

**SOCIAL WORKERS' PERSONAL SAFETY CHALLENGES
AND COPING STRATEGIES EMPLOYED DURING
SOCIAL WORK SERVICE DELIVERY: SUGGESTIONS
FOR PROMOTING SOCIAL WORKERS' PERSONAL
SAFETY**

by

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submitted in accordance with the requirements for the degree of

MASTER OF SOCIAL WORK (MSW)

in the subject

SOCIAL WORK

at the

UNIVERSITY OF SOUTH AFRICA

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NOVEMBER 2020

DECLARATION

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I, Shingirayi Zimunya, declare that SOCIAL WORKERS' PERSONAL SAFETY CHALLENGES AND COPING STRATEGIES EMPLOYED DURING SOCIAL WORK SERVICE DELIVERY: SUGGESTIONS FOR PROMOTING SOCIAL WORKERS' PERSONAL SAFETY is my own work and that it has never been submitted to any other institution for any examination purposes. I also declare without prejudice that all the sources that I have utilised or quoted have been indicated and acknowledged by means of an exhaustive reference list.

S. Zimunya

Date

DEDICATION

To the omniscient, omnipresent, and omnipotent God and to my Ancestors whose blood runs through me and irrigates the inner most parts of my soul. I conjure you up. I hear the words you whisper in my ears and the stories you put in my heart; I shall write and share them with the world as you command me in my dreams. *Hero Soko Mukanya!*

This dissertation is dedicated to my wife, Nombulelo Jiyane, pure and constant, lucid and thorough, with a warm heart and a level head, who has my heart and who brings me unending joy. Your stubborn belief in my abilities propels me higher and enables me to scale great and dizzying heights. *Ndinotenda. Ndinokuda. Mbandeni!*

To my unborn children, still in the clutches of my ancestors' gentle hands, may you arrive when the time is right and may you finish all that you ever start. Know that you are kings and queens; live as such. May you be bold, gentle, and affectionate and may you never dim your light!

ACKNOWLEDGEMENTS

As with all other things in my life, this research study is the result of collaboration, back-breaking work, and the unrelenting support of many women and men of goodwill. I wish to acknowledge these individuals who at one point or another encouraged me, sustained me, and spurred me on towards the finish line as I took on this onerous and arduous task:

- To my beautiful mother, Nonia, who planted the idea of academic excellence and the pursuit of brilliance in every sphere of my life. A woman who prays for me in a language so beautiful that English would bow. Thank you for your sacrifices and your unconditional love and support at all times. *Handina mazwi Shumba!*
- To my siblings – Nyasha, the sister whose brilliance inspired my own without her even knowing; Simba, with whom I shared the womb and whose heart beats in sync with mine; Tawanda, the fixer; Edward, the mechanic; Hazel, the pacifier; Chido, who looks like me; Malvern, who arranges things; and Patience, who paved the way for all of us – *Ana Mukanya rambai mune rudo!*
- To my nieces and nephews, who I hope to inspire – Anenyasha, whom I hope takes after me; Asanda, who stayed up late with me countless times and encouraged me when I grew weary; and finally, Andile, Ndumiso, Sandile, Siyabonga, Thandolwethu, and the myriads of other handsome nephews and beautiful nieces in the Zimunya bloodline, many of whom I have not yet met – I pray you choose the road less travelled and follow it relentlessly!
- To Lindiwe Jiyane, who has become a sister and whose soul is connected to mine (Thokoza Mbandeni), and to her husband, Cypriel Mhlanga, who has become a brother and whose every joke colours my life and whose grace permeates my life. And also, to the Jiyane family, who have become a second family of mine. I am eternally grateful to you all.
- This is also for Tafadzwa Maravanyika and Walter Ngoni Nyambuya, the friends who have become brothers, and for Olga Mahlangu, a sister and friend indeed.

- To the academic colossus and social work research fundi, Prof A.H. ‘Nicky’ Alpaslan, on whose gigantic shoulders I stand academically. Thank you for accepting nothing less than brilliance and thank you for being an able and capable study supervisor.
- To every social worker who partook in this research study. Thank you for sharing your stories and for opening yourselves up to scrutiny. Keep the faith!
- To every organisation which opened its doors to me as I sought knowledge; I am eternally grateful. And to UNISA’s Department of Student Funding for graciously funding this body of work.
- To Mrs Margaret Grobbelaar, who did the painstaking work of independent coding, and to Lindi De Beer, who edited both the research proposal and the dissertation. May you know peace, happiness, and wealth eternally.

ABSTRACT

Social work, as a profession, is critical for societies as it aims to promote social change and development, as well as social cohesion and the empowerment and liberation of people. Whereas the working conditions of social workers have been the focus of previous research, the topic of social workers' personal safety challenges and the coping strategies employed during social work service delivery seems to be sparsely researched and documented in indigenous literature. In view of this, I designed a research project aimed at exploring the personal safety challenges that social workers encounter and the coping strategies they employ during social work service delivery from a qualitative research approach with a collective case study design, coupled with an explorative, descriptive, contextual and phenomenological research design, with a view to proffer suggestions for promoting social workers' personal safety. From the conception of the research project, up until its finalisation which culminated in this research report, I observed the ethical principles of informed consent, anonymity, and confidentiality in the context of the management of information.

I employed semi-structured interviews as a data collection method from a sample of 14 purposively selected social workers in the employ of one government Department and three non-profit organisations in the Tshwane region. Data was analysed using Tesch's (1990) steps and data verification was done through Gibbs' (2008) model. I utilised Schlossberg's (1981) Transition Process Model as the theoretical lens in this study. Based on the findings presented in this research report, it is evident that social workers face various challenges in terms of their personal safety, ranging from being physically attacked and being at the receiving end of aggressive behaviour from distressed, frustrated, and hostile service users, to facing risks to their personal safety in the social work offices and whilst on the road during fieldwork or in the communities they serve. The various coping strategies that social workers employ as way of dealing with the incidents and situations in which their personal safety is compromised include speaking to a supervisor, colleagues, friends, or a therapist; using their personal faith; remaining calm and withdrawing from the unsafe situation; and enlisting the help of the police or ensuring that they are accompanied by colleagues when doing fieldwork.

The research findings included the suggestions proffered by the research participants on how to promote the personal safety of social workers and these are directed at employer organisations and social workers themselves. In addition, recommendations are provided which are directed towards social work practice; social work education and training; and continuous professional development. There are also recommendations for areas of further research.

KEY TERMS

Social workers' personal safety; experience; challenges; coping strategies; qualitative research; promoting social workers' personal safety.

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LIST OF ACRONYMS AND ABBREVIATIONS

AASW	Australian Association of Social Workers
AIDS	Acquired Immune Deficiency Syndrome
BASW	British Association of Social Workers
BSW	Bachelor of Social Work
CBD	Central business district
CPD	Continuous Professional Development
CWL	Catholic Women's League
DSD	Department of Social Development
EAP	Employee Assistance Programme
GPS	Global Positioning System
HIV	Human immunodeficiency virus
IFSW	International Federation of Social Workers
KWO	Kungwini Welfare Organisation
NACOSS	National Coalition of Social Services
NASW	National Association of Social Workers
NGO	Non-governmental organisation
NPO	Non-profit organisation
SACSSP	South African Council for Social Service Professions
SAPS	South African Police Service
SAVF	Suid-Afrikaanse Vrouefederasie
TLF	Tshwane Leadership Foundation
UK	United Kingdom
UNISA	University of South Africa
USA	United States of America
WHO	World Health Organization

CHAPTER ONE:

GENERAL INTRODUCTION AND ORIENTATION TO THE STUDY

1.1 INTRODUCTORY OVERVIEW OF THE CHAPTER

In this first chapter of the research report the topic proposed for investigation is introduced, the identified research problem stated, and a rationale or motivation for embarking on this research study declared. In addition, the research questions that the study sought to answer are introduced together with the goals and objectives formulated to answer the stated research questions. The theoretical framework adopted for this study and the research approach, design, and methods that were employed in this study are also introduced.

1.1.1 Background and introduction to the study

The section on the ‘background and introduction to the study’ mainly serves as a ‘scene-setter’, informing the reader about what is to come (Thomas 2017:2). Creswell (1994:42) holds a similar view when asserting that in this part of the research report, the researcher introduces the topic, presents background information on it, and positions it within the existing body of knowledge on, or related to, the topic.

Social work as a profession is critical for societies, as it aims to promote social change and development, as well as social cohesion and the empowerment and liberation of people. This is realised by engaging people and social structures towards the facilitation of life challenges and the promotion of well-being (International Federation of Social Workers c2016). South Africa finds itself within a socio-economic and political quagmire. Attesting to this are the high levels of unemployment and a shrinking economy, currently fuelled by the world-wide COVID-19 pandemic (the Novel Coronavirus pandemic that has engulfed the world), resulting not only in loss of lives, but of livelihoods, as more jobs are lost and a stagnation in the job market becomes evident (Jain, Budlender, Zizzamia & Bassier 2020:2). Jain et al (2020:2) further estimate that there has been a 40 percent net decline in active employment in South Africa since the beginning of the lockdown brought on by the COVID-19 pandemic. High levels of crime and violence, specifically gender-based violence, femicide, domestic violence, and child abuse; alcohol and substance abuse; the

breakdown of families; and an increase in child-headed households, abject poverty, unemployment and diseases such as HIV and AIDS are some of the social ills increasing the demand for social work services and interventions (Perey 2016:2-6; Department of Social Development 2009:2). This is buttressed by the foreword of the Recruitment and Retention Strategy for Social Workers (Department of Social Development 2009:2), mooted by the National Department of Social Development (DSD). In this strategic document, the then Minister of Social Development, Zola Skweyiya, mentions the importance of social workers' contribution to the social development sector in dealing with the social problems bedevilling South Africa, such as poverty, substance abuse, and food insecurity (Skweyiya 2008). Khumalo (2009) underscores the importance of social workers in South Africa in an online article titled '*SA faces shortage of social workers*'. In the article, he cites the former Minister of Social Development, Zola Skweyiya, who states that the shortage of social workers is hindering the South African Government's ability to meet the ever-increasing demand for developmental social services. Social workers play a pivotal role in the attainment of the government's national priorities, such as poverty alleviation, youth development, social crime prevention, and social cohesion, and thus the government views social work as a scarce skill (Khumalo 2009). In the same vein, the former president Thabo Mbeki (2007), in his 2007 State of the Nation Address, mentioned the plan to "accelerate the training of family social workers at professional and auxiliary levels to ensure that identified households [in referring to the child-headed households] are properly supported and monitored." Two years later, the DSD (2009:2) admits to "the shortage of social workers [and the resulting] lack of capacity to implement policies and programmes that deal with [the mentioned] social issues."

Despite this need for more social workers and extra social work services, various studies (to be introduced in the subsequent discussion) conducted internationally and in South Africa point to the fact that social workers have to deliver social work services in environments and to client systems in which their personal safety is at risk or compromised.

Internationally, social work is labelled as a dangerous profession (Nho & Choi 2009:39-40) and as a risky, yet low-paying job that receives little recognition (Freese 2015). Freese (2015), writing from the context of the United States of America (USA) in an article titled '*The Cost of Being a Social Worker*', postulates that social workers go into homes of

service users who may be psychiatrically unstable, members of gangs, sex offenders, or even people who have previously been convicted of murder, thus posing a threat to their safety and security. Social workers are confronted by an ever-increasing number of threats of physical violence in the discharge of their duties, as in many instances social workers provide services in clients' homes where they are unprotected and susceptible to attacks (Winstanley & Hales 2015:25; Reeser & Wertkin 2001:95-96; Scalera 1995:337). For Laird (2014:1968-1969), as well as Nho and Choi (2009:39), the types of service user violence social workers are exposed to range from verbal and emotional threats – including profane language, verbal harassment, and threats to physically harm workers – to actual physical attacks, pushing, hitting, stalking, touching private areas, and other sexual contact.

In emphasising the fact that social work is a dangerous and unsafe profession, Reeser and Wertkin (2001:96) admit that “involvement in child custody, divorce proceedings, and domestic violence places social workers in potentially volatile and dangerous situations.” According to these authors, social workers, particularly working in the fields of child and family protective services, foster care, and mental health, are at risk of service user violence and abuse, as most of the service users are involuntary clients (Reeser & Wertkin 2001:96). Kim and Hopkins (2015:102) share similar sentiments when pointing to the fact that social workers frequently have to engage with involuntary clients and resistant families and have to intervene in volatile situations, such as domestic violence or substance abuse, often while having to protect vulnerable children, which compromises their personal safety. As pointed out earlier, child welfare social workers, in particular, are exposed to working in hostile environments where they have to intervene where grave harm and neglect were perpetrated on children by their own parents and relatives, who react with hostility and refuse any offers of help (Gonzalez, Faller, Ortega & Tropman 2009:41). Sometimes during the removal of children from abusive situations, social workers deal with emotionally charged, angry, and hostile clients, resulting in threats of violence or actual physical violence (Scalera 1995:341).

Scalera (1995:337) paints a gloomy picture regarding child welfare workers' safety by pointing out that between July of 1992 and June of 1993, eight social workers were killed whilst hundreds were assaulted during the discharge of their duties, such as home visits in an effort to protect children and support vulnerable families. These incidents occurred in

New Jersey and led to the New Jersey Division of Youth and Family Services developing a nine-point safety plan for social service professionals.

Whilst many more incidents from international media could be provided, I wish to highlight the following incidents reported in online articles as cases in point:

- In January 2016, Alexandra Mezher, a Swedish social worker, was stabbed multiple times by an Ethiopian migrant known as Youssaf Khaliif Nuur when she intervened in a fight between the assailant and another boy in a child migrant centre in Mölndal, Sweden. She subsequently passed away (Andersson & Fagge 2016).
- Lara Sobel, a child protection social worker employed by the Washington County State, in the USA, was shot twice by a client known as Jody Herring, who had lost custody of her nine-year-old daughter because of Lara Sobel's intervention (Sancken 2015).
- Teri Zenner was killed with a chainsaw by a schizophrenic client in Kansas, USA (Sancken, 2015).
- In an article titled '*Promoting Worker Safety in a Changing Society*', Huff (1999:12) highlights the death of Lisa Putnam, a social worker employed by the Macob County, Michigan, who was killed by a client from whom she had removed two abused children.

A study conducted online in the USA by Whitaker and Arrington (2008), on behalf of the National Association of Social Workers (NASW) Centre for Workforce Studies, found that social workers encounter safety issues on the job. The study further reveals that social workers fear for their personal safety, as evidenced by 41 percent of 3 653 respondents who indicated that they fear violence from adult clients. Furthermore, 35 percent of respondents indicated that their cars have been vandalised during home visits and 32 percent highlighted that they have been physically assaulted by unknown assailants during the discharge of their duties (Whitaker & Arrington 2008:15).

In turning the focus of the discussion to the South African context, Schenck (2003), in a study relating to the problems rural social workers experience, highlights the issue of personal safety as one of the many problems experienced. In a study conducted by Alpaslan and Schenck (2012) that focused on the challenges related to the working

conditions experienced by social workers practising in rural areas, the theme of personal safety yet again surfaces as one of the challenges experienced.

The issue of social workers' personal safety, locally, came into the spotlight when Deon Kondos, a social worker from the SAVF in Potchefstroom, in the North West Province of South Africa, was killed by the renowned musician Zirk Bergh whilst supervising a visit between this divorced father and his children in 2013. The incensed father took issue with having to see his child under supervision of the social worker and shot and killed the social worker, as well as his ex-wife's new husband, before turning the gun on himself (*SABC News* 2013).

Rendering social work services in volatile and dangerous situations compromise social workers' well-being, personal safety, and job-satisfaction. In support of this, Kim and Hopkins (2015:102) purport that individual social workers' fear and safety concerns will not only have an impact on them physically and psychologically, but will hamper their organisational functioning with reference to their overall job performance, absenteeism, turnover intentions, and their actual exit from the profession. Social workers, if they themselves are not safe, cannot effectively protect children or help families (Scalera 1995:337).

From the aforementioned reports of social workers sacrificing their lives in the line of duty and in reference to the fact that social work is a dangerous and risky job, various initiatives and calls for social workers' safety and protection were found in the literature consulted (Freese 2015; NASW 2013:5-6; Nho & Choi 2009:39-40).

Taking into account social workers' vulnerability, especially child welfare workers, Scalera (1995:342-350) proposes a nine-point plan to improve the safety of child welfare workers. The nine-point plan is summarised below:

- Establish a buddy-system, so that social workers do not conduct home visits for potentially or previously violent clients alone, but go with a colleague to ensure their safety.
- Develop a worker safety manual that will provide detailed steps to be taken regarding safety for social workers.

- Offer compulsory safety training that all social workers must attend to equip themselves with the requisite skills to ensure their safety.
- Inform staff/ social workers of their right to self-defence in the event that they feel their lives are under threat.
- Establish a worker safety committee that looks into policy and devises best practices to ensure safety.
- Establish a protocol for assisting staff members that have been victimised by violence, so as to ensure adequate responses and support for the affected workers.
- Develop strategies to effectively provide services to clients who live in areas with a high crime rate, so as to limit social workers' susceptibility to violence or harm.
- Improve communication systems to promote the safety of social workers.
- File criminal charges in the name of the agency against any client who physically or verbally threatens or attacks a social worker in the discharge of their duties.

The NASW (2013) formulated the following guidelines for social worker safety in the workplace:

- An organisational culture that promotes safety and security for their staff should be established and maintained by agencies that employ social workers.
- A proactive, preventative approach to violence and risk management should be adopted by organisations that employ social workers in view of creating a culture of safety. Office environments should promote safety for both social workers and their clients.
- Technology should be utilised appropriately and effectively to minimise risk.
- Social workers should be equipped with mobile phones to promote their safety in the field.
- A risk assessment for reducing their risk for exposure to violence prior to each field visit should be conducted by social workers.
- Social workers should remain cognisant of safety concerns when transporting clients.
- Protocols that follow an incident of violence or abuse should be developed by social work employers.
- In view of developing and maintaining the ability to practice safely, social workers should participate in annual training or receive supervision for this purpose.

- Student social workers need to be prepared for safe social work practice while they are studying to qualify as social workers.

Another initiative to address the personal safety of social workers is mentioned by Freese (2015). In March of 2009, the Teri Zenner¹ Social Safety Worker Bill was presented to the United States Congress with a view to secure funds to provide safety measures for social workers in the USA. The idea behind the Bill was to provide safety equipment and communication systems to enable social workers and their agencies to remain in contact in the event of a social worker being threatened or attacked in the field. Through this Bill, it was envisaged that social workers would be provided with self-defence classes, safety improvements in offices, pepper spray, and training in the de-escalation of potentially volatile situations with clients (Freese 2015).

Huff (1999:13) draws attention to the fact that social workers are being killed by service users and suggests as part of her recommendations that “the safety of social work interns and social workers must be an agency-wide priority”. Recognition of the importance of social workers’ safety in working with families and children by social workers themselves and management is called for and recommended by McClain (2010:30).

McClain (2010:30) also emphasises the safety of social workers by proposing and encouraging the establishment of safety committees in the Massachusetts Department of Children and Families in recognition of the personal dangers inherent in child protection services. Such safety committees should support social work staff in the field and assist with the drafting of clear policies to address the safety concerns of social workers (McClain 2010:30). The International Federation of Social Workers (IFSW) (2012) drafted a policy on effective and ethical working environments for social work. The policy statement places the responsibility on social work employers to create conducive and safe working environments, arguing that social workers need a working environment that upholds ethical practice and is committed to standards and good quality services (IFSW 2012). In addition, this policy unequivocally states that social workers have the right for their health and occupational safety to be protected at all times (IFSW 2012).

¹¹ Her client, Andrew Ellmaker, killed Terri Zenner, a social worker, during a home visit in August 2004. He killed her by stabbing her and cutting her with a chain saw.

In an article on the topic of the experiences of South African social workers in the United Kingdom (UK), Naidoo and Kasiram (2006:124) forward not only recommendations for improving social workers' service conditions, but also call for the establishment of a safer work environment.

Against the introduction and background information provided, the focus of the discussion will now shift to the aspect of the problem formulation.

1.1.2 Problem formulation and problem statement

In writing about the aspect of the research problem, Creswell (2016:88-89) states that a research problem can emanate from two sources. The research problem can emanate from "real life" or from the fact that the issue or research problem identified has not been adequately researched and reported in the existing body of knowledge available. A research problem, customarily expressed as a problem statement, is an explicit expression of an area of concern or a condition to be improved upon, which exists in practice and requires investigation and understanding (Creswell 2016:88).

When turning the focus of the discussion to the proposed topic of investigation, and from the introduction provided in this regard, social workers' personal safety is compromised and is a real-life problem. This is especially true in situations where they are mandated to render social work services to involuntary, hostile service users and in volatile environments (Winstanley & Hales 2015:25; Laird 2014:1968-1969; NASW 2013:5-6; Nho & Choi 2009:39; Reeser & Wertkin 2001:95-96; Scalera 1995:337).

When looking at the topic of "social workers' personal safety" in the body of scholarly literature and research available in this regard, I arrived at the conclusion that a literature-related problem exists, pointing to the fact that "the topic has been understudied", or not substantively researched (Creswell 2016:88). In substantiating this conclusion, I quote Alther (2012) who, in an online article titled '*Workplace Safety for Social Workers: A Student's Analysis and Opinion*', points out that her library search of peer-reviewed articles from 1950 to 2012 using the search terms "workplace safety" and "social workers" only resulted in one relevant article published in 2007. However, since there has been an increase in the deaths of social workers in the USA between the year 2004 and 2008,

legislation has been formulated to address the safety of social workers. The legislation is in the form of the Social Worker Safety Act 111 of 2009. In addition, guidelines for social worker safety in the workplace were formulated by the NASW (2013) in the USA. When looking at the topic of unsafe working environments across human service occupations, Kim and Hopkins (2015:10) emphasise that “minimal research has explored how a safety climate might influence individual social workers’ organizational attitudes or behaviours.” Nho and Choi (2009:47) hold the following view: “Despite the open secret that the social work profession is a dangerous one, safety and security issues in the workplace and client violence have been dealt with only cursorily in social work literature.” In like manner, MacDonald and Sirotich (2005:772) indicate that few studies have examined social workers’ experiences and concerns regarding client violence and workplace safety.

As for the South African scenario, Ncongwane (2014), in an online newsletter article titled *‘Bullying and Violence in the Workplace’*, highlights the paucity of literature regarding workplace safety and violence in South Africa, indicating that although workplace violence has become a global phenomenon, there are very few studies that have been carried out in South Africa. Given the fact that the personal safety of social workers rendering social work services in rural areas emerged as a challenge in Alpaslan and Schenck’s (2012:383) research, they recommended that the topic of the personal safety of rural social workers with reference to their experiences and coping strategies in this regard be placed on the agenda for future research.

The problem statement for this study is two-pronged and formulated as follows:

- *Social workers often have to render social work services to involuntary service users and practice in environments that are unpredictable and increasingly unsafe, which exposes them to the risk of being verbally and physically assaulted (Winstanley & Hales 2015:25; Laird 2014:1968-1969; NASW 2013:5-6; Nho & Choi 2009:39; Reeser & Wertkin 2001:95-96; Scalera 1995:337;) and results in some social workers sustaining permanent injuries or tragically losing their lives “in the line of duty” (NASW 2013:5-6).*
- *There seems to be a lacuna in the body of literature and research on the topic of social workers’ personal safety, both internationally and on the local front.*

1.1.3 Rationale for the study

In presenting the rationale for the study, Rojon and Saunders (2012:55) advise researchers to point out why it is essential to undertake a research study, and to indicate what the envisaged contribution of the study will be. For Maxwell (2013:24), a personal interest in a topic or a desire to change or improve a practice situation can serve as motivation for embarking on investigating a given topic. Both mentioned aspects rang true for me on this research journey. As a social worker with 10 years working experience, I witness on a daily basis how fellow social workers have to deliver social work services to involuntary and volatile service users and work in environments where their personal safety is being compromised. This was also confirmed during deliberations with peers when discussing this topic. I have also witnessed a high turnover rate in social work organisations, as the social workers choose less threatening and more rewarding professions over social work. Some social workers indicate the failure of employers to ensure their safety and their lack of responsiveness when asked to address issues of personal safety. It was these practice realities, together with a personal interest in this topic, that drew me to this topic and motivated me to make a contribution to body of knowledge on the safety of social work practitioners through this research project.

It is anticipated that this study, focusing on the topic of “social workers’ personal safety challenges and coping strategies employed during social work service delivery: suggestions for promoting social workers’ personal safety”, would address the gap in the indigenous knowledge base on the topic. An added expectation is that the suggestions put forward by the participants and their recommendations will sensitise both the social workers and the employer organisations to the aspect of social worker safety and how to promote it during social work service delivery.

The next section introduces the theoretical framework applied to the study.

1.2 THEORETICAL FRAMEWORK APPLIED IN THE STUDY

In explaining the concept “theoretical framework” in the context of research, Maxwell (2013:49-53) states that it functions as “a spotlight, illuminating what you see, drawing attention to particular events or phenomena”. In like manner, Imenda (2014:189) views a

theoretical framework as a set of concepts which are drawn from a theory for an explanation of an event, or to shed some light on a particular phenomenon. Theory can be utilised to provide a guide as to what the researcher intends to find in the research study (Creswell 2016:46). I regard a theoretical framework as the looking glass that a researcher uses to interrogate a phenomenon. In an effort to investigate challenges experienced by social workers in terms of their personal safety and the coping strategies they employed during social work service delivery, I utilised *Schlossberg's* (1981) *Transition Process Model* as a theoretical framework.

Schlossberg's Transition Process Model originated in response to the need to develop a systematic framework to facilitate an understanding of how adults confronted with transitions in their lives approach these events and respond to them, and to assist them to cope with the ordinary and extraordinary processes of living (Evans, Forney, Guido, Patton & Renn 2010:213). In Schlossberg's work, premised in crisis theory, a transition denotes a turning point or a period between two periods of stability (Levinson, in Anderson, Goodman & Schlossberg 2012:30) and is defined as any event or non-event that results in change in relationships, routines, assumptions, and roles (Schlossberg, Goodman & Anderson 2006:33). Schlossberg (2011:159) states that there are three types of transitions. They are –

- *anticipated transitions*, such as an individual getting their first social work job after graduation;
- *unanticipated transitions*, which are disruptive, such as the threat or an incident of workplace violence encountered by a social worker; and, lastly,
- *non-event transitions*, which are expected to occur, but do not occur, for example failing to gain a promotion in one's position as a social worker when one is expecting it.

The manner in which an individual reacts and responds to a transition is determined by three critical factors, namely: the characteristics of a particular transition, characteristics of the pre- and post-transition environment, and the characteristics of the specific individual experiencing the transition (Schlossberg 1981:5). These three factors interact to produce an outcome, which is either adaptation to the transition or a failure to adapt to the transition that an individual has experienced (Schlossberg 1981:5). In short: how the individual views and responds to an event or a transition both provides an opportunity for

psychological growth and the danger of psychological deterioration (Moos & Tsu, in Schlossberg 1981:6). Adaptation to a transition occurs when an individual moves from being overly concerned and preoccupied with a transition, to a stage in which they are able to integrate it into their life and develop further as an individual (Schlossberg 1981:7).

The transitions that individuals encounter are complicated and denote a process of moving out by leaving one set of roles, relationships, routines, or assumptions, and moving in or developing new ones as a result of having undergone a transition. When confronted with a transition, the individual needs to label the transition in terms of it being anticipated, unanticipated, or a non-event. In addition, the actual transition process and how to it is to be approached must be reflected on. The individual must take stock of coping resources available to assist with taking charge of the situation and move forward. Where required, the coping resources must be strengthened and expanded. Schlossberg (2011:160) developed the 4-S system of resources to help individuals cope with these transitions, specifically referring to the aspects of the *situation*, the *self*, *support*, and *strategies*. Schlossberg (2011:160) posits that the situation within which a person is at the time of the transition affects how the person will react. For example, the experience of being physically assaulted by a service user may be more traumatic for a social worker who is going through a divorce (a transition in her personal life). This event that happened in her professional life may compound her inability to recover and move forward. The self of the person experiencing the transition, their internal ability to deal with disappointment, their frame of mind, their resilience, and their positive-mindedness will also determine the extent to which that person recovers (Schlossberg 2011:160). An example would be the ability of the social worker previously mentioned to recover from the physical assault and divorce proceedings through believing in her abilities to overcome and to cope. This would go a long way in enabling her to draw positives from the transition. The institutional and interpersonal convoy of support that exists around an individual experiencing a transition also determines whether or not they will successfully adapt to the transition (Schlossberg 2011:161-162). A prime example would be if the aforementioned social worker has a strong family support system to rely on during her divorce and physical assault ordeal, and whether or not her employer has a strong and supportive system to help her cope through the incident that occurred in the discharge of her duties as a social worker. Lastly, Schlossberg (2011:161) posits that an individual's ability to design a multiplicity of strategies to cope with the transition goes a long way in helping them to adapt successfully.

Thus, the mentioned social worker's ability to craft a number of coping and survival strategies following her physical assault ordeal and divorce will ensure that she finds a way to develop resilience and move past the transition she has undergone.

Schlossberg's Transition Process Model (1981), and especially the constructs of the situation, the self, support, and strategies, will be used as hooks on which to hang the research findings, explaining the situations where the social workers' personal safety was compromised, and what support and strategies they employed to preserve the self and process these events.

1.3 RESEARCH QUESTIONS, GOALS AND OBJECTIVES

This section contains a discussion of the research questions, research goals, and the objectives of the research study.

1.3.1 Research Questions

The research question is of paramount importance in the study, as this is the question that the research itself tries to answer (Punch 2016:51). Creswell (2016:94, 97) asserts that the research question informs the study's purpose and points to the kind of data that needs to be collected to answer the stated research question. When attempting the investigation from a qualitative approach, Creswell (2014:139) advocates for a research question, and not a hypothesis, to focus the whole research endeavour. In essence, the research question serves as a guide in every step of the research process (Whittaker 2012:28). I hold the view that the research questions help to ensure that the study is focused on addressing specific areas that are of interest to the researcher. To focus the study, the following questions were formulated at the outset:

- *What are the challenges social workers experience in terms of personal safety during social work service delivery?*
- *What coping strategies do social workers employ to address the challenges experienced in terms of personal safety during social work service delivery?*
- *What are social workers' suggestions for promoting social workers' personal safety during social work service delivery?*

1.3.2 Research goals

As the research goal is the central thrust of the study, it must be formulated in a clear and focused fashion at the outset of study. The goal should be founded on a research problem or a research question (De Vos, Strydom, Fouché & Delport 2011:79, 108). Maxwell (2013:23) also refers to the fact that the research goal forms an important part of the study in that it informs the research design. He continues by saying that the goal points to anything that motivates the researcher to want to undertake a research project, or points to what the researcher wants to accomplish by doing it (Maxwell 2013:23). In like fashion, Weinbach (2007:128) regards the goal as “the outcome towards which the activities of persons are aimed”. I regard the research goal as the ultimate result that the efforts of the researcher are aimed towards. Thus, the research goals are formulated as such:

- *To develop an in-depth understanding of the challenges experienced by social workers in terms of personal safety during social work service delivery, as well as the coping strategies they employed.*
- *To proffer suggestions for promoting social workers' personal safety during social work service delivery.*

1.3.3 Research objectives

The concept of research objectives, according to De Vos et al (2011:94), points to practical steps taken to achieve the research goals. Simply stated, research objectives describe what the researcher will do to work towards realising the study's goal(s) (Denscombe 2012:85). According to Weinbach (2007:31), objectives are defined as “measures possible to determine to what degree a goal has been accomplished and often includes time and deadlines for accomplishment”. I hold the view that objectives guide the researcher in ensuring that the goal of the research study is attained within a specific time frame and utilising specific steps. I formulated the following task and research objectives:

- *To obtain a sample of social workers from a government department and non-profit organisations (NPOs) within the Tshwane Metropolitan Municipality identified as possible research sites for this research study.*
- *To conduct semi-structured interviews with the sampled social workers, aided by open-ended questions contained in an interview guide.*

- *To explore and describe the challenges experienced by social workers in terms of personal safety, as well as the coping strategies they employ to address these challenges.*
- *To transcribe the data obtained and then sift, sort, and analyse it according to the step-wise format proposed by Tesch (in Creswell 2014:198).*
- *To describe, as findings, the challenges experienced by social workers in terms of personal safety, as well as the coping strategies they employ to address these challenges.*
- *To interpret the data and conduct a literature review in order to verify the data.*
- *To draw conclusions and make recommendations pertaining to challenges experienced by social workers in terms of personal safety and coping strategies employed during social work service delivery, and forward suggestions for promoting social workers' personal safety during social work service delivery.*

In the next section, the research methodology utilised in the study will be introduced.

1.4 RESEARCH METHODOLOGY

The concept “research methodology” refers to the rationale, philosophical assumptions, and paradigm that inform a particular study (Punch 2016:65; Camarinha-Matos 2012:3). In view of this, I conclude that the “research methodology” section the aspects of the research approach (paradigm) and design need to be introduced.

1.4.1 Research approach

Since I sought to understand the meanings that the research participants constructed regarding their personal safety, I decided to employ a qualitative research paradigm or approach. According to Merriam (2009:13), qualitative researchers are interested in understanding the meaning people have constructed, that is to say, how people make sense of their world and the experiences they have in the world. Neuman (2011:157) mentions that “qualitative researchers borrow ideas from people they study and place them within the context of a natural setting.” Qualitative research aims to investigate naturalistic, real-life conditions as experienced (Terre Blanche, Durrheim & Painter 2006:48). Based on

these assertions, I am of the opinion that qualitative research focuses on people and the meanings that people attach to their lived experiences, and that the qualitative researcher adopts an appreciative enquiry into and for the understanding of the participants' experiences on a particular topic. The characteristics of qualitative research, as given by various scholars (Yegidis, Weinbach & Myers, 2018:19-20; Creswell 2016:6-9; Yilmaz 2013:316-317), are summarised below in an introductory fashion:

- Research is often conducted in the field, allowing direct interaction with the people being studied in their context. I conducted interviews with social workers in their work settings.
- Researchers collect data themselves by examining documents, observing behaviour, interviewing participants individually, and/or by engaging in focus group discussions. I employed semi-structured interviews to collect the data.
- Qualitative research is by nature explorative and descriptive. These characteristics tie in with the research objectives of exploring and describing the phenomenon being investigated.
- Multiple sources of data are preferred over a single source. I interviewed various social workers, from both the DSD and NPOs. In addition, different scholarly works were consulted to all contribute to a comprehensive understanding of the topic being investigated. Researchers often build their patterns, categories, and themes from the bottom up (inductive analysis).
- The focus is on learning the meaning participants hold, rather than the meaning brought in by the researcher.
- The research design is often emergent, allowing for changes in the research questions, data collection methods, and the research sites.
- The qualitative researcher interprets what is seen, heard, and understood. This must be seen in light of the researcher's background, history, context, and prior understanding.
- The findings of a qualitative research project are often presented in a narrative form.

I attempted to develop a complex picture of the problem or issue by reporting multiple perspectives and identifying the multiple factors involved. As such, I deemed that the qualitative research approach was appropriate in this research study, because it seeks to explain the meaning of social phenomena through exploring the ways in which individuals understand their social worlds (Whittaker 2012:7). In this research study, and because of

the fact that qualitative research is well-suited to exploring the experiential life of people (Polkinghorne, in Morrow 2007:211), I opted for this research approach to explore the challenges experienced by social workers in terms of their personal safety whilst rendering social work services, as well as the coping strategies they employ to manage the mentioned challenges, and to gather suggestions for promoting social workers' personal safety during social work service delivery. Another reason that this research approach was regarded as a good fit is the fact that qualitative research is based on the interpretive perspective, which holds the view that research participants' own interpretations of their social world are what define their reality (Grinnell & Unrau 2008:84). Furthermore, I opted for the qualitative research approach as it is suitable for investigating research topics that have been understudied (Morrow 2007:211), as is the case with the research topic of this study.

1.4.2 Research design

The concept "research design", according to Grinnell and Unrau (2008:330), relates to the organisation of the research question into a framework that sets the boundaries and requirements of the study. Research designs are plans of research that depend on the purpose of the research by linking the research questions, the data to be collected, and the strategies for analysing the data so that the study findings will address the research questions (Babbie 2011:67). I regard a research design as being informed by the kind of research problem being investigated, the intended audience for the research study, and the exact aims that the study seeks to achieve.

I decided on the collective case study design and a phenomenological research design, complemented by an explorative, descriptive, and contextual strategy of inquiry to research the topic under study.

1.4.2.1 The collective case study design

The qualitative case study is aimed at gathering greater insight into and an understanding of the dynamics of a specific situation (Nieuwenhuis 2007:76), whilst the collective case study design, to quote Stake (1995:452), is "a type of case study which is used to draw thematically from several cases". This allows for the topic of interest, in this case the challenges experienced by social workers in terms of personal safety and the coping

strategies employed while rendering social work services, to be explored by interviewing multiple cases (social workers) to provide insight into this phenomenon.

1.4.2.2 The phenomenological design

I also employed the phenomenological design, as this qualitative research design affords a researcher the opportunity to explore the personal meanings research participants attach to specific experiences (Perry 2013:263). Bakanay and Çakır (2016:161) posit that the phenomenological research design focuses on the lived experiences of individuals, and how they translate these experiences into consciousness given the meanings attached to it in an effort to decipher the linkages between the scientific world and their everyday life events. As it was my intention to gain an understanding of how social workers' personal safety is compromised during social work service delivery, and how they cope in these situations, phenomenology as a qualitative strategy of inquiry enabled me to engage in such an exploration. I invited the participants to explore and describe these aspects, which will be presented as research findings in Chapter Three.

1.4.2.3 The explorative research design

Exploratory research is undertaken when the researcher wants to become familiar with a topic (Babbie 2013:94). In addition, exploratory research is aimed at exploring a phenomenon and to derive answers to questions regarding a phenomenon that is particularly unknown (Yegidis et al 2018:105; Gray 2013:36). Thus, exploratory research is a vehicle for looking at an under-researched phenomenon by asking a set of questions to be answered so as to understand the phenomenon better. This approach was appropriate for this study, as I sought to explore challenges experienced by social workers in terms of personal safety and the coping strategies they employed during social work service delivery, and to gather suggestions for promoting social workers' personal safety during social work service delivery – a topic that has to date been under-researched (Ncongwane 2014; Nho & Choi 2009:47; MacDonald & Sirotich 2005:772).

1.4.2.4 *The descriptive research design*

In conjunction with the exploratory approach, I also employed the descriptive research design. Dadonienė, Žagminas and Beržanskytė (2013:38) define a descriptive research design as an attempt to provide a picture of what is happening to the poorly understood phenomena which do not lend themselves readily to quantification. The descriptive research design concerns itself with the fundamental question, which is the ‘what’ of the research study (Alston & Bowles 2009:33), attempting to describe situations and events (Yegidis & Weinbach 2018:105). I understood the descriptive research design as painting a word picture of the issues explored in a research study. My plan with the inclusion of the descriptive research design was not only to afford participants the opportunity to reflect on and describe situations where their personal safety was compromised during social work service delivery, as well as the coping strategies they employed in these scenarios, but also for me to describe as findings these aspects and to forward suggestions for promoting social workers’ personal safety during social work service delivery informed by the participants’ suggestions.

1.4.2.5 *The contextual research design*

The contextual research design enables the researcher to recognise and appreciate how contextual variables influence the participants’ experiences, perceptions, and behaviour (Hennink, Hutter & Bailey 2011:9). In like manner, contextual research design validates the notion that an understanding of human experiences and perceptions occurs when researchers fully comprehend the natural settings of the participants (Monette, Sullivan & De Jong 2011:225). I hold the view that the central focus of a contextual design is that the researcher must go to the environment of the research participants so as to understand participants’ lives and behaviour. In this study, I chose to use a contextual design in order to explore challenges experienced by social workers related to the context of personal safety in rendering social work services.

In the next section, I will introduce the research methods utilised in this study.

1.5 RESEARCH METHODS

Research methods, according to Kumar (2008:5) refers to “a systematic way to solve the research problem”, while Whittaker (2012:130) indicates that this concept denotes the practical ways in which researchers collect data. Punch (2016:65) provides a more encompassing explanation for this concept in stating that research methods refer to the specific techniques and tools used in the research, specifically for the purposes of participant recruitment (sampling) and data collection, analysis, and verification. As such, research methods can be seen as the vehicle through which the research study is conducted. Under this section, the proposed research methods for this study; the population, sample and sampling techniques; and the methods of data collection, data analysis, and data verification are introduced.

1.5.1 Population, sample, and sampling techniques

In explaining the concept “population”, Matthews and Ross (2010:154) write that in the context of research it means “the total number of cases that can be included as research subjects”. Population can be defined as an entire set from which a sample is drawn (Grinnell & Unrau 2008:552). Whittaker (2012:75) defines population as the total possible group of people in a research study. Consequently, I concluded that the population can be viewed as the overall number of people from which a select few can be chosen to partake in the research study. The **population** for this research project consisted of all frontline social workers employed at the DSD (Tshwane region); the Kungwini Welfare Organisation (KWO); and the Tshwane Leadership Foundation (TLF). The DSD, Tshwane region, is a government department under the Ministry of Social Development, whose core mandate is the delivery of social services, child protection, social assistance, and the upliftment of vulnerable populations (DSD 2009). The KWO is an NPO that was formed in 2002 and which provides residential care for persons with disabilities, as well as generic social work services (also called ‘generalist social work practice’) and community development projects in the Pretoria East area (KWO c2017). The TLF was formed in 1993 with a view to promote social change and social inclusion in the Tshwane region. The TLF works with vulnerable populations, such as homeless persons, commercial sex workers, orphans, and vulnerable children, as well as persons living with HIV/AIDS (TLF c2016). I considered the mentioned research sites, as I sought to investigate an array of

challenges experienced by social workers in terms of their personal safety and the coping strategies they employed during social work service delivery and to gather suggestions from them regarding how to promote social workers' personal safety during social work service delivery. I also decided to only delimit the boundaries of the population to the Tshwane region in the Gauteng Province, as this is where I reside and it would therefore be cost-effective and possible time-wise to conduct the research.

Sampling concerns itself with selecting what the researcher wishes to study and who the researcher will include in the study in order to answer the research question (Alston & Bowles 2009:80). Sampling can also be seen as the process by which experienced and knowledgeable individuals are selected to partake in a research study, as they are knowledgeable about the research problem and can help the researcher to answer the research question (Oppong 2013:203). Thus, in my view, sampling is the identification of key participants who have an appreciation of the research problem and can answer the research question as a result of their knowledge and experience regarding the specific research problem. Sampling in this research study was necessitated by the limited time and financial resources available to me, thus making it impossible to study the entire population.

I employed a **non-probability sampling** technique known as *purposive* (or judgemental) *sampling*. Maxwell (2013:97) explains purposive sampling as a participant recruitment strategy where people are intentionally selected for the information that they can provide, which cannot be obtained from other people (Grinnell & Unrau 2008:153). Purposive sampling is a type of non-probability sampling in which the units to be observed are selected on the basis of the researcher's judgement about which ones will be the most useful or representative of the population to be studied (Grinnell & Unrau 2008:554). Matthews and Ross (2010:154), who state that a purposive sample is "a sample of selected cases that will best enable the researcher to explore the research questions in-depth", support this. In this regard, I planned to target social workers employed by the aforesaid two NPOs, as well as those employed by the DSD in the Tshwane region. I proceeded to purposefully select social workers that have experienced challenges in terms of personal safety during social work service delivery and had to employ coping strategies to manage this. This sampling technique enabled me to gain valuable insight into and information

regarding the subject matter at hand from direct sources. The intended criteria for inclusion in the research study were:

- Social workers, both male and female –
 - from different races;
 - employed by the DSD and two NPOs in the Tshwane region, namely the KWO and the TLF;
 - duly registered as social workers at the South African Council for Social Service Professions (SACSSP);
 - who have served for at least one year in the profession; and
 - have rendered social work services to hostile clients and in volatile environments.
- Social workers able to converse in the English language.
- Social workers who are willing to participate out of their own free will.

As stated above, I intended to utilise purposive sampling to acquire a sample of social workers who meet the criteria set above. Matthews and Ross (2010:169) state that when employing purposive sampling as a technique, “gathering qualitative data is very time and resource-consuming”. Few researchers have the resources, or the need, to include large number of cases. As such, I did not predetermine a sample size and was guided by the principle of data saturation. Abrams (2010:539) states that sample size in qualitative sampling is rarely determined at the outset of the study. Consequently, I collected data from research participants until the data received became similar and repetitive.

My plan was to contact the Head of the Department at the DSD in the Tshwane District Office and the Directors of the KWO and the TLF to seek permission to conduct the research study. Once I had obtained permission to conduct research in the three organisations, I planned to utilise the respective directors of the organisations as gatekeepers who would inform the social workers in their employ about the research study. Gatekeepers are defined as persons who wield power and influence to either grant or refuse entrance to a research setting (Berg 2004:24). Gray (2013:73) regards gatekeepers as the people involved in the process of allowing or denying others access to someone or something. I view gatekeepers as the entry points into any research field, whose influence can be used to block the researcher or grant the researcher access to research participants. Following this, I intended to meet with the individual social workers and furnish them with information regarding the research study, their rights, the aim of the study, the implications

of their participation in the study, and what their participation would entail. The identified potential participants would be given some time to consider whether they wanted to participate in the study or not. In a follow-up contact I planned to establish this. The ones who agree to participate would be informed about the fact that their participation is voluntary and they would be requested to sign the consent forms (see Addendum B) agreeing to this. Follow-up appointments would be set for the actual interviews to be held at a time and place that would be convenient to the research participants.

1.5.2 Preparation for data collection

After the participants had been comprehensively briefed about the research and had given their consent to participate in the research, the intention was to prepare them for data collection in an environment that would be safe and conducive for this purpose and convenient for them. The logistics around what would happen at the interview, such as the time, place, and duration of the interview, would be mentioned and the participants would be provided with a list of data collection questions to be answered and discussed during the interview. In addition, my role during the interview would be clarified. I planned to take on the role of being an inquisitive enquirer and a student, whilst regarding them as experts on the envisaged topic of investigation (Guest, Namey & Mitchell 2013:153; Milena, Dainora & Alin 2008:1279). Any role misconceptions would be clarified. Permission would also be sought from them regarding digitally recording the interviews and their written consent would be obtained in this regard (see Addendum C). In accordance with research ethics, I planned to inform the participants of the various people who would have access to the recordings apart from me, such as the independent coder and the study supervisor, and I would once again remind them of the ethical considerations to be observed in this study. The interviews would then be scheduled in accordance with the availability and convenience of the research participants.

1.5.3 Methods of data collection

In qualitative research, data is customarily collected by way of face-to-face interviews, focus group interviews, and participant observation (Yegidis & Weinbach 2018:19; Creswell 2016:112-113). I decided to make use of semi-structured interviews, facilitated by open-ended questions in an interview guide, to explore social workers' personal safety

challenges and coping strategies during social work service delivery and gather suggestions for promoting social workers' personal safety. Semi-structured interviews are more flexible than structured interviews. A researcher can utilise open-ended questions to elicit views and opinions from the participants and facilitate the conversation between the researcher and the participant. Whilst striving to ensure that the interview remains focused on those questions, allowance is made for the conversation to flow naturally and diverge into unexpected directions (Edwards & Holland 2013:2-3; Hesse-Biber & Leavy 2011:102). Semi-structured interviews enable a researcher to explore the participants' experiences, views, opinions, attitudes, thoughts, feelings, and beliefs about certain events and phenomena (Greeff, in De Vos et al 2011:43). An interview guide is a list of questions or areas that need to be covered in the interview; it is used as a memory aid and helps to keep the interview focused (Edwards & Holland 2013:54; Hennink et al 2011:112). In compiling the interview-guide, I wrote down every question in view of exploring the aspects related to the topic in an understandable manner, and then arranged the different questions in a particular order to arrive at the answers to the questions (Edwards & Holland 2013:54; Luker 2008:168-171). The interviews would be digitally recorded with the permission of the interviewees (Creswell 2016:127-128).

I decided to employ the following interview skills to complement the flow of the interview and to allow for exploring the aspects related to the topic: in-depth listening, attending, probing, and follow-up questions. Listening and attending are crucial interviewing skills for a qualitative researcher, as they form part of the social interaction of interviews (Edwards & Holland 2013:72). I also made a conscious choice to pay particular attention to what the participants would say so as to be able to probe further and to use follow-up questions, if necessary. These interviewing techniques encourage interviewees to open up, elaborate, and provide more information (Edwards & Holland 2013:72).

I designed the following biographical questions to assist in the compilation of the profile of the participants:

- How old are you?
- What is your highest qualification in social work?
- How long have you been practicing as a social worker?
- What social work services do you render?

- How long have you been employed in your current position?

I also designed the following data collection questions related to the topic under investigation:

- What does your job as a social worker entail?
- What is your understanding of the concept “the personal safety of social workers”?
- Share with me your experiences where you felt your personal safety had been compromised during social service delivery (I probed for information, focusing on the aspects of where, when, and what happened, as well as why it happened).
- What coping strategies did you employ to manage the challenges experienced in terms of your personal safety during social work service delivery?
- What safety measures do your employers have in place in terms of the personal safety of social workers?
- Who should be responsible for the personal safety of social workers? Motivate your answer.
- Any suggestions on how the personal safety of social workers can be promoted?

1.5.4 Pilot testing

As a result of the uncertainty of the research process, I decided to embark on a pilot study before conducting the actual the research study. A pilot study is the administration of a research instrument to a group of people who will not be included in the study, in order to determine the efficacy and effectiveness of the specific research instrument (Grinnell & Unrau 2008:553). Janghorban, Roudsari and Taghipour (2014:1) refer to a pilot or preliminary study as a “small-scale of a complete survey or a pre-test for a particular research instrument such as a questionnaire or interview guide”. I view the pilot study as a small-scale test run of the research instrument to determine whether it serves its intended purpose. I decided to recruit three individuals that met the inclusion criteria to pilot test the data collection method and the data collection instrument, with these individuals being excluded from the actual study to avoid contamination. The aim of the intended pilot study was to assist me in determining whether the envisaged method of data collection was fitting for collecting the data required; whether the data collection questions are pitched at the participants’ level of understanding and cover the aspects to be explored; and the

amount of time it would take to interview participants. In addition, the pilot study would present me with an opportunity to gauge my skill in conducting a qualitative research interview aimed at the collection of information required to answer the research question.

1.5.5 Method of data analysis

Data analysis, to quote Babbie (2007:378), refers to “the non-numerical examination and interpretation of observations, for the purpose of discovering underlying meaning and patterns of relationships”. In a similar fashion, Creswell (2016:183) refers to data analysis as “a process of meaning-making related to the data collected which is an ongoing process of analytical reflection on the assembled data”. I view data analysis as the exercise through which the gathered data is examined and meaning is derived from this data. Data analysis is conducted concurrently with the processes of gathering and interpreting the data. While interviews are being conducted, for example, a researcher may be analysing an earlier interview and writing memos that may ultimately be included as a narrative in the final research report.

I planned to analyse the data utilising Tesch’s (in Creswell 2014:198) eight steps of data analysis:

- I would start by formulating a complete picture regarding the data by reading all the transcripts carefully and making notes about thoughts that occurred to me regarding the entire topic.
- I would then select one of the transcribed interviews and read through it in order to gain an understanding of what the transcript contained.
- This process would then be repeated in respect of all the transcripts until a list of the topics/themes is acquired. The topics/themes would then be placed together into clusters labelled as “major topics”, “unique topics”, and “leftovers”.
- Following that, I planned to compile a list of the different clusters and revisit the data. The topics would be abbreviated in the form of codes and each code written next to the appropriate portion of the text. This preliminary organising scheme is used to see if new themes emerge.
- I then planned to find descriptive wording for the topics and turn them into themes.

- After this, I would need to make a final decision on the abbreviation of each theme and alphabetise the list of themes with their corresponding abbreviations, in order to avoid any repetition or duplication of themes.
- Data belonging to each theme would be assembled in one place and a preliminary analysis would be conducted.
- Upon completion of the data analysis, I would present the results in a descriptive form.

1.5.6 Methods of data verification

To verify data in qualitative research, the researcher assumes the responsibility of showcasing that the research was conducted in a trustworthy, reliable, and rigorous manner (Porter 2007:81). The merits of qualitative research lie in the richness of the collected data which needs to be interpreted and coded in a valid and reliable way (Moretti, Van Vliet, Bensing, Deledda, Mazzi, Rimondini, Zimmermann & Fletcher 2011:420). I planned to employ the following strategies suggested by various scholars (Creswell 2016:194; Lietz & Zayas 2010; Gibbs 2008:98) to ensure the rigour of the research process and the trustworthiness of the research findings:

- *Triangulation of data sources*: Padgett (in Lietz & Zayas 2010:186) defines triangulation as “the use of two or more sources to achieve a comprehensive picture of a fixed point of reference”. I planned to interview different participants, both in the employ of the DSD and the selected NPOs in the Tshwane region. Gathering data from multiple sources or using multiple analysts to review data enables qualitative researchers to achieve an exhaustive response to the research question (Lietz & Zayas 2010:193).
- *Member checking*: according to Padgett (in Lietz & Zayas 2010:193) “member checking involves corroborating the research findings by seeking feedback from the research participants.” The researcher can ask some of the participants to assist with member checking by providing them with the transcripts of the interviews conducted and requesting that they check whether the transcripts are a true reflection of what transpired during the interviews, or the researcher can send a draft of the research findings to determine whether the participants agree with the findings (Shenton, in Lietz & Zayas 2010:194). I planned to conduct member checking by asking some of

the participants to review the transcripts of the interviews conducted with them to assess whether they are a true reflection of what transpired during the interviews.

- *Use rich, thick descriptions to convey the findings.* My plan was to use direct quotations from the transcribed interviews with the participants to substantiate the themes that emerged, and to meet the requirement of providing a thick description of the research findings (Lietz & Zayas 2010:194).
- *Clarify the bias the researcher brings to the study.* I planned to ensure that I engage in self-reflection and remain open and honest throughout this research study, while upholding the ethical considerations of research and maintaining objectivity. In keeping with reflexivity, I would keep a journal wherein I could record personal reflections and feelings to ensure that they do not hamper the research process (Freeman, Demarrais, Preissle, Roulston & St. Pierre 2007:27).
- *Use peer debriefing to enhance the accuracy of the account.* As a way of achieving this, I would present the interview guide to various social workers who could look at the structure of the questions and determine how suitable they are. These individuals would not be involved in the actual study, in order to avoid contamination. In addition, I planned to engage in regular supervision sessions with the study supervisor, who is well-versed in qualitative research, for peer debriefing.
- *Use an external auditor to review the entire project.* I would also make use of an independent coder who is well-versed in qualitative data analysis to independently conduct a thematic analysis of the data set.

In the next section, I will introduce the ethical considerations that I planned to adhere to in this study.

1.6 ETHICAL CONSIDERATIONS

The concept of ethics in research relates to that which is permissible and legitimate, and points to a researcher's attempt to follow the path of moral research procedures (Neuman 2011:143). This assertion is further emphasised by Marshall and Rossman (2011:47), who state that ethical research practice is grounded by moral principles or respect for persons. As such, ethics in research are concerned with protecting the interests and safety of participants and others who are, or could be, affected by the research. Qualitative research

projects involve more intense and sustained interaction with the research participants than quantitative designs (Shaw & Holland 2014:103). Hence, various ethical considerations have to be followed to ensure that participants are protected from harm that might arise as a result of taking part in the research study.

In keeping with suggestions by the aforementioned authors, I planned to uphold the ethical principles related to obtaining informed consent, confidentiality, anonymity, management of information, and debriefing.

1.6.1 Obtaining informed consent

Obtaining informed consent, according to the World Health Organization (WHO) (2013:21), entails “informing potential participants, through document and discussion, of the purpose, procedures, risks, potential benefits, and voluntary nature of the proposed research and documenting the participant’s agreement.” Harriss and Atkinson (2011:820) indicate that participants should provide consent to participate in the research freely and it should ideally be in writing. Obtaining informed consent is a process involving three interactions, namely: the researcher provides information to participants, participants are given information in a way that is easily understood, and then participants respond to this information (Cocks 2006:265). I planned to ensure that all the participants give their consent in writing before participating in the research. Before giving their consent, they would be informed about the purpose of the research and the entire research process would be explained, so as to enable them to decide whether or not to participate. Their consent would need to be given both verbally and in writing (see Addendum A). The participants would sign consent forms (see Addendum B) after they received information regarding the research.

1.6.2 Anonymity and confidentiality

Anonymity is the process of protecting the identity of the research participants in such a way the information shared cannot be traced back to the participants (Whelan 2007:2). I planned to observe anonymity in this study by removing the personal details of research participants and using pseudonyms so as to protect their identities. The information obtained through the research study which might reveal participants’ individual details

would be kept confidential and stored safely, as suggested by Shaw and Holland (2014:116).

Confidentiality is the process of protecting the different participants' opinions or information gathered in the research process (Clark 2006:4), and the confidential treatment of information that an individual has disclosed based on trust and an understanding that it will not be divulged without permission (WHO 2013:25). As a way of upholding confidentiality, I planned to make every effort to ensure that only the study supervisor, the independent coder, and I had access to this information; all of us consummate professionals that would protect the identities of the participants. I would also ensure that the information given by the participants would be kept confidential, unless I was permitted to divulge the information by the participants. Confidentiality is upheld through the anonymisation of the data and the proper management of the data – another ethical consideration to be presented next (Shaw & Holland 2014:116).

1.6.3 Management of information

Data management in research encompasses all aspects of looking after, handling, organising, and researching data (Van den Eynden, Bishop, Horton & Corti 2010:4). Research data management is concerned with the organisation of data, from its entry to the research cycle through to the dissemination and archiving of valuable results (Whyte & Tedds 2011:1). I hold the view that the anonymity and confidentiality of participants form part of the management of information and are essential to ethical research practice. As such, I planned to handle the information that was derived from the study in the strictest and most confidential manner (see Addendum B, C and D). This includes the removal of any identifying details of the research participants, such as their names, to protect their identities and to ensure that they enjoy the strictest confidentiality. All recordings and audio tapes would be kept under lock and key by me to avoid any unauthorised access. Apart from me, the only individuals that would have access to these recordings would be the independent coder and the study supervisor. I also planned to keep all transcripts under lock and key and ensure that there would be no unauthorised access to any of the research information or data, including transcripts, recordings, and any other material that may compromise the anonymity and confidentiality of the research participants.

1.6.4 Debriefing

Debriefing occurs after the collection of data and involves the giving of information to the participants so as to remove misconceptions that may have arisen as a result of the research study, and it is incumbent upon the researcher to ensure that all the participants gain access to debriefing services in the event that they need this (Padgett 2008:58; Babbie 2005:69). Ngwabi (2014:47) maintains that debriefing lessens the harmful effects incurred by participation in research. Since the research participants would share their personal experiences, it is possible that some of these experiences could be negative and possibly result in the participants reliving traumatic events. As such, I would arrange for a qualified professional with the relevant experience to be available to provide counselling for the research participants, should it be necessary.

The next section will provide clarification of the key concepts in this study.

1.7 CLARIFICATION OF KEY CONCEPTS

In this section, some of the concepts central to this study will be defined and how they should be understood in the context of this study will be highlighted.

1.7.1 Social workers

The Social Service Professions Act 110 of 1978 (South Africa 1978) defines a social worker as “any person who holds the prescribed qualifications and satisfies the prescribed conditions, and who satisfies the council that he is a fit and proper person to be allowed to practise the profession of social work.” In this study, ‘social workers’ refers to generic social workers registered with the SACSSP and currently employed in the identified research sites at which this study was conducted in the Tshwane region.

1.7.2 Experience

The word experience is defined as what you learn from doing something or seeing something (*Oxford School Dictionary* 2007, sv “experience”). The word experience is also defined as knowing about something, because you have seen it or done it (*Oxford South*

African School Dictionary 2010, sv “experience”). In this research study, the word experience pertains to social workers who experienced their personal safety being threatened or compromised in the course of doing their job.

1.7.3 Challenges

The word challenge is defined as a situation or task in which one must show one’s ability (*Oxford School Dictionary* 2007, sv “challenge”). The word challenge is also defined as a difficult task requiring one’s maximum effort (*Oxford South African School Dictionary* 2010, sv “challenge”). In this research study, challenges pertain to the difficulties that social workers face in terms of their personal safety during social work service delivery.

1.7.4 Coping strategies

Coping, according to Lazarus and Folkman (in Frydenberg 2014:83), can be defined as “constantly changing cognitive and behavioural efforts to manage specific external and/or internal demands that are appraised as taxing or exceeding the resources of the person”. Coping strategies can be defined as the ways and means through which an individual deals with a stressful situation (Centre for Studies on Human Stress, 2016). The North Carolina Hearing Loss Organization ([sa]) defines coping strategies as “behaviour that helps us function better in a given situation”. I view coping strategies as survival tools that one develops and utilises in an effort to manage a stressful and challenging situation. In the context of this research, coping strategies relate to the ways and means utilised by social workers, as well as tools that social workers develop, so as to cope with their personal safety challenges.

1.7.5 Personal safety

This is defined as the implementation of safe work systems in places of employment to ensure that employees are safe and free from harm (Queensland Government 2016). Every employee has a right to a work environment that is secure and free from violence or threats thereof, inclusive of freedom from psychological harassment (Seneca College c2020). I am of the view that personal safety in a workplace includes freedom from physical harm, hostility, and demeaning behaviour that is likely to put an individual at risk. In the context

of this research, personal safety relates to social workers' freedom from harm, either physically or psychologically, during the discharge of their duties.

The next section will highlight the format of this research report.

1.8 FORMAT OF THE RESEARCH REPORT

The research report/dissertation comprises four chapters with the focus of each of the chapters indicated below.

The first chapter served as a general orientation and introduction to the study and covered the following aspects: background and introduction; problem formulation and problem statement; the rationale for the research; the theoretical framework for the study; the research questions, goals, and objectives; the research approach; the research design; research methods; ethical considerations; clarification of key concepts; and the chapter outline of the research report.

In the second chapter I will provide a detailed account of how I applied the qualitative research process that is outlined in Chapter One. This chapter begins with a justification for the inclusion of this chapter in the research report. I will then focus on how the qualitative research approach; the chosen research design; the selected research methods, with specific reference to the recruitment of participants and data collection, analysis, and verification; and the applicable ethical considerations were applied in a practical sense in the study.

In the third chapter I will present the research findings, which will be discussed in comparison to existing literature linked to the topic. The chapter begins with the presentation of the demographic particulars of the research participants, followed by an overview of the research findings presented under various themes and related sub-themes. Each of these will be introduced and direct quotations from the transcribed interviews will be provided in substantiation, supported by a literature control before a summary draws the chapter to a close.

The fourth chapter is the final chapter of the research report. In this chapter, the reader will be furnished with the summary of the research findings and the conclusions drawn, as well as the recommendations emanating from them. As with the preceding chapters, this chapter will be concluded by way of a detailed summary of the chapter.

The next section will provide a summary of the chapter.

1.9. SUMMARY OF THE CHAPTER

The first chapter centred on an introduction for the topic under investigation, providing a backdrop for and casting it against the body of knowledge related to the topic. The research problem was identified and summarised in a problem statement. The rationale for this research undertaking was declared. Schlossberg's (1981) Transition Process Model as the proposed theoretical lens for the study was introduced. The research questions focusing the study, and the accompanying goals and objectives for answering them, were presented.

The qualitative research approach was introduced. The collective case study and phenomenological research designs were introduced, together with the explorative, descriptive, and contextual strategy of inquiry chosen for the study. The population for the study was defined and the methods of participant recruitment indicated. The proposed methods of data collection and analysis, and the strategies for ensuring the rigour and trustworthiness of the research process and findings were introduced. The key concepts central to this study were identified and clarified, and an outline of the chapters of the dissertation was presented.

CHAPTER TWO: DESCRIPTION OF THE APPLICATION OF THE QUALITATIVE RESEARCH PLAN

2.1 INTRODUCTION

The previous chapter of this dissertation was dedicated, in part, to introducing the research plan proposed for investigating suggestions for promoting social workers' personal safety informed by the personal safety challenges experienced and coping strategies employed during social work service delivery.

In this chapter the aim is to describe how this plan was applied in an ethically sound manner by adhering to the principles of obtaining the participants' informed consent for participation, guaranteeing their anonymity in terms of identity, and being the guardian as far as the confidential management of information is concerned. The application of the research plan in principle relates to conducting the research or doing the fieldwork (Pole & Hillyard 2016:3), with the focus being on the following activities:

- the identification of research sites where the potential participants congregate, obtaining permission to enter the identified research sites, and gaining access to the possible participants;
- the recruitment, screening, and selection of participants; and
- the collection of data, first-hand by the researcher, and the subsequent analysis of the data collected.

Before a detailed description is provided on how the research plan was applied, I need to justify the decision to dedicate a chapter of this dissertation to describing how the research plan was executed.

2.2 THE JUSTIFICATION FOR DEDICATING A CHAPTER TO DESCRIBING HOW THE RESEARCH PLAN WAS EXECUTED AND APPLIED

When adopting a qualitative approach to investigate a topic of interest (as is the case with this research project), the qualitative researcher must make every effort to provide

evidence to enable the reviewers and readers of the research report to conduct an audit to assess whether the research process, the decisions taken, and the product (the research findings and conclusions) pass the test of quality, transferability, and trustworthiness (Hadi & Closs 2016:644). Several scholars (Cope 2014:90; Carcary 2009:1; Akkerman, Admiraal, Brekelmans & Oost 2008:261) confirm that conducting an audit can be considered a key strategy or technique for establishing the credibility, trustworthiness, and quality of the qualitative research process and outcome. Enabling such an audit, the auditee (or the qualitative researcher) must provide, so to speak, the nuts-and-bolts information on what he/she has done. A detailed account is required, comprehensively describing the participant recruitment methods and data collection process in terms of the what, the where, the how, and from whom the data was collected, as well as how long he/she was engaged in the fieldwork activity and how the data was analysed. In addition, and in view of the eventual audit, the field notes depicting the researcher's decisions and assumptions must be interspersed throughout this detailed account and preserved for such an audit (Cope 2014:90; Öhman 2005:279).

Given the requirement to provide an audit trail for the purpose of assessing the quality and the trustworthiness of the study, I decided to devote this chapter of the research report/dissertation to providing the information required so as to enable a quality audit.

Another reason for including this chapter in the research report/dissertation, describing how the research plan was applied, is the fact that the idea of an emergent design is embraced within the realm of qualitative research. The advice from various scholars (Thomas 2017:140; Creswell 2014:186; LaBanca 2011:1160; Anastas & MacDonald, in Wright 2009:64) is for researchers not to have a predetermined or fixed format for the research plan, with specific reference to the study's design and data collection methods. Instead, an open mind is advocated for embracing the idea that the qualitative research design takes shape, unfolds, and crystallises as the research proceeds. Aspects in the research plan, such as the research site, sampling methods for participant recruitment, and the methods and format of data collection, cannot be set in stone. The research plan is therefore no more than an attempt to provide structure to the research process as, more often than not, the emergence of new data alters the research plan and takes it in another direction altogether (Creswell 2014:186).

In supporting this train of thought, Brown (in Lichtman 2014:40) writes:

We [referring to qualitative researchers] don't always know until we're well into the project where we are placing our emphasis. Often we change directions and take new tacks in the midst of the work, due to our own realisation about the material, and in part from the ongoing interaction with people.

In view of the emergent character of the qualitative research process, it would be wise to inform the readers of how the plan was carried out by indicating how the researcher stuck to the proposed research plan or how and why there was a deviation from the intended plan. Thus, it is imperative to constantly revisit, check, and adjust the research plan to ensure that it is as effective as possible. The constant shifting and changing of the research plan occurs when in the field as the researcher allows the data to be the central driver of the research process (Creswell 2014:186). I witnessed how the research plan had to be adjusted as the research proceeded. The initial plan was to collect data from the three research sites previously identified: The DSD, the TLF, and the KWO. However, as the research study took shape, I was informed by the manager of the KWO that none of the social workers in the organisation met the inclusion criterion stipulated for participation in this study in that they had never had their personal safety compromised during social work service delivery. Hence, I had to withdraw this organisation as a research site. I proceeded to recruit participants from the DSD and the TLF, but as the supervisor engaged with the transcribed interviews from participants from these research sites, he suggested that the data obtained lacked variety and that the voice of the NPO participants needed to be more audible in this study. The research plan thus had to be changed and expanded to include more NPOs. Through the assistance of a contact in the supervisor's professional network, I obtained access to two other NPOs and permission was granted to recruit participants from them. Hence, the Catholic Women's League (CWL) and an unnamed NPO operating in Atteridgeville (this NPO cannot be named as they did not grant me permission to publish their name), both NPOs rendering services within Tshwane in the Gauteng Province, were added as research sites. Based on the aforementioned amendment to the research sites, the need for this chapter becomes evident: this chapter was included to explain how the research process unfolded, to state how I deviated from the research plan, and to give the reasons for such deviations, as previously highlighted.

The focus of the discussion will now shift to describing how the research approach, design, and method introduced in the previous chapter, as part of the research plan, were executed and applied. As cross-references will be made to the previous chapter, the reader is advised to read some sub-sections in this chapter in collaboration with similar sub-sections in Chapter One.

2.3 A DETAILED DESCRIPTION OF THE QUALITATIVE RESEARCH APPROACH

As indicated in Chapter One (see 1.4.1), I decided to set about this investigation from a qualitative research approach. As the concept “qualitative research” was introduced in the previous chapter, I, by way of recap, will now provide the following adapted summary of qualitative research as given by Mohajan (2018:24). Qualitative research as a research approach places emphasis on the way people interpret and make sense of their experiences, and attempts to provide an understanding of the social reality of individuals. To realise this, interviews, diaries, and journals become the instruments for obtaining data, which is subsequently analysed and interpreted. Qualitative research is exploratory and seeks to explain the ‘how’ and ‘why’ of a particular social phenomenon or programme within in a particular context. It tries to help us understand the social world in which we live, and why things are the way they are. In addition, Bless, Higson-Smith and Sithole (2013:394) state that qualitative research, in essence, and by way of word pictures and visual images, investigates the aspects of social reality.

In addition to introducing the concept “qualitative research” in Chapter One (see 1.4.1), the characteristics peculiar to the qualitative research approach, as identified by Creswell (2016:6-9), were also introduced. These salient characteristics are briefly recapped below and a description is then provided on how they were applied during the fieldwork:

- Qualitative research is often conducted in the field, in pursuit of directly interacting with the people being studied in their context (Mohajan 2018:37; Creswell 2016:6; Hammarberg, Kirkman & De Lacey 2016:498). In similar fashion, Neuman (2011:157) mentions that “qualitative researchers borrow ideas from people they study and place them within the context of a natural setting.” In this research endeavour, I conducted interviews with social workers at their places of employment, as this is

where most of them had experienced challenges in terms of their personal safety. In addition, I also explored what coping strategies they employed to manage the challenges experienced and requested suggestions from them about promoting social workers' personal safety in rendering social work services.

- As qualitative researchers go to the field and collect data themselves by examining documents, observing behaviour, or interviewing participants, they become the primary instruments for data collection (Mohajan 2018:37; Yilmaz 2013:317; Öhman 2005:276; Devers & Frankel 2000:264). By employing interviews, semi-structured in nature, I became the primary instrument for data collection. I used open-ended questions and probes to explore the various aspects of the topic I was investigating and applied, amongst others, the skill of attentive listening to the answers provided by each participant. I then responded in a manner that encouraged the flow and progression of the interviews.
- Qualitative research is by nature explorative and descriptive (Wu, Thompson, Aroian, McQuaid & Deatrck 2016:495, 497; Creswell 2016:7; Morrow 2007:211). Thus, qualitative research can be seen as a vehicle for exploring and describing the meanings that individuals attach to specific situations (Creswell 2014:246). These characteristics tied in with the research objective of inviting the social work participants to explore and describe the challenges they experienced during social work service delivery in terms of their personal safety and the coping strategies employed by them to manage these challenges. Furthermore, the participants were asked to forward suggestions for promoting social workers' personal safety. In addition, I engaged in describing, as findings (see Chapter Three), the aspects as explored with and described by the participants. This too speaks to the descriptive characteristic of qualitative research in that this type of research, to quote Morrow (2007:211), is appropriate when the requirement is to present a detailed and in-depth description of the phenomenon investigated.
- As multiple perspectives about the phenomenon of interest are essential for obtaining an in-depth understanding about it, multiple sources of data are preferred over a single source privileging the participants' meanings (Wu et al 2016:494; Creswell 2016:6). I interviewed various social workers, from both the DSD and the selected NPOs. In

addition, different scholarly works were consulted with the aim of gaining a comprehensive understanding of the challenges experienced by social workers in terms of their personal safety and the coping strategies they employed to manage the challenges experienced during social work service delivery. Qualitative researchers present themes drawn from multiple perspectives, inductively, following a bottom-up approach and the consistency of the findings is as a result of the multiple sources of data utilised and triangulated (Creswell 2016:8; Cohen, Manion & Morrison 2011:255-256). In Chapter Three of this research report/dissertation, the research findings will be presented thematically.

- Qualitative research supports the idea of an emergent research design (Thomas 2017:140; Creswell 2014:186; LaBanca 2011:1160; Anastas & MacDonald, in Wright 2009:64), allowing for changes to be made to the initial research plan, especially in terms of the participant recruitment (sampling) methods, the data collection methods and protocols, and the research sites. Wright (2009:64) further explains the emergent nature of the qualitative approach, stating that it comes to the fore when the research assumes a different path from the one anticipated by the researcher and the researcher allows the data to shape the design. In this regard, Lévi-Strauss, as quoted by Morrow (2007:214), writes:

It may be useful to see the qualitative researcher as a ‘bricoleur’; a ‘Jack [or Jill] of all trades or a kind of professional do-it-yourself person’ who carefully and in a calculated fashion adjusts the research plan to the realities dictated in the field and the data emerging, indicating that a different route must be taken.

This rang true for me, as I mentioned earlier in this chapter that I had to deviate from the proposed research plan. My intention was to conduct research at the following sites: the DSD (Tshwane region), the TLF, and the KWO. Unfortunately, the KWO later withdrew from the research study after the chief social worker indicated that the social workers in the organisation did not meet one of the criteria for inclusion stipulated for participation in this study, as they had never had their personal safety compromised during social work service delivery. As a result, I had to extend my search for research sites to other organisations. For this purpose, I enlisted the help of

a social work colleague² introduced to me by the study supervisor, who was one of his colleagues in his professional network. This colleague, due to her position in the NPO social work fraternity, played a facilitative role in that she assisted in identifying NPOs who became research sites. She contacted the organisations, informed them about my research project, negotiated entry, and also obtained the particulars of potential participants (Devers & Frankel 2000:266) I could approach for participating in this study. Through her assistance the CWL, situated in Sunnyside, and an unnamed NPO based in Atteridgeville, both in the Tshwane region, became available as additional research sites to obtain participants from. These two organisations are engaged in offering family and child protection services, educational programmes, and community upliftment projects in their respective communities. The extension of the research sites was also necessitated by the need to obtain varied information. The study supervisor, after scrutinising the interviews conducted with the participants from the DSD and the TLF, advised that more NPO research sites should be identified and that participants from these organisations should be interviewed to assess and provide for a “phenomenal variation of the sought-after experience” (Roy, Zvonkovic, Goldberg, Sharp & La Rossa 2015:247). This was also recommended to establish whether information different from the data already collected would come to the fore. This in essence would contribute to the study’s credibility, as the use of multiple data sources or interviewing different participants allows for obtaining corroborating evidence (Anney 2014:277).

Investigating the personal safety challenges experienced and coping strategies employed by social workers during social work service delivery and obtaining suggestions from them on promoting social workers’ personal safety during social work service delivery through the vehicle of the qualitative research approach was well-suited for a number of reasons. Adopting a qualitative research approach was a good fit, as qualitative research, rooted in interpretivism, allowed me to study the “experiential life of people” (Polkinghorne, in Morrow 2007:211). Because qualitative research is founded upon interpretivism, it supports the notion that knowledge is everywhere and it is socially constructed, and also

² I approached Mrs Margaret Grobbelaar, the National Coordinator of the National Coalition of Social Services (NACOSS), to assist me in contacting NPOs in the Tshwane region, Gauteng Province, South Africa, who would permit me to conduct research at their organisations and identify social workers I could contact who fit the criteria for potential inclusion in the study.

the idea that multiple realities can exist. In addition, it admits the fact that all kinds of information may be called “knowledge”, even things of “the mind” (Thomas 2017:109). These tenets of the interpretivist qualitative approach resonate with my ontological and epistemological beliefs and strengthened the motivation to follow this approach, as I believe that the research participants’ interpretations of their own social world are what define their reality (Creswell 2014:185). As qualitative research allows participants to explore and describe the depth, breadth, and complexity of their human experiences by explicating the meanings they attribute to these experiences (Leedy & Ormrod 2013:14-97; Morrow 2007:209, 211), I deemed this approach a fitting choice for investigating the research topic chosen for this study.

In the next section, I will provide a discussion of the research design utilised in the study.

2.4 RESEARCH DESIGN

The concept “research design”, as introduced in Chapter One (see 1.4.2), refers to the plan to be followed by the researcher for collecting and analysing evidence that will eventually lead to answers for the research questions formulated in respect of the study (Yegidis et al 2018:100; Ragin, in Flick 2015:84). In addition, Thomas (2017:26) notes that the purpose of the study informs the design. Thus, the research design relates to the organisation of the research question into a framework that sets the boundaries and requirements of the study (Creswell 2014:12). Summing up the previous trains of thought: I hold the view that research designs are plans of research that are informed by the purpose of the research and the research questions, which in turn inform how and from whom the data needs to be collected, and what strategies need to be employed to analyse the data so that the study findings will address the research questions (Flick 2015:84; Babbie 2011:67). Having given all these explanations to emphasise the meaning of the concept “research design”, I need, as stated earlier in this Chapter (see 2.3), to reiterate the viewpoint that qualitative research designs are emergent in nature and, to quote Frankel and Devers (2000:253), must be viewed as a “rough sketch” that be completed as the research proceeds (Devers & Frankel, 2000:264).

As per the original plan, I remained with the collective case study and phenomenological designs, supported by an explorative, descriptive, and contextual strategy of inquiry for this study.

2.4.1 The collective case study design

The collective case study design, as a type of case study, refers to a number of cases that are studied hand-in-hand to investigate a phenomenon about which little is known (Yegidis et al 2018:132; Thomas 2016:172; Stake 2005:445) with the purpose of obtaining greater insight into and an understanding of the dynamics of a specific situation (Nieuwenhuis 2007:76). I specifically focused on the case of social workers' challenges experienced in terms of their personal safety during social service delivery and the coping strategies they employed to manage the experienced challenges. This allowed for the topic being investigated to be explored through the semi-structured interviews conducted with multiple cases (various social workers) in order to gain an in-depth perspective. In addition, I sought suggestions from the social work participants to promote social workers' personal safety. These intentions led to the collective case study being employed *instrumentally* in that it served as an instrument or a tool (Creswell & Poth 2018:98; Thomas 2016:121) with the purpose of gaining insight and making suggestions to inform social work practice.

2.4.2 The phenomenological design

Building on to the explanation given for the concept "phenomenological design" (see 1.4.2.2), Mohajan (2018:29) states that phenomenology is a qualitative strategy of inquiry, aiming to explore people's everyday life experiences with the intention of developing an understanding of the participants' worlds from their point of view, taking into consideration the ways in which they make sense of the world around them and how they transform their experiences into consciousness (O'Reilly & Kiyimba 2015:14; Turner, Balmer & Coverdale 2013:307). As such, and to quote Yegidis et al (2018:127), "phenomenology recognizes that all experiences are subjective and depend on the values, life experiences and biases of the person having the experience." I thus employed the phenomenological design as a qualitative strategy of inquiry, because it afforded me this opportunity. This design was also chosen as it was my intention to invite the participants to explore and describe the challenges they experienced in relation to personal safety while

rendering social work services to service users and to describe as findings the challenges they experienced, as well as how they coped in this regard.

2.4.3 The explorative design

Exploratory research is undertaken when the researcher wants to become familiar with a topic he has little knowledge about (Yegidis et al 2018:106; Thomas 2016:126; Babbie 2013:94). Thus, exploratory research is aimed at exploring a phenomenon and to derive answers to questions regarding a phenomenon that are particularly unknown (Gray 2013:36). I regard exploratory research as a vehicle for looking at a little-known phenomenon by asking a set of questions to be answered so as to understand the phenomenon better. This design fitted the study well, as I sought to explore the challenges experienced by social workers in terms of personal safety and the coping strategies they employed to manage these during social work service delivery, and to gather suggestions for promoting social workers' personal safety during social work service delivery – a topic that would be described by Creswell (2016:68, 88) as being “ill-researched”. A literature search undertaken to establish the body of knowledge and available research on this topic revealed that not much has been written on the personal safety of social workers in South Africa. A study by Alpaslan and Schenck (2012), focusing on the challenges experienced by social workers practising in rural areas, highlights the need for a study focused on the personal safety of social workers. Ncongwane (2014) further highlights the lack of literature on workplace safety in South Africa and the need for more research studies to be conducted in this regard. This is the motivation behind utilising the explorative design in this research study; it is an attempt to plug the gap in literature regarding this topic in the South African context.

2.4.4 The descriptive research design

As planned, I also employed the descriptive research design as part of the strategy of inquiry, since the accumulation of the data gathered through exploration provides the researcher with knowledge to describe the phenomenon under investigation (Yegidis et al 2018:107). Dadonienė et al (2013:38) define a descriptive research design as an attempt to provide a picture of what is happening to the poorly understood phenomenon, which does not lend itself readily to quantification. In addition, Babbie (2013:95) adds that the aim of

many social science studies is to describe situations and events, and in these studies researchers observe and then describe what they have observed or heard. I contend that the descriptive research design provides word pictures on a phenomenon, aimed at enhancing our understanding of it. As such, this research study answered the previously mentioned question in the quest to understand the challenges experienced by social workers in terms of personal safety and the coping strategies they employed during social work service delivery, and suggestions were proffered for promoting social workers' personal safety during social work service delivery.

2.4.5 The contextual research design

In writing about the aspect of the contextual research design, Flick, Von Kardoff and Steinke (2004:9) postulate that “qualitative data collection, [as well as the] analytical and interpretive procedures are bound, to a considerable extent, to the notion of contextuality.” It is therefore of paramount importance for researchers to recognise and acknowledge the fact that their participants' experiences, perceptions, and behaviour are contextually situated and that the context shapes and is being shaped by the mentioned aspects (Hennink et al 2011:9). In like manner, the contextual research design validates the notion that an understanding of human experiences and perceptions occurs when researchers fully comprehend the natural settings of the participants (Monette et al 2011:225). I hold the view that the central focus of a contextual design is for me to go to the environment of the research participants so as to understand the participants' lives and behaviour in and from their contexts. In this study, I chose to use a contextual design in order to explore challenges experienced by social workers related to the context of personal safety in rendering social work services. The contextual research design sensitised me in terms of zoning in and enabled me to understand what social workers perceive as challenges to their personal safety, as well as the coping strategies that they employ during social service delivery in the various contexts within which they work.

The following section provides a discussion on the research methods applied in the study.

2.5 RESEARCH METHODS APPLIED IN THE RESEARCH STUDY

In recapping and further elaborating on the meaning of the concept “research methods” introduced in Chapter One (see 1.5), various scholars (Punch 2016:65; Mills, in Mills & Birks 2014:32; Whittaker 2012:130) posit that research methods, broadly speaking, refer to the practicalities of doing the research and specify the techniques and tools to be used for the choosing of participants or participant recruitment (sampling); data collection, analysis, and verification; and the reporting of the findings. Against the clarification of the concept “research methods” provided, I interpret the research methods as the vehicle for conducting the research. In the ensuing discussion, I will describe how the research methods, decided upon in Chapter One, were applied.

2.5.1 Population, sampling, and sampling techniques

The aspects of population, sampling, and participant recruitment or sampling techniques were introduced in the research plan in the previous chapter (see 1.5.1). In view of developing a sampling frame, in terms of selecting sites and/or participants capable of answering the research questions formulated for the study (Devers & Frankel 2000:264), the population or the total number of cases which one can draw conclusions from needs to be defined (Babbie 2013:119; Whittaker 2012:75). The population for this study was initially, as per the research plan, identified and demarcated as: all frontline social workers employed at the DSD (Tshwane region), the KWO, and the TLF, which are all in the Tshwane region in the Gauteng Province of South Africa. However, and as mentioned earlier in the chapter, the KWO’s withdrawal from participating necessitated that I expand the activity of identifying and accessing other NPOs in the Tshwane region. With the assistance of a colleague, from the study supervisor’s professional network, I managed to obtain permission from and access to participants from one NPO in Atteridgeville and the CWL in the mentioned region.

Thus, the population from which participants were drawn to form the sample for this study was ultimately defined as follows: *all frontline social workers employed at the Department of Social Development (Tshwane region), the Tshwane Leadership Foundation, an NPO in Atteridgeville, and the Catholic Women’s League (Sunnyside Office) – all NPOs in the Tshwane region in the Gauteng Province of South Africa.*

For the purpose of sampling, or the selection of a small portion from the population for inclusion in the study (Yegidis et al 2018:204-205; Thomas 2017:142), I kept to the initial plan and employed *purposive sampling* to select participants for inclusion in the study. With this sampling method, guided by the developed criteria of inclusion, I intentionally sought “information-rich” participants who had experience and insight into the topic being investigated and who could provide answers to the formulated questions (Yegidis et al 2018:216; Oppong 2013:203; Maxwell 2013:97; Devers & Frankel 2000:264).

With the exception of one criterion, I kept all the criteria of inclusion as per the original plan (see Chapter One: 1.8.1). The criterion speaking to the aspect of the research sites where participants were to be recruited from was amended, due to the withdrawal of the KWO as a research site and the subsequent expansion of research sites with the inclusion of an NPO in Atteridgeville and the CWL as additional research sites. This criterion as adjusted reads as follows: “*Social Workers... employed in the DSD (Tshwane region), as well as the following NPOs also located in the Tshwane region: the TLF, an NPO in Atteridgeville, and the CWL.*”

In qualitative research, the sample size is not fixed at the outset of the study (Abrams 2010:539), but rather informed by data saturation. Merriam (2009:80) posits that sample size cannot be pre-determined, as it is dependent on factors such as the availability of resources, the research questions, and the richness of the data collected. Data saturation refers to the stage when the additional collection of evidence or information on the topic being investigated provides little in terms of new emergent themes and perspectives (Given 2016:135; Suri 2011:72). In order to determine whether the stage of data saturation has been reached, Bryman (2012:18) advises that the processes of sampling participants, data collection, and data analysis run concurrently. In following this advice, I transcribed the recording of the interview immediately after interviewing a participant and engaged in the process of identifying themes in the transcript. Each of the transcripts was also made available to the study supervisor at the same time, so that he could also identify the themes noted in the transcripts. I did not proceed to sample another participant before receiving feedback from the study supervisor on the richness of the information obtained from a participant; the possible themes that emerged; his assessment of my ability to conduct a qualitative research interview; and my interviewing skills to conduct such an interview.

Data saturation became evident after I had recruited 14 participants, interviewed them, transcribed the digitally recorded interviews, and both the supervisor and I had engaged in the preliminary process of data analysis to identify emerging themes and had participated in a consensus discussion on the matter of terminating the process of recruiting and interviewing participants.

The following section will provide a description of how the participants were recruited.

2.6 RECRUITMENT OF PARTICIPANTS

After obtaining ethical clearance from the Department of Social Work's Research and Ethics Committee at the University of South Africa (UNISA) (see Addendum H), and prior to setting out to recruit participants for the study, I sought permission from the Director-General of the National DSD and the Regional Director of the Tshwane office, as well from the Programme Coordinator of the TLF and the Chief Social Worker of the KWO to use them as research sites, as per the original plan. It was during this stage of obtaining permission that I learned that the KWO would not be able to serve as a research site. The Chief Social Worker informed me that they do not have frontline social workers who meet the criterion of having experienced challenges in terms of their personal safety, thus they could not partake in the study. I then, with the assistance of my supervisor, enlisted the help of a colleague, who holds a coordinator's position at the NACOSS and who has contact with various NPOs in Tshwane, to negotiate entry for me to two NPOs who would be willing to act as research sites and link me up with possible participants. After informing the Directors of the CWL and an NPO in Atteridgeville, she managed to gain permission from them for me to conduct research at their organisations. In the discussion to follow, I will provide an overview of how entry was arranged to the mentioned research sites, permission to conduct the research was obtained, and how the participants were recruited from the respective sites.

2.6.1 The Department of Social Development (Tshwane region) and participants recruited from this research site

I contacted the National DSD via email and sought permission to conduct research in the Tshwane-region. The specific gatekeeper who granted permission was the DSD National

Deputy Director-General: Support. Although the National DSD office had granted me access to their Tshwane regional offices as research sites to conduct my research, I went further by contacting the Tshwane Regional Director, who is the overall Head of the DSD in the Tshwane region and who can also be considered as a gatekeeper, via email. The Tshwane Regional Director, in addition to acknowledging the permission granted by the National DSD, granted me permission and provided me with a list of the names and contact details of all the supervisors of the DSD service points in the Tshwane region. Within the Tshwane region, the DSD has service points at Manaka House (in the Tshwane CBD³), and in Mamelodi, Soshanguve, and Hammanskraal (the Temba Service Point). Upon receipt of the names and contact details of the supervisors, I proceeded to personally call and email each of the supervisors at the various service points and requested an appointment with each of them to explain the topic and aim of my study, and the research process involved. I also asked for their assistance in informing their social workers about the research and finding out who would be willing to participate in the research project, given the stated criteria of inclusion for participation. I then requested that they forward the names of the potential participants to me. With the “insider assistance” of the supervisors who acted as gatekeepers in that they had the authority to facilitate access to potential participants (King & Horrocks 2014:31), I managed to recruit 10 participants who met the criteria of inclusion and who expressed their willingness to participate in this research project. They each signed a consent form testifying to the fact that they are participating in this study out of their own free will. They were: **Velile, Nathi, Marinus, Flo, Jules, Unathi, Lwazi, Clara, Thulani, and Khomotso** (their real names have been replaced by pseudonyms to protect the identity of the participants).

2.6.2 The Tshwane Leadership Foundation and the participants recruited from this site

I contacted the Programme Coordinator of the TLF telephonically and via email, seeking permission to conduct research in the organisation. Following the approval given by the programme coordinator and the board of the organisation, I contacted two individuals known to me through previous work engagements. An appointment with each of the two individuals was scheduled, where they were informed about the research and what

³ The central business district of the Tshwane area.

participation in this study would entail. **Amahle** and **Batseba** (their real names have been replaced by pseudonyms to protect their actual identities), from this research site, agreed to participate; they signed the informed consent form and arrangements were made for the interviews to be conducted at their convenience and in a setting of their choosing.

2.6.3 The Catholic Women's League (CWL) and the participant recruited from this site

As previously stated, the NACOSS Coordinator arranged entry for me to the CWL, and she informed me that I needed to contact the director. After I had spoken to the Director of the CWL, she put me in contact with the supervisor at the Sunnyside office of the CWL, who granted me permission to contact social workers in the organisation and made their names and contact details available to me. After contacting the social workers at the organisation, one participant (**Dawn**⁴) showed an active interest in partaking in the research study. I met with **Dawn**, and after I explained to her the aim of the study, what her participation would entail, as well as the ethical considerations I would observe, she consented in writing to participate and she requested to be interviewed on the spot. The CWL is an organisation that runs a professional welfare and developmental service under the auspices of the Catholic Church and the CWL in the Tshwane Diocese (CWL [sa]).

2.6.4 A non-profit organisation and the participant recruited from this site

There was one additional NPO chosen as a research site. Entry to this site was also negotiated by the NACOSS Coordinator (which cannot be named, as they did not give me permission to publish their name in this research report). After the coordinator informed the director of this NPO about my research project and my request for entry into this organisation in view of recruiting participants who met the criteria of inclusion, the director gave her permission. I contacted the director, and she advised me to contact the supervisor at the organisation's Atteridgeville Office, given the fact that the frontline social workers in this area are more likely to work with hostile clients in this community. The supervisor at the Atteridgeville office put me in touch with three possible participants. After establishing contact with all three of them, only one was willing to participate. After

⁴ A pseudonym.

I met with **Rebone**⁵ and informed her about the research, its practicalities, and what her involvement would entail, she consented to participate and a date and time convenient to her was set for the interview.

The next section will highlight the preparation for data collection that I embarked upon in this study.

2.7 PREPARATION FOR DATA COLLECTION

The process of preparation for data collection began before the participants signed the consent forms confirming their willingness to participate in the research project. During the process of participant recruitment, after I introduced myself and the goal of the study, I introduced the following aspects related to data collection: I informed them that interviews (semi-structured in format) would be used to collect the data from them; I provided them with a list of the biographical and data collection (or topical) questions to be covered during the interviews; and I discussed the ethical considerations that I would uphold during this process. All of this information was explained to the potential participants verbally and in writing (see Addendum A). I also informed them that the interview would be digitally recorded, explained the reason for this, and assured them that their permission would be sought before doing so. I also made it clear how the information shared by them would be used or documented in subsequent publications. Once the potential participants agreed to participate by signing the informed consent forms to confirm this and before conducting the research interview with each of them, time was set aside at the outset of the interview to, once again, comprehensively brief them about the following: The –

- goal of the research;
- value of their contribution in the investigation;
- method of data collection, with reference to the interviews (which would be semi-structured in nature and facilitated by open-ended questions contained in an interview guide);
- digital recording of the interview, the reason for doing it, and that they have to consent to this, as well as the fact that only the study supervisor, the independent coder, and I would have access to these recordings;

⁵ A pseudonym.

- ethical principles that would be adhered to; and
- the manner in which their contributions would be reflected in the dissertation and other publications that may emerge from it.

In the table below, an overview is provided of how and when I prepared the recruited participants for data collection.

Table 2.1: Overview of how the recruited participants were prepared for data collection

Participant Pseudonym	Prepared the recruited participant for data collection during a face-to-face contact prior to the research interview	Prepared the recruited participant for data collection during a telephone call before conducting the research interview
Amahle	X	
Unathi		X
Dawn	X	
Flo	X	
Jules	X	
Lwazi	X	
Marinus	X	
Clara		X
Thulani		X
Khomotso		X
Rebone		X
Velile		X
Nathi	X	
Batseba	X	

2.7.1 Methods of data collection

The semi-structured interview is one of the commonly used methods of qualitative data collection (DeJonckheere & Vaughn 2019:1; Jamshed 2014:87) and the method I utilised, as originally planned and proposed in Chapter One (see 1.5.3). Interviews hold the promise of collecting rich, valuable, and useful information that answers the research questions (Yin 2011:130). In addition, Sutton and Austin (2015:227) explain that apart from “data collection” pointing to “how” first-hand data is going to be collected from the participants, it also points to the formulation of the data collection questions to be included in interview guide; how the participants are prepared for the data collection (alluded to in the previous section); and how the data collected should be recorded (Creswell 2016:105; Williams

2015:118). In qualitative research, the data collection methods employed to obtain information covering the depth and breadth of the topic are an important part of the strategy for ensuring the study's credibility (Alshenqeeti 2014:39).

In Table 2.2 on the following page, the key characteristics of semi-structured interviews are summarised as adopted from DeJonckheere and Vaughn (2019:3).

Table 2.2: Key characteristics of semi structured-interviews

The semi-structured interview's format is flexible.
As method of data collection, the semi-structured interview can be repeated with the participant to get more detail on topics explored previously.
The semi-structured interview can be scheduled in advance.
Semi-structured interviews allow for gathering information from key informants about a topic being investigated.
Semi-structured interviews allow for gaining insight into participants' perspectives.
Often the sole method of data collection, semi-structured interviews make allowance for the in-depth exploration of participants' thoughts and emotions.

Adapted from: DeJonckheere and Vaughn (2019:3)

The key characteristics alluded to in Table 2.2 are what attracted me to the semi-structured interview as a method of data collection in this study and I will now discuss my reasons for choosing this method. Following a phenomenological design, this interview method allowed me to tap into the lived experiences of participants (Usher & Jackson 2014:188). It offered me some flexibility in that I was allowed to ask for clarification on answers provided by participants and I was free to probe further regarding certain aspects. Participants were allowed to speak freely and without being limited. In addition, semi-structured interviews invited me into the life-world of the participants, who I regarded as the "experts", having first-hand knowledge and experience (Guest et al 2013:153), in order to get a glimpse of the social world as seen from the participants' perspectives (Boeije 2010:61). This method of data collection was well-suited to exploring the aspect of social workers' personal safety challenges experienced while executing their social work duties, which could be regarded as being of a personal, sensitive, and emotionally challenging nature (DeJonckheere & Vaughn 2019:3). While I employed observation as an interviewing skill to note the non-verbal behaviour of the participants, the semi-structured interview was the sole method of data collection employed in this study.

As for the **practicalities around the data collection**, the *duration of the interviews* ranged between 30 and 45 minutes on average. I followed the advice of King and Horrocks (2010:42-43), as well as DeJonckheere and Vaughn (2019:6), and **let the participants decide where they would like to be interviewed**, ensuring that the interview environment was physically and psychologically comfortable, private, free of interruptions, and quiet. In the table below, an exposition is provided on where (setting) the respective participants were interviewed, as decided by them.

Table 2.3: Settings where the participants were interviewed

Participant's pseudonym	Place of interview
Amahle	In the social worker's office at her place of employ at the TLF (Tshwane CBD).
Nathi	In a room used for interviewing clients at the DSD's Tshwane Regional Office (Manaka House, Tshwane CBD).
Batseba	The social worker's office at her place of employ at the TLF (Tshwane CBD).
Dawn	At the CWL (Sunnyside) in the social worker's office.
Flo	At the DSD's Temba Service Point in Hammanskraal, in the social worker's office.
Unathi	In the interviewing room of the DSD's Tshwane Regional Office at Manaka House (Tshwane CBD).
Jules	In the interviewing room of the DSD's Tshwane Regional Office at Manaka House (Tshwane CBD).
Lwazi	In the boardroom of the DSD's Mamelodi Service Point (Mamelodi).
Marinus	In the interviewing room at the DSD's Tshwane Regional Office in Manaka House (Tshwane CBD).
Clara	In the interviewing room at the DSD's Tshwane Regional Office in Manaka House (Tshwane CBD).
Thulani	In the boardroom of the DSD's Mamelodi Service Point (Mamelodi).
Khomotso	In the social worker's office at the DSD's Soshanguve Service Point (Soshanguve).
Rebone	In the social worker's office at the NPO's office in Atteridgeville.
Velile	In the interviewing room at the DSD's Tshwane Regional Office in Manaka House (Tshwane CBD).

As per the original plan, I compiled an *interview guide* containing open-ended data collection questions and prompts to focus the interview and explore the topic, and I stuck to these (see Chapter One: 1.5.3 for the biographical and the data collection questions used during the interviews with the participants). The data collection questions were used to collect the data required to answer the research questions formulated at the outset of the study (Punch 2016:51). In essence, the questions and the prompts in the interview guide

provided structure (King & Horrocks 2010:35), but in a flexible manner, recognising the participants as the “experts” on the given topic (Guest et al 2013:153), allowing to take the lead in the interaction and steer the direction of the conversation. In addition, the interview guide ensured that I did not present myself as an “incompetent interlocutor” and served as a guide to keep the interview on track (Flick 2015:142).

The *interviews planned for the collection of data* happened on days and times set by the participants and at venues chosen by them. At the interviews I conducted with the participants for the actual collection of the data, and before I started asking the questions in the interview guide to obtain biographical information and explore the topic, I endeavoured to make them feel at ease by enquiring about their well-being, as recommended by various scholars (Moser & Korstjens 2018:14; Guest et al 2013:147). I then proceeded to obtain biographical information from them, using the questions formulated for this purpose. On completion, I shifted the focus to the topic under investigation and asked the questions that were formulated to explore this topic. I reminded myself not to turn this into a question-answer session but, as advised by Guest et al (2013:147), adopted a mode where I posed a question, listened to what the participant said, and then followed up with a probe or a prompt to further explore what was shared by the participant. The questions were mainly open-ended. After the participants responded to an initial topical question posed to them, I used prompts and probes, encouraging them to elaborate more on certain aspects of their answers to get as much detail as possible (Moser & Korstjens 2018:14; Thomas 2017:207). Where a participant would refer to an incident where they felt their personal safety was compromised, I used prompts, for example: “Can you tell me more about this incident?” I also used probes, such as: “You mentioned that the government must bring back the danger pay for social workers; can you tell me more about this?” Apart from the prompts and probes I employed, I also employed active listening; I listened to the verbal communication and observed the non-verbal communication of the participants (DeJonckheere & Vaughn 2019:6). I used follow-up questions, as well as the skill of clarification and clarification probes, asking participants to clarify the sequence in which an incident transpired. In addition, the skill of summarising was used where I tied together what the participants had said and mirrored it back to them, using their own words as much as possible (Reid & Mash 2014:4; King & Horrocks 2010:53). To give an example, where a participant spoke about various incidents where she felt that her personal safety was compromised, I

summarised the incidents and then used a follow-up question to enquire if there were any additional incidents that she would like to share.

As it is recommended by various scholars (DeJonckheere & Vaughn 2019:4; Guest et al 2013:157; King & Horrocks 2010:44-46) to record the interview so that the researcher can focus his/her undivided attention on the participant and not become distracted with extensive note taking, I digitally recorded the interviews with the consent of all the participants. Note taking was limited to taking down information about the setting and non-verbal behaviour from the participants (King & Horrocks 2010:47).

2.7.2 Pilot testing the data collection method and the questions in the interview guide

As per the original research plan, and before embarking on the main process of data collection, I undertook three semi-structured pilot interviews. I used the criteria qualifying a person for inclusion in the study to recruit the three participants. The purpose of the pilot study as a small-scale “pre-test for a particular research instrument” (Janghorban et al 2014:1), such as the questions in the interview guide and the method of data collection, was to determine the fittingness of both the interviewing questions and the method employed to obtain the answers to these questions (De Vos et al 2011:237), given the objectives of the research study. In addition, I regarded the pilot interviews conducted as a dry-run to assess my skills in conducting a qualitative research interview (Doody & Doody 2015:1074).

Two female social workers (26 and 32 years of age) and one male social worker (38 years of age) partook in the pilot study. As they met the criteria of inclusion, I sought their permission for the interviews to be digitally recorded in preparation for the pilot interviews. I also informed them that they would not be included as part of the sample for the main study and that the information obtained from them would be used for piloting purposes, thus it would not be included in the findings of this study. On completion of the interviews, they were invited to reflect on the experience and to specifically give feedback on the questions posed. I wanted to find out from them whether the questions were clearly formulated and easy to understand. The recordings of the pilot interviews were transcribed and forwarded to the study supervisor, so that he could reflect on the data obtained and

also look at my style of interviewing and the skills I used, or failed to use. The feedback from the participants was that the questions should remain as they were formulated. Accordingly, no additions were made as the questions proved to be fitting given the topic, easy to understand, and useful in eliciting the required information. The study supervisor's feedback on my style of interviewing was that I needed to probe for more alternatives and be careful not to turn the interview into a question-answer session. The supervisor therefore recommended, after the first pilot interview, that I do two more pilot interviews (thus, three pilot interviews). Following the successful completion of the pilot study and the approval of the study supervisor, the main study began.

In the next section, I will discuss the method of data analysis utilised in this study.

2.8 METHOD OF DATA ANALYSIS

The concept of “data analysis”, introduced in the research plan (see Chapter One: 1.5.5), can be viewed, broadly speaking, as a process in which meaning is derived from the collected data through definition, identification, interpretation, and description in an effort to paint a clearer picture of the phenomenon under study (Wu et al 2016:500). For Noble and Smith (2014:2), data analysis refers to the process of taking apart and reconstructing the data gathered from the participants “in a meaningful or comprehensible fashion, in a way that is transparent, rigorous and thorough, while remaining ‘true’ to participants’ accounts.” Taking into account what qualitative data analysis entails, I utilised the steps suggested by Tesch (in Creswell 2014:198) to analyse the data obtained, as per the original plan. Prior to employing these steps, to be presented next, I did verbatim transcriptions of the audio recordings of the interviews that were made with the permission of the participants. (The reader is advised to see **Addendum K** for an excerpt example of a transcribed interview).

I executed the steps of Tesch (in Creswell 2014:198) in the following manner in view of analysing the data collected:

- In attempting to formulate a complete picture of the data collected, I started out by reading all the transcripts carefully, while making notes about the thoughts that I developed as I was reading and possible themes that emerged from the data.

- I selected one of the transcribed interviews (the transcript of the interview I conducted with **Amahle**, as I viewed this to be a comprehensive account of the topic that was explored) and read it attentively to get to the essence of what the participant said.
- Subsequently, I repeated this process with the other 13 interview transcripts and, while engaging with each transcript, I started to compile a list of possible topics that could be turned into themes and/or sub-themes related to a specific theme. Examples of the initial topics were “incidences where personal safety was compromised” and “coping strategies employed”.
- I then provided each of the identified topics with a fitting abbreviation and returned to the data set. When I read information speaking to a specific topic, I wrote the matching abbreviation for the topic next the segment of data whilst remaining open-minded about new topics that could emerge. For example, the topic “coping strategies” was abbreviated as “CS”.
- I then found descriptive wording for the topics and turned them into themes or sub-themes. I endeavoured to keep the wording of themes clear and self-explanatory. The topic on “coping strategies”, for example, was expanded to read: “Coping strategies employed by social workers to deal with the incidents where their personal safety was compromised.”
- I then proceeded to make a final decision on the wording of the themes and their respective abbreviations, and I arranged the themes in alphabetical order to prevent any overlaps.
- Using the “cut-and-paste” function in MS Word, I cut the data belonging to a theme and pasted it into a file with the relevant theme name.
- Where deemed necessary, I revisited some of the transcripts to check that I had included all the data belonging to a specific theme under that theme. I then went on to start compiling the chapter on the presentation of the research findings, namely Chapter Three of this report.

2.8.1 Data verification and ensuring the trustworthiness of the study

By way of recapping the meaning of the concept “data verification” (introduced in Chapter One: 1.5.6), Morse, Barrett, Mayan, Olson and Spiers (2002:17) describe it along the following lines:

Verification is the process of checking, confirming, making sure, and being certain. In qualitative research, verification refers to the mechanisms used during the process of research to incrementally contribute to the rigor of a study. These mechanisms are woven into every step of the inquiry to construct a solid product.

The aim of data verification is to establish the rigorousness of a study, assessing whether the researcher was careful, exact, and thorough in the planning and executing of the study, and in the reporting of the research findings. Rigour brings into play the aspect of trustworthiness which, according to Cypress (2017:254-255), is “a goal of the study and, at the same time, something to be judged during the study and after the research is conducted”. It is therefore the responsibility of the researcher to showcase that the research study was conducted in a trustworthy, reliable, and rigorous manner (Hays, Wood, Dahl & Kirk-Jenkins 2016:173). Cypress (2017:254-255) further explains that trustworthiness points to the “quality, authenticity, and truthfulness of findings of qualitative research”, whilst (Yin, in Cypress 2017:254) highlights that it “relates to the degree of trust, or confidence, readers have in results”. In order to realise this, Lincoln and Guba (Cypress 2017:254; Anney 2014:276; King & Horrocks 2010:160-161; Lietz & Zayas 2010:191) have suggested the criteria of credibility, transferability, auditability, and confirmability to ensure that the research process was carried out in a truthful manner and that the findings are trustworthy.

The mentioned criteria were introduced in the research plan, as well as the strategies I proposed in respect of each criterion to ensure the trustworthiness of the study.

In Table 2.4, the criteria for ensuring the study’s trustworthiness and the strategies I have applied in this regard are summarised.

Table 2.4: Criteria for ensuring the study's trustworthiness and the strategies employed

Criteria for ensuring rigour and trustworthiness of the research findings	Strategies employed to realise each of the mentioned criteria
<p>Credibility is concerned with establishing whether the research findings reflect the actual views, perceptions, and experiences of the research participants (Moser & Korstjens 2018:121; Du Plooy-Cilliers, Davis & Bezuidenhout 2014:258).</p>	<p>To enhance the credibility of the study, I employed the following:</p> <ul style="list-style-type: none"> • Peer debriefing – I had regular supervision sessions with my supervisor, where I discussed matters related to participant recruitment and the chosen method of data collection and analysis. • Triangulation of data sources – I interviewed different participants and from different settings, i.e. from the DSD and from the selected NPOs. • Member checking – This was done by furnishing a number of the research participants with hard copies of the transcripts of the interviews I held with them and asking them to verify the accuracy thereof. I also ascertained whether their views were correctly captured and whether they had any additional information they wished to add (Mafenya 2016:127).
<p>Transferability assesses the extent to which the study's findings can be transferred to other contexts and other participants (Moser & Korstjens 2018:121; Du Plooy-Cilliers et al 2014:259; Anney 2014:277).</p>	<p>To enable the possibility of a transferability audit, I devoted a chapter of the dissertation to providing a detailed description of how the qualitative research approach and methods were applied. In addition, I presented the research findings in a comprehensive and detailed fashion, quoting from the transcribed interviews conducted with the participants, to provide the evidence required to determine the transferability of the study's findings.</p>
<p>Dependability speaks to the aspect of the consistency of the findings over time (Anney 2014:278). For Shenton (2004:71), a study meets the criterion of dependability if the same results are obtained when the study is repeated, in the same context, and with the same methods and participants.</p>	<p>In order to ensure dependability, I employed the following strategies:</p> <ul style="list-style-type: none"> • I provided a paper trail by way of presenting a thick description of the research methodology, the research context, and research findings, allowing "outsiders" to validate the process and the research findings (Anney 2014:278). • Step-wise replication – This strategy was employed in that an independent coder and I analysed the same data separately and compared the results (Anney 2014:278).

<p>Confirmability, simply put, relates to the extent to which research data and findings can be confirmed by others as being free from the researcher's own biases and personal preferences (Mafenya 2016:127; Du Plooy-Cilliers et al 2014:259; Tobin & Begley, in Anney 2014:279).</p>	<p>In an attempt to ensure that the findings reported are those of the participants and did not reflect my own views, I employed the following strategies:</p> <ul style="list-style-type: none"> • I provided a thick description of the research methodology, research context, and research findings as alluded to above. Direct quotations from the transcribed interviews were presented as storylines, to add the participants' voices to the study (Elo, Kääriäinen, Kanste, Pölkki, Utriainen & Kyngäs 2014:5; Barusch, Gringeri & George 2011:16). • I used, as mentioned, triangulation of data sources. • I kept a reflective journal in which I jotted down my personal thoughts, feelings, and emotions while writing this dissertation. This was done so as to ensure that I acknowledged the preconceived notions I held about the topic under study and ensured that the manner in which these notions were likely to impact the research study was highlighted (Thomas & Magilvy 2011:154, Lietz & Zayas 2010:193). I surmise that reflexivity is an examination of how subjectivity can impact the research process (Palaganas, Sanchez, Molintas & Caricativo 2017:427). This is because the impact of the researcher's own personal biases on a research study remains a topical issue in social research (Ortlipp 2008:695). Thus, I employed the reflective journal as a way of ensuring the confirmability of the research study.
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In the next section, I will discuss the ethical considerations I applied in the study.

2.9 ETHICAL CONSIDERATIONS APPLIED IN THE RESEARCH STUDY

In this section, the ethical principles which I proposed to use will be discussed by indicating how I have applied them in this study. To recap: ethical research practice is premised on morality and respect for research participants, and serves as a guide to human behaviour (Weerasinghe 2018:40). In the context of research, ethics refers to a portrayal of the researcher's honesty and trustworthiness, and demonstrates how beneficial and worthy the specific research study is (Hammond & Wellington 2013:59, 61). As such, the researcher's ethical conduct should permeate all stages of the research process, from the formulation/planning stage of the research study and the research design stage, to the actual data collection phase and, finally, the reporting stage of the research study (Wellington 2015:113). In this research study, I undertook to treat the participants with respect by not forcing them to participate, but rather requesting that they consent to participation out of their own free will, based on the information I provided. I vouched to keep their identities a secret and I undertook to manage the data in a confidential manner.

To ensure that the research project was legitimate, I sought permission and ethical clearance from the Research and Ethics Committee of the Department of Social Work at UNISA by presenting my research plan to this committee for their approval. Following the approval of the plan and with ethical clearance being granted, I embarked on the fieldwork where I observed the following ethical principles (as per UNISA's code of ethics): informed consent, confidentiality, anonymity, management of information, and debriefing (Du Plooy-Cilliers et al 2014:264). Below I will give a brief description of how each of these ethical considerations was applied to this research study.

2.9.1 Informed consent

In recapping the meaning of the concept "informed consent", various scholars (Arifin 2018:30; Babbie 2013:507; King & Horrocks 2010:99) reiterate that prior to including prospective participants as part of the sample of a study, they must agree to voluntarily participate in the study. The consent to participate must be based on clear and detailed

information given to them by the researcher. The researcher must provide comprehensive detail on what the research is all about, what their participation would entail, and what the risks and benefits inherent to participating in the research project would be. I ensured that every research participant involved in the research study was adequately informed about the study. This was done verbally during a telephone conversation and/or a face-to-face meeting, as well as in a letter I gave each participant (see Addendum A), explaining all the aspects related to the research, as well as their participation in this research. During these contact sessions with the participants, I allowed time for questions on matters that might have been unclear. Once they had sufficient information about the research, their participation, the risks and benefits associated with participating, and the ethical considerations to be observed, and were satisfied, I requested that they sign the informed consent form in order to testify that they chose to participate in this research voluntarily. It is worth mentioning that I sought each participant's permission to digitally record the data collection interview conducted with them.

2.9.2 Confidentiality, anonymity, and management of information

In recapping the meaning of confidentiality in research, Thomas (2017:315) writes that confidentiality is:

...a state of affairs in which no one except the researcher knows the identities of the participants in the study. It also refers to the treatment of information that a participant has disclosed to the researcher with the expectation that it will not be revealed in other ways that violate the informed consent agreement.

Failing to protect the identities of the participants is regarded as unethical and disrespectful (Wellington 2015:113). In order to protect the participants' identities, I asked them to come up with a pseudonym of their choice. Anonymity was further promoted in that I transcribed each of the interviews myself, and made a deliberate effort to remove any information that may be linked to a particular participant.

While anonymity could be guaranteed, in terms of protecting participants' identities, various scholars (Hennink et al 2011:71-72; King & Horrocks 2010:117-118) assert that complete confidentiality cannot be assured for the reason that in qualitative research the

information shared by the participants is presented as storylines to enrich the research findings and its credibility. Where the aspect of confidentiality comes into play is with the management of the data. This I observed and I saw to it that the data collection interviews were conducted in private settings so as to ensure that no one would listen in (Arifin 2018:31). I, as mentioned, transcribed the interviews myself and the transcripts were only identified by pseudonyms. The list with the participants' real names and pseudonyms were stored in a password-protected file on my computer. The transcripts and the digital recordings of the interviews were stored separately under lock and key, and only I had access to them. Access to the anonymised transcript was only granted to the study supervisor and the independent coder, who are all consummate professionals that managed the information in a confidential fashion.

2.9.3 Debriefing

As mentioned earlier in this chapter, the aspect of social workers' personal safety challenges experienced while executing their social work duties can be regarded as being of a personal, sensitive, and emotionally challenging nature. In view of this, I made provision at the end of each data collection interview to reflect on the interview and allowed the participants to debrief. This is an ethical obligation, as the information shared may cause research participants to be emotionally distressed or harmed on a psychological level (Arifin 2018:32). In addition, I had arranged with a social work colleague to provide counselling for each of the research participants, should the need for this be expressed or become evident (see **Addendum F and G**). Fortunately, none of the 14 research participants required debriefing.

In the following section, I will provide the summary of this chapter.

2.10 SUMMARY OF THE CHAPTER

This chapter provided an overview of how the qualitative approach was applied in this study. I began by providing the justification for including this chapter and its importance in the research report. Following this, I provided evidence of how the characteristics of the

qualitative research approach were applied and reflected on the suitability of this approach in relation to the topic that was indicated.

An exposition was provided on how the collective case study and the phenomenological research designs, complemented by an explorative, descriptive, and contextual strategy of inquiry, were applied in the research study.

I provided an account of the research sites where participants were recruited from and the sampling techniques employed, and also discussed how the recruited participants were prepared for data collection, as well as how the data was collected. I indicated how I conducted the pilot test and I also provided a synopsis of how Tesch's steps (in Creswell 2014:198) were utilised in terms of analysing the data. The criteria and strategies for ensuring the trustworthiness of the study and data verification were indicated. I also provided a description of how I went about obtaining participants' informed consent, ensuring their anonymity, and managing the data in a confidential manner.

In the next chapter of this dissertation, the research findings will be thematically presented, underscored with fitting storylines from the transcribed interviews, and a literature control will be conducted to confirm and/or contrast the research findings.

CHAPTER THREE:

A DISCUSSION OF THE RESEARCH FINDINGS

3.1 INTRODUCTION

Research findings, whether part of a journal article, a podium presentation, a dissertation, or a thesis, have the following knowledge-related functions: raising awareness about important issues; informing academics, students, disciplines, and communities alike about phenomena; influencing workplace conditions; and informing practitioners how work is to be done (Bekker & Clark 2018:1). Bekker and Clark (2018:2) emphasise that research findings add to the body of knowledge on a topic and contribute to the larger academic conversation on it. For this reason, Charmaz (2014:289) encourages qualitative researchers to write up and present their study's findings in such a way that readers would notice and appreciate the underlying richness of the data. In addition, the research findings should disclose the rigour of the research process followed, specifically indicating how the data was analysed.

As part of my contribution to the larger social work academic conversation on the topic of the personal safety of social workers, I will present the research findings speaking to this in this chapter. The findings emerged from the processes of data analysis of the transcripts of the interviews I conducted with the 14 participants who made up the sample for this study.

On the aspect of data analysis, an independent coder and I followed the step-wise format suggested by Tesch (in Creswell 2014:198), which is an "iterative" thematic data analysis process (Vaismoradi, Jones, Turunen & Snelgrove 2016:108). The themes independently arrived at by the independent coder and I were compared and further crystallised by the study supervisor during a consensus discussion facilitated by him.

The research findings to be presented, after a biographical profile of the participants is offered, showcase the personal safety challenges experienced and coping strategies employed by the participants during social work service delivery, as well as their suggestions for promoting social workers' personal safety.

In the next section I will discuss the demographic profiles of the participants that took part in this study.

3.2 THE DEMOGRAPHIC PROFILES OF THE RESEARCH PARTICIPANTS

As mentioned in the introduction to this chapter, 14 participants made up the sample for this study. The participants, all meeting the stated criteria for inclusion for the study (see Chapter One: 1.5.1), were recruited from three NPOs, namely, the CWL, the TLF, and an unnamed NPO, as well as from the DSD's Mamelodi, Manaka House, Temba, and Soshanguve service points in Tshwane, Gauteng Province, South Africa.

The sites from which the participants were recruited, deliver "social welfare services". Such services, according to Streak and Poggenpoel (2005:4), aim "to support, empower and fulfil the rights of vulnerable South Africans as well as help prevent vulnerability".

The DSD and the NPOs' welfare service delivery is informed by the Framework for Social Welfare Services (DSD 2013), which aims to facilitate/guide the implementation of a comprehensive, integrated, rights-based, well-resourced, and quality developmental social welfare service (DSD 2013:9). In the table below, and adapted from the Framework for Social Welfare Services (DSD 2013:36), an overview is provided of the nature of social welfare services, the level of interventions, the beneficiaries of social welfare services, and the strategic focus areas of service delivery, according to which the chosen research sites have to position and in actual fact deliver their social welfare services.

Table 3.1: Integrated framework for social welfare services

Nature of the social welfare services to be offered	Levels of intervention	Beneficiaries of social welfare service	Strategic focus areas of service delivery
<ul style="list-style-type: none"> • Promotion and prevention services and interventions • Social assistance and relief services • Protection and statutory services • Social support services • Therapeutic, restorative, and rehabilitative services • Continuing care services • Reintegration and aftercare services • Economic development services 	<ul style="list-style-type: none"> • Prevention • Early intervention • Statutory intervention • Reconstruction and aftercare 	<p>Although services should be equal for all people – focusing on the family as the central unit in communities – specific target groups are more vulnerable than others in South African society. These groups are:</p> <ul style="list-style-type: none"> • Children • Youth • Women • The elderly • People with disabilities • Internally displaced people 	<ul style="list-style-type: none"> • Poverty alleviation • Social integration and cohesion • Family preservation • Care and protection of vulnerable groups • Prevention treatment, care, and support for substance abuse • Support for mental and social health/wellness • Prevention of crime • Victim empowerment • Prevention of HIV/AIDS and care of and support for HIV/AIDS sufferers

Adapted from: The Framework for Social Welfare Services (DSD 2013:36)

Against the introductory remarks, an overview of the demographic particulars of the participants is provided in Table 3.2.

Table 3.2: The biographical particulars of the participants

Pseudonym	Age	Organisation the participant is employed at	Gender	Race⁶	Years of social work experience/practice	Highest qualification in Social Work	Social work services rendered
Amahle	26	TLF	F	A	3	Bachelor's degree in Social Work (BSW)	Child and youth care services
Batseba	30	TLF	F	A	3	BSW degree	Social work with refugees
Clara	31	DSD	F	A	6	BSW degree	Generic social work services
Dawn	55	CWL	F	W	10	BSW degree	Generic social work services
Flo	34	DSD	F	A	8	BSW degree	Generic social work services
Jules	30	DSD	F	A	1	BSW degree	Generic social work services
Khomotso	51	DSD	F	A	8	BSW degree	Generic social work services
Lwazi	35	DSD	M	A	5	BSW degree	Generic social work services
Marinus	56	DSD	M	W	36	BSW degree	Generic social work services
Nathi	46	DSD	F	A	10	BSW degree	Generic social work services
Rebone	24	An unnamed NPO	F	A	1	BSW degree	Generic social work services
Thulani	29	DSD	M	A	7	BSW degree	Generic social work services
Unathi	42	DSD	F	A	11	BSW degree	Generic social work services
Velile	32	DSD	F	A	10	BSW degree	Generic social work services

⁶ 'A' denotes that the participant is a Black African, and 'W' denotes that the participant is White.

From the table above it becomes clear that the participants' years of experience ranged from one to 11 years. Three of the participants are male and 11 are female, with their ages ranging from 24 to 56 years of age. In terms of the racial distribution, 12 participants are Black Africans, whilst the remaining two participants are White. The dominance of females in the social work profession is a trend observed both in South Africa and internationally. Khunou, Pillay and Nethononda (2012:120) hold the view that "the caring professions", such as social work, teaching, and nursing, are regarded as female-orientated professions. Craik, the President of the Australian Association of Social Workers (AASW), confirms this to be the case for social work internationally (AASW 2019), while Alpaslan (2019:349) in his South African study entitled *'Promoting social work graduates' employment through the social work curriculum: employers' perspectives on the employability of UNISA's newly qualified social workers'* noted a similar trend (Alpaslan & Lombard 2011:434).

The following section will provide a presentation of the themes and their accompanying sub-themes, as well as a literature control for this study.

3.3 PRESENTATION OF THEMES AND LITERATURE CONTROL

Following the process of data analysis and a subsequent consensus discussion between the study supervisor, the independent coder, and myself, seven themes and 23 sub-themes emerged from the research study. As pointed out in the introduction to this chapter, the development of themes during the activity of data analysis requires the researcher to repeatedly move back and forth between the data and the coding process, turning this into a cyclical process and an iterative or repetitive activity (Vaismoradi et al 2016:102). As explained by Vaismoradi and Snelgrove (2019:2), themes can be defined as the "subjective meanings and cultural-contextual messages of data". The themes emerging from the data must be supported by the data; a viewpoint underscored by Wu et al (2016:501). They advise that quotations from the interviews must be selected with care to support or validate the themes they are attached to, and to illustrate or support the researcher's interpretation. This idea of using the direct words of the participants as quotations in qualitative research to back the identified themes and sub-themes is a long-standing tradition (Yilmaz 2013:315; Hennink et al 2011:279). Hennink et al (2011:279) point out that a quotation

“provides readers with an immediate link to the social world of the participants. A quotation can also convey more than words, it can expose emotions, expressions and language that can reflect more vividly the perspectives of the study population.” In addition, quoting the participants in support of a theme or a sub-theme, to quote Denzin (in Lietz & Zayas 2010:194), provides “deep, dense and detailed accounts”, which in turn promote the study’s credibility and may “ring true” for the readers who were not part of the study, but who are, as in this case of the study, also social workers confronted with issues compromising their personal safety during social work service delivery.

Against these introductory remarks, the themes and sub-themes that emerged from the data are presented in Table 3.3.

Table 3.3: The themes and sub-themes that emerged from the process of data analysis and the consensus discussion

THEME	SUB-THEMES
Theme 1: The participants perform generic social work	
Theme 2: Participants’ understanding of the concept “personal safety of social workers”	
Theme 3: Social workers’ experiences of incidents during service delivery where their personal safety was compromised	3.1 Participants experienced physical attacks and aggressive behaviour from service users. 3.2 Participants experienced verbal threats issued to them by service users. 3.3 Participants experienced being chased away by service users. 3.4 A participant experienced being stalked by a service user. 3.5 Participants experienced incidents where they had to render social work services in unsafe areas and under unsafe working conditions.
Theme 4: Coping strategies employed by the participants to deal with incidents when their personal safety was compromised	4.1 Spoke to a supervisor, colleagues, friends, a therapist, or an employee assistance practitioner as a coping strategy 4.2 Practising their faith as a coping strategy 4.3 Calmed down, sought assistance, or left the scene as coping strategies 4.4 Social workers arrange for company when doing home visits as a coping strategy
Theme 5: Participants’ accounts of the current	5.1 No safety measures in place to ensure social workers’ personal safety

measures put in place to ensure social workers' personal safety	5.2 Security measures to ensure the social workers' personal safety are in place, but participants had varied views on their effectiveness
Theme 6: Participants' perspectives on who should be responsible for ensuring the personal safety of social workers	6.1 Participants are of the view that the employer is responsible for the personal safety of social workers 6.2 Participants are of the view that the social workers are personally responsible for their own safety
Theme 7: Social workers' suggestions about what can be done to ensure the personal safety of social workers	7.1 Pay social workers a danger allowance 7.2 Raise management's awareness about the personal safety of social workers 7.3 Inform colleagues about your whereabouts 7.4 Do not go out alone on home visits; develop a buddy-system 7.5 Train social workers in self-defence and how to ensure their personal safety 7.6 Employers must bolster their initiatives to ensure social workers' personal safety 7.7 Provide social workers with panic buttons, or install these in offices, along with security cameras 7.8 More security guards and thorough security checks of service users to enhance the social workers' personal safety 7.9 Facilitate access to counselling and debriefing 7.10 Miscellaneous suggestions to ensure the social workers' personal safety

Drawing from the table above, I will now proceed to discuss each of the themes and the attendant sub-themes in greater detail. Quotations from the research participants will be utilised to support or illustrate the themes and sub-themes being presented, and references to literature will be made as a means of control to confirm and contrast the findings presented (Schurink, Fouché & De Vos 2011:429; Sandelowski 1994:479).

3.3.1 Theme 1: The participants perform generic social work

This theme emanated from the responses of the participants to the following question: *“What does your job as a social worker entail?”*

This theme speaks to the aspect of the “situation” in Schlossberg’s (2011:160) Transition Process Model, adopted as theoretical framework for this study. In writing about the function of the theoretical framework in qualitative research, Maxwell (2013:49) equates

the framework to a closet, and the constructs of the theory as the “coat hooks” in the closet, serving as an organising structure to hang the data on. Shifting the focus back to the Transition Process Model, introduced in Chapter One, this model explains how individuals cope with transitions. A transition refers to “any event or non-event that results in change in relationships, routines, assumptions, and roles” (Schlossberg 2011:160; Goodman, Schlossberg & Anderson 2006:33). The transition can be anticipated, such as a promotion at work, or can be unanticipated, such as when a social worker is physically attacked by a service user. How a person responds, to both anticipated and unanticipated events, will depend on the *situation*, the *self* of the person, their convoy of *support*, and the coping *strategies* they employ (Schlossberg 2011:160).

This theme showcasing that the social work-participants perform generic social work speaks to the “situation” or the work-related context of the participants, and is also the context where their personal safety is compromised.

Before presenting the participants’ accounts of what their jobs entail, a few introductory remarks need to be made about what social work is and how it can be practised. The IFSW (c2016:1) states that:

Social work is a practice-based profession and an academic discipline that promotes social change and development, social cohesion, and the empowerment and liberation of people. Principles of social justice, human rights, collective responsibility and respect for diversities are central to social work. Underpinned by theories of social work, social sciences, humanities and indigenous knowledge, social work engages people and structures to address life challenges and enhance wellbeing.

Social workers use the primary social work methods, namely, case work, group work, and community work, as the vehicles for restoring and maintaining service users’ social functioning and well-being (Segal, Gerdes & Steiner 2013:149; Staniforth, Fouché & O’Brien 2011:193). As deduced from the participants’ accounts, which I will present later in this section, it seems that they are all engaged in what can be referred to as “generic social work practise”. Kirst-Ashman (2017:115) defines the generalist (or generic) approach to social work practice as follows: “The application of an eclectic knowledge base, personal values, and a wide range of skills to target individual, family, group, organisational or community systems for change within the context of five primary

processes” (Cf. Zastrow 2014:43; Segal et al 2013:149). These processes are client empowerment; working under supervision within an organisational structure; assuming a variety of roles as a social worker to address the myriad of problems faced by the individuals, groups, and communities they serve; adhering to the principles of evidence-based practice; and applying critical thinking skills to the process (Kirst-Ashman 2017:115). Generic social work practitioners, according to various scholars (Stranz, Wiklund & Karlsson 2016:174; Choate & Engstrom 2014:371; Stranz & Wiklund 2013:549), render social work services in the fields of family and child welfare; child protection; providing social assistance; work with the elderly; persons with physical and mental disabilities; and persons suffering with substance use disorders. Various scholars (Roets, Roose, Schiettecat & Vandenbroeck 2016:310; Kuosmanen & Starke 2013:123; Perlinski, Blom & Morén 2012:16) hold the view that generic social work practitioners have a more comprehensive and holistic view of their service users’ problems, which put them in an advantageous position to provide the services and interventions suited to the service users. Post-1994, South Africa has adopted a developmental approach to social welfare service delivery (DSD 2013:6; Holscher 2008:114) “to respond to the needs of the poorest of the poor, the marginalised and the most vulnerable groups in society” (DSD 2013:6), which necessitated the need for generic social work practitioners to link communities to resources, develop communities, and to empower individuals, groups, and communities (Patel 2015:129). These social workers, departing from a developmental paradigm, are expected to eradicate social inequalities, foster growth, and ensure that human growth takes place in tandem with socio-economic development (Engelbrecht 2008:167).

Against the background of these introductory remarks, the following storylines are presented in support of the theme being presented.

The **generic nature of the social work** performed was clearly articulated by **Flo**: “...we do generic work, meaning I do intake irrespective of the matter. It depends on the service users that day. I do intake, I do foster [care], and with intake cases one can’t be specific to say ‘I do intake given maybe marital disputes’ or whatever. I deal with all cases that involve a person under general... at intake level, and we do mediation, we do counselling, we do substance, we do foster [care], we do child neglected cases. We do presentations,

because in the Department what we do is that every social worker has to be in at least two programmes, so with those two programmes you have no choice but to go and do presentations...”

Unathi is also employed at intake-level and she highlighted the following: *“With me specifically I’m doing intake services... every client starts with me. It doesn’t matter whether it’s foster care, any social problem. I have to start with it [referring to the intake service] before I refer it to the field social workers.”*

Batseba is employed at an organisation that provides services to refugees and spoke about the generic services offered to this cohort of service users: *“...in the specific programme that I’m working in, we... I work under the refugee programme, we do counselling, we do advocacy in the form of workshops, sometimes we accompany the refugees or asylum seekers to Home Affairs to advocate for them and then we also do capacity building. We do as well, developmental programmes and then empowerment groups.”*

It came as no surprise that *most of the participants, both in the DSD and at the selected NPOs* were, in their *generic social work practice, predominantly rendering social work services to families and children*. This is as per the directive in the South African Department of Social Work’s Framework for Social Welfare Services (DSD 2013:36), which highlights the prominence of these services, as the family stands central as beneficiary for social welfare services with the children and youth being regarded as vulnerable groups in the family. Engstrom (2016:13) confirms social workers’ engagement in the field of child and family care when stating that social workers are the foremost professionals involved in ensuring the care and protection of children all over the globe (Engstrom 2016:13); making decisions regarding the safety of children and whether they should remain in their families or be removed to safer environments (Ferguson 2016:283).

Jules spoke along the following lines about what her job as social worker entails: *“I’m in the Statutory Unit... Child Protection wherein most of my work is based on child protection... and also care and contact, which is... mostly has to do with contact between the child and the parents and also, I do the foster care.”*

Dawn highlighted her key performance areas as a social worker at an NPO she is employed at as follows: *“...rendering foster care supervision services, doing family reunification services, I also do adoptions, but it’s related adoptions. So, in other words, it’s foster care to adoption or foster parent adoptions... I do community outreach programmes. One is with regards to the distribution of any items that we get in, like food parcels, etc., and then the second one is that I run Back to Basics Maths and Afrikaans programme for children from Grade 3 to Grade 7, because we find that because there are a lot of foreign children here, that are not exposed to Afrikaans. They are not going to watch Afrikaans programmes on TV, but the schools in the area require Afrikaans language as a second language and this poses a huge problem, and Maths is a huge problem across the board, so we do tutor sessions.”*

Clara explained her job responsibilities as follows: *“...I specifically do foster care supervision, or anything regarding foster care, but we have Form 9s which is your mediation, parenting plans things like that...”* She also stated that her job involves additional tasks: *“Going to court, writing reports, home visits, awareness campaigns – we go out into the community and do that... I know the disability programme and parenting skills to make people aware of it and to give brief background of the services.”*

Latching on to **Dawn** and **Clara’s** references to engaging in community work and community outreaches, Dhavaleshwar (2016:62) confirms that these activities form part of generic social work practice in that social workers act as facilitators in linking community members to resources and benefits from governments and international bodies, such as the United Nations. In addition to this, the DSD’s (2013:21) Framework for Social Welfare Services posits that “community work is an integral part of social development”; thus, embedding community work in generic social work practice in South Africa.

Khomotso described how she operates at intake level and her work entails mainly counselling: *“I do intake... I attend to service users, have counselling sessions with them, like marital problems, those who have marital problem... I am not doing foster care, because there are those specifically who deal with foster care, but then everything starts with the intake worker, yes... most of the time it’s counselling to service users.”*

Marinus detailed his work at the DSD as follows: *“Presently I am doing foster care supervision, placement of newly placed children in foster care, reunification services. I attend court. I do extension of court orders, section 186, 155⁷ children for 2 years... I do reunification services as well, so I don’t do any enquiries [referring to intakes] or anything like that. ...And we’ve got statistics [indicating the number service users they have serviced] we have to complete every month. We do individual supervision, we’ve got group supervision, we’ve got office meetings, that’s basically all... If there is a dispute, over visiting rights... we also have to attend disputes between the foster mother that the court has granted contact, but they said the child is acting out after the visits so we have to go back to court. I have to write a report, so I have drawn up that report, so I have to write it as soon as possible.”*

In latching on the aspect of disputes in rendering foster care services raised by Marinus, Böning and Ferreira (2013:519) admit that rendering foster care services is fraught with difficulties and necessitates intensive investigations, especially when disputes surface. Clapton, Cree and Smith (2013:811) state that social workers who mediate in disputes related to foster care placement often become the targets of service users’ anger, anxiety, and fears.

Amahle, employed at a Child and Youth Care Centre, spoke as follows about what her work entails: *“...I sole-handedly [sic]... do the therapeutic programmes, so that’s individual counselling, group sessions, family sessions... Mentor students... social auxiliary students, social work students, mentor supervise my house mothers, the child care givers here... and practically make sure the house residential is working well, is functioning.”*

Supervising student auxiliary social workers, student social workers, and house mothers at the institution where Amahle is employed is in line with the DSD and the SACSSP’s assertion that social workers can, as part of their duties, provide supervision to fellow social workers and social work students (DSD 2013:36; SACSSP 2012).

⁷ Section 186 of the South African Children’s Act 38 of 2005 (South Africa 2006) regulates the extension of foster care placements until a child turns 18 and limits social work supervision. Section 155 deals with the decision of whether a child is in need of care and protection.

In summary, as is evident from **Clara, Jules, Dawn, Khomotso, Marinus** and **Amahle's** accounts, they work in the field of child and family welfare. Social workers in this field are referred to by various names in literature. They are mainly seen as “child welfare workers” (Griffiths & Royse 2017:73) or as “designated social workers” working with families and children (Truter, Theron & Fouché 2017:712), or social workers doing “statutory social work” (Stanley 2018:104), or engaged in providing “child protection services” (Tavormina & Clossey 2017:126). The services provided by this cohort of social workers focuses on the protection of children from harm through rendering early prevention services; the investigation of allegations of child abuse; the removal of children from environments deemed unfit for their well-being; the placement of those children into alternative care, such as foster care; and family reunification services (Stanley 2018:104; Streak & Poggenpoel 2005:3). Worth noting, given the research topic, is the fact that child protection social workers are more likely to be abused by service users. Shin (2011:3338) confirms this in his South Korean study entitled *‘Client violence and its negative impacts on work attitudes of child protection workers compared to community service workers’*, highlighting a greater prevalence of client violence towards child protection workers, as compared to community services workers. He points out that these incidents of violence impact negatively on the child protection workers’ work attitude. In a similar fashion, Littlechild (2005:77) highlights the fact that child protection social workers are at great risk of client violence as they carry out their work. Littlechild’s (2005) study was undertaken at the Hertfordshire Social Services Department in the UK and was aimed at discovering the prevalence of aggression and violence from service users against child protection social workers.

This then concludes the presentation on the finding that the participants perform generic social work. The discussion will now move on to Theme 2, which investigates participants’ understanding of the concept “personal safety of social workers”.

3.3.2 Theme 2: Participants’ understanding of the concept “personal safety of social workers”

This theme emerged from the participants’ responses to the following question posed to them, “*What is your understanding of the concept ‘the personal safety of social workers’?*”

These responses can be hooked onto the construct “situation” in Schlossberg’s Transition Process Model (Schlossberg 2011:160), because it refers to the context (situation) as it relates to the personal safety of social workers. Before presenting the participants’ understanding of this concept, I need to explain this concept generally and how it applies to social work.

Addressing personal safety is critical to enhancing the well-being of social workers (Kim & Hopkins 2017:6). Personal safety in the workplace can be defined as putting employees first, and ensuring that the safety and security of employees always take precedence over the agency’s assets, programmes, and reputation (Bickley 2014:3). This concept also refers to the risks or threats of violence which need to be addressed in the form of guidelines to address potential harmful incidents (Waters & Raiden 2008:1056). Bickley (2014:6) further posits that managing and reducing risks to employees should be the collective responsibility of all employees and the decision makers of the organisation. Personal safety in the workplace is believed to be at greater risk in occupations that involve the provision of health care, such as nursing and social work. Internationally, studies reveal that social workers are employed in a variety of settings which expose them in differing degrees to physical, emotional, psychological, and verbal harm (Kim & Hopkins 2017:1; Koritsas, Coles & Boyle 2010:258; Faria & Kendra 2007:142). Thus, I came to the conclusion that the participants were faced with challenges regarding their personal safety as they performed their social work duties.

After police officers, social workers run the highest risk of experiencing work-related violence (Newhill 1995:631). In an online survey by the British Association of Social Workers (BASW) entitled “*The State of Social Work 2012: What Social Workers think about the State of their Profession in 2012*”, conducted in Britain from the 14th to the 30th of April 2012, 50 percent of the 1 100 social work respondents mentioned that they work in environments that make it impossible for them to practice their profession safely and free from harm (BASW 2012:6). Social workers working in the field face greater risks than their counterparts who are office-based, primarily because they often provide services in unsafe areas where they have little to no support if anything bad happens to them (Spencer & Munch 2003:534). The aggressive behaviour of service users towards social workers has become an alarming phenomenon in social work (Enosh & Tzafrir 2015:971-972). Robson,

Cossar and Quayle (2014:924) highlight the fact that verbal aggression and threats against social workers by service users are common and are deleterious. Alther (2012:1) posits that workplace safety is of prime concern to many social workers. The ill effects of the threats on social workers' personal safety result in social workers repositioning their value systems and changing their practice to ensure their own personal safety and boundary setting after being faced with violence (Tzafrir, Enosh & Gur 2013:65).

The concept "personal safety" in the context of this research refers to social workers' freedom from harm, either physically and psychologically, during the discharge of their duties (see Chapter One: 1.7.5). In support of this theme, the excerpts below showcase the participants' understanding of this concept.

Clara explained her understanding of the concept in the following words: *"...that we need to be safe at all times, because we don't actually know what situation we are going to find ourselves in on the other side [referring to when they go into the community, or do home visits]. We get a case and we got to go with it. We get a place to do awareness and we got to go with it. So, we need to keep ourselves safe."*

Dawn highlighted what personal safety means to her by asking the following pertinent questions: *"...Are you safe in your job? Are you safe in your working environment? Are you safe in your community that you are based in? And it goes into physical safety for me..."*

Flo provided a comprehensive explanation of the concept "personal safety of social workers": *"It entails are you safe, are you not exposed to any harm of any nature, being maybe from somebody else, being the building itself, being from service users, being from office cars..."*

Rebone stated her opinion as follows: *"Personal safety of social workers... entails me being able to feel comfortable and confident enough to work in a place where I don't have to worry about being harmed by the work itself, meaning mentally and physically by the client system that we are working with, and also the environment itself like the conduciveness of the office. Ja, that's what I understand."*

While the participants' accounts testify to their common understanding of the concept "personal safety of social workers", various scholars (Kim & Hopkins 2015:101; Robson et al 2014:924; BASW 2012:10) maintain that like all human service professionals, social workers also run the risk of having their personal safety compromised, as they often fall prey to becoming victims of psychological, physical, verbal, and emotional harm. Looking specifically at the South African context, and with Gould, Mufamadi, Hsiao & Amisi (2017:2) positing that South Africa is one of the 10 most violent countries in the world, the possibility of social workers' personal safety being compromised in the execution of their duties becomes a greater reality. Social workers often work on the frontline in communities ravaged by violence, poverty, unemployment, and other social ills; all of which place their personal safety at great risk and expose them to the possibility of experiencing psychological and physical violence at the hand of community members and service users (Lamothe, Couvrette, Lebrun, Yale- Soulière, Roy, Guay & Geoffrion 2018:308). Lamothe et al (2018:308) further state that some social workers may view communities' and service users' violence as part and parcel of social work, while others interpret it as a cry for help or attention by service users. Nonetheless, if a social workers' personal safety is under threat or has been compromised, it negatively influences their work performance and the quality of the services offered, leaving them feeling worn down, fatigued, and highly likely to become disengage from their work as a result (Padyab, Chelak, Nygren & Ghazinour 2012:124; Shin 2011:3349).

This reality will be presented in the next theme focusing on social workers' experiences of incidents during service delivery when their personal safety was compromised.

3.3.3 Theme 3: Social workers' experiences of incidents during service delivery where their personal safety was compromised

This theme, reporting the participants' experiences of incidents during service delivery where their personal safety was compromised, can be hooked on the construct of "the situation" in Schlossberg's (2011:160) Transition Process Model and was derived from the responses of the participants to the following question: "*Share with me your experiences where you felt your personal safety had been compromised during social work service delivery.*"

Chung and Chun (2015:134) are of the view that threats to social workers' safety and a lack of law enforcement in that regard contribute to stressful working environments for social workers. Various scholars (Winstanley & Hales 2015:25; Robson et al 2014:924; NASW 2013:5; Whitaker & Arrington 2008:15) found that it is not uncommon for social workers, in their day-to-day practice in the neighbourhoods, to be physically and psychologically assaulted by service users, have their vehicles vandalised, and get into car accidents whilst on duty. Field social workers who often work alone and have to contend with the likelihood of violence occurring whilst they are in the field and far away from any protection that their organisation might provide. Evidently it boils down to the reality that they are responsible for their own safety and must utilise their own resources to ensure their personal safety (Lamothe et al 2018:318).

The sentiments expressed in the literature quoted above resonate with the study participants' experiences of incidents of physical attacks, aggressive service users, psychological and emotional abuse, verbal threats, physical threats, and working in unsafe neighbourhoods. The mentioned incidents are presented next as sub-themes to this theme.

3.3.3.1 *Sub-theme 3.1: Participants experienced physical attacks and aggressive behaviour from service users*

As many social workers can attest to being physically attacked by service users in their offices, in the service users' homes, and whilst on the road during fieldwork, Padyab et al (2012:125) are of the view that the management of service organisations are slow in their uptake to prevent and react to incidents of violence by service users or patients perpetrated on helping professionals. Various authors (Raczova & Lovasova 2017:60; Harris & Leather 2012:851; Koritsas et al 2010:258; Winstanley & Hales 2008:103) make mention of the high prevalence rate of violence towards social workers, exposing them to physical, verbal, or emotional attacks meted out by service users. This is buttressed by the excerpts from the research participants.

Amahle described an incident in which she felt her personal safety was compromised by a service user who was called into the office to be informed that, because of her child's reoccurring absconding behaviour from the Child and Youth Care Centre, she (the child)

was going to be reintegrated with the service user (the mother). This decision infuriated the service user to such an extent that it led to Amahle being physically attacked. She spoke about this incident along the following lines: “...when I had called in the mom [to the office] to say ‘listen, so your child is absconding and we going to do reunification with you because she no longer fits the centre’, she lost it and said I’m not being considerate of her needs... she was unemployed, so I was supposed to take that into account, but sadly she had a house, but she felt she is not yet in a position to look after her child.” Amahle mentioned that they subsequently had “a panel discussion and the mom didn’t pitch, so we had to call her for another one, to say, ‘listen, we want to discuss the way forward’, you know the IDP [Individual Development Plan] of a client, and by the time the mom came, she was a raging volcano... she was defensive of her child whom she says is behaving well and we are just taking drastic measures and also defensive about her home circumstances to say but they haven’t improved... So, it turned into an altercation where I literally felt OMG! [Oh my God!], this woman is gonna throttle me.”

As is evident from Amahle’s account, the levels of aggressive behaviour displayed by service users, fuelled by individual aggressive personality traits and personal frustrations towards employees of human service organisations, can reach frightening levels and can potentially cause harm to the employees and to the organisation itself (Robson et al 2014:924-936; Enosh, Tzafrir & Gur 2013:1123). Social workers are likely to come into contact with individuals who are distressed and frustrated by social ills and problems that heighten tension and potentially create hostility, thus they become easy targets for service users who want explanations, answers, and resources that the social worker may not be in a position to provide. As such, Amahle was perceived as a stumbling block to the service user’s wishes and desires, which resulted in the service user becoming frustrated and aggressive, resulting in Amahle fearing that she would be physically attacked by the service user.

Marinus shared an incident where he and colleagues were almost highjacked while attempting to remove a child who was allegedly molested. He described this ordeal as follows: “I had the complaint of a molestation of a child. I actually attended the family [meaning that they were part of his caseload]; it was a multi-cultural couple. The father and mother was [sic] substance abusers, child neglect and all. There were allegations that

the grandfather was molesting the four-year-old daughter, and this child was acting out at school. I remember a specific Friday, I had just received my subsidy car... My colleagues said I already had experience [referring to the removal of children in need of care] so I must go with them... so we came into the park [referring to the Caravan Park where the service users stayed]. We called the owner, the manager [of the park]... [informing him] that we are going to remove the child... As we presented the Form 36⁸ to the parents that I am going to remove the child, they refused to give the child to me... The news spread very fast through the caravan park, because people living there are close to each other. There was about 70 mostly women and few men on that specific day at the park, and I found it difficult, the mother became anxious and emotional. At the end of the day, the manager of this park he had to give the child to me... I watched two cars I saw them moving around there, I got into my car. At last the mother gave the child to the manager and the manager handed over the child to me. I got out of the caravan park, going uphill. I saw this car in front of me, he was going slow, there was a car in the back pushing me. I had the child in the back seat with my colleagues; those ladies started panicking, they started screaming that we were being hijacked. Luckily the road widened up for me and I could go past the first car... I later ... eventually saw a gap, between two trucks, I just drove in between two because I know there is no ways they can hijack me between the two trucks..."

This excerpt brings to the fore the likelihood of physical attacks on social workers conducting removals of children from unsafe homes. Social work interventions usually occur when service users are at their worst and experiencing severe challenges, thus making them susceptible to frustration, anger, and aggression in the process (Lynch 2017:1). A case in point is Lynch's 2017 study entitled 'An exploration of social worker risk in the field when working with vulnerable adults and their desire for safety training', conducted in California, in the USA. One of the findings from this study was that home visits endanger social workers' personal safety, exposing them to the possibility of being physical and verbally abused in these contexts (Lynch 2017:15). Lamothe et al (2018:318), in their Canadian study entitled 'Violence against child protection workers: a study of workers' experiences, attributions and coping strategies', concluded that social workers who work in the field are afraid of working alone; they fear the possibility of violence

⁸ Form 36 pertains to the emergency removal of a child in need of care and protection without a court order, as stipulated in section 152 (1) and (2) (b) of the Children's Act 38 of 2005 (South Africa 2006).

while being away from the agency and its resources, and have to rely on themselves should they fall victim to crime or violence. Other scholars confirm this conclusion. Shin (2011:3338) states that client violence is more prevalent against child protection workers, who often encounter unsafe working conditions whilst conducting home visits and are at risk of experiencing physical and psychological violence and abuse (Cf. Lamothe et al 2018:308; Kim & Hopkins 2017:1; Robson et al 2014:924; Harris & Leather 2012:851; Kosny & Eakin 2008:149; Virkki 2008:247). It is imperative to note that when social workers suffer violence or aggression at the hands of service users, this impacts negatively on the social workers and on the organisation as well (Enosh et al 2013:1123).

Dawn's account serves as a testimony of service users' aggressive behaviour towards social workers when she shared the following: *"It has happened frequently. We have got a huge homeless group, which are currently under attack if you read the newspapers, and they will often come to the organisation to demand services. They will demand money, they will demand clothes, they will demand blankets, they will demand anything that we can give them, and when we say 'no', they get extremely aggressive. So we've been spat at, we've been sworn at, I have been spat at, sworn at, they've tried to kick in the gates when I have been here. And we've had to have... this year [2019], we've had to ask twice for ADT [a security company] to come and remove people that were getting overly aggressive at the gate, or the police come..."*

In other instances, service users fight amongst themselves and the social worker is caught in the middle of the fight, ultimately compromising the social worker's personal safety. **Unathi** recounted such an incident: *"I was doing a home visit... [to intervene in] a family matter... As we were busy with our session... one of the family members got... physical... he end up beating the one that was next to him and then he was also throwing things... He ended up going to the kitchen to pick up... a knife... he was like physically wanting to stab that guy, but only to find... this guy was mentally ill but he was not in treatment."*

Unathi also made mention of another incident where she had to diffuse a tense situation between family members: *"...recently... I had to call all family members to come to the office so that we can discuss the way forward... in terms of their mother's well-being. Unfortunately, the mother wasn't there... it was only four kids and the grandson... the*

interview didn't go well... They were fighting verbally so, but it ended up being physical... Then it's like I was put in the middle of being... a mediator... it ended up being physical. I was caught in the middle of it because I was with them at that time... I had to do something to stop the family from fighting physically, and then I was caught in the middle... to stop them from fighting each other... and then they ended up throwing things in the office, throwing things at each other and trying to block those things and they ended up hitting me."

In speaking to the incident encountered by Unathi, Lynch (2017:1) points out that social workers conducting home visits may encounter service users suffering from mental illness or trauma, who act aggressively towards social workers. This is further buttressed by Kim and Hopkins (2017:1) stating that child protection social workers often encounter unsafe working conditions during home visits and are likely to encounter physical or verbal threats from service users or other community members. Wacek (2017:4) explicitly points out that working directly with service users comes at a risk for social workers. An Australian study by Koritsas et al (2010), aiming to determine the prevalence of different forms of workplace violence and the factors that may predict the occurrence of violence towards social workers, discovered that 67 percent of Australian social workers had experienced aggressive behaviour from service users, particularly through verbal threats (Koritsas et al 2010:266). Social workers are at the forefront of assisting service users with different societal and personal problems and, more often than not, social workers lack the resources that service users want. This frustrates the service users and these frustrations are usually taken out on the social workers.

Khomotso also recounted an incident where the family was aggressive towards each other: *"I was in the office, I had clients, they were fighting over the child. Actually, it was not my case; my colleague was supposed to handle that case, but then since she was not at work... I had to attend to that case. Both the maternal and paternal family – the grandmother, the grandfather, the biological mother, the sister – were present... [they] were fighting over the child. It got so physical... they fought in my office and I didn't know how to solve it... I was just so scared... I wanted to call security... everything just got so messy, everybody was just down there, you know, fighting..."*

It's imperative to note that when social workers witness client violence and aggression, this results in negative effects and emotions for the social worker involved, such as exasperation, impotence, indignity, defencelessness, and a lack of self-regard (Lanctôt & Guay 2014:495-496). In a plea to the United States Congress to pass the Workplace Violence Prevention for Health Care and Social Service Workers Act, the NASW's Chief Executive Officer, Angelo McClain (NASW 2019), stated that an increase in societal violence and deinstitutionalisation has increased the risk to social workers. McClain (NASW 2019) further posits that social work is amongst the top 10 most dangerous professions in the world and that social workers are twice as likely to face work-related violence in comparison to other professions.

3.3.3.2 *Sub-theme 3.2: Participants experienced verbal threats issued to them by service users*

Research participants in this study made mention of how social workers are sometimes threatened by service users, which endangers their personal safety. A number of social workers described such incidents.

Flo shared how she was threatened by a service user's boyfriend after she did a home visit and found that the children were in need of care. This happened after the service user requested that the Child Support Grant must be paid to her, since the children were now living with her, instead of being paid to the grandmother who previously received the grant when the children were staying with her. When Flo did a home visit to look into the mother and the boyfriend's circumstances, she found the children in need of care. Upon confronting them about this and informing them that she would remove the children, Flo was threatened. She confronted them by saying: "... 'so are you saying these kids have been under your care for the past three months? Look at them, they don't look OK, so I am going to remove these kids. Please prepare the birth certificates, clinic cards, and their clothes, everything. I am going to take them tomorrow'... She was like, 'no you can't take them' and I left with my colleague. And then the next day indeed I came and then the boyfriend was very angry, he was so angry that he even promised me that he would hit me and then I had to call SAPS [South African Police Service], because I could not go into that shack to take everything because they didn't want to cooperate. I couldn't go in

myself, because I was afraid for my safety. I had to call in SAPS specifically the Child Protection Unit to say 'come and help me', because here now I am faced with a problem that the boyfriend wants to get physical with me, because I had to even go around [the other side of] my car, the G-car [government car] because he really wanted to hit me... I just chose to... run around and remember I am at work and I am wearing my heels and I have to run like that... we are expected to dress properly for our clients to respect the profession, whereas it can even put your life at stake, because I can't even run in those heels..."

Nathi also recounted the threatening behaviour of service users: *"...my work... as a mediator... I have to be that person that doesn't take the side of the other, and most of the time I make sure they understand what my role is, but... they always think that I'm taking sides somehow and some of them... they always threaten me... To kill me or even to make sure that my life doesn't go any further."*

Dawn shared the following threatening incident: *"I've had a client sitting with a knife in the boardroom, and it was a normal table knife and he was sitting there turning it around and he was asking for assistance. So, the idea is if I didn't give him the assistance, what would happen?"*

These excerpts point to the manner in which social workers are often threatened and intimidated by service users. In a study conducted in East London, UK, Jussab and Murphy (2015:290) mention that service users' aggression results in helping professionals being fearful of them. This in turn shifts the power dynamics in the therapeutic relationship, as it disempowers the helping professional; they lose control of the helping process, leaving them feeling exposed (Jussab & Murphy 2015:290). The prevalence of verbal threats in social work is highlighted in a 2010 study by Koritsas et al (2010) in which they surveyed 1000 social workers in Australia regarding their experiences of client violence over a 12-month period. Fifty-seven percent of these social workers reported that they had been verbally threatened and attacked in that 12-month period. This resonates with the accounts of Flo, Nathi, and Dawn who were all threatened verbally by service users. Interestingly, these research participants are all employed in the field of child protection and Robson et

al (2014:924) emphasise that social workers in this field are more exposed to service users' violence than social workers in other service fields.

3.3.3.3 *Sub-theme 3.3: Participants experienced being chased away by service users*

Batseba and Khomotso's accounts gave rise to this sub-theme.

Batseba explained such an incident in this way: *"...especially in October we do... human trafficking campaigns, so we usually go to the salons at Sunnyside⁹ to do awareness campaigns there, giving cupcakes and messages of hope and the cell numbers where trafficked people can call... in order to assist them. So, because we went to the salon knowing that... the research was done that most of the people who are trafficked... they are being used to work at salons here in Sunnyside. So when we were given those messages, we could see, the owners of the salons were not happy and others like, they didn't want us to enter... They chased us away, and in that way, you could see, they could even follow us and look where we are going so I felt scared."*

Khomotso also explained how she was chased away when she went to conduct a home visit to investigate an alleged rape incident: *"I remember I was doing a home visit for a case that was reported... about this guy... it was allegedly claimed that he raped... a little girl. He was so, so violent. When I arrived and introduced myself that I am a social worker... he just got so mad... before I told him my reason for the visit he was just like, you know, 'I am not going to allow you to come into this house, take your car, please get out of this house'... He was just so violent... I was treated like just dirt... [The man said] 'just get out of my house before I can do something that I am going to regret, just get out of the house'. He was so mad, I didn't even get the chance to interview him and I was alone can you just imagine, alone attending to such a case."*

These excerpts point to the dangers that social workers face on a day-to-day basis when conducting home visits in the discharge of their duties. Home visits, especially for child protection social workers, are an essential social work tool for assessing the ongoing service needs of children and families and to monitor children's well-being and their safety

⁹ Sunnyside is a suburb located on the eastern outskirts of Pretoria's CBD.

(Kim & Hopkins 2017:1). However, home visits may expose social workers to a number of risks endangering their personal safety. They can be targeted for representing a particular agency or driving an agency's car, or may be endangered by simply going into unsafe residential areas where they encounter violent service users and possible exposure to health hazards in the service users' homes (Pace 2015:5). A study conducted by Canadian scholars, Guay, Goncalves and Jarvisa (2014:572) focusing on verbal violence according to sex across different occupational domains, makes mention of how verbal aggression is one of the most common forms of workplace violence, and Batseba and Khomotso serve as testimony to this. Generally speaking, getting into a confrontation, whether verbal or physical, is particularly difficult and taxing, because it elicits physiological responses in which one experiences tension, increased heart rate, profuse sweating, and loss of fine motor coordination, and results in one having difficulty controlling one's movement and gestures (Collins 2012:136).

3.3.3.4 *Sub-theme 3.4: A participant experienced being stalked by a service user*

Flo described how a service user stalked her and how this incident resulted in her personal safety being threatened: *"It was 2012 and I was pregnant and this client comes in for an intake and I do the intake... Then he started stalking me – remember I am pregnant... he would come during my working hours. He would come just to stare at me whilst sitting at the park next to my workplace here, stare at me and I was not aware all the time until he came to my place where I am staying. And then I was sleeping in the morning at around 8am and my brother wakes me up to say there is somebody looking for me... and then I got very worried..."*

Flo explained that the service user's actions became more alarming: *"...started calling me, sending me WhatsApp messages, love messages, and he started obsessing about me to an extent that I even went for maternity leave... he still sent me messages even on WhatsApp... so I started telling him that I am going to open a case, a stalking case, because I am no longer feeling safe, the he stopped for a few weeks..."*

Flo recounted that she was also accosted by a client in the mall: *"I am minding my business at the mall there, month end... doing my shopping and I have got my plastics and I*

don't know that man and then I see this person following me... so I asked if he was OK and he said 'how can I be OK when you take us for granted, because we are poor?' Imagine everyone is watching me now at the mall, and then he started throwing words, you social workers... I felt humiliated."

Social workers are often stalked as a result of their interaction with service users who may be suffering from major mental health problems and who may develop delusions regarding their relationship with the social worker (Regehr & Glancy 2011:232). A 2005 Canadian survey conducted by MacDonald and Sirotich (2005) aiming to investigate the experiences and attitudes of social workers working with violent or potentially violent clients found that 16 percent of the 171 respondents had been stalked at one point in their career (MacDonald & Sirotich 2005:772-781). Stalking has major negative psychological, social, and physical effects on the victim thereof (Regehr & Glancy 2011:234). In Flo's case, her stalker took advantage of the work that she does to gain access to her even though she registered her displeasure. This way of operating is not uncommon, as Sheridan, North and Scott (2019:61) make mention of how workplace stalkers manipulate workplace practices and procedures to gain access to and harass their victims. The emotional distress that Flo experienced as a result of being stalked showcases how the stalking behaviour of service users may result in significant emotional distress on the part of the social worker and may lead to a possibility of violence (Cooper 2017:2; Regehr & Glancy 2011:236).

3.3.3.5 *Sub-theme 3.5: Participants experienced incidents where they had to render social work services in unsafe areas and under unsafe working conditions*

Dawn, Thulani, Velile, and Batseba's accounts gave rise to this sub-theme.

Dawn spoke along the following lines about how dangerous it is for social workers to work in Sunnyside: *"Sunnyside... it's the drug addicts, the sounds that you hear quite often are the guns going off, I think it's just a scary area."* She continued to explain: *"...going out into the flats, the one day I went to a flat and as I walked in, the chap asked me as I walked past, he said, 'do you think you are going to come out of the block of flats?' and I said to him 'I should hope so'. But in Sunnyside, a lot of the flats have good security, with security guards on duty, but some of them don't and it's those ones that are the scariest to*

go into... When I came back out he looked at me and said, 'you came out' and I said to him 'yes', he says, 'no, I was watching because I just wanted to make sure that you come out'. So, from his point of view, he was trying to ensure my safety, but it's a bit intimidating, you know. Someone says, 'do you think you are going to come out?'. But the service users themselves, no, I have never had a feeling where a client intimidated me. It's more the environment that makes you just feel unsafe, and you don't like being here after dark either, you know, it's a bit scary."

In other instances, social workers may consider their personal safety to be compromised when they see dogs in the yard of a service user's home, and this fear can impede service delivery.

Thulani made reference to this, when stating the following: *"...other incidents are maybe just going in a yard and finding that there is a dog and, you know, there was no sign, those are some of the things we encounter."*

Velile shared the following on this aspect: *"...make home visits, there's a lot of dogs there, so mostly... recently in Eersterust¹⁰ when you... make home visits, there's a lot of dogs there, so mostly I don't enter if it's a pit bull, because I don't get danger allowance¹¹ so... I can't enter the house."*

Batseba, who provides services to refugees, spoke of an unsafe area in terms of health risks for social workers: *"It's an area that is not safe, like it's not hygienically clean and then there is a high rate of TB [Tuberculosis] and then we're not allowed to wear masks to go out there, so we are mostly at risk because there was a time where I experienced symptoms that I felt like they were more like TB... our management, they say if you go to*

¹⁰ A formal South African township within the Tshwane Metropolitan Municipality, located just about 15km east of the Pretoria city centre.

¹¹ Danger allowance was part of an agreement contained in Resolution 4 of 2015 between Social Work Unions and the Public Service Co-ordinating Bargaining Council, promising to pay 'danger allowance' as an incentive to social workers, social auxiliary workers, and youth care workers for the dangerous work they do with service users.

people to assist them and we are wearing masks, it's more like you... you, I can say you, they are disgusting to them, or you become like a threat to them."

These excerpts paint a clear picture of the dangers social workers face when they conduct home visits or carry out campaigns in unsafe areas. Child protection social workers spend the majority of their time conducting visits in service users' homes, enabling them to assess their needs; provide support; and ensure and monitor the safety and well-being of children, so as to safeguard children and protect them from harm (Kim & Hopkins 2017:1). Unfortunately, as the excerpts from the research participants show, social workers are often placed at risk of being physically and verbally abused and they have to perform their duties in situations that may compromise their health (Lynch 2017:15; Kim & Hopkins 2017:6). The mentioned risks compel actions by managers and supervisors to ensure that they protect social workers from harm and make sure that they promote workplace safety for social workers (Nho & Choi 2009:44). This sentiment is also endorsed by the NASW (2013:12). Batseba's account also points to the notion that social work is regarded as a 'dirty' job which is disgusting and degrading, causing them to be stigmatised for the work they perform (Engstrom 2016:242-243; Baran, Rogelberg, Lopina, Allen, Spitzmüller & Bergman 2012:597).

The discussion will now move on to Theme 4, which investigates the coping strategies employed by the participants to deal with incidents when their personal safety was compromised.

3.3.4 Theme 4: Coping strategies employed by the participants to deal with incidents when their personal safety was compromised

This theme emerged from the answers provided by the participants in response to the following question: *"What coping strategies did you employ to manage the challenges experienced in terms of your personal safety during social work service delivery?"*

Situating this theme, presented under various sub-themes below, within Schlossberg's Transition Process Model (2011:160), the participants' coping strategies adopted speak to both the constructs of "support" and "strategies". Speaking to a supervisor, colleagues,

friends, or a therapist as a way to process and cope with the incidents where the participants' personal safety was compromised, according to Schlossberg (1981:10-11), speaks of enlisting interpersonal and organisational support. Khan (in Schlossberg 1981:10) refers to the significant others in one's work and personal life as "the convoy of support" in that these people offer and provide support in our life's transitions. Exercising their faith, remaining calm, and withdrawing from the situations that compromise the participants' personal safety speak specifically to strategies of coping. Coping, in the classical work of Lazarus and Folkman (1984:141), is explained as the "constantly changing cognitive and behavioral efforts to manage specific external and/or internal demands that are appraised as taxing or exceeding the resources of the person" (Cf. Chun & Poole 2009:3). According to Pearlin and Schooler (in Schlossberg 2011:161), individuals cope by employing one or more of the following strategies:

- *by changing the situation*, or in the case of the participants, seeking help; asking colleagues to accompany them on home visits; and walking away from the situation;
- *by reframing the situation*; and/or
- *by relying on their faith* (meditation) to cope with and move on from the incidents that compromised their personal safety.

Against these introductory remarks, the sub-themes to this theme are now presented.

3.3.4.1 *Sub-theme 4.1: Spoke to a supervisor, colleagues, friends, a therapist, or an employee assistance practitioner as a coping strategy*

The accounts (below) showcase the convoy of support (Khan, in Schlossberg 1981:10) the participants enlisted in utilising supervision, peer support, familial support, and therapy as coping strategies to adapt after having their personal safety compromised during social work service delivery.

Amahle, after the incident of being physically attacked by a service user, shared how she spoke to her supervisor in an effort to be debriefed: "...luckily I am supervised every Monday, you know, so my supervisor came through and it was that debriefing and telling her, and she actually stepping up to say 'listen we need to put security measures in place',

but on my side it was just like it happened, this is it, this is life, welcome to reality, and we just need to prepare for more situations...”

Nathi described how she uses her supervisors and fellow social workers as sources of support: *“...I always make sure my supervisors know about it [referring to incidents where her safety had been compromised] and maybe somehow they guide me through, on what can I do and what else you see... other things and also my colleagues, that’s the most important rule. Because we always, especially there are some of them that I always share with them and somehow they guide me through on what I can do to make sure that the client is having a good service.”*

Dawn also referred to the coping strategy of speaking to her supervisor or colleague: *“What helps a lot is, OK I normally will say that at that stage you sort of move on, so it’s something you handle and move on. The actual problems come in later on when you start looking back and thinking how bad it could go, and then normally the next morning I will speak to my director; my director is my sounding board. And I will speak to her and it’s like a debriefing sort of situation, and that helps a lot. I know a lot of the social workers don’t have it; you know they don’t have it. I’m in luck and I think the social workers here are in luck that we’ve got someone and it’s not only her, but also the lady that normally sits here, that you can go to and you just like, you know, ‘this is what happened’ and they hear you, and they listen. They are just sort of comforting... sort of, you know, ‘we are here for you’ and I think that helps tremendously.”*

Flo spoke of seeing a psychologist for debriefing to help her cope emotionally with the demands of her work: *“OK, on a personal level what I do, I normally love consulting, to tell the honest truth I consult quarterly with my psychologist to talk and then that really helps, because I debrief, otherwise one wouldn’t be able to cope emotionally.”*

Thulani enlists the support from her colleagues for purposes of debriefing: *“Sharing with colleagues, because they help me to debrief when I come back from such situations. Also just reporting to my supervisor to let them know what’s going on at the particular house, so that if I go there and something happens, they will know. Also, just bravery you know,*

just telling myself that I will do my best to ensure that children's rights are protected so those are some of the coping mechanisms."

Jules referred to how she debriefed by talking to her colleagues: *"Firstly, you speak to your colleagues. Your colleagues are the first support system that you have. If you are lucky enough you can also speak to your supervisor, if you get along. Such incidents [where your safety has been compromised] sometimes, they label them, as 'personal' so you shouldn't be personal with your supervisor so most of the times it's your colleagues. Us as colleagues are the first support system that you have and also having a time away from work, you know, after such incidents it's your only coping strategy, because sometimes you can't even afford to go to a psychologist you know. So I think your colleagues, my experiences my colleagues have always been where I debrief most of the times."* **Jules** reference to "having a time away from work", according to Kalliath and Kalliath (2014:113-114), can be interpreted as "avoidance" coping, especially where a social worker resorts to taking time off from work frequently and for an extended period of time to avoid/cope with a stressful situation. This passive way of coping is considered less effective, as it prevents the person from taking steps to do something about the situation

Khomotso copes by speaking to her friends. She made reference to this as follows: *"...I spoke about it [referring to the incidents where a family reacted aggressively towards her, and when she was chased away] with my friends just to debrief about everything, but you know a lot of things you just deal with them on your own, you just have to find a way..."*

Nathi spoke of debriefing as a coping strategy to remain sane and stable: *"Because the work that social workers do, it's very stressful. One has to sometimes get some place that she can debrief and make sure that she's emotionally stable... whenever she meets the client... to know... that there is nothing that will make her do something that is not right to the client... she has to debrief all the time so that she can be able to be in the good space when coming to service delivery."*

Dawn, Thulani, Khomotso, and Jules make mention of the informal support amongst the social workers, which ties in with the aspect of "interpersonal support systems" by Schlossberg (1981:10). This type of easily accessible and readily available support seems

to be an often-used coping strategy employed by these participants who share similar experiences, to move on after incidents where their personal safety was compromised. Ingram (2013:896) highlights the importance of this peer group support for social workers because, unlike official scheduled supervision, it is unrecorded, informal, and supportive in nature. It is also imperative to note that colleagues are most likely to be more understanding, as they experience the same incidents and are able to be the first source of comfort and debriefing to a fellow colleague.

Amahle, Nathi, Jules, Dawn, and Thulani's reference to having their supervisors available and being able to approach them for debriefing as a coping strategy refers to what Schlossberg (1981:11) calls "institutional" or "organisational" support that can assist individuals with their adjustment after experiencing a crisis event. To conclude, an openness to enlist the social and emotional support, assistance, and guidance from friends, fellow social workers, and supervisors is a healthy, emotion-focused coping strategy for managing stress and controlling one's emotional response in relation to a stressor (Allen 2017:87; Chun & Poole 2009:3).

3.3.4.2 *Sub-theme 4.2: Practising their faith as a coping strategy*

In latching on to this sub-theme, and writing about "Learned Optimism" as a balm for social worker stress, Allen (2017:85-86) points out that engaging "in spiritual and mindfulness practices such as worship, prayer, reflection... can be a source of transformative solace and a renewal of spirit". This is a coping strategy employed by some of the participants following incidents where their personal safety was compromised.

Nathi mentioned how she employs prayer as a protective buffer, stating: *"...I always pray that whenever I do... God should guide me through... I always turn to Him for protection and everything, because really I am dealing with people that are very frustrated most of the time. I understand sometimes if things don't go the way the person anticipates then he or she can do something to another person or blame someone else, so I always get into the way that I've been blamed for something that I didn't do... So, to cope I always make sure that I pray a lot and make sure that I do my work no matter what threats they sent to me, but I always make sure that I do my work."*

Lwazi spoke of using his personal faith as a coping strategy along the following lines: *“...my faith is the one that kept me going in this profession... so, even if there is danger I always believe if it’s time for me to die, it’s time. If not, God is going to save me; I am going to be safe. So that’s the strategies that I am using. It’s internal, based on my faith, my mind is channelled to say anything that must happen, let it happen, but with God’s grace I am going to be safe...”*

Batseba, who works for a faith-based organisation, spoke about God being her pillar of strength. She expressed herself as follows: *“Since we [are] working for a faith-based organisation, like, I could say our coping mechanism is God. We just pray and we hope that God will protect us, that’s the only thing we can say.”*

The participants’ accounts of praying to God and believing in Him for protection resonate with what Chun and Poole (2009:9) consider “psychological coping”. According to Koenig, King and Carson (2012:585) there is evidence that religion, spirituality, and personal faith have a positive impact on a variety of physical and mental health issues. Keeping the faith is an important ingredient to succeed in highly stressful situations and to bounce back after a crisis (Allen 2017:85).

3.3.4.3 *Sub-theme 4.3: Calmed down, sought assistance, or left the scene as coping strategies*

Dawn, Lwazi, and Rebone’s accounts gave rise to this sub-theme.

Dawn employs walking away from situations that may get out of hand and compromise her personal safety. She spoke about this as follows: *“I normally walk away from the gates and close the door, and then as I said, when it gets really bad, we will call the police or the ADT security. You cope. It’s sort of just another day at the job; you don’t know what’s going to happen and so you wait for it and... Afterwards, maybe take some tea and have that, but ja, walk away.”* **Dawn**’s reference to calling the police or security services resonates with Lynch’s (2017:14) assertion and suggestion that social workers be trained in risk assessment and management in order to handle service users’ volatility by knowing when to call in law enforcement agencies, such as the SAPS.

Lwazi also spoke of walking away: *“What I remember the most was when we were in one of the offices, the client was angry, fought with my colleague. And I was part of that office, so I decided to walk away, because that client was doing, like was grabbing my colleagues physically, their clothes. It was not nice at all. Physical bruises were visible so, fortunately for me, I decided to walk away, because I didn’t understand why must she fight, and I didn’t understand my role. Do I fight back or what? So, I decided to be safe, let me just walk away from the situation.”*

Rebone spoke about diffusing volatile situations by calming the service users down. If this does not work, she will excuse herself from the situation. She stated: *“I... try to calm the client down. If the client does not want to calm down, I would offer them the platform to step outside and to just refresh. Whether they leave or not that would be their choice, but if I... feel that I am trying to alleviate the situation I would excuse myself; say I am going to the kitchen quickly... to fetch a glass of water. Or I would ask to be excused by saying I am going to the bathroom.”* She also made mention of having pepper spray: *“...but I’ve never actually used it before. Honestly speaking, it had never come to mind for me to use it, because at that specific time something like that is happening the first thing you think of is getting out of the office to try and protect yourself.”*

Distancing themselves from aggressive service users and remaining calm is regarded as an emotion-focused coping strategy, with Kalliath and Kalliath (2014:113) stating that a social worker copes by remaining calm when confronted by angry service users. Rebone’s reference to trying to calm service users down is referred to in the literature as the skill of “de-escalation” and it is often applied in an attentive and empathic manner when working with emotionally distressed individuals (Spielfogel & McMillen 2017:232, 246). For the participants to assert themselves by walking away or distancing themselves from volatile service users and situations is to exercise their right to practice in environments free from physical, verbal, and psychological violence and threats of violence (NASW 2013:9).

3.3.4.4 *Sub-theme 4.4: Social Workers arrange for company when doing home visits as a coping strategy*

Flo and Marinus made mention of this coping strategy.

Flo said: *“What I do is, I avoid doing home visits alone. I would say [to] one colleague ‘let’s go, so that we can at least be two’.”*

Marinus indicated the following: *“...if it’s very dangerous, I take a colleague with me; then I am not alone. That I’ve learnt out of any situation to take a colleague or auxiliary with me. The second instance is to get SAPS or anybody else to accompany...”*

In turning to the literature, to find support for this sub-theme, Muzicant and Peled (2018:826) indicate that conducting home visits is a common practise in social work for direct service provision. Home visits can be conducted for the purpose of assessing the person-in-environment and can also be the site of intervention. The area of the home visit may be regarded as dangerous and service users may, for various reasons, react violently. Hardy (2016:18), in support of this sub-theme, encourages social workers to “pair up with a colleague and conduct home visits”.

This concludes the discussion on the theme focusing on coping strategies employed by the participants to deal with incidents when their personal safety was compromised. The discussion will now move to Theme 5, which provides the participants’ accounts of the current safety measures in place at their employing organisations.

3.3.5 *Theme 5: Participants’ accounts of the current measures put in place to ensure social workers’ personal safety*

This theme emerged in response to the following question: *“What safety measures do your employers have in place in terms of the personal safety of social workers?”* This relates to the aspect of the “situation”, “support”, and “strategies” in Schlossberg’s (2011:160) Transition Process Model. These measures, when present, could create a work environment

or situation that can protect social workers in terms of their personal safety. When absent, they may expose social workers to danger. In addition, the measures could, if present and used correctly, offer support and become strategies for ensuring social workers' personal safety. This theme is presented next according to various sub-themes.

3.3.5.1 *Sub-theme 5.1: No safety measures in place to ensure social workers' personal safety*

In substantiating this sub-theme, Batseba and Flo's accounts are provided:

Batseba said: *"...don't think there are any – none."*

Flo referred to the lack of safety measures and included environmental safety measures as well. She stated: *"There is nothing in place, because the security guards, what they do there, they mind government cars – which one is coming in, which one is going out, is the spare wheel still there, is the jack still there? Those are the only things the government is worried about; the property, so that they don't get to replace the property [referring to the cars and spares] in the near future. But about us as the employees? No. Even the fire extinguishers, for goodness' sake, if the building burns now, they expired long ago. We had to threaten to work outside the building for them to service the fire extinguishers which were last serviced in 2012. They only changed them now in 2019... even water... health hazards. You can come to work without water, toilets dirty – you can't flush them. Someone will be pressed, they'll go to the toilet use the toilet without water, and then our department which claims to be protecting the well-being of people, it fails to protect the well-being of employees who should deliver services. And then now if I want to cope, I must now bring the 10 litre [sic] of water to drink; what about the awful smell of the office?"*

The excerpts above showcase a lack of effort on some organisations' part to ensure that workplace safety receives adequate attention. This trend stands in opposition to the views held by various authors emphasising the responsibility of social service organisations' management to create safe work environments through effective and implementable safety

policies and protocols that ensure proper working conditions (NASW 2013:7; Alther 2012:1; McMahon 1998:3)

3.3.5.2 *Sub-theme 5.2: Security measures to ensure the social workers' personal safety are in place, but participants had varied views on their effectiveness*

Some employers, particularly the DSD, have security measures in place in the form of *security guards*, but the social workers lamented that they are few in number and they cannot provide the required protection should the need should arise. One NPO also has security measures in place.

Clara made reference to this along the following lines: *"...I guess if we look at it realistically, there is security, ja, but people also get through that... there was a petrol incident where a client came in and threw petrol on a social worker and the husband. It was a mediation case, here in this other office. There was a time where somebody came in with a knife, there was a time where somebody pulled out pepper spray at me and my colleague. So yes, there is security, but how effective is it? Are they [referring to the service users] being searched? ...because they [referring to the security officers] just say, 'open your bag', so I can hide something under in my bag and you are not going to see in terms of that. They have the tag-in system of the doors fit; it's all open as you see. They have the tracker thing on the cars, but how regularly is it actually checked? And do people know how to use it or is there a panic button? I know the tracker is there just to monitor the car, but is there something there, like those assist buttons or something like that? I don't know... The danger allowance they took away and a lot of people that said they've had incidents, they haven't been paid out... and the EAP [Employee Assistance Programme] services that there is [are] – from what I've heard, I've never used it – but they say it's very... it's not confidential. It's people that know people and then your story comes out... There are things, but it's not effective... and talking about emergencies, if there is a blackout or if there is a fire or whatever, they don't even have an evacuation plan. Luckily the time there was a fire I wasn't in the building, but... well not fire, smoke but still, so I don't know. I don't think there is anything that's really there, the systems are not very effective."*

Whilst **Marinus** took a more *positive view on the matter of security guards*, he had his **reservations**. He spoke about this along the following lines: “...now the security is so much better, things are more in place here, so they don’t allow any drunk people, any aggressive people. Sometimes they are reluctant to let the people through... the clients start pressurising them and then they just let the people in. They are supposed to search them, but they don’t. Sometimes they search, sometimes they don’t. So, the security is not always up to standard, because if a guy is in, he’s got a gun or a knife, there is nothing you can do about it.”

Khomotso was of the view that the *security guards are ineffective* because they do not have the right equipment to provide proper protection. She echoed what others had said about the ineffectiveness of the current security guards and measures: “OK they have got security, you saw the security, but then the security [referring to the security officers] without a gun, without anything, are we safe? It’s just a security, I don’t know what to call it, a baton or that. Are we safe? We are not. If a person can just come here with a gun, there is nothing they can do. That person can just come into my office having a gun, because he is not properly checked here, it’s just the security [guard]. He goes there, register his name and he can come into my office; he’s not properly checked. Ja, what if maybe he is having a gun? I can be killed in the office.”

Dawn, on the other hand, was of the view that the various *safety measures the employer had put in place were satisfactory*. She stated: “We have the panic button, we have the alarm system, we have all the security fences and you can see the barbed wire everywhere and the front gate, the security gate. So as far as that is concerned, that is a protective scenario. You can ask a colleague to go with you if you are unsure, and developing good relationships. Our organisation has a very good relationship with the police and also ja, I think they do what they can to ensure our safety at work...”

Bickley (2014:3) posits that as part of the employer’s responsibilities and duty to care, the safety and security of all staff members must take precedence over the protection of the assets of the agency or its reputation. In a similar fashion, the NASW provided guidelines that employers ought to follow to ensure the safety of social workers. In these guidelines, organisations are advised to promote an organisational culture that promotes the safety and

security of their social workers by making use of resources such as security guards, panic buttons, and technology that promotes safety, for example the Global Positioning System (GPS) which can track the location of cell phones and cars used by social workers (NASW 2013:9-14). The IFSW (2012:11) supports this position and posits that social workers have a right for their health and occupational safety to be protected.

Thulani spoke about the *department's vehicles being tracked* and **felt that it is a good safety measure**. He stated: *"Our cars are tracked. I think that is a good thing, because if I wander off and I don't come back to the office on time, they are always able to call the transport section to see what's happening. We've been advised not to go to places where we do not feel safe; we rather call the client to come to the office. That helps a lot because... there are just some areas where we feel that it's risky, and especially when looking at our female colleagues... those are the only things that have been done."*

Rebone made reference to *pepper spray being provided* by the employer, **while the owner of the building provided additional safety measures to protect the tenants**: *"Our employer, it was only the pepper spray that they have put in place as a safety measure for us. But the security guard and the burglar door that's put in place by the municipality, because it's their building structure and our organisation rents office space from them, so now we also make use of that."*

Kim and Hopkins (2017:7) encourage social workers and social work agencies to engage in collaborative efforts with community members through relationship building to address the personal safety of social workers. The IFSW (2012:11) emphasises the need for employers of social workers to eliminate dangerous behaviour through the implementation of policies that protect social workers from violence. Perkins, Beecher, Aberg, Edwards and Tilley (2017:1) mention that employers should furnish helping professionals with panic buttons/ personal alarms, install fixed emergency alarms in offices, and employ security guards, as efforts to protect employees' personal safety. Furthermore, Bickley (2014:46) suggests that agency staff must know where the vehicle safety equipment is and how to use it, and that each vehicle must have communication equipment so as to be able to communicate in times of danger. Establishing and maintaining safe environments for

social workers, according to Nho and Choi (2009:47), will result in higher productivity, higher job satisfaction, and deeper job commitment.

The discussion will now move to Theme 6, which showcases the participants' perspectives on who should be responsible for ensuring the personal safety of social workers.

3.3.6 Theme 6: Participants' perspectives on who should be responsible for ensuring the personal safety of social workers

This theme emerged in relation to the following question posed to the participants: *"Who should be responsible for the personal safety of social workers? Motivate your answer."* Their responses are presented under two sub-themes, and speak to the aspects of "support", with reference to "institutional support", and "the self" in Schlossberg's Transition Process Model (2011:160), in that they are partly responsible for their own personal safety.

3.3.6.1 Sub-theme 6.1: Participants are of the view that the employer is responsible for the personal safety of social workers

The following storylines are provided in support of the mentioned sub-theme.

Khomotso unequivocally stated: *"I can say the department [her employer], if maybe the management can attend to us... talk to us, and find out what is our problem and then like you are doing now [referring to my research project]. You want to know how we are coping with everything and all that. If the management can just do that, maybe hear from us, because we are the ones doing the visits, we are the ones who are dealing with this on a daily basis. If maybe they can hear us, talk to us... and escalate the matter, because we know that they've got their superiors too, but then the matter needs to be escalated."*

Batseba said: *"Our employers, they should be responsible, because when you hire someone you must ensure... their safety; you take care of their safety first before anything else, because if I'm not safe, sometimes, it's hard for me to render services."*

Rebone stated the following: *“In my personal view, I feel that it should be the management, because we are ultimately employed by our executives to provide a service to client. Yes, our supervisors may not be there at a specific time incidents like that are happening, but I feel like they should have put in place measures that will help us in their absence, you see.”*

Jules pointed out that the social workers themselves and their employers are responsible for the personal safety of social workers. She spoke about this as follows: *“One, it’s me as a social worker obviously. But then in general, whoever is the head of this department must really ensure the safety of social workers. I feel like most of the time we are compromised, because they say you have passion. You know, as a social worker, you are respectful, you are godly, you are all these nice words, but at the end of the day, you are a human being and you are not just a social worker, because it’s a calling you know. At the end of the day you want to make ends meet; there’s people who are depending on you. Imagine one day you go in to work and you don’t come back, because a client stabbed you, you know, what would happen to your family? So, I think the whole department is obliged to ensure the personal safety of the social workers. As much we are rendering services to the most vulnerable groups out there, we are also vulnerable, because at the end of the day these clients that we serve, they end up taking advantage of us and I know we cannot die for passion... we have to get something in return.”*

The viewpoint of the participants quoted pointing to the fact that the employer is responsible for the personal safety of social workers find support in McMahon’s (1998:3) assertions that all social work agencies must have safety policies to ensure that service users and social workers are kept safe. The IFSW (2012:4) holds a similar view that employers are responsible for ensuring that social workers work in environments in which their personal safety is promoted and protected, primarily because the ability of social workers to practice effectively and ethically is influenced by the working environment created by employers. Furthermore, employers are expected to put in place measures that reduce or eliminate the risk that social workers face when conducting their duties (NASW 2013:8). To this, Alther (2012:1) adds that more emphasis must be placed on workplace safety training in social work agencies and that such training should materialise.

3.3.6.2 *Sub-theme 6.2: Participants are of the view that the social workers are personally responsible for their own safety*

The storylines below are provided in substantiation of this sub-theme.

Velile clearly expressed her view on this matter along the following lines: *“I think it should be the department, because they are the ones that employs [sic] us, but at the same time even ourselves. We can’t just go by ourselves into an area when we know that area is not safe... you have to take your safety first, because if you die in the field your family is going to lose, but the department will replace you. So I think you need to check first and assess the area before you just go in and if you don’t feel comfortable to go for a particular home visit, I think you should request police to come along with you just for safety. Because even if we are in pairs, as social workers we don’t have the skills to protect ourselves, you know, but if you are with a police officer...”*

Dawn had no doubt that social workers need to take personal responsibility for ensuring their own safety: *“...don’t get yourself into a situation, if you feel it’s intuition. If you feel ‘this is not a good situation’, get out of it if you can. If, you know, you are going into a bad situation, take the police with you or take someone with you. And then the organisation also promotes by having the panic button and the security gates and all that. And also, the people that are there for the debriefing, that they will listen to you and they will hear you. But it’s first your responsibility – develop an intuition, that you know this is not going to be a good scenario and then have someone accompany you, either a colleague or, if necessary, the police.”*

Marinus also felt that social workers are responsible for their own safety: *“...your safety is your own... as a social worker you must really know it’s your responsibility. Also, you can’t be reluctant to try and run into a brothel and try and take children away; you are going to get problems or go into it... you know you need the cooperation of the police, before you can really go into... some of the police are there to help you, other police are very reluctant...”*

Flo's perspective was that ensuring social workers' safety starts with the social workers themselves. She stated: *"It first starts with an individual, with me. I should think for myself first, because it's even in human nature to want to protect oneself. Like I am saying now we choose to call in one colleague to be with me when I do home visits. I should first be able to say 'for me to be safe, this is what I need to do, this is what is needed' and I should be able to even read the situation to say 'is it safe to go in there, is it unsafe?' So, it starts with me."*

This sub-theme and the accompanying storylines are supported by Alther (2012:1) who posits that social workers must take responsibility for their own safety and advocate for this within the workplace. In addition to this, the NASW advises social workers to practice routine safety precautions in the execution of their day-to-day social work duties (NASW 2013:7).

Thulani sums up this theme when sharing his perspective as follows: *"Firstly it's us, as the people working on the ground. Secondly, the employer, because the employer must make sure that there are continuous engagements regarding personal safety... also the police. We work hand-in-hand with them; they play a crucial part in helping us. Councillors in communities, especially if they know that we are working in their area it makes things very easy. Because the community workers liaise with the councillor, so when they see you, and they know a particular case and you are having a challenge, they [are] also are of great assistance."*

Thulani draws attention to the need for a collaborative approach involving various stakeholders to ensure the personal safety of social workers and went a step further to mention the importance of including local leadership, such as local councillors, to ensure social workers' safety. This is in line with the NASW's guidelines for employers to establish policies in which other players such as law enforcement agencies and community leaders are involved in ensuring the personal safety of social workers (NASW 2013:8). The same sentiments are raised by the IFSW (2012:8) which posits that one of the ways to create a safe and ethical working environment is to involve service users in the formation of such environments.

This then concludes the discussion on this theme of participants' perspectives on who should be responsible for ensuring the personal safety of social workers. The discussion will now move to Theme 7, the final theme, which presents the social workers' suggestions about what can be done to ensure the personal safety of social workers.

3.3.7 Theme 7: Social workers' suggestions about what can be done to ensure the personal safety of social workers

This theme, to be presented under various sub-themes, emerged in response to the following question: *"Any suggestions on how the personal safety of social workers can be promoted?"* These suggestions can be hooked onto the constructs of "situation", "support", and "strategies" in Schlossberg's (2011:160) Transition Process Model, used as theoretical framework for the study, as they speak to how each of these can enhance and ensure social workers' personal safety. The suggestions will be presented next as sub-themes to this theme.

3.3.7.1 Sub-theme 7.1: Pay social workers a danger allowance

A number of the social workers employed by the DSD made reference to the need for social workers to be paid a danger allowance. Upon enquiry, it was brought to my attention that the DSD used to pay social workers a danger allowance, but this was later stopped as a result of budgetary constraints.

Nathi suggested that a danger allowance be paid to enable social workers to pay for debriefing: *"...there was a time when we used to get the danger allowance, but it stopped sometime, maybe it was last year [2017] or what – I'm not very sure."* She suggested that the payment of a danger allowance be reinstated: *"I do think... for all the social workers to feel safe, a danger allowance somehow, it has to be considered again. That's one of the things that is helpful to the social workers, because it will assist somehow to upgrade even their lives, and to make sure that they get those medical... maybe hospital plans. You know... things that will benefit them. Because we know very well medical aids are there, but at the same time somehow, some of them, you'll see that they are taking that options that are not somehow helpful to them for everything... So, if they get extra cash somehow,*

maybe it will assist them to get that help, especially psychological help; that's the most important thing. So that they can always [do] their best in their work."

Thulani also mentioned the payment of a danger allowance, particularly for female social workers: *"When looking at our female colleagues... those are the only things that have been done [referring to the payment of a danger allowance]. We don't have danger allowance anymore, so the employer is lacking on that side. So those are some of the measures."*

Unathi's suggestion was that the payment of a danger allowance for social workers must be reinstated: *"...we once had danger allowance I don't know if some mentioned about it, but it was cut, and then the sad part of it we were not informed about it..."*

Clara also spoke about the danger allowance, but said that it is not going to save social workers' lives. She spoke about this as follows: *"...I believe that the organisation needs to be able to take a stand and protect the employees. I mean yes, people keep saying about danger allowance, but that R300, R400 – that's not going to save your life. Whether you have it or you don't, it's irrelevant. You can maybe get a life cover, but that's after you're dead and it's going to pay out, that's the only benefit that R300, R400 is going to give you. So, I don't truly believe in the danger allowance, but they do need to take some precaution."*

The payment of a danger allowance formed part of the recommendations stated in the Recruitment and Retention Strategy for Social Workers, together with an improvement in salaries and working conditions for social workers (DSD 2009:40; Earle 2008:72). This suggestion by some participants to reinstate a danger allowance for social workers resonates with one of the findings of the study by Ntjana (2014:89). In her study focusing entitled *"The progress of developmental social welfare: a case study in the Vhembe district, Limpopo"*, in which she interviewed both social workers and social work supervisors in the Vhembe District in the Limpopo Province of South Africa, the participants expressed their dissatisfaction with their salaries and the lack of incentives, including the lack of a danger allowance.

3.3.7.2 *Sub-theme 7.2: Raise management's awareness about the personal safety of social workers*

Amahle's suggestion in this regard gave rise to this sub-theme: *"People are not aware... that our environment is not safe. They tend to think we are dealing with passive clients who are vulnerable all the time. The truth is, that's hardly the case. Yes, you will have those passive clients, but then you will have those aggressive clients... So, it's firstly to make our management aware, because, truly, when I said that, I was... laughed at... when I... spoke to the... external supervisor who is not part of the organisation I work for... The ones inside here [referring to the internal supervisors], they were just like, 'don't be silly, she wouldn't have done that [referring to how a client threatened to attack Amahle] – you know she knows you're a social worker'. So, it was just dismissed, like you are just throwing your toys out of the cot... So, we need to actually educate our managers in the Child and Youth Care Centres, in wherever social workers are working, to say, 'listen, it is not safe...' So, it's people who do not know what social workers are going through. Already our profession is undermined, so now for us to say, we are not safe, that's like, 'now you're not safe, since when is giving advice not safe?' ...So, we need to educate them..."* In addition, she shared the following safety tip: *"...my [office] keys – I never leave them on at the door, because... if somebody's angry and they see it, they could just lock you in and do whatever they want..."*

The dismissive attitude of the supervisors in Amahle's account is rather disconcerting given the fact that Nho and Choi (2009:47) point out that social work is a dangerous profession in which safety and security in the workplace must be adequately addressed by social work agencies. The IFSW (2012:11) also places the responsibility of promoting, ensuring, and protecting social workers' health and occupational safety in the hands of the employer agencies. Williams (2015:89) advocates for social work agencies and employers to regard social workers as "fire fighters". As such, employers must take responsibility for their employees' well-being; ensuring that their social work employees receive training on work hazards and have proper mental health support available, and that time be allocated, at regular intervals, for emotional risk assessments. These assessments should be regarded as 'fire fighter tests', aiming to identifying gaps in social workers' self-care attempts, as

well as to raise awareness about the personal safety of social workers and the importance of a safe and healthy workplace (Engstrom 2016:236).

3.3.7.3 *Sub-theme 7.3: Inform colleagues about your whereabouts*

Batseba made this suggestion: “...when you’re going out, inform other colleagues that’s where you are going, so that they can know of your whereabouts, how long you are going to spend there. If you spend more than the time you have estimated, then they should start to contact you or... make means to get hold of you. And then also have company wherever you are going – don’t go to a place alone...”

Batseba’s suggestion finds confirmation in the NASW’s (2013:20) guidelines for social work safety in the workplace, emphasising the importance of social workers’ whereabouts always being accounted for. When going out to conduct a home visit, social workers are encouraged to inform fellow social workers or office staff where they will be visiting (the address), the intended duration of the visit, and who they are going to see (particulars about the service users), as well as the vehicle they will use for such a visit (Hardy 2016:18-19). The organisation’s management must also draw up risk profiles on the social workers’ personal safety for the communities they are servicing, prior to sending social workers out to conduct home visits and render services in any community (Hardy 2016:18-19; IFSW 2012:11).

3.3.7.4 *Sub-theme 7.4: Do not go out alone on home visits; develop a buddy-system*

Rebone, Dawn, and Marinus’ accounts gave rise to this sub-theme.

Rebone suggested the following: “...when we do home visits... it is suggested that we do it two at a time, like travel together, because of the area that we work in [a squatter camp in Atteridgeville, located to the west of Tshwane, in the Gauteng Province of South Africa]¹². Our company car is a VW Citi Golf, which is mostly used as form of local transportation around here, so it’s easy enough for people to steal that vehicle. So, even when we do home visits and then maybe you are alone, you have to make sure that the car is locked

¹² The name of this squatter camp has been removed for confidentiality purposes.

properly, because you'd find that there are people who are looking at you like, 'Oh you are driving this car, we can take this car and sell it to someone else', use it for personal gain, money or whatever, especially if it's a welfare car. People don't like welfare cars in [the squatter camp in Atteridgeville]."

Dawn also suggested that social workers should go out accompanied by others: *"...You can ask a colleague to go with you if you are unsure, and developing good relationships. Our organisation has a very good relationship with the police and also ja, I think they do what they can to ensure our safety at work. When you go out into the community, that's a different kettle of fish, because that is where, if it is a bad scenario, take the police. But there is a tremendous amount of goodwill with the people in Sunnyside as well. It's not only the bad things. You get a lot of goodwill; the people are willing to help you cooperate."*

Marinus had the following specific suggestion on how social workers can ensure their personal safety when engaging with clients during home visits: *"Make sure when you get into a place that the doors be [sic] open and you can get out of a situation. I don't have a firearm, but if you come to a complex, the security of that complex, most of these nowadays have got security. The security [guard] must also accompany you, so it's safety first precautions. Never be alone, that's what I can tell you and make your preparations. If you want to go, prepare well; have your documents and everything in order. You mustn't go and then scratch, scratch. Your documents must be on your flip file; a, b, c and d. You must explain to the people precisely what is happening. They can argue – it happens in a Form 36¹³ – the next morning you have to be at court so that person can get a lawyer or anybody else to represent him the next morning. So, [you] have to be factual, you must know your Act¹⁴, you must know your procedures."*

Hardy (2016:18), in support of this sub-theme, states: "pair up with a colleague and conduct home visits". The buddy-system is also encouraged by the NASW (2013:19), particularly because it ensures that social workers do not conduct field visits or home visits

¹³ Form 36 pertains to the emergency removal of a child in need of care and protection without a court order, as stipulated in section 152 (1) and (2) (b) of the Children's Act 38 of 2005 (South Africa 2006).

¹⁴ Referring to the Children's Act 38 of 2005 (South Africa 2006).

alone. This in turn minimises the risks that social workers are likely to face in terms of their personal safety in the field. The need for the utilisation of members of the SAPS was highlighted by a number of the research participants who felt that in most cases this is absolutely essential as a way of ensuring the personal safety of social workers. Liquid Personnel and Munro (2015:2) are of the view that regardless of a social worker's level of skill and experience, it is impossible to do commendable work in a non-supportive environment and without the support of other key stakeholders, such as police officers, to ensure both the social workers' and the service users' personal safety.

3.3.7.5 *Sub-theme 7.5: Train social workers in self-defence and how to ensure their personal safety*

Flo and Rebone's suggestions informed this sub-theme.

Flo suggested that social workers should receive training in self-defence: *"I would say they should train us. I don't know what training they call it – this basic one to be able to defend ourselves like the police get. If they can train us as social workers to be able to defend ourselves to say 'when somebody attacks you, this is what you do'..."*

Rebone also suggested training in self-defence and de-escalation techniques. She spoke about this along the following lines: *"...if maybe we can get training on how to approach different scenarios that can show us with regards to threatening our safety... because I believe that the way you respond to a client also determines what he or she will do next. If they are violent and you also want to become violent, then it's a clash. But if you become calm, sometimes, you might feel that I think they are also seeing that you are scared, so they can want to maybe pursue whatever they want to do, because they can see that they have the upper hand... I feel that if we can get maybe a crash course on how to respond to such situations to help us also know where to stand, what we need to do... because if not, then you constantly become scared when a client is supposed to come here then you end up maybe even telling the security guard that if a certain client comes just tell them, 'I am not here'. By doing that, you are also robbing them of services that you are supposed to give to them, but you can't help it because you fear for your own safety. So, that type of intervention can help."*

Flo and Rebone's suggestions are supported in the literature by Engstrom's (2016:136) assertion that training in personal safety for helping professionals is essential, as these professionals deal with unknown quantities, characters, and personalities on a day-to-day basis. This is even more important given the threats to social workers' personal safety nationally and internationally (Kim & Hopkins 2015:101; Newhill 1995:631). Alther (2012:1) states that what is worrisome is the fact that training about social workers' personal safety and how to de-escalate a tense situation with violent service users is not specifically covered in social work curricula. Social workers are unlikely to receive self-defence or violence prevention training at university or after qualifying as social workers. For this reason, the need for social worker training on aspects of personal safety and preventative practices such as self-defence and de-escalation training is called for by various authors (Kim & Hopkins 2017:7; Kim & Hopkins 2015:112; Ringstad 2005:312; Newhill 1995:635). Equipping social workers with the required information and skills to assess the risk of their personal safety will enable them to manage these threats in a more coordinated manner and to use the resources available to them in this regard (Lynch 2017:14). Kim and Hopkins (2017:7) argue that social work agencies must commit to offering ongoing safety training to social workers and ensure that they have a platform to share their experiences regarding personal safety with their colleagues. This in turn will mitigate possible mental health consequences for these social workers when their personal safety is indeed compromised (Enosh & Tzafrir 2015:982; Kim & Hopkins 2015:104).

3.3.7.6 *Sub-theme 7.6: Employers must bolster their initiatives to ensure social workers' personal safety*

The suggestion that gave rise to this sub-theme was succinctly put forward by **Flo**: *"I would say the department [her employer] must really sit and think about our well-being before reaching out for statistics, because what they want is numbers that you can just submit so that the parliament tomorrow can say the Department of Social Development catered for one million children. But now what about those people providing those services? Think about them, because we have families to take care of them. They need us healthy, alive, and kicking. So now charity begins at home. If you fail as a department to take care of us, how do you expect us to extend that care to the community? What is needed is that the employer must be willing to spend money if it requires money to be able*

to protect us. If they can't afford to hire security, maybe they should work with SAPS and align with them. Maybe there should be police officials who report for duty here, maybe two or three police officials for our protection."

Flo's concern about her employers' lack of concern over the health and well-being of social workers and call to prioritise this matter is not out of line. In an online survey conducted by the BASW (2012) in Britain, entitled "*The State of Social Work 2012: What Social Workers Think About the State of their Profession in 2012*", a participant stated the following: "...It makes me so sad that this job seems only to be possible if you sacrifice your own health and well-being..." (BASW 2012:11). In this mentioned survey, in which a total of 1100 social workers participated, 50 percent found it difficult to practice social work effectively without the support of their organisations in terms of ensuring their personal safety and well-being (BASW 2012:6).

3.3.7.7 *Sub-theme 7.7: Provide social workers with panic buttons, or install these in offices, along with security cameras*

Amahle, Lwazi, Clara, and Marinus' accounts are provided in support of this sub-theme.

Amahle said: "...I would love to have a panic button, because my security [referring to the security guard] is right at the gate [referring to the front of the building], which is super far. I don't even think that some of them remember that there is a social worker in this building; they only see me in the morning when I come in and when I leave. So... I would feel more safer [sic] had I known I've got a panic button, because I would immediately when I see that 'ok now, this woman's rage is becoming uncontrollable', you know... just click, so that by the time she does anything, I know that somebody is on their way..."

Lwazi also suggested the installation of panic buttons: "There is no emergency button that you need to press to call unto them [referring to the security officers] to come and assist, so I think if they can consider that, put an emergency button or something..."

Clara endorsed the idea of panic buttons that the social workers could wear on their person and spoke about this as follows: "...if you're one in an office there should be like the

tighter security... Our panic buttons need to work, but it doesn't help to have panic buttons on the desk. We should have like maybe necklaces or bracelets or something, so that when you are in the field, we also have the opportunity... to actually use it, because two of my colleagues... went out and they basically got hijacked with a G-car [government vehicle]..."

The assertions by these participants regarding panic buttons are in line with the suggestions from various scholars (Perkins et al 2017:2; Hardy 2016:18) who view panic buttons/ personal alarms as an effective way of ensuring social workers' personal safety.

Marinus recommended that cameras should be installed in the building: *"I think the security at the department can be jacked up [increased]...and it must be consistent. Don't have one day you have a task team and the next security [guards]... security has improved a lot since we got private security. The government ones, they were not good; they just let people in, fill in forms, and that's it. People there for years and years just waiting for their pension day, not really interested. I think cameras to cover the whole place. Our whole office is not covered with cameras. The reception is, but there are certain areas of this building with no cameras. We have thefts and things like that and when you go to the security [guards], they say no they can't get a tape. So it's a problem between getting the evidence at the end of the day if you really need it... there is [sic] cameras, but sometimes they say to me 'no, the tapes doesn't work'. So why is the guy sitting in front of the camera the whole time, but there is no recording? ...there is no recording afterwards for something that has happened, so I think they must get their systems in place."*

The suggestion by Marinus for the installation of cameras find expression in Perkins et al (2017:2) who regard cameras as necessary tools in safeguarding the workplace and the staff.

3.3.7.8 *Sub-theme 7.8: More security guards and thorough security checks of service users to enhance the social workers' personal safety*

Unathi, Amahle, and Jules' accounts are provided in support of this sub-theme.

Unathi recommended that security guards should search service users visiting their offices more thoroughly: *“...I think thorough security, and then people should always be searched. Like there was an incident that happened...[to] one of my colleagues... it was a mediation session. So, this lady thought that the social worker was biased and then she couldn’t take it very well. The time when they were called again for the interview, the lady came with petrol in a bottle and then while they were in a session, that lady poured the social worker with [poured petrol over her]... saying ‘you side with my husband’. So, I think if that lady was searched thoroughly and asked why is she carrying whatever that she is carrying, I don’t think such things could have happened.”* She added: *“...it was very traumatic for her and those are the things we find ourselves in. Yes, we have... the security [guards]... it’s just to do their administrative work and it’s finished.”*

Amahle also suggested that more security guards should be employed: *“I would love to have a security guard outside on the patio... who monitors everyone’s movements, coming in and out... So, we need more security personnel; we need more check-ups. I am for the panic buttons... even though I do feel it is a long stretch... everybody probably wants it, but more security personnel, somebody who is able to go, ‘social worker, are you OK?’, ‘It’s 12 o’clock, are you good?’, ‘Hi, it’s 2:30, are you OK?’... I mean have you gone to the departments where security is so tight? ...they’ve got tags to go into different departments, they’ve got those papers which you need to sign out with those, and in NGOs [non-governmental organisations] it’s not like that. Once you’re in, you’re in... so we need such measures.”*

Jules also highlighted the need for tighter security measures: *“I mean as much as we deal with clients whom we fear ourselves, there should also be security that is employed to ensure that whoever enters... our offices, is safe enough. Because there was an incident that happened to my colleague, a client came with a knife and... what did the security [guard] do for someone to pass with a knife and come through a colleague’s office? I mean I think they should tighten the security in our offices, because every day, every time you are really not safe. In terms of the G-vehicles, sometimes we do try to travel in groups, because when you are in groups they don’t target you as much as when you are alone...”*

The importance of effective security is supported by McMahon (1998:3) calling for the establishment of safety committees aimed at maintaining safety programming in the organisation, as well as by Bickley (2014:58) who encourages each employee to be familiar with the security procedures of the organisation. Social workers must at all times be aware of what is happening around them, be aware of the people in their vicinity, and follow safety practices, as these form an important part of self-care for social workers (Hardy 2016:18; McMahon 1998:3)

3.3.7.9 *Sub-theme 7.9: Facilitate access to counselling and debriefing*

Jules worded this suggestion along the following lines: *“...if... there’s psychologists or therapists, whichever kind... a place wherein we can pour out whatever we come across. Maybe if we can attend those on a weekly basis, you know, that could help. Sometimes... they do try to bring in psychologists, but I think that happens once in a year and there’s a lot of us here. So, sometimes you don’t even, you can’t even fit in that schedule, because you are busy trying to, you know, get your work going and the day pass you by then you can’t even attend those... this year it only happens [sic] once. It’s only a few of us who attended and whenever that [the appointment with the psychologist] comes, it comes at a later stage when you have experienced so much, you’re exhausted inside. So much that you get to that point to say ‘aargh, it won’t even help anymore’. So if there’s psychologists or therapists or people who can be employed by the department to... assist, maybe on a weekly basis... I think that could help us a lot, because you get a lot of burnout as a social worker, especially when you are working in statutory and having to deal with, you know, cases that are even almost personal to you. Because you look at a case and then you compare to your life and say this is similar to what my child could be going through. So, I think if they could employ like psychologists or therapists so that we can attend on a weekly basis, it would help.”*

Velile expressed the need for counselling: *“...and also to take us for... like if maybe you’ve been in an incident whereby you felt traumatised, to take you for counselling or EAP. And again, regarding the EAP issue, we have just one person in Johannesburg. We don’t have anyone closer here in Manaka House, whom we can go to when we have problems...”*

This suggestion for social workers to receive counselling and debriefing corresponds to a similar request by some of the participants in Moyane's (2016:75) study conducted in the DSD in Mpumalanga. This author focused on social workers' experiences of occupational stress, and the participants of this study indicated the need for the urgent implementation of EAP services in order to support social workers and to enable them to gain access to debriefing services (Moyane 2016:75). Furthermore, the participants in Moyane's (2016:64) study suggested that the EAP services should be provided by an external service provider and not by internal EAP practitioners, because they feared the lack of confidentiality and anonymity. The provision of counselling and debriefing services are essential to ensuring both the social workers' psychosocial functioning and the quality of service being offered by the employer organisation, as these two aspects are inextricably linked (Conway 2016:2).

3.3.7.10 Sub-theme 7.10: Miscellaneous suggestions to ensure the social workers' personal safety

This sub-theme speaks to suggestions of safer and cleaner buildings, having vehicles that are road-worthy, and having cell phones (that could be used for emergencies), as well as GPS to assist social workers to get safely to their destinations.

Jules suggested clean offices and road-worthy cars: *"...the offices that we have, most of them is an open plan; I mean that alone it's not safety. Secondly, our offices are a mess. I think if we are prioritised in terms of better offices to start with. They [referring to management] always speak of budget when we speak, of course, but then most of the time the G-vehicles are not even safe. You get stuck somewhere in Soshanguve¹⁵ and the only person who can assist you is the transport officer. You cannot allow anyone else to help you. That also is very not safe, because anyone can come and claim to try to help you and God knows what might happen..."*

Khomotso recommended resources being acquired, such as cell phones and GPS: *"...we can have cell phones with us, so that I can notify the supervisors that 'OK, I am here... what, what, what', and we can also have the GPS you know. That can show us the*

¹⁵ A township situated about 30km north of Pretoria, Gauteng, South Africa.

direction and all that, because sometimes we just drive the car and these people, they see the G-cars and already they know that it's a government car. You can be put in a risk of being hijacked, you know, and with hijacking, anything is possible, rape and all that."

Dawn recommended that management should inform social workers about the available safety measures: *"I think from the organisation's point of view, I think they need for instance to inform us 'we've also got the fire extinguisher'. You know, that kind of thing. You conscientize your employees to know where the panic button is and what button to push. You know, whom to call in the case of an emergency. We also in our cars carry this message that says who are you supposed to contact if you break down..."*

Participants suggested improved security in the offices, cameras, high quality buildings, sufficient cars with trackers and GPS, cell phones to allow for emergency contact, and fire extinguishers for the office buildings. Hardy (2016:18-19) is in agreement with the use of cell phones belonging to the organisation, as well as the use of vehicles belonging to the social work agency, in order to promote the personal safety of social workers. Furthermore, Bickley (2014:42) advocates for the safe use of vehicles and emphasises the need to ensure that the vehicle is in good working order before utilising it. The use of the agency vehicles ensures that the social worker is safer, as it is usually equipped with GPS and has communication equipment, as opposed to a social worker's private vehicle (Hardy 2016:18).

The next section will provide a summary of the chapter.

3.4 SUMMARY OF THE CHAPTER

The central focus of this chapter was the discussion of the research findings. The chapter began with a description of the demographic profiles of the 14 research participants who partook in this study. Subsequent to that, a brief overview of the seven themes and the attendant sub-themes was given. A discussion of the seven themes was then provided.

The first theme showcased the fact that the participants were mainly performing generic social work. The second theme centred on the participants' understanding of the concept

‘the personal safety of social workers’. The third theme encompassed the social workers’ experiences of incidents during service delivery where their personal safety was compromised. The fourth theme centred on the coping strategies employed by the participants to deal with incidents when their personal safety was compromised. The fifth theme comprised participants’ accounts of the current measures that are in place to ensure the personal safety of social workers. The discussion continued on to the sixth theme, which focused on the participants’ perspectives regarding who should be responsible for ensuring the personal safety of social workers. The seventh and final theme comprised the social workers’ suggestions about what can be done to ensure the personal safety of social workers. These themes were subjected to a literature control where possible and storylines from the transcribed data were used to provide evidence.

The next chapter will focus on the recommendations, conclusions, limitations, and the summary of the research study.

CHAPTER FOUR: SUMMARY, CONCLUSIONS, LIMITATIONS, AND RECOMMENDATIONS OF THE STUDY

4.1 INTRODUCTION

This is the last chapter of this four-chapter dissertation and contains a summary, conclusions, limitations, and recommendations for a research project I embarked on to investigate social workers' personal safety challenges and coping strategies during social work service delivery, and to gather suggestions from them for promoting social workers' personal safety. In deciding how to structure this chapter, I took the advice of various scholars (Faryadi 2019:779-780, 782; Tribe & Tunariu 2017:65) to heart, who advise that students compiling a thesis (or in my case, a dissertation), should present the following in the concluding chapter:

- A brief summary of what was covered in the dissertation, so as to refresh the reader's memory; reaffirm the research problem and the research questions; and indicate whether the questions were answered. In addition, evidence should be provided that the goals and objectives stated in respect of the study were realised (if indeed they were realised).
- A brief statement indicating whether the research contributed to resolving the identified research problem, either by contributing to the knowledge of the discipline and/or by bridging the knowledge gap identified.
- The conclusions drawn from the research findings and the recommendations formulated to inform (further) education and training, practice, and future research.

In the following section, I will present the summary and conclusions of this research study.

4.2 SUMMARY AND CONCLUSIONS

Against the pointers provided above, I will now commence with providing a brief summary on the previous three chapters of the dissertation and present the salient conclusions I arrived at. I will also indicate whether the research questions have been

answered, highlight whether the goals and objectives were attained, and indicate whether the identified research problem has been solved.

4.2.1 Summary and conclusions for Chapter One: The general introduction and orientation to the study

Chapter One centred on providing the general introduction and orientation to the study. In setting the stage and the scene for the research project to follow, I used literature to introduce and provide background information on the topic and to frame the research problem (Thomas 2017:2; Creswell 2016:881; Creswell 1994:23). From the literature consulted for the aforementioned purposes, I arrived at the conclusion that the mandate of social work, internationally and domestically, is to empower societies, promote social change, and develop and the liberate people (IFSW c2016). With the triple challenge of poverty, inequality, and unemployment that faces South Africa (Plagerson & Mthembu 2019:5), and the many social ills emanating from this, there is an exponential rise in the demand for social work services (DSD 2009:2). From the literature consulted, I arrived at the following conclusions:

- Internationally and domestically, social work is labelled as a “risky”, “low paying”, and “dangerous profession” (Nho & Choi 2009:39-40), with social workers receiving very little recognition for the services they render (Freese 2015).
- Social workers are encountering an ever-increasing number of threats of physical violence, leaving them susceptible to attacks and violence at the hand of service users in contexts where they are not adequately protected (Winstanley & Hales 2015:25; Reeser & Wertkin 2001:95-96; Scalera 1995:337).
- Social workers, especially those working with child abuse, neglect, sexual molestation, custody, divorce proceedings, and domestic violence cases, as well as those working in the fields of child and family protective services, foster care, and mental health, are at risk of service user violence and abuse, as most of these service users are involuntary clients. They resist social work services, which in turn render social workers particularly vulnerable to harm (Kim & Hopkins 2015:102; Gonzalez et al 2009:41; Reeser & Wertkin 2001:96; Scalera 1995:341).
- The types of service user violence social workers are exposed to range between verbal and emotional threats – including profane language, verbal harassment, and threats to

physically harm workers – to actual physical attacks, pushing, hitting, stalking, touching private areas, and sexual contact (Laird 2014:1968-1969; Nho & Choi 2009:39).

- Social workers here in South Africa (Deon Kondos) and abroad (Alexandra Mezher, Lara Sobel, Teri Zenner, and Lisa Putnam) have lost their lives at the hand of service users whilst executing their social work duties (Andersson & Fagge 2016; *SABC News* 2013; Sancken 2015; Huff 1999:12; Scalera 1995:337).

When turning to the body of knowledge on the topic proposed for investigation, I arrived at the conclusion that “the topic has been understudied”, or not substantively researched (Creswell 2016:88). In substantiating this conclusion, I refer to Alther (2012) who, in an article entitled ‘*Workplace Safety for Social Workers: A Student’s Analysis and Opinion*’, points out that her library search of peer-reviewed articles from 1950 to 2012 using the search terms “workplace safety” and “social workers” only resulted in one relevant article published in 2007. Between the year 2004 and 2008, as a response to the increase in the deaths of social workers in the line of duty, the USA promulgated legislation in the form of the Social Worker Safety Act 111 of 2009. The NASW (2013) in the USA also formulated guidelines for social worker safety in the workplace. The gap in the body of knowledge on the topics of social work safety and security issues in the workplace have also been noted by other scholars confirming that these topics have been dealt with “cursorily in social work literature” (Nho & Choi 2009:47), with only a few studies examining social workers’ experiences and concerns regarding client violence and workplace safety (MacDonald & Sirotich 2005:772). Domestically, Ncongwane (2014) highlights the paucity of literature regarding workplace safety and violence, indicating that although workplace violence has become a global phenomenon, there are very few studies that have been carried out in South Africa. Alpaslan and Schenck (2012:383) also recommend that the topic of the personal safety of rural social workers, with reference to their experiences and coping strategies in this regard, be placed on the agenda for future research.

The literature consulted and the state on the body of knowledge led me to formulate a two-pronged problem statement:

- Social workers often have to render social work services to involuntary service users and practice in environments that are unpredictable and increasingly unsafe, which

exposes them to the risk of being verbally and physically assaulted (Scalera 1995:337; Reeser & Wertkin 2001:95-96; Winstanley & Hales 2015:25; NASW 2013:5-6; Nho & Choi 2009:39; Laird 2014:1968-1969) and results in some social workers sustaining permanent injuries or tragically losing their lives “in the line of duty” (NASW 2013:5-6).

- There seems to be a lacuna in the body of literature and research on the topic of social workers’ personal safety, both internationally and on the local front.

The question that now begs an answer is the following: *Did the research address the identified problem?*

The answer is an unequivocal “yes”. The research findings presented in Chapter Three of this dissertation addressed the gap in the body of literature and research on the topic of social workers’ personal safety domestically, as it added evidence, showcasing and confirming that social workers render social work services to involuntary service users and in practice environments that are unpredictable and increasingly unsafe, where they are exposed to verbal and physical threats and assaults. In addition, the social workers’ suggestions forwarded to promote social worker safety makes a contribution to recommendations for education and training, policies, practice, and further research to address this under-researched topic.

In Chapter One I also introduced the theoretical framework for the study, departing from Maxwell’s (2013:49-53) assertion that in research a theoretical framework can serve as “a spotlight”, illuminating what one sees; drawing attention to particular events or phenomena; and/or functioning as a “coat closet”, in that the constructs of the theory can serve as “coat hooks” to hook the data on. As indicated, I adopted Schlossberg’s Transition Process Model as the theoretical framework for the study (see Chapter One: 1.2). Schlossberg’s (1981) Transition Process Model emerged from her analysis of how adults adapt to transitions, and provides a systemic framework for understanding these transitions and identifying the elements that influence individuals’ ability to cope during a transition period and move on, adapting to the transition (Burch 2020:23; Gbogbo 2020:2; Anderson et al 2012:59). To recap, a transition, according to Schlossberg (1981:5), is an *event*, such as a social worker being physically assaulted by a service user during a home visit, or a

non-event (e.g. not getting promoted at work, as anticipated) that results in a change in that person's perspective and, as an outcome, transforms relationships, practices, expectations, and responsibilities (Gbogbo 2020:2; Anderson et al 2012:59; Goodman et al 2006:33; Schlossberg 1981:5). The impact of the transition will be determined by the setting where the event took place and whether it was regarded as expected or unexpected. Unexpected events, as they are not planned, can disrupt an individual's day-to-day living and functioning (Burch 2020:24). While noting that a transition may be triggered by an event or non-event, dealing with a transition is a staged process whereby the individual is "moving in, moving through, and moving out" of the transition (Evans et al, in Gbogbo 2020:3; Anderson et al 2012:59). Moving in, in the context of the research, can be interpreted as a social worker changing his/her view about service users being passive recipients of social welfare services following the experience of a physical assault. Moving through denotes coming to terms with what happened and coping while venturing forth, while moving out points to the end of the transition and the beginning of another transition (Burch 2020:24). Schlossberg mentions four facets that could either benefit or subtract from the individual's capabilities to cope during a transition period. These are the situation, self, support, and strategies, and together they form the 4-S system in Schlossberg's Transition Process Theory (Gbogbo 2020:3; Burch 2020:24; Schlossberg 2011:160). The "situation" speaks to the situation at the time of the event. The "self" refers to the individual's attitude, worldview, and resilience. "Support" refers to the convoy of support available at the time of the transition, both institutionally and interpersonally, to provide assistance. "Strategies" speak to the coping strategies the individual employs to modify the situation and manage the stress caused by the situation (Burch 2020:24). Upon reflection and in conclusion, I found Schlossberg's Transition Process Model (which was adopted as the theoretical framework for this study) well-suited, as it assisted with spotlighting the phenomenon under investigation. The 4-S system was particularly helpful to hook the research findings on. Under the construct of the "situation", I could present the situations where the participants' personal safety was challenged and compromised. The construct of the "self" was fitting to hook the data on that spoke to the aspect that they are, in part, responsible for ensuring their own safety. The constructs of "support" and "strategies" became the hooks to hang the data on pertaining to the support the participants received following the event where their personal safety was compromised, and the coping strategies they employed in this regard. Their suggestions for promoting social work

safety, to be presented as recommendations, will also be organised under the 4-S system constructs.

Chapter One also included the specific research questions formulated at the outset of the study (see Chapter One: 1.3) to serve as signposts, informing the data collection questions so that the required information could be obtained to answer the initially formulated research questions. By way of concluding, I will now reaffirm each research question and indicate whether they have been answered through this research endeavour.

- *What are the challenges social workers experience in terms of personal safety during social work service delivery?*

Theme 3 of Chapter Three reporting on the participants' experiences of incidents that occurred during service delivery where their personal safety was compromised answers this research question. The participants reported that their personal safety was challenged and compromised in that some of them were physically attacked or were the recipients of aggressive behaviour by service users. Other challenges experienced included receiving threats from service users and being chased away by service users that they attempted to assist. Furthermore, one participant reported having been stalked by a service user. References were made to the fact that they had to deliver social work services in unsafe areas and provide social work service delivery in unsafe working conditions.

- *What coping strategies do social workers employ to address the challenges experienced in terms of personal safety during social work service delivery?*

The answer to this research question is reported under Theme 4 (see Chapter Three) entitled "Coping strategies employed by the participants to deal with incidents when their personal safety was compromised". The participants enlisted a convoy of support (Khan, in Schlossberg 1981:10), including supervisors, colleagues, friends, and therapists or employee assistance practitioners, to assist them in managing the incidents where personal safety was compromised. The participants referred to using faith, remaining calm, seeking assistance, or leaving the scene as ways of coping

following events where their personal safety was compromised. Other participants highlighted that they arranged for company when doing home visits as a coping strategy employed to manage incidents where personal safety was compromised.

- *What are social workers' suggestions for promoting social workers' personal safety during social work service delivery?*

The suggestions for promoting social workers' personal safety during social work service delivery, as answers to this research question, are reported under Theme 7 of Chapter Three. Their suggestions were paying social workers a danger allowance, raising awareness amongst social work management about how social workers' personal safety had been compromised, informing fellow social workers about their whereabouts, and ensuring that they do not go out alone on home visits by introducing a buddy-system. Providing social workers with training in self-defence and training on how to ensure their personal safety, as well as ensuring that employers bolster their initiatives to ensure social workers' personal safety, were also forwarded as suggestions. In terms of ensuring safer workspaces, the participants suggested that social workers should be provided with panic buttons or that these should be installed in their offices, along with security cameras. Other miscellaneous suggestions given by the participants to enhance the safety of their work environments included the provision of more security guards and thorough security checks of service users. The final suggestion centred on facilitating access to counselling and debriefing as a way of ensuring social workers' personal safety.

- *Who should be responsible for the personal safety of social workers?*

The participants' answers to this research question are provided under Theme 6 of Chapter Three. Their suggestions are premised on the belief that both the employer and the social workers themselves are responsible for ensuring their own personal safety. One of the participants expressed the need for management to engage with social workers so as to determine what personal safety challenges exist and determine how the employer organisation can solve these challenges. Some of the participants intimated that employer organisations must take responsibility and ensure that the

working environment in which social workers operate is free from any hazards that may threaten their personal safety. Some of the participants highlighted the fact that social workers themselves must assume the responsibility for their own personal safety. The final suggestion raised by one participant was the need for a collaborative approach involving various stakeholders, such as local leadership, to ensure the personal safety of social workers.

In Table 4.1 below I will reaffirm the research goals formulated at the beginning of this research study in view of answering the initially formulated questions, and provide a concluding statement confirming how each of the formulated goals was attained.

Table 4.1: Summary of the goals of the study and the concluding statements on how they were attained

Goals of this research study	Concluding statement on how the research goal was attained
<ul style="list-style-type: none"> To develop an in-depth understanding of the challenges experienced by social workers in terms of personal safety during social work service delivery, as well as the coping strategies they employed. 	<p>The execution of the research plan introduced in Chapter One allowed me to obtain an in-depth understanding of the challenges experienced by social workers in terms of their personal safety and the coping strategies they employ during social work service delivery. This in-depth understanding is exemplified in Chapter Three of the research report, in which I zoned in on the challenges experienced by the participants when their personal safety was compromised, as well as the support they enlisted and the coping strategies they employed to manage these transitions.</p>
<ul style="list-style-type: none"> To proffer suggestions for promoting social workers' personal safety during social work service delivery. 	<p>The suggestions which I obtained from the research participants are set out in Chapter Three of this research report and integrated as part of the recommendations on how to promote the personal safety of social workers during social work service delivery</p>

I will now, in Table 4.2 below, restate the task and research objectives formulated to realise the abovementioned goals and showcase, by way of conclusion, how each goal was attained.

Table 4.2: Summary of the research objectives and concluding statements on how they were attained

Task and research objectives formulated to realise the goals formulated for the study	Concluding statement on how each research objective was attained
<ul style="list-style-type: none"> To obtain a sample of social workers from a government department and NPOs within the Tshwane Metropolitan Municipality identified as possible research sites for this research study. 	<p>Chapter Two (see 2.3) provides a description of how I went about obtaining a sample of social workers from the identified research sites in a specific geographic location. This section also contains an explanation of how I expanded the research population to include other NPOs, as well as the motivation for doing so. This exemplifies the use of the emergent design, allowed in the ambit of qualitative research (Thomas 2017:140; Creswell 2014:186; LaBanca 2011:1160).</p>
<ul style="list-style-type: none"> To conduct semi-structured interviews with the sampled social workers, aided by open-ended questions contained in an interview guide. 	<p>This objective was attained through preparing the participants for data collection as discussed in Chapter Two (see 2.7 and specifically Table 2.1), which details the specific steps taken to achieve this.</p>
<ul style="list-style-type: none"> To explore and describe the challenges experienced by social workers in terms of personal safety, as well as the coping strategies they employ to address these challenges. 	<p>This was attained through the data collection alluded to in the previous objective and discussed in detail in Chapter Two (see 2.7.1).</p>
<ul style="list-style-type: none"> To transcribe the data obtained and then sift, sort, and analyse it according to the 	<p>I discussed how I aimed to achieve this in Chapter One (see 1.5.5) and the reader is</p>

step-wise format proposed by Tesch (in Creswell 2014:198).	referred to Chapter Two (see 2.8), where a detailed explanation is given of how I followed the step-wise format proposed by Tesch (in Creswell 2014:198).
<ul style="list-style-type: none"> To describe as findings the challenges experienced by social workers in terms of personal safety, as well as the coping strategies they employ to address these challenges. 	A detailed description of the challenges experienced by social workers in terms of their personal safety; the coping strategies they employ to address these challenges; and the suggestions for promoting social workers' personal safety during social work service delivery is outlined in Chapter Three.
<ul style="list-style-type: none"> To interpret the data and conduct a literature review in order to verify the data. 	The findings were organised into themes and where applicable, sub-themes with storylines were used to support each theme. Literature was also used to confirm the findings presented. Evidence of this is to be found in Chapter Three of this report.
<ul style="list-style-type: none"> To draw conclusions and make recommendations pertaining to challenges experienced by social workers in terms of personal safety and coping strategies employed during social work service delivery, and forward suggestions for promoting social workers' personal safety during social work service delivery. 	This chapter (Chapter Four) points to the attainment of this objective, as it spells out the specific conclusions made, as well as the recommendations arrived at, together with the suggestions forwarded with a view to promote social workers' personal safety.

Part of Chapter One was devoted to introducing the research methodology and research methods proposed for investigating the identified research problem. I decided to follow a qualitative research approach, and adopted a collective case study design and a phenomenological research design, complemented by an explorative, descriptive, and contextual strategy of inquiry. I resolved to employ purposive sampling to recruit information-rich participants who would be in a position to provide answers to the research

questions. I elected to utilise semi-structured interviews to collect the data required. In this Chapter I also introduced the plan of how I envisaged to analyse the collected data and decided on the eight steps by Tesch (in Creswell 2014:198) to systemise this process. The way in which the trustworthiness of the research process and findings would be ensured was also introduced in this chapter. The ethical considerations I vouched to follow in this research endeavour were introduced, the salient concepts central to this research topic were clarified and contextualised, and a chapter-wise outline of the proposed dissertation was introduced.

4.2.2 Summary and conclusions for Chapter Two: A description of the application of the qualitative research plan

Chapter Two of this dissertation is devoted to providing a description of how the research plan, introduced in Chapter One, was applied. I arrived at the conclusion that the chosen approach was well-suited, given the fact that the qualitative research approach is geared towards studying participants in their natural surroundings, aiming to explore and describe the phenomenon being investigated by way of uncovering how the participants make sense of and interpret their experiences, trying to understand their social reality, and obtaining multiple sources of data (Mohajan 2018:24, 37; Creswell 2016:6-7; Hammarberg et al 2016:498; Marshall & Rossman 2016:2). It afforded me an opportunity to develop an in-depth understanding of the challenges experienced by social workers in terms of their personal safety and the coping strategies they employed during social work service delivery to address these challenges, and to gather suggestions from them regarding how social work safety can be promoted during social work service delivery.

As for the research design, this concept was introduced in Chapter One (see 1.4.2) and explained as the plan to be followed by the researcher for collecting and analysing evidence that will eventually lead to answer the research questions formulated in respect of the study (Yegidis et al 2018:100; Ragin, in Flick 2015:84). As per the original plan, I chose the collective case study and phenomenological research designs – designs inherent to the qualitative research approach. In addition, I also adopted an explorative, descriptive, and contextual strategy of inquiry.

Upon reflection, I arrived at the following conclusions about the research designs I employed:

- The collective case study design was a good match, as it allowed me to study and gain insight into *the case of social work safety in the execution of social work service delivery from the perspectives of multiple participants* (Yegidis et al 2018:132; Creswell & Poth 2018:98; Thomas 2016:121, 172; Stake 2005:445).
- As the phenomenological research design concerns itself with exploring personal experiences and how individuals make sense of the world around them, as well as how they transform their experiences into consciousness (Mohajan 2018:29; Perry 2013:263; O'Reilly & Kiyimba 2015:14; Turner et al 2013:307), I reached the conclusion that this design was a good fit, as it allowed participants to explore and describe personal experiences where their safety had been compromised and how they coped in these circumstances.

The explorative, descriptive, and contextual strategies of inquiry employed also proved to be appropriate, especially given the topic under investigation and the research objectives formulated for the study. This is because the explorative design was necessitated by the fact that I had little knowledge regarding the topic under study (Yegidis et al 2018:106; Thomas 2016:126; Babbie 2013:94). I conclude that this design fitted the study perfectly, especially because I set out to explore the challenges experienced by social workers in terms of their personal safety and the coping strategies they employed to address these challenges during social work service delivery, and allowed invited the participants to explore suggestions for promoting social workers' personal safety during social work service delivery – a topic that, given the state of the knowledge available on it, would be deemed as being “ill-researched” (Creswell 2016:88). The descriptive design also emerged as a good fit because of its usefulness in accumulating data, enabling me to give a detailed description of the topic under study (Yegidis et al 2018:107). Apart from allowing participants to explore and describe the phenomenon under investigation, it allowed me to describe, as findings, the aspects explored and described by the participants, enabling me to answer the research questions formulated at the outset of the study and, as part of the recommendations, forward suggestions to promote the personal safety of social workers. In a similar fashion, and by way of conclusion, the contextual design was a good fit as it enabled me to understand the social workers' experiences as determined by their context

and their natural settings (Hennink et al 2011:9). As such, a reflection on the research designs employed points to their suitability for this research study.

The emergent nature of the qualitative research approach must also be reflected upon. Chapter Two included an explanation of this concept and how it was applied in this study (see 2.3). Initially, the research plan for this study was premised on collecting data from the following research sites: the DSD, the KWO, and the TLF. As highlighted in Chapter Two (see 2.6), it was not possible to recruit participants from the KWO, as they indicated that their social workers did not meet one of the inclusion criteria spelt out in Chapter One (see 1.5.1). Thus, I had to adjust the original research plan to include other research sites that were not initially part of the study, namely: an unnamed NPO and the CWL. Unlike in quantitative research, the research plan in qualitative research is not cast in stone, but rather emergent, and upon entering the field the researcher may change research sites based on the non-availability of participants (Creswell 2014:186). This flexibility in the research plan augured very well for the research study, as it made it possible to widen the pool of participants; a feat that would not have been possible if a more rigid research plan had been adopted.

In Chapter Two I also described how the chosen research methods were applied (see 2.5). The population for the study was geographically demarcated to the Tshwane region in the Gauteng Province of South Africa, which was a wise decision cost- and time-wise. An account was provided on how each of the 14 participants was purposively recruited and prepared for data collection. The method of data collection, with reference to the use of semi-structured interviews with the aid of an interview guide containing mainly open-ended questions, was elaborated on. I can conclude that the purposive selection of the participants as guided by inclusion criteria was a sensible decision, as it enabled me to recruit information-rich participants that could provide detailed information to answer the research questions formulated in respect of this study. The participants contributed to the social work body of knowledge pertaining to the personal safety challenges that social workers face and the coping strategies that they employ during social work service delivery, and offered suggestions to promote the personal safety of social workers.

The semi-structured interviews conducted with each of the participants and the detailed responses given by them led me to the conclusion that the method of data collection adopted for this study was appropriate and well-suited to the study. I arrived at the conclusion that the use of specific interviewing skills, with reference to attentive listening, probing, and asking follow-up questions, encouraged the interviewees to open up and elaborate on what they have shared (Edwards & Holland 2013:72), and allowed me to obtain detailed information. This, in turn, enabled me to answer the research questions formulated at the beginning of this study.

As highlighted in Chapter One (see 1.5.5), I utilised the eight steps of Tesch (in Creswell 2014:198) to facilitate the process of data analysis. I conclude that this step-wise format simplified the daunting task of engaging with the voluminous amount of data that was collected, and assisted me in analysing the data in a systematic and orderly fashion. I further concluded that using the services of an independent coder to analyse the same data separately and compare the results served as a dependability audit to validate the research findings (Anney 2014:278). On reflection, I can conclude that the strategies employed, with reference to triangulation of data sources, peer debriefing, the provision of a detailed research plan (see 1.5.6), and a comprehensive account how this plan was executed (see Chapter Two), together with a utilisation of an independent coder to independently analyse the data set, all served to ensure the trustworthiness of the research study and the findings presented in Chapter Three of this study. These strategies individually and collectively enhanced the study's credibility, transferability, dependability, and conformability, and Table 2.4 showcases evidence that the study was conducted in a trustworthy, reliable, and rigorous manner (Hays et al 2016:173).

Being cognisant of the fact that social researchers like myself have a moral obligation to conduct research in an ethical manner and treat the research participants with integrity, dignity, and respect (Thomas 2017:52; Punch 2016:23), I provided an account in Chapter Two (see 2.9) of how I applied the ethical principles of obtaining the participants' informed consent, ensuring confidentiality and anonymity, and managing information. I also made arrangements for the provision of debriefing in the event that it would be requested by the participants. I can conclude that I made a concerted effort to ensure that my ethical conduct permeated all stages of the research process, from the

formulation/planning stage and the research design stage of the research study, to the actual data collection stage and, finally, the reporting stage of the research study (Wellington 2015:113). Upon reflection, I arrived at the conclusion that adhering to the mentioned ethical considerations made it possible for the research participants to willingly participate in the research study. Being transparent about the aims of the study, what their participation would entail, and the potential benefits of their participation, as well as the fact that they could pull out of the study any point without having to feel obliged to complete the interviews, put the participants in the driving seat, which in turn facilitated their willingness to voluntarily participate in this research project.

4.2.3 Summary and Conclusions for Chapter Three: A description of the research findings

The focus of the discussion now turns to Chapter Three, as I briefly summarise the research findings presented in this chapter and present the conclusions I have drawn in respect of the findings. Concerning the demographic profile of the participants (see 3.2), 14 social workers were purposively recruited for participation in this research project according to the criteria for inclusion as set out in Chapter One (see 1.5.1). The participants' ages ranged from 26 to 56 years of age and their practice experience as social workers span from one to 36 years. In terms of qualifications, all 14 participants are in possession of a Bachelor's degree in Social Work. Racially, 12 of the participants are Black and two are White. The participants consisted of three males and 11 females, and I can conclude that the dominance of females amongst the research participants is in line with observations by the AASW (2019), Alpaslan (2019:349), and Khunou et al (2012:120), who all hold the view that "the caring professions", such as social work, teaching, and nursing, are regarded as female-orientated professions. These aforesaid authors confirm this to be the case for social work locally and internationally.

The rest of Chapter Three is devoted to the thematic presentation of the research findings. In the discussion below, the findings related to each theme will be briefly summarised and the conclusions arrived at will be presented.

- **Theme 1: The participants perform generic social work**

From the participants' accounts provided, I can conclude that all of them were involved in delivering generic social work services. All the participants offer services to families and children (Truter et al 2017:712; Engstrom 2016:13; DSD 2013:36), with some of them employed as child welfare social workers or statutory social workers (Griffiths & Royse 2017:73). Some of the participants indicated that they also work at intake level. Others mentioned their involvement in foster care (Clapton et al 2013:811; Böning & Ferreira 2013:519) and working as child and youth care workers. Community work was also referred to by some as part of their job responsibilities (Dhavaleshwar 2016:62; DSD 2013:21). The job descriptions they provided match what is referred to as "generic social work practice". This means that they perform all three primary social work methods, namely, case work, group work, and community work (Segal et al 2013:149; Staniforth et al 2011:193). Kirst-Ashman (2017:115) defines the generalist (or generic) approach to social work practice as follows: "The application of an eclectic knowledge base, personal values, and a wide range of skills to target individual, family, group, organisational or community systems for change within the context of five primary processes" (Cf. Zastrow 2014:43; Segal et al 2013:149). Generic social work practitioners, according to various scholars (Stranz et al 2016:174; Choate & Engstrom 2014:371; Stranz & Wiklund 2013:549) render social work services in the fields of family and child welfare; child protection; social assistance; and work with the elderly, persons with physical and mental disabilities, and persons suffering from substance use disorders.

- **Theme 2: Participants' understanding of the concept "personal safety of social workers"**

Having read the responses that the participants gave with regards to this theme, I concluded that they have a good understanding of what the concept 'personal safety' entails. I also concluded that addressing personal safety is critical to enhancing the well-being of social workers (Kim & Hopkins 2017:6). In their descriptions of the meaning of the concept "personal safety of social workers" they shared their views on the responsibility of employer organisations to ensure the safety and security of their

employees (Bickley 2014:3). Their accounts contained sentiments around their opinion that the risks or threats of violence and harmful incidents in the workplace should be limited by their employers to ensure social workers' personal safety, and they emphasised the stark reality that their social work jobs exposed them to physical, emotional, psychological, and verbal harm (Kim & Hopkins 2017:1; Koritsas et al 2010:258; Waters & Raiden 2008:1056; Faria & Kendra 2007:142). Based on the accounts of the participants, I arrived at the conclusion that they commonly understood "personal safety" as being safe from harm while conducting their social work duties, whether in the office, in the community, or in service users' homes when they conduct home visits. For some, "personal safety" was also extended to include a safe and hazard-free work environment and buildings, and reliable vehicles to use in the discharge of their duties. Thus, I concluded that the participants were fully aware of the risks to their personal safety posed by their roles as social workers (Kim & Hopkins 2015:101; Robson et al 2014:924; BASW 2012:10).

- **Theme 3: Social workers' experiences of incidents during service delivery where their personal safety was compromised**

From the participants' accounts on challenges experienced in terms of where their safety was compromised while executing their social work duties, I can conclude that social work is a risky profession with social workers having to operate in risky situations (Winstanley & Hales 2015:25; Robson et al 2014:924; NASW 2013:5; Whitaker & Arrington 2008:15). In substantiating this conclusion, the participants relayed experiences where they were physically attacked and at the receiving end of the aggressive behaviour of distressed, frustrated, and hostile service users whose (sometimes unrealistic) service expectations and needs were not met. These attacks and displays of aggression were not only limited to the service users' homes, but transpired in the social work offices and whilst the social workers were on the road during fieldwork. The findings further highlighted the high prevalence rate of physical, verbal, and emotional attacks on social workers by service users (Raczova & Lovasova 2017:60; Robson et al 2014:924-936; Enosh et al 2013:1123; Harris & Leather 2012:851; Koritsas et al 2010:258; Winstanley & Hales 2008:103). I also reached the conclusion that the social workers employed in the field of child

protection services are more frequently exposed to verbal and physical threats and abuse by service users, especially when they have to remove children in need of care and usually when service users are at their worst and experiencing severe challenges, thus making them susceptible to frustration, anger, and aggression in the process (Lamothe et al 2018:318; Lynch 2017:1; Kim & Hopkins 2017:1). It became evident that witnessing and/or experiencing service user violence and aggression has a negative impact on the social workers' functioning, leaving them feeling exposed, helpless, embarrassed, and defenceless, as well as causing a lack of self-regard (Jussab & Murphy 2015:290; Lanctôt & Guay 2014:495-496). The participants' accounts also brought me to the conclusion that social workers that have to conduct home visits, especially in unsafe communities that are often riddled by crime and violence, are more at risk of having their personal safety being compromised (Pace 2015:5).

- **Theme 4: Coping strategies employed by the participants to deal with incidents when their personal safety was compromised**

The accounts of the participants resulted in me arriving at the conclusion that social workers employ various coping strategies as a way of dealing with the incidents and situations in which their personal safety was compromised. The participants navigated each incident as a “transition”, based on Schlossberg’s (1981) Transition Process Model, and in the process of facilitating their “moving through” the transition (Schlossberg 2011:160) they used what this author refers to as “support” and “strategies”. They processed the incidents where their safety was compromised in an effort to change the course of events by enlisting a convoy of organisational and interpersonal support (Pearlin & Schooler, in Schlossberg 2011:161; Khan, in Schlossberg 1981:10), such as speaking to a supervisor, colleagues, friends, or a therapist. In addition, I arrived at the conclusion that some of the participants used their faith as a coping strategy; an important ingredient providing support in highly stressful situations, helping one to bounce back after a crisis (Pearlin & Schooler, in Schlossberg 2011:161; Allen 2017:85). It became evident that for some, remaining calm and withdrawing from the unsafe situation was the best coping strategy, and I also concluded that others adopted preventative strategies to ensure their personal

safety, such as enlisting the help of the police and organising a buddy-system when conducting home visits (Hardy 2016:18).

A final conclusion I arrived at on the aspect of the coping strategies employed by the participants to process the incidents where their personal safety was compromised, was the fact that they employed what Papalia, Sterns, Feldman and Camp (2007:425) would classify as “constructive ways of coping”, as these coping strategies assisted them in giving meaning to the incidents that happened in a way that it did not harm or derail their relationships with the self or others.

- **Theme 5: Participants’ accounts of the current measures put in place to ensure social workers’ personal safety**

Based on the accounts of the participants, I arrived at three main conclusions. Firstly, employer organisations currently do not have clearly operationalised measures in place to ensure social workers’ personal safety within the “situation” (with reference to the environments where they have to execute their duties); in terms of “support”; and as far as safety “strategies” are concerned (Schlossberg 2011:160). This trend corresponds with what is documented in the literature consulted (NASW 2013:7; Alther 2012:1; McMahon 1998:3). Secondly, I noticed that even though there were security measures in place at some of the organisations (mainly security officers), the social workers in those organisations doubted their effectiveness and felt that they could be improved upon. They indicated that most of the security officers were only conducting general security checks at the entry points to the building and most were unarmed, thus making the social workers question their ability to protect them. Two participants, respectively, mentioned having tracking systems in cars and pepper spray as the only safety measures in place. Thirdly, and in contrast, only one participant spoke about the existence of effective measures being in place at her employer organisation to ensure the social workers’ personal safety, referring to panic buttons, a security fence, barbed wire, and security gates. Upon reflection and based on the accounts of the participants, I arrived at the conclusion that the DSD has some security measures in place, however, the social workers in the DSD feel that these measures are inadequate and need to be improved on to ensure that their personal safety is

promoted. Taking into consideration the accounts of the participants, I also arrived at the conclusion that the NPOs employing the majority of the social workers in this study have varying degrees of measures promoting the personal safety of their social workers, with some reportedly lacking in this regard and needing to bolster the measures in place. It became evident that the organisations to which the participants were attached did not have standardised measures in place to promote the personal safety of the social workers. This trend has also been noted in the literature consulted and thus standardised measures to promote the personal safety of social workers are widely advocated for (NASW 2013:7; Alther 2012:1; McMahon 1998:3).

- **Theme 6: Participants' perspectives on who should be responsible for ensuring the personal safety of social workers**

On this aspect, and given the participants' responses, I can conclude that the employer organisations and the social workers are jointly responsible for ensuring the social workers' personal safety. Some held the view that the employer was solely responsible for ensuring the social workers' safety (IFSW 2012:4; Alther 2012:1; McMahon 1998:3) by creating safe working spaces and conditions. In the event that a social worker's personal safety is compromised, employers have to provide "institutional support" (Schlossberg 2011:160) to assist the affected social worker to process the experienced event. In contrast, some participants were of the view that the social workers were to take responsibility for their own safety. In addition, and deduced from the participants' trains of thought and the literature consulted, I concluded that the involvement of communities and service users could assist in promoting the personal safety of social workers while conducting their duties (NASW 2013:8; IFSW 2012:8)

- **Theme 7: Social workers' suggestions about what can be done to ensure the personal safety of social workers**

I conclude that the participants had a variety of suggestions, mostly directed at the employer organisations, regarding what can be done to ensure the personal safety of social workers. These suggestions not only entail ensuring the personal safety of social workers as preventative measures, but also providing support in cases where the social

workers' personal safety has been compromised. These suggestions speak to the aspects of the "situation", the "self", "support", and "strategies" (or the 4-S system) in Schlossberg's Transition Process Model (Gbogbo 2020:3; Burch 2020:24; Schlossberg 2011:160). In Table 4.3 below, by way of summarising these suggestions, I will link them to the 4-S system alluded to above.

Table 4.3: Summary of the participants' suggestions about what can be done to ensure the personal safety of social workers linked to the 4-S system in Schlossberg's Transition Process Model

Suggestion speaking to the facet of ...	Participants' suggestions about what can be done to ensure the personal safety of social workers
Support – specifically institutional support.	<i>Pay social workers a danger allowance (Ntjana 2014:89; DSD 2009:40; Earle 2008:72) to be used, amongst other things, for counselling and debriefing and to pay for medical costs and losses incurred when their personal safety has been compromised.</i>
Self – this speaks to how the social workers themselves should educate management.	<i>Raise management's awareness about how social workers' personal safety is compromised.</i>
Self – social workers should take joint responsibility for their own safety.	<i>Inform colleagues about your whereabouts (Hardy 2016:18-19; IFSW 2012:11).</i>
Self – social workers should take joint responsibility for their own safety. Support – institutional policy should be developed speaking to this.	<i>Do not go out alone on home visits; develop a buddy-system (Hardy 2016:18-19); and compile a risk-rating for the communities where social workers have to execute home visits and engage in community work and activities.</i>
Support – the employer organisations should offer such training or arrange for it.	<i>Train social workers in self-defence and de-escalation, and how to ensure their personal safety (Kim & Hopkins 2017:7; Engstrom 2016:136; Kim & Hopkins 2015:112; Ringstad 2005:312; Newhill 1995:635).</i>
Support – institutional support and policies addressing this suggestion.	<i>Employers must bolster their initiatives and prioritise social workers' personal safety.</i>
Support – institutional.	<i>Provide social workers with panic buttons, or install these in offices, along with security cameras (Hardy 2016:18 Perkins et al 2017:2).</i>
Support – institutional.	<i>More security guards armed with guns and batons, as well as thorough security checks of service users to enhance the social workers' personal safety (Hardy 2016:18; McMahon 1998:3).</i>

Support – institutional.	<i>Facilitate access to counselling and debriefing (Moyane 2016:75).</i>
Support – institutional. Situation – speaking to the environment where the social workers have to execute their duties.	<i>Miscellaneous suggestions to ensure the social workers' personal safety – clean offices; road-worthy cars; and the provision of cell phones and GPS, especially when they need to conduct home visits (Hardy 2016:18-19; Bickley 2014:42).</i>

Before presenting the recommendations emerging from the research findings and the participants' suggestions, the limitations inherent to this study need to be noted.

4.3 LIMITATIONS

A number of limitations existed in this study. These will be listed and explained below:

- **Limitations pertaining to the non-generalisability of the research findings:** The use of a qualitative research approach to develop an in-depth understanding of the challenges experienced by social workers where their personal safety was compromised and the coping strategies they employed to manage these during social work service delivery, as well as the suggestions for promoting the personal safety of social workers, presents a limitation in that the research was limited to a specific context and can therefore not be applied to a broader context. This is also a limitation because I purposefully sought out research participants that could provide detailed information on the topic under study (Yegidis et al 2018:216; Oppong 2013:203; Maxwell 2013:97; Devers & Frankel 2000:264).
- **Limitations pertaining to the demographic profiles of the research participants:** The research participants were predominantly female, Black African social workers, with only two White social workers and only three male social workers, and this presents a limitation.
- **Limitations pertaining to the NPOs serving as gatekeepers:** Some NPOs did not agree to partake in the research study, as they felt that the topic under study would call into question their commitment to ensuring the personal safety of their social workers, thus this must be regarded as a limitation.

- **Limitations regarding the geographic location within which the research study was conducted:** As a result of resource constraints, the research study was limited to organisations operating in the Tshwane Metropolitan Municipality, in the Gauteng Province of South Africa, and this must be regarded as a limitation, as it does not allow for a multiplicity of voices in other localities to be considered.

The next section will provide the recommendations that emerged from the research study.

4.4 RECOMMENDATIONS

I will now proceed by forwarding recommendations that emerged from the research findings and the literature consulted, focusing on social work practice; social work education, training, and continuous professional development (CPD); and recommendations for further research.

4.4.1 Recommendations for social work practice aiming at promoting the personal safety of social workers

The recommendations for social work practice as informed by the research findings, in particular the participants' suggestions and the literature consulted, are presented in Table 4.4 below.

Table 4.4: Recommendations for social work practice aiming at promoting the personal safety of social workers

In view of promoting the personal safety of social workers, the following is recommended:	Empirical research finding that informs the recommendation
<ul style="list-style-type: none"> • The employers (namely, the DSD and the NPOs), the SACSSP, the organised labour union organisations representing social workers, and social workers themselves should develop uniform minimum standards and policies on – <ul style="list-style-type: none"> ○ secure, safe, clean, and hazard-free workspaces and environments preventing injury and illness; ○ safety protocols and practices when engaging with service users at the office and during home visits and in the community, such as informing colleagues where home visits will be conducted; not leaving keys in the door when seeing service users at the office; establishing a buddy-system; or establishing police and community networks when entering high-risk areas or investigating child abuse and molestation or domestic/community violence cases; ○ resources and equipment, and the provision thereof, to ensure the personal safety of social workers during home visits – i.e. road-worthy vehicles fitted with tracking devices; GPS to allow the accurate determination of geographical locations; cell phones; and panic buttons and pepper spray to use in self-defence; and ○ resources and the provision thereof to ensure social work safety in the workplace – i.e. armed and well-trained security officers; thorough security checks of service users; and panic buttons and security cameras in the office. 	<ul style="list-style-type: none"> – See Chapter Three: Sub-theme 7.10. – See Chapter Three: Sub-themes 7.3, 7.7, 7.10. – See Chapter Three: Sub-theme 7.7. – See Chapter Three: Sub-theme 7.7 & 7.8.

<p>– The employers (namely, the DSD and the NPOs) should arrange for and offer training programmes to all staff in their employ, not only social workers, in terms of –</p> <ul style="list-style-type: none"> ○ self-defence, de-escalation, and personal safety training; ○ informing them about the personal safety policies, protocols, and practices within the organisation; and ○ the use of resources and equipment ensuring their personal and communal safety. 	<p>– See Chapter Three: Sub-theme 7.5</p>
<p>– Social workers and their labour union representatives should, through all channels and avenues available, keep the management informed about the personal safety challenges facing social workers in the execution of their duties and hold them accountable to prioritise social workers’ personal safety.</p>	<p>– See Chapter Three: Theme 3; Sub-theme 7.2 & 7.6.</p>
<p>– The employers (namely, the DSD and the NPOs) should have a professional network of support available to offer counselling and debriefing to social workers whose personal safety has been compromised. In addition, they need to budget for such services when they are outsourced and allow social workers to access these services.</p>	<p>– See Chapter Three: Sub-theme 7.9.</p>

4.4.2 Recommendations for social work education and training, and continuous professional development

Regarding the aspect of social work education and training and CPD, I would like to propose the following recommendations:

- Institutions that offer social work education and training must incorporate safety training in their curricula, as most social workers indicated that they were not trained or prepared for the risks and dangers they are likely to face when entering the social work field as newly-qualified graduates (Kim & Hopkins 2017:7; Kim & Hopkins

2015:112; Ringstad 2005:312; Newhill 1995:635). This training could be in the form of safety awareness, self-defence training, and de-escalation training.

- Institutions and individuals that are accredited CPD providers in the social work sector must develop training programmes centred on personal safety training for social workers, specifically focusing on how to prevent, cope with, and manage incidents in which their personal safety is compromised. These can be offered in the form of workshops or seminars.
- Social work managers in various practice settings must receive training on personal safety and the roles they can play in enhancing their employees' personal safety. This would also assist in making managers aware of the dangers and risks that social workers face when they deliver services.

4.4.3 Recommendations for further research

This research study was borne out of my observations regarding the challenges faced by social workers in terms of their personal safety as I delivered social work services in various settings and the gap I discovered in the literature as I attempted to seek knowledge regarding this topic. Admittedly, this research study focused on a small sample size and a localised geographic area, thus there are various topics that I would like to recommend for further research. I will list these below:

- It would be prudent to investigate this topic at a national level to gain an understanding of the national situation regarding the personal safety of social workers; the challenges they face; and the coping strategies they employ to address these challenges; as well as the suggestions they have for promoting the personal safety of social workers.
- The perception of social work managers in various settings regarding the personal safety of social workers must be investigated, together with their responses to the challenges that social workers face in terms of their personal safety.

- The impact of the compromised personal safety of social workers on the social workers themselves, on the organisations that employ them, and on service delivery must also be investigated.
- Intervention design and development research is recommended for the development of safety models and programmes aimed at ensuring the personal safety of social workers, so as to inform social work practice.
- Research in view of the development of a module on safety training is recommended for inclusion in the undergraduate training of social work students before they enter the field for work-integrated learning.

The next section will provide a detailed chapter summary and serve as a conclusion to the study.

4.5 CHAPTER SUMMARY

In this final chapter of this dissertation, and based on the pointers provided by Faryadi (2019:779-780, 782) and Tribe and Tunariu (2017:65) on what to include in the final chapter of the research report, I presented a brief summary of what was covered in the previous three chapters. As part of the summary of Chapter One, I reaffirmed the research problem identified, the research questions formulated to address the identified problem, and in turn the research goals and objectives developed to answer the research questions. By way of conclusion I indicated that the identified research problem was addressed, the research questions were answered, and the goals of the study were realised. I summarised the essence of Schlossberg's Transition Process Model (1981) adopted as theoretical framework for the study and in summary introduced the research plan adopted for the study – all depicted in Chapter One. I then proceeded to give a brief summary of Chapter Two, focusing on describing how the research plan was applied and presenting the conclusion drawn in this regard. I provided a theme-wise summary of the research findings presented in Chapter Three, interspersing the conclusions that I arrived at. Before concluding Chapter Four by presenting recommendations for social work practice in view of promoting the personal safety of social workers, recommendations for education and

training and CPD, and recommendations for future research, I indicated the limitations inherent to this study.

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ADDENDA

ADDENDUM A: INFORMATION LETTER

Dear Colleagues,

I, Shingirayi Zimunya, the undersigned, am a social worker employed by Gauteng North Services to People with Disabilities (GN-SPD) as a generic social worker in the Tshwane region, and also a part-time Master's student in the Department of Social Work at the University of South Africa. In partial fulfilment of the requirements for the master's degree, I have to undertake a research project and have consequently decided to focus on the following research topic:

Challenges experienced by social workers in terms of personal safety and coping strategies employed during social work service delivery.

In view of the fact that you are exposed to, and have experience in delivering social work services whilst placing your personal safety at risk within the region, I humbly approach you with the request to participate in the study. For you to decide whether or not to participate in this research study, I will furnish you with information that will help you to understand the study (i.e. what the aims of the study are and why there is a need for this particular study). Furthermore, you will be informed about what your involvement in this study will entail (i.e. what you will be asked to do, the risks and benefits involved, and your rights as a participant).

I have decided to conduct a research project on this topic resulting from my observation that very little research has been conducted regarding the challenges experienced by social workers in terms of their personal safety and the coping strategies they employed during social work service delivery, with a view to offer suggestions for social workers. With this in mind, the following aim is formulated:

- To develop an in-depth understanding of the challenges experienced by social workers in terms of personal safety during social work service delivery, as well as the coping strategies they employed.

The data collection questions for the research study are as follows:

- What does your job as a social worker entail?
- What is your understanding of the concept “the personal safety of social workers”?
- Share with me your experiences where you felt your personal safety had been compromised during social service delivery (I will probe for information, focusing on the aspects of where, when, and what happened, as well as why it happened).
- What coping strategies did you employ to manage the challenges experienced in terms of your personal safety during social work service delivery?
- What safety measures do your employers have in place in terms of the personal safety of social workers?
- Who should be responsible for the personal safety of social workers? Motivate your answer.
- Any suggestions on how the personal safety of social workers can be promoted?

It is hoped that the information gathered from this study will contribute to the improvement of personal safety for social workers and raise awareness on the challenges that social workers face during the discharge of their duties, as well as the coping strategies that they employ within the region. Should you agree to participate, you will be requested to participate in a face-to-face interview that will be conducted at your place of employment and at your convenience. It is estimated that the interview(s) will last approximately 1 hour.

With your permission, the interview will be audio-taped. The recorded interviews will be transcribed word-for-word. Your responses in the interview (both the taped and transcribed versions) will be kept strictly confidential. The audiotape will be coded to protect any identifying information. The tapes will be stored in a locked office, in a safe at my place of residence and only I will have access to them. The transcripts (without any identifying information) will be made available to my research supervisor, a translator (if they need to

be translated into English), and an independent coder with the sole purpose of assisting and guiding me with this research undertaking.

My research supervisor, the translator, and the independent coder will each sign an undertaking to treat the information shared by you in a confidential manner. The independent coder is someone who is well-versed and experienced in analysing information collected by means of interviews and is appointed to analyse the transcripts of the interviews independently of the researcher to ensure that the researcher will report the participants' accounts of what has been researched. The audiotapes and the transcripts of the interviews will be destroyed upon the completion of the study. Identifying information will be deleted or disguised in any subsequent publication and presentation of the research findings.

Please note that participation in the research is completely voluntary. You are not obligated to take part in the research. Your decision to participate, or not to participate, will not affect you in any way now or in the future, and you will incur no penalty and/or loss to which you may otherwise be entitled. Should you agree to participate and sign the information and informed consent document herewith, as proof of your willingness to participate, please note that you are not signing your rights away.

If you agree to take part, you have the right to change your mind at any time during the study. You are free to withdraw this consent and discontinue participation without any loss of benefits. However, if you do withdraw from the study, you will be requested to grant me an opportunity to engage in informal discussion with you so that the research partnership that was established can be terminated in an orderly manner. As the researcher, I also have the right to dismiss you from the study without regard to your consent if you fail to follow the instructions or if the information you divulge is emotionally sensitive and upsets you to such an extent that it hinders you from functioning physically and/or emotionally in a proper manner. Furthermore, if participating in the study at any time jeopardises your safety in any way, you will be dismissed for your own safety. Should I conclude that the information you have shared left you feeling emotionally upset, or perturbed, I am obliged to refer you to a counsellor for debriefing or counselling (should you agree). You have the

right to ask questions concerning the study at any time. Should you have any questions or concerns about the study, please contact me: **Mr Shingirayi Zimunya** at **079 078 5121**

Please note that this study can only be conducted following approval by the Research and Ethics Committee of the Department of Social Work, UNISA. Without the approval of this committee, the study cannot be conducted. Should you have any questions and queries not sufficiently addressed by me as the researcher, you are more than welcome to contact the Chairperson of the Research and Ethics Committee of the Department of Social Work at UNISA. His contact details are as follows: Prof AH (Nicky) Alpaslan, telephone number 012 429 6739 or email alpasah@unisa.ac.za.

If after you have consulted the researcher and the Research and Ethics Committee in the Department of Social Work at UNISA their answers have not satisfied you, you may direct your questions/concerns/queries to the Chairperson of the Human Ethics Committee, College of Human Science at: PO Box 392, UNISA, 0003. Based upon all the information provided to you above, and being aware of your rights, you are asked to give your written consent should you want to participate in this research study by signing and dating the information and consent form provided herewith and initialling each section to indicate that you understand and agree to the conditions. Thank you for your participation.

Kind regards,

Mr Shingirayi Zimunya

Researcher

Contact details: 071 099 3560

Email: shingirayiz@gmail.com; 51677938@mylife.unisa.ac.za

ADDENDUM B: INFORMATION AND INFORMED CONSENT DOCUMENT

TITLE OF THE RESEARCH PROJECT: SOCIAL WORKERS' PERSONAL SAFETY CHALLENGES AND COPING STRATEGIES EMPLOYED DURING SOCIAL WORK SERVICE DELIVERY: SUGGESTIONS FOR PROMOTING SOCIAL WORKERS' PERSONAL SAFETY

REFERENCE NUMBER:	<u>5167 7938</u>
INVESTIGATOR/RESEARCHER:	<u>S. ZIMUNYA</u>
ADDRESS:	<u>887 WONDERPARK ESTATE, FIRST AVENUE,</u> <u>KARENPARK, 0118</u>
TELEPHONE NUMBER:	<u>079 078 5121</u>

DECLARATION BY OR ON BEHALF OF THE PARTICIPANT:

I, the undersigned, _____ (name),
 [ID No: _____] the participant or in my capacity as
 _____ of the participant,
 [ID No _____] of
 _____ (address)

HEREBY CONFIRM AS FOLLOWS:

1. I, the participant, was invited to participate in the above research project which is being undertaken by SHINGIRAYI ZIMUNYA of the Department of Social Work in the School of Social Science and Humanities at the University of South Africa.
2. The following aspects have been explained to me/the participant:
 - 2.1 Aim: I was informed by the researcher that the aim of the study is –
 - To develop an in-depth understanding of the challenges experienced by social workers in terms of personal safety during social work service delivery, as well as the coping strategies they employed.
 - To proffer suggestions for promoting social workers' personal safety during social work service delivery.

2.2 I understand that:

My participation in this study is completely voluntarily and that I can withdraw at any time, without any penalty.

3. Risks:

I have been informed that I will have to share information about my social work service delivery in unsafe and volatile environments and speak about situations where my safety has been compromised, and that divulging this information may leave me feeling traumatised. I have also been informed that should I in any way feel unsettled about sharing this information, the researcher will arrange for me to go for counselling and debriefing, to be conducted by a social worker contracted for this purpose.

4. Possible benefits as a result of my participation in this study:

I have been informed that by participating in this research study I, through sharing my experiences, coping strategies, and suggestions for promoting social worker safety, would contribute to the body of knowledge on this topic, and also inform and influence social work employers and other social workers about social worker safety during service delivery and how it could be pursued.

5. Confidentiality: My identity will not be revealed in any discussion, description or scientific publications by the investigators/researchers.

6. Initial access to findings: Any new information/benefit that develops during the course of the study will be shared with me.

7. Voluntary participation/refusal/discontinuation: My participation is voluntary. My decision whether or not to participate will in no way affect me now or in the future.

The information above was explained to me, the participant, by _____ in Afrikaans/English/Sotho/Xhosa/Zulu/other

_____ (indicate other language) and I am in command of this language/it was translated to me satisfactorily by _____.

I was given the opportunity to ask questions and all these questions were answered satisfactorily.

8. No pressure was exerted on me to consent to participate and I understand that I may withdraw from the study at any stage without any penalty.
9. Participation in this study will not result in any additional cost to me.

I HEREBY CONSENT VOLUNTARILY TO PARTICIPATE IN THE ABOVE PROJECT.

Signed/confirmed at _____ on _____ 20__

Signature or right thumbprint of participant: _____

Signature of witness: _____

**ADDENDUM C: CONSENT FORM REQUESTING PERMISSION TO PUBLISH
AUDIOTAPES AND VERBATIM TRANSCRIPTS OF AUDIOTAPE
RECORDINGS**

As part of this project, I have made an audio recording of the data collection interview conducted with you. I would like you to indicate (with ticks in the appropriate blocks next to each statement below) what uses of these records you are willing to consent to. This is completely up to you. I will use the records only in ways that you agree to. No names will be identified in any of these records.

1. The records can be studied by the research team and quotations from the transcripts of the recordings can be used in the research report. ☐
2. The records (i.e. quotations from the transcripts of the recordings) can be used for scientific publications and/or meetings. ☐
3. The written transcripts can be used by other researchers. ☐
4. The records (i.e. quotations from the transcripts of the recordings) can be used in public presentations to non-scientific groups. ☐
5. The records can be used on television or radio. ☐

Signature of participant

ADDENDUM D: STATEMENT AND DECLARATION BY OR ON BEHALF OF THE INVESTIGATOR(S)

I, Shingirayi Zimunya, declare that I have explained the information given in this document to _____ (name of participant) and/or his/her representative _____ (name of representative); he/she was encouraged and given ample time to ask me any questions; this conversation was conducted in Afrikaans/English/Sotho/Xhosa/Zulu/other _____ (indicate other language) and no translator was used/this conversation was translated into _____ (language) by _____ (name).

Signed at _____ on _____ 20____

Signature of investigator/representative: _____

Signature of witness: _____

DECLARATION BY TRANSLATOR

I, _____, confirm that I translated the content of this document from English into _____ to the participant/participant's representative; I explained the content of this document on the Practical Guidelines on Ethics in Social Work Research to the participant/participant's representative; and I also translated the questions posed by _____ (name), as well as the answers given by the investigator/representative, and conveyed a factually correct version of what was related to me.

Signed at _____ on _____ 20____

Signature of translator: _____

Signature of witness: _____

IMPORTANT MESSAGE TO PARTICIPANT/REPRESENTATIVE OF PARTICIPANT

Dear Participant/Representative of participant,

Thank you for your/the participant's participation in this study. Should an emergency arise at any time during the study as a result of the research, or you require any further information with regard to the study, kindly contact SHINGIRAYI ZIMUNYA at telephone number 071 099 3560/ 079 078 5121.

ADDENDUM E: RISK-ASSESSMENT TOOL

RESEARCH ETHICS – RISK ASSESSMENT TOOL			
5.1	Does your research include the direct involvement of any of the following groups of participants? (refer to section 4 in the SOP)	YES	NO
<i>Place an 'x' in the tick box [if yes, provide details in the space allocated for comments]</i>			
a) Children or young people under the age of 18			X
b) Persons living with disabilities (physical, mental and/or sensory)			X
c) Persons that might find it difficult to make independent and informed decisions for socio, economic, cultural, political and/or medical reasons			X
d) Communities that might be considered vulnerable, thus finding it difficult to make independent and informed decisions for socio, economic, cultural, political and/or medical reasons			X
e) People who might be vulnerable for age related reasons, e.g. the elderly			X
f) UNISA staff, students or alumni			X
g) Persons whose native language differs from the language used for the research			X
h) Women considered to be vulnerable (pregnancy, victimisation, etc.)		X	
i) Plants			X
j) Molecular or cell research			X
k) Animals			X
l) Environmentally related research			X
m) Other. Please describe.			
Comments: <p>As social work is a female-orientation profession, and the topic is about social workers' personal safety, the data collected may uncover instances where they were victimised in the line of duty.</p>			

5.2	Does your research involve any of the following types of activity?	YES	NO
<i>Place an 'x' in the tick box [if yes, provide details in the space allocated for comments]</i>			
a)	Collection, use or disclosure of information WITHOUT the consent/assent of the individual or institution that is in possession of the required information, i.e. will be conducted without the knowledge of the participants (with the exception of aggregated data or data from official databases in the public domain)		X
b)	Causing discomfiture to participants beyond normal levels of inconvenience		X
c)	Deception of participants, concealment or covert observation		X
d)	Examining potentially sensitive or contentious issues that could cause harm to the participants	X	
e)	Research which may be prejudicial to participants or may intrude on the rights of third parties or people not directly involved		X
f)	Using intrusive techniques, e.g. audio-visual recordings without informed consent		X
g)	Study of or participation in illegal activities by participants that could place individuals and/or groups at risk of criminal or civil liability or be damaging to their financial standing, employability, professional or personal relationships.		X
h)	Innovative therapy or intervention		X
i)	Personal information collected directly from participants		X
j)	Personal (identifiable) information to be collected about individuals or groups from available records (e.g. staff records, student records, medical records, etc.) and/or archives		X
k)	*Psychological inventories / scales / tests		X
l)	Activities which may place the researcher(s) at risk		X
m)	Collecting physical data from the participants such as body measurements, blood samples, etc.		X
n)	Collecting physical samples from animals such as blood, etc.		X
o)	Harvesting indigenous vegetation		X

p) Harvesting vegetation or soil from privately owned land		X
q) Other. Please describe.		X
Comments: Given the fact that the researcher will be investigating a sensitive topic, which will require the participants to share their accounts of social work service delivery in unsafe and volatile environments, it may cause secondary traumatisation. Thus, the researcher has arranged for debriefing sessions to be conducted by a social worker contracted for this purpose, should the need for this arise.		

**Please add details on copyright issues related to standardised psychometric tests and registration at the HPSCA of test administrator if test administration is in South Africa or of an equivalent board if administration is non-South African.*

5.3	Does any of the following apply to your research project?	YES	NO
<i>Place an ' x' in the tick box [if yes, provide details in the space allocated for comments]</i>			
a)	Reimbursement or incentives to any participants		X
b)	Financial obligations for the participants as a result of their participation in the research		X
c)	Financial gains to be anticipated by any of the involved researchers		X
d)	Any other potential conflict of interest for any of the researchers (real or perceived personal considerations that may compromise a researcher's professional judgement in carrying out or reporting research, such as conducting research with colleagues, peers or students)		X
e)	Research will make use of UNISA laboratories		X
f)	Research will be funded by UNISA or by an external funding body		X
Comments: 			

5.4	Guided by the information above, classify your research project based on the anticipated degree of risk. [The researcher completes this section. The
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<p><i>ERC critically evaluates this benefit-risk analysis to protect participants and other entities.]</i></p> <p><i>Place an 'x' in the tick box</i></p>							
Category 1 Negligible		Category 2 Low risk	X	Category 3 Medium risk		Category 4 High risk	
<p>(a) Briefly justify your choice/classification</p> <p>As the researcher has identified only two possible areas of risk, and has taken measures to limit the possible harm, this study is rated in the low risk category.</p>							
<p>(b) In medium and high-risk research, indicate the potential benefits of the study for the research participants and/or other entities.</p>							
<p>(c) In medium and high-risk research, indicate how the potential risks of harm will be mitigated by explaining the steps that will be taken (e.g. referral for counselling, debriefing, etc.).</p>							

ADDENDUM F: REQUEST FOR DEBRIEFING SERVICES

Dear Mr Kgashane Johannes Malesa,

Re: Request for Debriefing Services

My name is Shingirayi Zimunya and I am currently registered for a Master of Social Work degree at the University of South Africa, student number 5167 7938. As part of my studies, I am required to conduct research and write a research report. In that regard, I am humbly requesting that you assist me with the debriefing of my research participants, should it become necessary for them to receive such debriefing. The research title is: **SOCIAL WORKERS' PERSONAL SAFETY CHALLENGES AND COPING STRATEGIES EMPLOYED DURING SOCIAL WORK SERVICE DELIVERY: SUGGESTIONS FOR PROMOTING SOCIAL WORKERS' PERSONAL SAFETY**. The research study will be qualitative in nature and will employ the use of interviews as a data collection method. The research will be conducted in Tshwane and will cover three institutions, namely, the Department of Social Development Tshwane Regional Office, the Kungwini Welfare Organisation, and the Tshwane Leadership Foundation, all of which are within easy reach.

The research goals are:

- To develop an in-depth understanding of the challenges experienced by social workers in terms of personal safety during social work service delivery, as well as the coping strategies they employed.
- To proffer suggestions for promoting social workers' personal safety during social work service delivery.

The research study will only be conducted following the approval of the UNISA Research and Ethics committee, which follows strict ethical guidelines and ensures that research participants are protected from harm. Your wealth of experience in the social work field makes you a suitable individual to conduct the debriefing of research participants, as you are familiar with the methods and strategies employed in debriefing.

Should you be willing to assist me in this regard, please accept my request in a formal letter, as I have to prove that I have engaged you in this regard. If you have any further enquiries, please contact me via the contact details given below. Your assistance will be greatly appreciated.

Kind regards,

Shingirayi Zimunya

Master of Social Work Student

079 078 5121

51677938@mylife.unisa.ac.za

ADDENDUM G: ACCEPTANCE LETTER FROM DEBRIEFER

ENQ: MALESA KGASHANE JOHANNES TEL : (012) 429 4780

maleskj@unisa.ac.za

Dear Mr Shingirayi Zimunya,

Re: REQUEST FOR PARTICIPANTS' DEBRIEFING SERVICES

This letter serves as a confirmation that I Mr. Malesa Kgashane Johannes with SACSSP registration no: 10-30065 have accepted your requisition regarding the debriefing services. I am willing to support your research participants with such services without any charge.

You are requested to remind me at least a week before when data collection begins so that one can be ready to receive your participants when the need arise.

Wishing you great success with your studies.

Kind regards,

Mr. K.J. MALESA

Contact details:

Date: 2017/08/12

Email: maleskj@unisa.ac.za

Office line: 012-4294780

Cell: 0838790697

ADDENDUM H: PERMISSION LETTERS TO PUBLISH THE NAMES OF ORGANISATIONS IN THE RESEARCH REPORT

From: Wayne Renkin <wayne@tlf.org.za>
Sent: Friday, 17 July 2020 09:31
To: Shingirayi Zimunya <51677938@mylifeunisaac.onmicrosoft.com>
Cc: wilna@tlf.org.za <wilna@tlf.org.za>
Subject: Re: Permission to Name TLF in Masters Research Thesis

Dear Shingirayi,

You are welcome to name our organisation as a participant organisation as long as it is done as how you spell it out

Good luck with the write up of your data and completing your thesis

Kind Regards
Wayne Renkin

Catholic Women's League

DIOCESAN COUNCIL • ARCHDIOCESE PRETORIA



REGISTERED WELFARE ORGANISATION
REGISTRATION NUMBER - 001-679 NPO

Katolieke Vrouebond

RAAD VAN DIE AARTSBISDOM • PRETORIA

297 Jorissen Street
Sunnyside
Pretoria
0002

Tel: 012-343-0111
012-343-0112
Fax: 012-343-8575
086-620-0094
e-mail: cwlpretoria@wol.co.za

TO WHOM IT MAY CONCERN

I hereby give Shingirayi Zimunya permission to list the Catholic Women's League Pretoria in his Masters' Thesis as an organisation that participated in the research study.

LOUISE RUCH
DIRECTOR

11 November 2019



GAUTENG PROVINCE
SOCIAL DEVELOPMENT
REPUBLIC OF SOUTH AFRICA

Enquiries: Dr. Sello Mokoena
Tel: 082 331 0786
File no.: 04/07/20

Dear Shingirayi Zimunya

RE: PERMISSION TO PUBLISH GDSD NAME IN MASTER'S THESIS


Thank you for conducting research within the Gauteng Department of Social Development. The title of the research is **'Social Workers' Personal Safety Challenges and Coping Strategies Employed During Social Work Service Delivery: Suggestions for Promoting Social Workers' Personal Safety' [UNISA]**. You have been granted permission to publish the name of the department in the Master's thesis.

Ethical considerations

It is expected that researchers within GDSD take the following precautions during the execution of research projects:

- Protect the validity and integrity of data at every stage of the research through control mechanisms built into the research plan.
- Ensure that the reputation of the Department is protected.
- Engage with the respondents appropriately as guided by the dictates of the Batho Pele principles
- Ensure that no false expectations are created in undertaking this research project in the minds of the respondents

Regards


Dr. Sello Mokoena
Director: Research and Policy Coordination
Date: 27/07/2020

ADDENDUM I: ETHICAL CLEARANCE

University of South Africa
 Preller Street
 Muckleneuk Ridge.
 City of Tshwane
 PO Box 392 UNISA
 0003 South Africa
 Telephone: +27 12 429 3111 Facsimile
 +27 429 12 429 4150
 www.unisa.ac.za

Ref#: R&EC:24/08/17/51677938_04

Name of Applicant: Zimunya, S.S Student#:51677938

**DEPARTMENT OF SOCIAL WORK RESEARCH AND ETHICS REVIEW
 COMMITTEE**

1 November 2017

Dear Mr Zimunya

DECISION: ETHICAL APPROVAL

Name: **Mr SS Zimunya**

Address & contact details: **1st Avenue, Unit 887, Wonder Park Estate, Karen Park,
 0182**

Contact No: **079 078 5121**

Supervisor: **Prof AH Alpaslan**

Title of Proposal: ***SOCIAL WORKERS' PERSONAL SAFETY CHALLENGES AND COPING
 STRATEGIES EMPLOYED DURING SOCIAL WORK SERVICE DELIVERY:
 SUGGESTIONS FOR PROMOTING SOCIAL WORKERS' PERSONAL SAFETY***

Qualification: **Master of Social Work**

Thank you for the application for research ethics clearance by the Department of Social Work Research and Ethics Review Committee.

The application was reviewed in compliance with the UNISA Policy on Research Ethics by the abovementioned Committee at a meeting conducted on 24 August 2017.

Final approval is granted for the duration of the project.

The proposed research may now commence with the proviso that:

- 1) The researcher will ensure that the research project adheres to the values and principles expressed in the UNISA Policy on Research Ethics.
- 2) Any adverse circumstance arising in the undertaking of the research project that is relevant to the ethicality of the study, as well as changes in the methodology, should be communicated in writing to the Department of Social Work's Research and Ethics Review Committee. An amended application could be requested if there are substantial changes from the existing proposal, especially if those changes affect any of the study-related risks for the participants.
- 3) The researcher will ensure that the research project adheres to any applicable national legislation, professional codes of conduct, institutional guidelines and scientific standards relevant to the specific field of study.

Kind regards,



Signed by: Prof AH Alpaslan

Chair: Department of Social Work Research and Ethics Committee

Email: alpasah@unisa.ac.za

Date 1 November 2017.



Signed by: Prof MPJ Madise

Manager Postgraduate Studies: College of Human Sciences

Date: 1 November 2017

ADDENDUM J: THE INTERVIEW GUIDE**INTERVIEW GUIDE**
“SOCIAL WORKERS’ PERSONAL SAFETY CHALLENGES AND COPING STRATEGIES EMPLOYED DURING SOCIAL WORK SERVICE DELIVERY: SUGGESTIONS FOR PROMOTING SOCIAL WORKERS’ PERSONAL SAFETY”
Biographical Questions

- How old are you?
- What is your highest qualification in social work?
- How long have you been practicing as a social worker?
- What services do you render?
- How long have you been employed in your current position?

Topical Questions

- What does your job as a social worker entail?
- What is your understanding of the concept “the personal safety of social workers”?
- Share with me your experiences where you felt your personal safety had been compromised during social work service delivery (the researcher will probe for information, focusing on the aspects of where, when, and what happened, as well as why it happened).
- What coping strategies did you employ to manage the challenges experienced in terms of your personal safety during social work service delivery?
- Who should be responsible for the personal safety of social workers? Motivate your answer.
- What safety measures do your employers have in place in terms of the personal safety of social workers?
- Any suggestions on how the personal safety of social workers can be promoted?

ADDENDUM K: EXAMPLE OF A TRANSCRIBED INTERVIEW EXCERPT: QUALITATIVE DATA PREPARATION AND TRANSCRIPTION PROTOCOL

SOCIAL WORKERS' PERSONAL SAFETY CHALLENGES AND COPING STRATEGIES EMPLOYED DURING SOCIAL WORK SERVICE DELIVERY: SUGGESTIONS FOR PROMOTING SOCIAL WORKERS' PERSONAL SAFETY

This document contains the transcribed data which is the true reflection of what has transpired from the audio recording regarding the interview conducted at a non-profit organisation in Sunnyside, which is part of the study area located in Tshwane, Gauteng Province. Questions by the interviewer/researcher are indicated by using the word “**Researcher**” or “**R**” next to the relevant the question. All responses from the participant are labelled as “**Participant D******” or “**D**”. Therefore, the participants’ real names were not used, in order to protect their identities. Information from the audiotape was transcribed verbatim (i.e. word-for-word, exactly as said), including background sounds (e.g. phone ringing). The transcript was not “cleaned up” by removing grammatical errors, or misuse of words or concepts. Filler words such as *err*, *uhuh*, *uhmm*, *ja*, etc. were all transcribed.

Pauses

The researcher used three ellipses (...) to indicate where the participants paused briefly between statements.

Sensitive information

Where the participants indicated their actual names, the researcher protected the information for ethical and legal purposes. The transcripts were audited for accuracy by the researcher.

TRANSCRIPT PARTICIPANT D****

Date of interview: 20 June 2019

Place: Tshwane (participant’s workplace)

Time: 09:04 am

Duration: 45 minutes 35 seconds

Background of the participant

Participant D*** is a part of the sample of the study, as she is employed at a non-profit organisation which operates in Sunnyside, Tshwane. The researcher followed due process by seeking authority and permission to conduct the study in the organisation, and permission was granted. Access to Participant D*** was arranged through electronic and telephonic contact with the director of the organisation, as well as telephonic and electronic communication with potential participants. Ultimately, the researcher made contact with Participant D*** who agreed to be interviewed. The participant was identified as “Participant D***” or “D” for confidentiality purposes. She is aged 55 and has a Bachelor’s degree in Social Work, an Honours degree in Psychology, a Master’s degree in Sociology, and a D.Phil in Sociology. Participant D*** has 10 years working experience and has been employed at her current place of employment for the last 10 years, thus she meets the criteria as set out in the proposal for the study. Confidentiality and the attendant issues were discussed prior to the interview and the participant consented to be audio-taped. The participant was also informed of the availability of debriefing services in the event that she requires such services.

Transcription of an interview conducted with Participant Dawn

A1	Researcher: Good morning, it’s the 20 th of June 2019 and it’s 09:09 am.
A2	How are you madame?
A3	Participant D: I’m fine thanks.
A4	R: Doctor, in fact, as you read through the ethical consent form, once the
A5	research is done I will provide a copy so that you know what the findings
A6	were. I wanted to start by asking a few questions. What is your highest
A7	qualification in social work?
A8	D: I just have a normal degree; I did it for non-degree purposes at UNISA
A9	because I had all the other degrees, so... academically it’s the D.Phil but for
A10	social work it’s just a normal 4-year course.
A11	R: OK, would you share with me what your age is?
A12	D: I’m 56.
A13	R: And what position do you hold currently?
A14	D: Social worker, just normal social worker.

A15	R: And what sort of services does your organisation render?
A16	D: We do statutory, we do community outreach programmes, and we do group
A17	work if required. Here in Sunnyside it's mainly statutory work and community
A18	outreach programmes.
A19	R: OK, and with regards to that, what are your specific roles in your specific
A20	position?
A21	D: Me, rendering foster care supervision services, doing family reunifications
A22	services. I also do adoptions, but it's related adoptions, so in other words it's
A23	foster care to adoption or foster parent adoptions, and then I do community
A24	outreach programmes. One is with regards to the distribution of any items that
A25	we get in like food parcels, etc., and then the second one is that I run back to
A26	basics Maths and Afrikaans programme for children from grade 3 to grade 7,
A27	because we find that because there are a lot of foreign children here, that are
A28	not exposed to Afrikaans, they are not going to watch Afrikaans programmes
A29	on TV. But the schools in the area require Afrikaans as a second language,
A30	and this poses a huge problem. And Maths is a huge problem across the board,
A31	so we do tutor sessions; I run it every term for two weeks to three weeks
A32	depending on the need. That is only on a Saturday morning, and then the kids
A33	come and we have tutors that volunteer and they go back to basics.
A34	R: OK, how long have you been employed as a social worker?
A35	D: 10 years.
A36	R: And how long have you been practising as a social worker?
A37	D: 10 years.
A38	R: And in this organisation, how long have you been employed in your current
A39	job?
A40	D: 10 years.
A41	R: 10 years as well, OK, I wanted to get an understanding of what your
A42	understanding of the concept the personal safety of social workers.
A43	D: Are you safe in your job? Are you safe in your working environment? Are
A44	you safe in your community that you are based in? And it goes into physical
A45	safety for me.
A46	R: OK, are you able to relate to me specific incidents wherein you felt that

A47	your personal safety was threatened whilst you were doing your job?
A48	D: It has happened frequently. We have got a huge homeless group, which are
A49	currently under attack if you read the newspapers, and they will often come to
A50	the organisation to demand services. They will demand money, they will
A51	demand clothes, they will demand blankets, they will demand anything that
A52	we can give them, and when we say no, they get extremely aggressive. So
A53	we've been spat at, we've been sworn at, I have been spat at, sworn at, they've
A54	tried to kick in the gates when I have been here. And we've had to have... this
A55	year [2019], we've had to ask twice for ADT [<i>a security company</i>] to come
A56	and remove people that were getting overly aggressive at the gate, or the
A57	police come. We contact the police, going out into flats. The one day I went to
A58	a flat and as I walked in, the chap asked me as I walked past, he said: "do you
A59	think you are going to come out of the block of flats?" And I said to him "I
A60	should hope so". But in Sunnyside, a lot of the flats have good security, with
A61	security guards on duty, but some of them don't and it's those ones that are
A62	the scariest to go into.
A63	R: Did the individual specify why he asked if you thought you would come
A64	out?
A65	D: When I came back out, he looked at me and he said, "you came out" and I
A66	said to him "yes". he says, "no, I was watching because I just wanted to make
A67	sure that you come out". So he was, from his point of view, he was trying to
A68	ensure my safety, but it's a bit intimidating, you know. Someone says 'do you
A69	think you are going to come out?'. But the service users themselves, no, I've
A70	never had a feeling where a client has intimidated me. It's more the
A71	environment that makes you just feel unsafe, and you don't like being here
A72	after dark either, you know, it's a bit scary.
A73	R: OK, when you say the environment that makes you feel unsafe can you
A74	explain?
A75	D: Sunnyside... it's the drug addicts, the sounds that you hear quite often, the
A76	guns going off. I think it's just a scary area, I've never... I'll be honest, I go
A77	into a flat, I'll go and if necessary, I'll call the police and the police will go in
A78	with me. So, it's not... nothing bad out there has ever happened. The

A79	experiences that I've had that have been very negative have been here at the
A80	office itself, but not at the flats.
A81	R: Those specific experiences wherein you felt that your personal safety was
A82	threatened at the office, are there any specific incidents that stand out for you,
A83	that you remember particularly?
A84	D: I've had a client sitting with a knife in the boardroom, and it was a normal
A85	table knife and he was sitting there turning it around and he was asking for
A86	assistance. So, the idea is if I didn't give him the assistance, what would
A87	happen? But I think the worst was the chaps at the gate when they start
A88	grabbing the gate and trying to force the gate open to come in, so it's that.
A89	We've got the panic button and that kind of thing, but you're at the front gate,
A90	you are sort of like there, then you have to handle it.
A91	R: So the people who come at the gate, what sort of services and assistance
A92	are they looking to receive?
A93	D: They're homeless, so they want food, they want clothes, they want
A94	blankets, and that kind of thing. And so we depend on donors, so if we don't
A95	have we can't give and when you say we can't give, that's when they start
A96	getting very upset.
A97	R: OK, I wanted to find out as well, what coping strategies would you say you
A98	employ at any time, when you are rendering services and you feel that your
A99	personal safety is compromised?
A100	D: I normally walk away from the gates and close the door, and then as I said,
A101	when it gets really bad, we will call the police or the ADT security. You cope.
A102	It's sort of just another day at the job. You don't know what's going to happen
A103	and so you wait for it and then <i>ja</i> , afterwards maybe take some tea and have
A104	that, but <i>ja</i> walk away.
A105	R: You indicated that you cope; what is your idea of coping, in such an
A106	incident occurs, then what action do you take?
A107	D: What helps a lot is, OK, I normally will say that at that stage you sort of
A108	move on. So, it's something you handle and move on. The actual problems
A109	come in later on when you start looking back and thinking how bad it could
A110	go. And then normally the next morning I will speak to my director; my

A111	director is my sounding board. And I will speak to her and it's like a
A112	debriefing sort of situation, and that helps a lot. I know a lot of the social
A113	workers don't have it; you know, they don't have it. I'm in luck and I think
A114	the social workers here are in luck that we've got someone and it's not only
A115	her, but also the lady that normally sits here, that you can go to and you just
A116	like, you know, 'this is what happened' and they hear you, they listen. They
A117	are just sort of comforting... sort of, you know, 'we are here for you' and I
A118	think that helps tremendously.
A119	R: OK, so from where you are sitting, who do you think should actually be
A120	responsible for promoting the personal safety of social workers?
A121	D: Yourself. Don't get yourself into a situation, if you feel it's intuition. If you
A122	feel 'this is not a good situation', get out of it if you can. If you know you are
A123	going into a bad situation, take the police with you or take someone with you.
A124	And then the organisation also promotes by having the panic button and the
A125	security gates and all that. And also, the people that are there for the
A126	debriefing that they will listen to you and they will hear you, but it's first your
A127	responsibility. Develop an intuition – that you know this is not going to be a
A128	good scenario and then have someone accompany you, either a colleague or, if
A129	necessary, the police.
A130	R: OK, so if I understand you correctly, it's both the social worker and the
A131	employer organisation?
A132	D: <i>Ja</i> , that's my opinion.
A133	R: So what current safety measures would you say your employer have in
A134	place to ensure the personal safety of social workers?
A135	D: We have the panic button, we have the alarm system, we have all the
A136	security fences and you can see the barbed wire everywhere and the front gate,
A137	the security gate. So as far as that is concerned, that is a protective scenario.
A138	You can ask a colleague to go with you if you are unsure, and developing
A139	good relationships. Our organisation has a very good relationship with the
A140	police and also <i>ja</i> , I think they do what they can to ensure our safety at work.
A141	When you go out into the community, that's a different kettle of fish, because
A142	that is where if it is a bad scenario take the police. But there is a tremendous

A143	amount of goodwill with the people in Sunnyside as well. It's not only the bad
A144	things. You get a lot of goodwill; the people are willing to help you cooperate.
A145	R: So, with regards to that, what suggestions would you come up with to
A146	ensure that the personal safety of social workers is promoted?
A147	D: I think from the organisation's point of view, I think they need for instance
A148	to inform us we've also got the fire extinguisher. You know, that kind of
A149	thing. You conscientize your employees to know where the panic button is
A150	and what button to push. You know, whom to call in the case of an
A151	emergency. We also in our cars carry this message that says who are you
A152	supposed to contact if you break down. I think from yourself, from your own
A153	point of view, if you want to go and do a self-defence course, go and do it. But
A154	develop intuition and don't think that it's not bad. Rather go from the point of
A155	view that what you are walking into is not good and have the support
A156	necessary... <i>[interruption to the interview for two minutes]</i> .
A157	R: OK, so you were mentioning some of the suggestions that can be put into
A158	place to ensure the personal safety of social workers?
A159	D: Oh, and I think I was talking about intuition?
A160	R: <i>[researcher nodded]</i>
A161	D: You know, I think it comes with experience, but it also comes with, they
A162	always say when you neck hair starts going up like that, you know, just be
A163	aware. And don't be afraid to get the police involved or ask a colleague to
A164	come with you, because it isn't good putting yourself in a bad spot, but it
A165	comes from experience, knowing what you are walking into.
A166	R: OK, is there any other information you want to share with me with regards
A167	to this topic?
A168	D: Social workers aren't always liked and especially when you are going into
A169	a situation where they feel you might be wanting to take their kids away or,
A170	you know, they feel that, you know, you threaten their families, people react
A171	in different ways. Some will get aggressive, some will get highly emotive, but
A172	it's important that you investigate. Make sure that you know where you are
A173	going, make sure that you don't get lost, know your environment, know where
A174	the main things are. Like where are the police, where is the clinic, where is,

A175	you know, your clients, where are the flats? If the flats have got caretakers,
A176	who are the caretakers? And also, who are the like... you get Huurkor and
A177	Propertykor and all of them and they are the controlling bodies for the
A178	different flats and sometimes it's necessary to phone them to get access. Try
A179	not to walk into something blindly. If necessary, know the schools, know who
A180	to speak to at the schools, and if you get a reference about a child at the
A181	school, speak to the school first, because sometimes the teachers have got
A182	information. Be aware of your surroundings; don't just walk in blindly. Be
A183	aware of what you are going into, if that's any help whatsoever, but develop
A184	an awareness if you don't have it already. Take time to develop it.
A185	R: OK, anything else that you want to say?
A186	D: No, I think that's about it, unless if you've got other questions.
A187	R: Alright, thank you so much for your time.
A188	D: You're welcome.


ADDENDUM L: EDITOR'S STATEMENT

EDITOR'S STATEMENT

5 October 2020

I hereby declare that I have edited this dissertation entitled *Social Workers' Personal Safety Challenges and Coping Strategies Employed During Social Work Service Delivery: Suggestions for Promoting Social Workers' Personal Safety* by Shingirayi Zimunya (student number 51677938). The edit entailed correcting spelling and grammar where necessary, and checking for consistencies in style and reference method used, according to guidelines provided by the student. I have not helped to write this document or altered the student's work in any significant way. I will not be held accountable for bad spelling or grammar or incorrect referencing where the student has rejected my editing, ignored my suggestions, or made changes after I had completed my edit.

It was not my responsibility to check for any instances of plagiarism and I will not be held accountable should the student commit plagiarism. I did not check the validity or factual accuracy of the student's statements/research/arguments.

**Lindi De Beer****Contact Details:** **083 456 4358** lindi@grammarsmith.co.za**GRAMMAR
SMITH**