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## The Space Between: The Interactional Dynamics between Policy, Organizations, and Social Actors Within the Field of Sexual Abuse

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THE SPACE BETWEEN: THE INTERACTIONAL DYNAMICS BETWEEN POLICY,  
ORGANIZATIONS, AND SOCIAL ACTORS WITHIN THE FIELD OF SEXUAL  
ABUSE

by  
Elizabeth Rachelle Taylor

A thesis submitted to the faculty of The University of Mississippi in partial fulfillment of  
the requirements of the Sally McDonnell Barksdale Honors College.

Oxford  
May 2018

Approved by

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Reader: Dr. Kirsten Dellinger

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## DEDICATIONS

To my wonderful nieces and nephews, thank you for loving me as I am but always inspiring me to become a better person. I am so extremely proud of each and every one of you! Do not forget to keep a curious mind and do the things that bring you joy! Most importantly, remember that I am always here for you... no matter what!

“Surround yourself with the dreamers and the doers, the believers and the thinkers, but most of all, surround yourself with those who see the greatness within you, even when you don’t see it yourself” – Edmund Lee

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## ABSTRACT

ELIZABETH RACHELLE TAYLOR: The Space Between: The Interactional Dynamics between Policy, Organizations, and Social Actors within the Field of Sexual Abuse  
(Under the direction of James Thomas)

Federal and state policy pertaining to sexual assault is broad in its guidelines. In some cases, it is vague. This ambiguity often leads to multifarious interpretations of policy, which can diminish the overall effectiveness. While we know a great deal about how changes in policy shape the outcomes of survivors, we know very little about the context between institutional policy and institutional outcomes: the interpretive practice of social problems within the arena of sexual assault. Therefore, this project will advance knowledge in an area that has very little existing insight. Throughout this research, I observe and document how organizations negotiate, interpret, and implement institutional policies centered on responses to sexual violence. I also consider how internal and external variables act as both barriers and enablers to policy implementation. This research design provides insight into the interactional dynamics of policy, organizations, and social actors in the field of sexual assault. I observed the behavior of employees within their work environment to better understand the overarching organizational framework. Throughout the case study, I documented procedures and analyzed institutional norms. Complementing my participant observation, I conducted four in-depth, semi-structured interviews. Findings demonstrate that this organization's framework and its going concerns directly impact policy implementation. In addition, the common themes found within the data include political and cultural environments and community resources. These emerging themes serve as both barriers and enablers to policy implementation.

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## INTRODUCTION

### *Background*

Me Too! How can such a small phrase begin a revolution? How can a Facebook status bring healing to a survivor of sexual trauma? The #MeToo movement sparked a revolution to end the silence by providing a supportive platform for survivors to speak out (BBC 2017). For years, culturally and socially accepted rape myths have silenced survivors (Edwards et al. 2011:761). As intended, the hashtag quickly raised awareness to the prevalence of sexual assault. Harvard law professor Catharine MacKinnon proclaims that “the #MeToo movement is accomplishing what sexual harassment law to date has not” (The New York Times, 2018). Historically, the majority of sexual assault cases have gone unreported (Campbell, Patterson, and Bybee 2012:224). Worse still, the small amount of cases that are reported to the police are rarely prosecuted (Shaw, Campbell, and Cain 2016:446). The Rape Abuse and Incest National Network (RAINN) recently published statistics revealing that “every 98 seconds, an American is sexually assaulted” (2016). For many years, researchers have sought an explanation for this phenomenon. Various national surveys provide data confirming that the pervasive problem of sexual assault affects one in five women in their lifetime (Black et al. 2011; McCauley et al. 2009; Tjaden and Thoennes 2006), resulting in over fifty million women experiencing sexual violence in their lifetime (Breiding 2011).

Compounding the overwhelming prevalence of sexual assault is the lack of clear and effective policy in preventing it, and then treating its victims. Federal and state policy



concerning sexual assault is broad in its guidelines (Deitz et al. 2015). In some cases, it is vague. This ambiguity often leads to multifarious interpretations of policy, which can create obstacles for the organizations tasked with addressing this wide-spread social problem. Additionally, it is argued that policy fails to teach implementers to effectively do policy (Hill 2003:265). As one study notes, “years of research document that laws and policies are not always enforced as they are written, and they are experienced differently by people partly on the basis of their social location” (Richards, Branch, Fleury-Steiner, and Kafonek 2017:112). Professionals responding to and interacting with survivors of sexual assault recognize that they play a key role in shaping survivors' outcomes. Unfortunately, service providers are challenged with interpreting vague policy and must adhere to state and federal regulations, regardless of whether these regulations are in the client's best interest. Restrictive bureaucratic processes can impede the execution of an organizations mission, further complicating the process of policy implementation. Each of these factors can negatively impact the care survivors receive. Therefore, it is important to investigate how organizations respond to the numerous conflicts that arise throughout this process.

Leading scholar, Patricia Yancey Martin, in her book titled *Rape Work: Victims, Gender, and Emotion in Organization and Community Context*, states that “a physician's reassurance can start a victim on the road to recovery. “A physician (or nurse) who comforts a rape victim, tells her she is not to blame, and reassures her that she will be alright can help her recover” (Martin 2005:78). Martin's study also reveals that an organization's framework can prevent the institution from providing comprehensive care, often resulting in a secondary assault. An organizational framework is defined as

“overarching frames that reflect an organizations primary mission and core work activities, which influence members’ perceptions, practices, and social relationships” (Martin 2005:51).

Each organization has a particular organizational framework for how to provide resources to survivors. For this reason, it is imperative to understand how organizations interpret policy, while simultaneously adhering to bureaucratic processes and fulfilling their organizational framework. While we know a great deal about how changes in policy shape the outcomes of survivors (Campbell et al. 2001), we know very little about the context between institutional policy and institutional outcomes: the interpretive practice of social problems within the arena of sexual assault. The space between can be better defined as the interactions between organizational actors and social actors.

Acknowledging and accounting for these interactions can allow for a more dynamic model that recognizes the intricacies of policy negotiation and implementation.

Understanding the interactional dynamics between policy, organizations, and social actors in the field of sexual assault will allow scholars to produce clear, concise policy that will guide and assist organizations in their pursuit to address this social problem.

Thus, my research asks the following questions:

- 1.) In what ways does the organizational framework impact policy implementation?
- 2.) What are the barriers and enablers to policy implementation?

Recent literature revealed that sexual assault is a “consequence of widespread belief in rape myths” (Armstrong, Hamilton, and Sweeney 2006:485). Rape Myths are “false beliefs used mainly to shift the blame of rape from perpetrators to victims” (Suarez and

Gadalla 2010:2010). Another study affirms that “a renewed awareness of how rape myth acceptance shapes societal perceptions of rape victims, including perceptions of service providers, could also reduce victims’ re-victimization and enhance their coping mechanisms” (Suarez and Gadalla 2010:2010).

The aforementioned evidence on the prevalence of sexual assaults suggests an important component for responding to sexual assault is providing responsive victim-services. Research reveals that in addition to the physical and emotional trauma that victims of sexual assault suffer, they also experience a secondary victimization which “is caused by the negative reactions of people around them” (Yamawaki, Darby, and Queiroz 2007:41). Because service providers are often the first to come in contact with a survivor after the assault, they have the responsibility of beginning the healing process. In a recent study, researchers acknowledged that “when women go public with their stories of rape, they place a great deal of trust in our social system as they risk disbelief, scorn, shame, and refusals of help” (Campbell et al. 2001:1253). The negative interactions mentioned above can have a profound impact on a survivor’s recovery process. Moreover, research often reveals that “negative community contacts are associated with poorer health outcomes” (Campbell et al. 2001:1254). Hence, the actions of the service provider have the potential to dramatically impact the survivor.

Much of the previously mentioned literature focuses on the response to sexual violence within the United States. Taking this into account, I decided to design my case study to investigate organizations in Ireland. Throughout my literature review, leading researchers continually referenced the Swedish Model, also known as the Nordic Model (Danna 2011; Kotsadam and Jakobsson 2012; Svanström 2005). The Nordic model is a

multifaceted approach which combats sexual exploitation schemes by criminalizing and penalizing the purchase of sex. The comprehensive model includes criminal reform, “social welfare policies that assist people in exiting and avoiding prostitution, and public education campaigns to raise awareness of the harms experienced by prostituted people and to change social norms that support sex trafficking and prostitution” (Dempsey 2010:1730). In 2017, Ireland passed the Criminal Law (Sexual Offenses) Act of 2015. This assimilated the Nordic Model into Irish Law. Research pertaining to the Nordic Model reveals differences in policy implementation among Nordic countries (Skilbrei and Holmström 2011). This literature influenced my decision to conduct participant observation of an organization following the Nordic model.

Within my research, I observe and document how organizations negotiate, interpret, and implement institutional policies centered on responses to sexual violence. I also consider how internal and external factors affect the implementation of policy. Identifying how organizations interpret, enact, and negotiate policy can provide policymakers and advocates with the knowledge they need to improve victim services and reduce the likelihood of secondary victimization. If empirical data reveals the limitations policies create for organizations, then lawmakers can reshape policy to better serve survivors of sexual assault. Organizations can utilize this knowledge to effectively implement new policy, and the use of evidence-based implementation practice can ensure that resources remain consistent across regions.

## **Literature Review**

### *The Gap Between Research and Policy Implementation*

There exists little research on the systematic study of policy implementation (Khan 2016). Concurrently, an overwhelming amount of scholarship is calling for evidence-based solutions (Lerum and Brents 2016; Weitzer 2012). This is a problem discussed by leading scholars from various disciplines, who have noted that “U.S. polices on sex work and human trafficking are driven more by ideology than reliable empirical data” (Lerum and Brents 2016). The absence of evidence-based polices, paired with the lack of guidelines for policy implementation, creates challenges for service providers who must adhere to inadequate policy, while simultaneously addressing the needs of their clients.

In addition to adhering to inadequate policy, organizations are limited by their own framework and bureaucratic procedures (Martin 2005). These procedures include defining what is considered sexual violence (Deitz et al. 2015). According to the United States Department of Justice, sexual assault is defined as “any type of sexual contact or behavior that occurs without the explicit consent of the recipient” (2017). Sometimes, even those who work directly with survivors of sexual violence lack the knowledge and training needed to respond appropriately (Campbell and Raja 2005). When service providers receive insufficient training, they develop uninformed perceptions of survivors (Martin 2005). These perceptions influence both the creation and implementation of

institutional policies, which can result in a secondary assault (Greeson, Campbell, and Fehler-Cabra 2016).

To conduct a thorough analysis of what causes a secondary assault, one must look beyond the service providers' perceptions. Using mixed methods including interviewing rape workers, observing rape trials, conducting telephone interviews with all existing Rape Crisis Centers in the state of Florida, and assembling archival data from the Florida Supreme Court Administrator's Office, Martin reveals that organizational frames can prevent institutions from providing comprehensive care, often resulting in a secondary assault (2005). One example of an organizational framework functioning to prevent an institution from providing comprehensive care is found within the criminal justice system. A secondary assault is caused when a law enforcement officer treats a survivor as if they are solely a witness (Martin 2005). This framework fails to acknowledge that they are also victims. Therefore, this approach can cause a secondary assault, because it is not victim-centered or trauma-informed. Understanding organizational frameworks can provide insight into the mission of an organization. Because the mission molds an institution's policies and procedures, this concept is essential to understanding the culture of an organization.

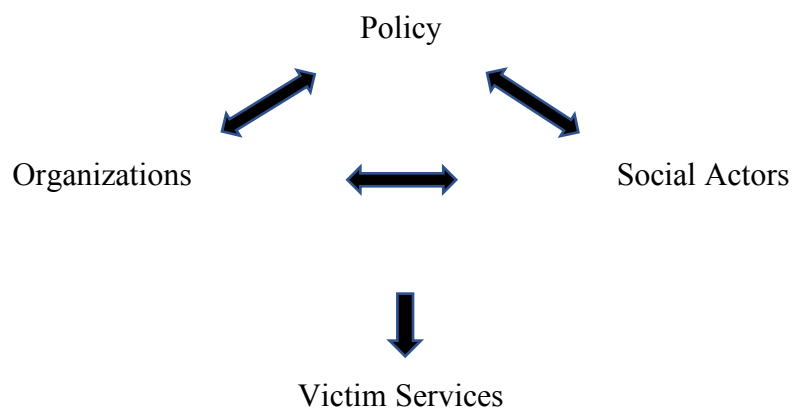
An example of trauma-informed policy is the Nordic Model, also known as the Swedish Model (Danna 2012). It is a comprehensive model, which "includes social welfare policies that assist people in exiting and avoiding prostitution; public education campaigns to raise awareness of the harms experienced by prostituted people and to change social norms that support sex trafficking and prostitution; and criminal law reforms that penalize trafficking, pimping, and the purchasing of sex, while

decriminalizing the sale of sex” (Dempsey 2010:1730). The Nordic Model combats sexual exploitation schemes through criminal law reforms. Sadly, millions of women are exploited through the commercial sex industry around the world (Svanström 2005). This comprehensive model combats sexual violence by criminalizing the purchase of sex. This approach aims to impact the demand and disrupt the profits of sellers. The Nordic Model also criminalizes trafficking and pimping (Danna 2012). Advocates in favor of this model understand that there are complex power structures at play within the sex industry (Svanström 2005). This is why the model aims to fully decriminalize those who are prostituted (Dempsey 2015). Prostitution is viewed as gender-based violence and is understood to be the consequence of institutionalized gender inequality (Svanström 2005).

It is important to note that research reveals differences in policy and implementation among Nordic countries (Skilbrei and Holmström 2011). These researchers describe the differences and similarities in prostitution regulation and social policies. As previously stated, Sweden pioneered this model. Now, various other countries have followed their lead. These countries include: Norway, Iceland, Northern Ireland, Ireland, Canada, and France. Equality Now reports that the European Union and the Council of Europe both adopted resolutions recommending others to adopt the Nordic Model. There are also numerous organizations and activists around the world advocating for these reforms.

### *Theoretical Framework*

My research uses Martin's analysis of organizational framework to better understand how organizational structures influence policy implementation. In addition to analyzing the organizational framework, I consider the 'going concerns' of the organization. Everett C. Hughes (1962) concept of 'going concerns' explains the negotiation between changing environments and everyday concerns of an institution. This concept lends to my framework by revealing the interactional dynamics between bureaucratic procedures and social actors within an organization.



Hughes's concept of a 'going concern' should stand for both entire institutions and for chains of activities within institutions" (Wästerfors 2011). Because the organizational framework manifests itself through the going concerns of an institution, the rigorous analysis of both can produce more comprehensive findings.

David Wästerfors employs Hughes' concept of 'going concerns' in his research at an institution for troubled boys in Sweden (2011). As Wästerfors observes and



documents the everyday responsibilities of the residents and the staff, he questions how the going concerns of the institution cause conflict between the staff and the clients. For example, Wästerfors describes a dispute between three young residents that takes place during music lessons. The institution's going concern of providing music lessons brought the three young boys together in the same location. As the residents began to argue, the staff responded by attempting to redirect the client's attention to the music lesson. The staff focused their energy toward upholding the going concern. If the staff were not tasked with upholding the institution's going concern, they could respond in a manner that would best serve the residents. When they focus solely on upholding the going concern, they are serving the institution and neglecting the needs of the residents. In this instance, the going concern is responsible for both provoking and deescalating the dispute. Hence, this study reveals that an institution's going concerns impact the interactional dynamics between staff and clients. Based on my framework, I hypothesize that:

- 1.) The going concerns, which manifest from an institution's organizational framework, constrain the service providers' actions.

Therefore, they directly impact policy implementation.

- 2.) There are various internal and external factors that serve as barriers and enablers to policy implementation, including political and cultural environments and community resources.

As previously stated, an institution's organizational framework manifests itself through the going concerns of that institution. Therefore, the rigorous analysis of both concepts can yield more comprehensive findings that will advance knowledge in an area that has

very little existing insight. Most importantly, it will enlighten scholars of the various ways in which interactions between policy, organizations, and social actors influence the field of sexual abuse.

## **Research Methods**

### *Research Design*

To better understand the interactional dynamics of policy, organizations, and social actors in the field of sexual assault, I conducted participant observation of a non-governmental organization that provides services to survivors of sexual violence. I selected this approach, because it “stays close to first-person practice to produce rich descriptions of field-based practice” (Longhofer, Floersch, and Hartmann 2017). The research design allowed me to observe the implementation of a multifaceted policy, which includes social welfare services, education campaigns, and criminal reform. Moreover, the case study design situates institutional relationships “in cultural contexts and everyday realities” (Longhofer, Floersch, and Hartmann 2017). This became particularly useful when investigating the connection between culturally accepted rape myths and policy implementation. Researchers agree that the case study is “crucial to the production of meaningful and new knowledge” (Steinmetz 2004). In particular, it is understood that the case study deepens understanding of the determinants in program outcomes (Koenig 2009).

My research focused on organizations within Dublin, Ireland that provide services to victims of sexual violence. I decided to conduct this study in Ireland, because in 2017 the country adopted the Nordic Model into law.

## *Cases*

When selecting my case study, I used non-probability purposive sampling. This ensured that my sampling frame was comprised of organizations that provide services directly to survivors of sexual violence. I began by comprising a list of all relevant organizations within Ireland. Next, I thoroughly reviewed each website to verify whether they offered direct services to their clients. From my search, I yielded four possible sites for observation. To secure a research site, I corresponded through email to request access into their place of employment. I asked for an opportunity to interview members of the staff and observe everyday work procedures within their organic work environment. From the four organizations contacted, I secured interviews with all. I will refer to these organizations as Second Chances, Action and Advocacy, Childhood Survivors, and Comprehensive Care. Second Chances is a non-profit organization based in Dublin. It works at a national level with women affected by prostitution and other forms of sexual exploitation. Action and Advocacy was formed in Ireland, in 2012, for the purpose of changing attitudes about prostitution. A year later, the organization developed into an international advocacy group. Since then, its advocates have urged governments across the globe to recognize prostitution as a sexually exploitative human rights violation. Childhood Survivors is a non-profit organization located in Dublin, and it supports men and women who have experienced sexual abuse during childhood. And for almost forty years, Comprehensive Care has worked to prevent the harm and heal the trauma of sexual violence. They work with men and women who have experienced rape, sexual assault, sexual harassment, or childhood sexual abuse. Each of these cases were selected because

they relate back to the broader field of sexual abuse. I chose Second Chances as my case study, because I was able to establish a better rapport with their victim advocate. The three additional organizations provided context for my research. To protect the identities of these organizations and their employees, I use pseudonyms in place of their names. Once I did gain approval, my access was limited. I was unable to extensively observe the employees during normal business hours, which could have provided more insight to everyday procedures. In addition to the limited access for participant observation, I was only able to conduct four interviews. Ideally, I would have hoped to interview multiple staff members at each location.

### *Methods*

While on site, I observed the behavior of employees within their work environment to better understand the overarching organizational framework. I documented procedures, analyzed institutional norms, and tried to rule out any possible influences. Complementing my participant observation, I conducted four in-depth, semi-structured interviews, each averaging around sixty minutes. The questions developed were structured to reveal:

- 1.) How the organizational framework influences policy implementation.
- 2.) The types of barriers and enablers that non-governmental organizations face when implementing policy.

The interviewees were selected based on their job titles and duties. I focused on employees who could provide information about general services and procedures. For the case study, I interviewed an employee who provided direct services to clients and who

also took part in creating policies and procedures. Each interviewee explained how their organization negotiates, interprets, and implements policy.

I began the interviews with a baseline set of questions, which can be found in the Appendix. The questions were meant to provide insight into topics such as: organizational structure, policy implementation, and common barriers or enablers. When necessary, I asked follow-up questions to clarify vague responses. This allowed the freedom to investigate areas not yet considered. I interviewed all advocates within their own work environment, except for the employee from Action and Advocacy. Because Action and Advocacy is an advocacy group, they do not have an office within Ireland. Thus, I interviewed their employee at a coffee shop in Malahide, a coastal town located less than an hour north of Dublin. Otherwise, I spent a total of two hours conducting field work at each organization. This allowed me to observe each employee within their normal work environment, and it was most convenient for the employees. Each day, I arrived at a predetermined time selected by the service providers. This helped protect the privacy of the clients. As I conducted each interview, I took notes by hand and recorded their responses on a hand-held voice recorder. Once I conducted all four interviews, I began to transcribe the data and organize it into themes. The themes that emerged were cultural and political environments and community resources. The community resources found within the data included organizational alliances and resources referrals. These themes were selected because they reappeared throughout the data as common barriers and/or enablers to policy implementation.

## **Findings**

The focus of this thesis is to identify the interactional dynamics of policy, organizations, and social actors in the field of sexual assault. These factors were identified through the analysis of field observations and interviews with service providers. As noted previously, I comprised a list of Irish organizations that provide services directly to survivors of sexual violence and interviewed one employee from each of the four institutions. Within Dublin, there are various organizations serving survivors of sexual violence. Each organization has a unique mission and serves a different population. Second Chances works with survivors of human trafficking and prostitution, Childhood Survivors only works with survivors of childhood abuse, Action and Advocacy advocates on behalf of survivors of prostitution, and Comprehensive Care works predominantly with survivors of rape. As previously stated, I selected Second Chances as my case study, and the three additional organizations provided context for my research.

As previously mentioned, Second Chances is a non-profit organization based in Dublin. Advocates works at a national level with women affected by prostitution and other forms of sexual exploitation. The organization's website lists a variety of services offered to clients. These services include: individual casework support and advocacy, information and advice about individual rights and entitlements, crisis accommodation in emergency situations, one on one training, group development opportunities, support in finding housing, assistance in accessing social welfare, support into mainstream training and/or employment, counseling, mobile street outreach in Dublin's "Red Light" area,

practical support, interpretative support, referral to other key agencies that can offer support services, court accompaniment, befriending, repatriation, outreach service to the women's prison, and outreach service to the Women's Health Service sexual health clinic.

The organization's leadership consists of a board of directors, an executive director, a service manager, a volunteer manager, and a policy and communication manager. The executive director answers to the board, which consists of ten representatives. The board of directors is responsible for governance and fundraising, while the executive director is responsible for the overall operational tasks. Furthermore, each staff manager leads a team of employees and/or volunteers in their own focus area. For example, the service manager works with the housing and social welfare officer, the education and development officer, and four caseworkers. On average, the volunteer manager works with fifty volunteers at a time. Lastly, the policy and communications manager works with three staff administrators and one organizational administrator.

Second Chances' mission aligns directly with the Nordic Model, which contends that prostitution is a form of gender-based violence. This model argues that prostitution is a result of inequality and is produced from a lack of social and economic power. Those who support this model believe that prostitution ties into patriarchal notions of women's bodies and ownership of those bodies. Moreover, it is a way of regulating women's bodies, and it feeds into unhealthy gender stereotypes.

Childhood Survivors is a non-profit organization located in Dublin. It supports men and women who have experienced sexual abuse during childhood. The organization's mission is to reduce the incidence of sexual abuse by intervening in key areas of the cycle of abuse. This is done through psychotherapy, advocacy, and



prevention services. The organization's client-centered services help survivors find healing from past sexual trauma. Advocates often assist with accessing the criminal justice system and child protective services. Then, they draw on their clients' experiences to engage with legislators and policy makers. This helps ensure that policies meet the needs of their clients. Their services also include prevention campaigns, offender treatment, and public awareness.

The organization's leadership consists of a board of directors, an executive director, a clinical manager, an advocacy manager, and a finance manager. The board is responsible for the strategic direction of the organization, and they ensure that the organization is compliant with statutory obligations. The board has three sub-committees: Audit, Development and Governance. Each board member provides their services on a voluntary basis. The executive director is responsible for providing detailed financial and activity reports to the board at each meeting. Moreover, the therapeutic services are broken down into three main categories: general therapy, family therapy, and the Phoenix Program. The Phoenix Program is a core child protection strategy which works with individuals who exhibit sexually harmful behavior towards children. The Phoenix Program has aspects that can cross into general and family therapy. The Advocacy Program is a support and information service for adults who are considering reporting their experience of childhood sexual abuse. They also work with people who have already engaged in a legal process and would like support. Lastly, the Prevention Program offers specific courses of evidence-based therapeutic interventions that are aimed at individuals who exhibit sexually harmful behavior towards children and aim to support the individuals who are impacted by the perpetrator's behavior.

Action and Advocacy was formed in Ireland, in 2012, for the purpose of changing attitudes about prostitution. A year later, the organization developed into an international advocacy group. Since then, its advocates have urged governments across the globe to recognize prostitution as a sexually exploitative human rights violation. All of its members advocate for the Nordic Model of prostitution legislation in their own regions of the world. Action and Advocacy includes representatives from Ireland, France, Germany, Denmark, Canada, South Africa, Australia, the United States, and the United Kingdom. All of the organization's representatives are survivors of prostitution. They now serve as abolitionist activists, and many of them provide front-line services to help others exit the sex trade. The organization's board is comprised of five advocates. The current board members reside in the United States, Norway, Ireland, the United Kingdom, and Sweden.

For almost forty years, Comprehensive Care has worked to prevent the harm and heal the trauma of sexual violence. They work with men and women who have experienced rape, sexual assault, sexual harassment, or childhood sexual abuse. The organization strives to eliminate the tolerance of sexual violence through public awareness campaigns, education, and trainings. The organization's services include: a national twenty-four-hour help line, one-on-one counseling, accompaniment services, outreach services, training, and awareness services. In addition, they advocate for survivors of sexual violence to ensure they receive responsive services from medical providers and law enforcement.

The organization's leadership consists of a board of directors, a chief executive officer, a clinical services manager, an education and training manager, a business development and communications officer, a policy and research officer, an administration

and finance officer, and two fundraising officers. The board of directors is comprised of ten representatives.

In order to develop responsive policy, one must first understand how certain barriers and enablers impact policy implementation within an organization. This case study reveals that an organization's framework and its going concerns directly impact the process of implementation. It also highlights the interactional dynamics between policy, organizations, and social actors in the field of sexual assault. The data collected through participant observation and interviews provided insight into the organizations' procedures for policy creation and implementation. Common themes found within the data include political and cultural environments and community resources. These emerging themes serve as both barriers and enablers to policy implementation.

There are various ways that an organization's framework can manifest into an everyday going concern. Take, for example, this interview response from Sara, an employee at Second Chances:

I would say it is very difficult in many ways, because of the sensitivity of the issue, to advocate for women in prostitution, because we cannot always advocate and say who we are. We must protect privacy. We have a housing worker, and when she is phoning landlords she is a friend. She will say that she is a friend who used to work in housing. Everything should be done with the woman's permission and explained to her (Sara).

Sara explained how the going concerns of her organization constrain her coworker's actions. As an advocate, the housing and social welfare officer must protect the privacy of the client, while simultaneously seeking resources through outside referrals. As

previously verified in Wästerfors' study (2011), the organization's going concerns directly constrain the service provider's actions.

#### *Cultural and Political Environments:*

Sara, an advocate from Second Chances, mentioned that societal attitudes can normalize sexual violence and create a hostile environment for survivors. She strongly believes that the conversation must shift. During the interview she shared that "women bear the brunt of society's judgement when it comes to prostitution. Nobody ever focuses on the buyer and their choice." She followed this statement by sharing a recent incident that showcased the double standards held by members of the community. She explained that the local paper became outraged when a journalist attempted to publish the names of several men who were arrested for buying sex. The paper refused to publish the article, even though they had previously published the names and photos of women charged with prostitution. This is an example of how gender bias within Irish culture holds women to a higher standard than men.

Erin, an advocate from Action and Advocacy, confirmed that victim blaming is a major problem in Ireland. During her interview, she described numerous times when she was blamed for her own abuse. After becoming homeless at the age of fourteen, Erin was forced into prostitution to survive. Eight years later, after experiencing years of abuse, she escaped prostitution. Since then, she has been a leading activist and advocate. During her interview, she explained that she is constantly blamed for her own sexual trauma. She also said that many of her friends and clients have received an equally condemning response from their communities. She mentioned how difficult it can be to advocate on

behalf of victims in a cultural environment that excuses the actions of the perpetrator and focuses on the actions of the victim.

An article published by the Guardian newspaper, provides a recent example of victim blaming within the Irish media. In 2017, George Hook, one of Ireland's best-known radio broadcasters, discussed the topic of rape during his show. During the discussion, the broadcaster quickly turned the focus to the 'girls' behavior. "Discussing a case in which a woman went to a hotel room with a man for consensual sex and was raped by a second man, Hook condemned the rapist, but also said: 'Why does a girl who just meets a fella in a bar go back to a hotel room? She's only just barely met him. She has no idea of his health conditions; she has no idea who he is; she has no idea of what dangers he might pose. But modern day social activity means that she goes back with him, then is surprised when somebody else comes into the room and rapes her'" (The Guardian 2017). Sadly, Hook is just one of many Irish citizens that hold women accountable for their own abuse (Gracia 2014). Columnist Emer O'Toole proclaimed that "victim-blaming will continue to be the norm in male-dominated cultures like that in which George Hook works, until women's voices are heard" (The Guardian 2017).

During an interview with Comprehensive Care, Mary explained that the stigma around sexual violence was a major barrier for many years.

Things are better in terms of stigma. That would have been quite a big [barrier], but obviously it is still there. You know some people still feel that there are certain things you cannot talk about. With our history of being a Catholic Country, people did not talk about things. There is a lot of shame (Mary).

Mary acknowledged that the new awareness of victim-blaming and rape culture has created a change in the discourse. She argued that we need to have those conversations in order to change the mindsets of others. Especially, “societal issues around acceptance of sexual assault and violence against women” (Mary).

In addition to the cultural expectations mentioned above, Sara discussed important political factors that impact Second Chances’ policies. She spoke positively about Ireland’s position as a member state in the European Union. Traditionally the European Union was a trade agreement, but it has been expanded out to human rights.

I would say that one good thing about being part of the European Union is that there are countries in Europe that are more progressive. You can set a European standard and say this is what you have to aim for. Obviously, you are always falling short, but it is like being in a kind of peer group. You know Susie over there is doing that, so we better pull up our socks (Sara).

Sara clearly communicated the importance of these political factors to the creation and implementation of more victim centered policies.

She specifically mentioned the Victims’ Rights Directive, a European Union Directive which was recently transposed into Irish Law. This particular directive was brought into Irish law to protect the rights of victims in the criminal justice system.

We are particularly excited about the Victims’ Rights Directive. It provides consistency in an approach to victims across Europe, regardless of where the crime happened. [The victim] would have access to translators, ...should be informed of support services, ...have the right to be identified as a victim, ...have the right to compensation, and there is a positive obligation on countries to inform

[the victim] of how [their] case is progressing. We are hoping it will provide more empowerment to victims (Sara).

Historically, the Irish court system has focused on the rights of the accused. Thankfully, the Victims' Rights Directive was brought into force in 2015, which established new rights, supports, and protections for the victims of crime (Law Society of Ireland 2016). "The directive places an obligation on each state to take into account and consider the risk of emotional or psychological harm that may occur for a victim during the interview process and, indeed, while participating in any trial" (Law Society Gazette 2016). The directive will protect victims who choose to proceed with legal action.

Mary, an advocate from Comprehensive Care, mentioned that her organization has recently developed a campaign to educate college students on the topic of consent. She explained that many schools in Ireland do not allow comprehensive sexual education classes. Therefore, she feels that the campaigns in the Universities are extremely important to the prevention of sexual violence.

Recently, Richard Bruton, the Minister for Education and Skills in Ireland, ordered the National Council on Curriculum and Assessment (NCCA) to review the content of the relationships and sexuality education (RSE) curriculum and how it is taught in the classroom (BBC 2018).

Consecutively, representative Ruth Coppinger launched the Objective Sexual Education Bill, which was recently introduced to the National Parliament. Coppinger believes that

The school curriculum should cover contraception, sexuality, gender, LGBT+ issues and consent. Her Bill would remove religious ethos from the relationships

and sexuality education curriculum. While Ms. Coppinger welcomed the review of Relationships and Sexuality Education (RSE) in schools announced by Education Minister Richard Bruton this week, she said changing the curriculum will be pointless if schools can opt out of teaching it on the basis of ethos (Breaking News 2018).

These recent events confirm that Comprehensive Care's awareness work in Universities pertaining to consent is of extreme importance. Fortunately, the aforementioned representatives are attempting to provide comprehensive relationships and sexuality education to all children throughout the country of Ireland.

#### *Community Resources:*

Another important variable that impacts policy implementation is access to community resources. Two main forms of resources that emerged are organizational alliances and resource referrals. Organizational alliances that serve as enablers to Second Chances' mission include the Coalition Against Prostitution, the National Women's Council of Ireland (NWCi), and the United Nations. An additional alliance that is important to mention is the organization's alliance with the Gardaí. The Gardaí, also known as the Guards, are the police force of the Republic of Ireland. Three of the four organizations interviewed have an alliance with the Gardaí.

The Coalition Against Prostitution is an international organization that advocates on behalf of frontline non-governmental organizations. There are twenty-three-member organizations located around the world. This organizational alliance continually empowers Second Chances and assists them in obtaining progressive legal reforms.



Our CEO currently is the chair of the Coalition Against Prostitution. We have links with organizations working on this issue from Mexico to India, also in Lebanon, Germany, and across Europe as well. I think there is a real benefit for anyone to come to an organization and to understand a little bit of what they have experienced and not have to explain it in great detail. When women come to us they have been involved in prostitution or the sex industry in some capacity. When they come to us, we have particular organizational policies around questioning clients (Sara).

As I spoke with Sara, it became apparent that she attributed her organizations responsive policies, in part, to their alliance with the Coalition Against Prostitution. As a member of this broader community, Second Chances is provided with the information and resources needed to develop victim-centered policies. For years, Second Chances and Action and Advocacy have aligned their organizational policies with the Nordic Model. Their efforts eventually influenced National Parliament to assimilate the Nordic Model into Irish law. The sense of community created through these alliances was not unique to Second Chances. Each employee that I interviewed mentioned their appreciation for being connected with a broader community of advocates.

Colleen, an advocate from Childhood Survivors, mentioned that her organization relies on community resources because they do not have a help line.

“If people need support and there is a waiting list to get in for therapy and groups here we refer them [to the national hotline] and the crisis center. There is also an organization called Towards Healing which, again with the church, serves people with institutional abuse (Colleen).

Collen mentioned that there were many more organizations that she would consider community partners. The additional partners included Family Services, which provides family centered treatment. They rely on the partners to provide any resources they lack.

Sara confirmed that, as members of the National Women's Council of Ireland, Second Chances is linked into a much broader community. The National Women's Council of Ireland is a national women's membership organization that seeks equality between women and men (NWCi 2018). NWCi campaigns for more female representation in the influential positions of Irish Society. They also advocate to the Irish Healthcare Care System for a better response to the healthcare needs of women. In addition, NWCi promotes economic equality for women. These affiliate organizations create a larger community and provide a wealth of resources, which allows Second Chances to refer clients to outside organizations in order to receive additional services.

During an interview with Mary, an advocate from Comprehensive Care, she discussed the United Nations and the role they play in policy creation.

Just this week, our CEO was at the United Nations Convention to report [to] the Committee Against Torture, [they were] looking at Ireland's history of institutional abuse. [Comprehensive Care's] submission covered what recommendations should be there for survivors (Mary).

Mary explained that representatives from Comprehensive Care continually lobby the government for more support services and changed legislature. In particular, they advocated for the Victims' Rights Directive. Advocates from Comprehensive Care gained unique insight as they accompanied victims to court.

The advocacy team helps through the court procedures, they work with the lawyers, and they work with the guards. Then they work with others to change the policies that work to benefit [the survivor], because they see all the problems. We look at the ways that the victims' needs are not being met [in the court process] and see how we can make sure that they are (Mary).

Mary explained that their policy manager works with other agencies to develop victim-centered policies. She felt this was very important, since it has not always been that way.

## **Discussion**

The #MeToo movement has ushered an outpouring of sexual assault disclosures. More than ever, survivors are speaking out and seeking help. It is a very important time to understand how organizations are going to respond. The service providers' actions have the potential to facilitate healing. Instead, they often inflict a secondary assault on survivors seeking help. Understanding how these organization negotiate, interpret, and implement policies can provide insight to policy makers and, hopefully, improve outcomes for survivors in the future.

I do not want to give the impression that all organizational frameworks solely negatively impact policy implementation. On the contrary, organizations with a comprehensive, victim-centered framework are much more capable of implementing responsive policies and services. Yet, even in these cases, the going concerns can impede the organization's mission.

While looking beyond the organizational framework, I noticed numerous factors that influence policy implementation. Second Chances polices are victim-centered and trauma informed, but the cultural and political factors previously mentioned acted as barriers to implementation. Cultural factors that served as barriers to policy implementation were observed and documented throughout the case study. As can be expected, these attitudes normalize sexual violence against women and contribute to a culture of victim blaming. This type of an environment acts as a barrier for service providers and negatively impacts policy implementation.

Fortunately, the influence of more progressive member states within the European Union helps combat the barriers created by Ireland's cultural environment. Overall, the service providers identified their alliances with progressive organizations throughout Europe as enablers to policy implementation. The network of service providers within Ireland allows the organizations to rely on one another for assistance, and the presence of numerous service providers enables each organization to focus on their own services, while relying on each other to provide referral services. Although each organization serves a different population, they experienced similar barriers and enablers.

The alliances created by international advocacy groups and national service providers facilitated the creation of more responsive policies. One example of this was the Victims' Rights Directive, which began as a European Union Directive and was eventually transposed into Irish law. When advocates accompanied victims to court, they became aware of the deficiencies in victims' rights and protection. Once they recognized the deficiencies, the providers met with international alliances, such as the United Nations, to advocate for better protections. These collaborative alliances are necessary when striving to deliver comprehensive care. In this case, the collaborative work resulted in better protections for survivors.

## **Conclusion**

### *Contributions-*

While we know a great deal about how changes in policy shape the outcomes of survivors, we know very little about the context between institutional policy and institutional outcomes: the interpretive practice of social problems within the arena of sexual assault. Therefore, this project advances knowledge in an area that has very little existing insight. Current research identifies core services that are critical for survivors, but it fails to mention why some organizations offer them and others do not. This study reveals the constraining aspects of an organizational framework and presents various ways that the framework manifests into everyday going concerns. Most importantly, the study uncovers relevant barriers and enablers that impact policy implementation. Understanding how these variables impact policy implementation can improve how organizations negotiate and implement policy.

### *Limitations-*

It is worth noting that there are limitations within this case study. To begin, it was challenging to gain access into these organizations to conduct my research. Many staff members expressed concerns about maintaining their clients' privacy. This is because they are serving such vulnerable populations. Even after reassuring these organizations that I had undergone extensive training and gained approval from the Institutional Review Board, they still resisted granting me access into their organizations. Once I did

gain approval, my access was limited. I was unable to extensively observe the employees during normal business hours, which could have provided more insight to everyday procedures. In addition to the limited access for participant observation, I was only able to conduct four interviews. Ideally, I would have hoped to interview multiple staff members at each location. Even though the organization's differences prevented me from making more in-depth comparisons, the study uncovered common themes that are found throughout the broader field of sexual violence.

## Appendix

### IRB Interview Questions

1. How long have you worked for the company/in this position?
2. Have you always been in this position? How have your responsibilities changed over the years (if applicable)?
3. What did you do prior?
4. In your own words, tell me about your organization's importance?
5. Please describe what a normal work week looks like for you?
6. How do you determine which services are offered to your clients?
7. Do you experience barriers or limitations in services?
8. How do you acquire funding?
9. Do you advocate for changed policies?
10. If so, what does that process look like?
11. Has your organization been affected by recent policy or legislation? If so, how?
12. What community partners do you work with?
13. Can you tell me about the structure of your organization?
14. How big of a problem is sexual assault in Ireland?
15. Do you get much help from your local or national government?
16. What are the biggest challenges for your organization in being able to achieve its mission?
17. What kinds of things would make your work easier?
18. What kinds of things do you think would reduce, or eliminate, sexual assault and or domestic violence?



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