



# Silencing touch and touching silence? Understanding the complex links between touch and silence in residential child care settings

Childhood  
2021, Vol. 28(2) 245–261  
© The Author(s) 2021



Article reuse guidelines:  
sagepub.com/journals-permissions  
DOI: 10.1177/09075682211000111  
journals.sagepub.com/home/chd



**Lorraine Green**   
Edge Hill University, England

**Lisa Warwick**  
University of Nottingham, England

**Lisa Moran**  
Edge Hill University, England

## Abstract

Touch and silence are neglected across most disciplines, including within child-specific academic literature, and their interconnections have not been studied before. This article focuses on touch/silence convergences in residential childcare in England, drawing from two qualitative studies. We reveal the fluidity, multidimensionality and intersectionality of touch and silence, illuminating the labyrinthine ways they frequently coalesce in children's homes, often assuming ambiguous forms and meanings. We therefore offer new understandings of these concepts, as multifaceted, entwined, temporal and malleable.

## Keywords

Children's homes, constellation, multidimensionality, silence, touch

---

## Corresponding author:

Lorraine Green, Department of Social Sciences, Edge Hill University, Creative Edge Building, St Helens Road, Ormskirk, Lancashire, L39 4QP, England.  
Email: [lorraine.green@edgehill.ac.uk](mailto:lorraine.green@edgehill.ac.uk)

## Introduction

This paper analyses silence and touch convergences within residential childcare settings in England. Touch is one of the most academically disregarded of the senses (Paterson, 2007) whilst silence is also under-researched and is often regarded as insignificant (Scott, 2017). Drawing from two qualitative studies, we show that touch and silence are more interlinked, multifaceted and complex than frequently assumed, extending previous separate understandings of them. In England and many other countries, the number of children and young people in residential childcare is significantly lower than alternative care arrangements. In 2018, only 6370 out of 75,420 'looked after' children were accommodated in residential facilities (National Statistics, 2019). Due to a preference for fostering, most current residents are teenagers from highly traumatic backgrounds with complex neglect and abuse experiences (Berridge et al., 2011). Touch, attachment, relationships and communication are consequently extremely challenging issues (Biehal, 2014; Winter et al., 2016). Although abuse inquiry recommendations often suggest policy and practice developments (Kendrick and Smith, 2002), the connectivity of touch and silence remains unaddressed, despite their significance for young people's safety and wellbeing.

In this paper, we define silence as voluntary and involuntary lack of speech or sound, or to speaking or gesticulating in ways that deny or ignore an issue, with touch materially representing intentional and unintentional person-to-person bodily contact (Green, 2017). The ways young people and residential care staff touch and/or avoid touch, and their silences around touch, often relate to unarticulated past experiences and relationships, culturally sanctioned behaviours and institutional power dynamics. Existing literature illuminates some of the multidimensionality of touch, with some conceptual approaches also elucidating different forms of touch and silence (Green, 2017; Mazzei, 2003). These conceptualisations add meaning to our data but fail to encapsulate the complexity of touch or silence categorisations or acknowledge the slipperiness and frequently conjoined nature of these imbricated concepts. In this paper we initially analyse literature on touch and silence, forging a link between them through developing the concept of touch-silence constellations. The second section outlines the methodology. Examples and interpretations of touch/silence intersections drawn from two studies on residential care in England are subsequently presented. The final section theoretically discusses the findings in the context of the literature, also offering policy and practice insights.

## Reconceptualising touch and silence: Multidimensionality, interconnections and 'layers'

The multidimensionality of touch is manifest in its different physical configurations; stroking, holding, grasping, rubbing, pushing, striking, punching, deployed variably in their speed, location, pressure, duration, frequency and the areas touched. Touch, however, has many possible contextual and constructed meanings, not always discernible from its physical form (Green et al., 2002). Touch can denote control and warnings, illuminate personal or occupational power dynamics or constitute sexual and/or physical violence. Conversely, it can positively convey affection, support, solidarity, reassurance, empathy and mutual desire (Green and Day, 2013). Furthermore, 'accidental' touch sometimes possesses no intended meaning, although it may still be emotionally experienced.

The touch literature differentiates various static touch categorisations, generally distinguishing between good and bad touch, designated as sexual or platonic, nurturing or abusive (Aquino and Lee, 2000; McNeil-Haber, 2004; Owen and Gillentine, 2011), with absent touch or touch deprivation sometimes also being discussed (Green, 2017). These categorisations generally conflate the physical touch configuration with a distinct meaning, such as a hug representing positive and nurturant touch (Eßer, 2018). However, despite ‘affectionate’ touch being vital for child development (Field, 2014) and adult mental health (Linden, 2015), ‘appropriate’ child/carer touch or more generic normative touching practices vary considerably culturally, historically and ideologically (O’Malley-Halley, 2007),

Some qualitative studies suggest the significant impact absent or abusive touch in childhood can have on adults’ self-esteem, body image, platonic and intimate relationships, and on giving and receiving touch (Johansson, 2013; Sakson-Obada, 2014). The negative effects of various forms of child abuse (sexual, physical, psychological, neglect) are also widely documented (cf. Wilkins et al., 2019) but remain unanalysed in terms of touch. Within residential child care and child protection social work, fear of false abuse allegations or of contravening professional boundaries has continually been used as a justification by staff and organisations for not using nurturing touch with children (Baeza et al., 2019; Green, 2005, 2017; Lynch and Garrett, 2010). The effects of depriving already abused children of ‘positive’ touch, or the importance of touch for recognising physical injuries in child protection, have also largely been overlooked (Ferguson, 2011; Green, 2017), as has the child’s subjective perspective.

What is therefore missing from much touch literature is a careful examination of what constitutes ‘good’ and ‘bad’ touch from the perspectives of observers, the touchers and the touched, and an awareness that interpretations may change over time and/or may be ambiguous. How the immediate context of the touch, previous/current experiences and relationships, and cultural norms and practices, affect responses, is also important. Extant conceptualisations of touch therefore underline some of the complexity, multiplicity and contextual nature of touch but fail to capture the interconnections between competing touch forms, the temporal, dynamic and situated nature of touch and how it may be divergently understood at different times and by different people. From this multi-layered perspective, ‘good’ and ‘bad’ touch are more appropriately conceptualised as continuums or spectrums, rather than discrete or (predominantly) disconnected categorisations. Restraint touch, for example, can be brutal and sadistic, but could also be gentle and empathic, such as a worker holding back a child who is in a physical argument, while stroking her/him on the arm. Intent and reception may also diverge, as our data demonstrates.

## **Exploring competing dimensions of silence: Opaqueness, complexity and touch-silence constellations**

Silence is often regarded as presumed absence of thought and/or action, with overt acts being more noticeable and intelligible, thereby generating greater academic attention (Scott, 2017). Silence, like touch, is nevertheless, highly symbolic, and its meanings may similarly be multifaceted and difficult to interpret (Jaworski, 1993). Silence can be experienced as both ‘pleasant and soothing, but also tense and oppressive. . . and is as

ambiguous as it is ephemeral' (Van Elferen and Raeymaekers, 2015: 262). Why people stay silent, or choose to speak out, is therefore context-dependent and often linked to power dynamics and emergent reflections that resist verbalisation. Bunkers (2013) elucidates how silence may indicate multiple meanings, including deep reflection, dissociation, contemplating confusing or taboo issues, compassion, or reliving traumatic experiences. Individual silences sometimes echo wider cultures of silence, where it is ill advised to speak about taboo issues, such as child abuse, criminal acts or disability (Yoshida and Shanouda, 2015). In religious contexts, silence often symbolises piety, virtuosity, inner strength and self-understanding (Caranfa, 2013). However, in Gothic Fiction, it is used as a metaphor for menacing, supernatural beings and terrifying unknowns. Silence can also possess culture-specific variable elements. These different interpretations indicate the multiplicity and diversity of silence types; their 'layeredness', and confluence and convergence in meanings and expressions.

Comparable to touch, scholarly work on silence also reveals different, sometimes overlapping typologies, largely emphasising distinct silences rather than interconnections between silences and/or reasons for being silent. Categorisations include *polite silences* (concern about offending another); *privileged silences* (ignoring others because of high social status); *veiled silences* (hiding the nature of one's relationships) and *intentional silences* (concern about negative reactions) (Mazzei, 2003). *Organisational silences* occur when institutional power dynamics prevent employees speaking out for fear of reprisal (Morrison and Milliken, 2000). *Defensive silence* similarly incorporates concern about consequences; *acquiescent silence* indicates disengagement, futility and self-devaluation and *prosocial silence* protects others (Kirrane et al., 2017). Spyrou (2015) also identifies *wavering silences* whereby children, unsure about discussing controversial or emotional issues, vacillate between partial and full disclosure, and may later retract. Children may also create silence by feigning ignorance about an issue or using pauses, breaths, reframing, deflections and denials (Spyrou, 2015).

Sparse research links children and silence, perhaps because recent literature posits the most authentic child voice as 'spoken'. Nevertheless, silence is an important but largely overlooked feature of children's communication (Lewis, 2010; Spyrou, 2015). Although contemporary sociology problematizes childhood as a subordinated social status, characterised by multiple social divisions (Jackson and Scott, 2013), 'the good child' is often seen as quiet and acquiescent, particularly in the presence of adults (Wyness, 2011). However, in many child sexual abuse institutional scandals, children's and staff's silences are often interpreted as indicating fear as well as signifying acquiescence or complicity (Government of Ireland, 2019), thereby illustrating multiple silences, each grounded in different contexts and histories. Like touch, silences sometimes occur in continuums. One could be silent in one way, through not speaking, but through nonverbal communication important feelings and information could be expressed. Conversely, much superfluous verbosity could convey silence by overt or covert refusal to discuss an issue. As Spyrou's nuanced research showed (2015), children could vacillate between full or partial silences and disclosure/discussion at different times, suggesting the validity of a continuum approach. The reasons underlying these silences may be different or even conflicting, or they may overlap, depending on the situation. Viewing silences like this, suggests that extant competing silence types reveal only some, often decontextualized, dimensions of silence.

The concept of '*touch-silence constellations*' developed in this paper therefore conceptualises touch and silence forms as potentially intersecting continuums, linked to immediate micro context, individual biographies and emotions, and wider institutional histories and national and international socio-political considerations. As illuminated in data presented, some touch forms in residential care cannot be fully understood unless analysed in relation to silence (and vice versa). Comparable to notions of '*constellations*' in a (natural) scientific sense, touch-silence constellations emerge and develop at different times, where certain aspects of touch and/or silence are made manifest, while others are unknown (or perhaps unknowable) and remain concealed (due to either advertent or inadvertent actions). Comparable to patterns of stars in astronomical constellations, *touch-silence constellations* develop and transform both momentarily, and over and across time. They may also converge through '*cataclysm*'. This suggests that constellations that previously appeared stable across time can transform due to personal context and wider circumstances. For example, interpersonal touch outside the home became destabilised and mostly proscribed during 2020 across the world, because of fears of Covid-19 contagion (Green and Moran, in press). However, the emotional constituents of 'touch' were also simultaneously submerged and silenced under impersonal scientised terminology such as 'social distancing' (Moran and Green, 2020).

## Methodology

This paper draws upon two ethnographic doctoral studies of residential childcare settings in England. The first study incorporated two ethnographies in two local authority (LA) children's homes and unrelated in-depth interviews with care leavers and residential care workers (RCWs) (Green, 1998). This study focused primarily on sexuality and sexual abuse/exploitation issues in children's homes, although touch issues were central. The second, more recent ethnographic study, involved one LA home and focused specifically on touch (Warwick, 2017).

Ethnography involves immersing oneself in and richly understanding and describing a culture (Hammersley and Atkinson, 1995). It allowed deep understanding of cultures within these settings, extending beyond institutional and governmental narratives, thereby enabling the researchers to identify complex touch-silence intersections and capture multiple perspectives from different actors. Although the data for the studies was collected approximately 20 years apart, with the primary research focus differing, conversations between the authors generated important insights and similarities about touch-silence intersections. Both data sources were therefore re-analysed in 2019. Despite the time difference and policy and practice changes, touch/silence interactions identified across both studies displayed strong similarities in the plethora of meanings surrounding different touch forms (e.g. abusive touch, nurturing touch), how children and adults made sense of these touch formations, and the significance of ambiguous touch, which emerged strongly in both studies. To re-analyse the datasets, Braun and Clarke's (2006) Thematic Analysis (TA) was deployed. Interview transcripts and field notes were read and re-read and themes and sub-themes extracted, interpreted and re-interpreted in relation to identifying, analysing and comparing touch/silence convergences across the studies.

## **The slipperiness of touch and silence: Multidimensionality and touch-silence constellations**

To illustrate the slipperiness of touch and silence and their convergences in children's homes, we present various touch-silence constellations documented in both datasets. Most constellations manifested varying ambiguity and opacity, thereby confirming our oscillating continuum approach. Despite this, partial understanding was sometimes achieved through examining various cues, clues and signs which reinforced each other. Some touch/silence convergences corresponded more clearly to extant categorisations of 'good' and 'bad' touch, both in form and consensual interpretations from those involved about meaning. Others were highly ambiguous, either because of insufficient information to interpret them clearly, or because of discrepant interpretations. Both touch and silence can therefore transgress boundaries according to intent and mis/interpretation and temporality. However, the silences surrounding some touch incidents meant some individuals' perspectives were never manifest, or were expressed through covert and coded actions, and many forms of touch were clothed in silence simply because they were not recognised as touch. These complex, unclear situations raise temporality, power and positionality questions as to whose interpretation of a situation should or does count and when? Therefore, could some people's experiences, particularly those possessing minimal power and status, such as children, often be too incoherent or risky to verbalise? Could many 'genuine' realities, dependent on different people's fluctuating and divergent understandings and narratives across time therefore coexist?

We consequently examine how various touch forms, and their unclear or differential interpretations, interact and/or converge with different sorts of silences, revealing their often overlapping, dynamic, multidimensional and ambiguous meanings. We subdivide our discussion into three overlapping categories, which demonstrate the problem with extant static and separate understandings of touch and silence. We also highlight how generational and organisational power relates to both silence and touch in these settings. The first section conceptualises touch as an absent/presence which has many configurations, manifestations, silences and meanings associated with it. The second section deals with constellations where notions of what good and bad touch are, heavily dependent on context, perspective and interpretations. These evaluations of positivity or negativity are always relative and ambiguous temporary judgments, because they are enveloped by swirling silences. Meanings and understandings therefore can and do change. The third section showcases the many ways silences are performed and achieved. It illuminates how different, and even the same forms of silence, may communicate different messages (for example, not saying anything may indicate fear or the converse – the ability to disregard another because of one's status and power). The third section also examines one scenario in detail, (amongst other examples), to show the interspersals and fluxes between haptic communication and silence, speech and silencing. In this final section, different participants with different vested interests, distributions of power and experiences, communicate and draw on silence in divergent ways to block communication, to resist or express power or to conceal, accentuate or communicate meanings or feelings.

## **Absent/present touch, uncomfortable silences and communicative actions**

Both residential care workers (RCWs) and children initially purported narrow discourses of touch, as usually projected by the hand and deploying affection or sexual overtones, or occasionally involving restraint. Many touch forms therefore were silenced by initially being unrecognised as touch. However, some staff, sensitised into thinking more deeply about touch by the research, later verbalised wider understandings.

We had a paddling pool. All the kids are diving over, and I'm throwing them, and [they're] grabbing you, hugging you, fighting you and although you don't think, it is touch, isn't it? It is. (Keith, male RCW, 2017).

Little positively experienced touch in young people's pre-care and in-care biographies, generated desires for supportive touch, but RCWs, particularly males, were fearful about initiating such touch, regularly using terms like 'wary' and 'afraid'. One worker would not even help an inebriated teenage girl, who had been sick, into her bedroom.

One night a girl got drunk and was sick and I found her in the toilet. She looked unconscious . . . and she had this flimsy top and bed-shorts on. I thought 'I can't leave her but if I touch her I might be in bother' . . . I had to knock two of the other girls up and ask them to carry her to bed (Ben, Male RCW, 1998).

The young people similarly were reluctant to overtly express their touch needs which would expose their vulnerability, resulting in silences from both staff and residents. However, young people's constellations involved verbal silences being accompanied by active but covert strategies to procure substitute touch. Although staff members in the second study were supported to proactively initiate supportive touch with the children, unlike the first study, affectionate or supportive staff/child touch rarely occurred, even in the second study, without strong nonverbal cues from children.

They would never instigate or ask for a hug, but they give signs . . . Sam's leant in, with his arms open, and a staff member hugged him and then he's relaxed. And he appreciated the hug (Kim, female RCW, 2017).

In both studies the young people therefore procured substitutes for affectionate touch, through initiating play fighting, invoking accidental/non accidental touch, triggering restraints and engaging in casual sex.

When craving touch, they'll escalate a situation knowing they're going to be held, even if it's in restraint, and as soon as restraint happens, they relax into you (Diana, female RCW, 2017).

Us kids had sex with each other because we needed someone, whether it was for five minutes or the night . . . it was the easiest way to get affection (Josie, female ex-resident, 1998).

Now the lads can't get close to you by horseplay (rough, boisterous but jokey physical interactions) because that's now banned, they'll give you a dig on the arm [or] brush against you or tap you, because it's a way of getting contact and not being soft (Bob, male RCW, 1998).

There were also many silences about restraint touch in the second study because it was ostensibly banned and seen as an unacceptable way to control volatile situations, but some staff commented on other workers exercising coercive and arguably unacknowledged tactile control or punishment.

At [Previous workplace] it was restraints every other day, but here it's pushing or banging a kid through the door (Nick, male RCW, 2017).

This section has therefore demonstrated that fluid boundaries exist between absent and present touch. Although there were uncomfortable silences around children's needs for affection from both staff and children, the children's actions spoke volumes in their furtive attempts to procure substitute 'affectionate' touch through various ingenious tactics. The presence of some touch was also silenced because it did not fit participants' normative discourses of what constituted touch and some children engaged in secretive sexual liaisons but were silent because of (seemingly) tacit awareness such interactions would be disallowed. Furthermore, some adult/child micro-aggressive touch interactions, such as pushing a child, were also covert and not clearly definable as violent touch and were therefore shrouded within silence.

### **Competing meanings and everyday oscillations**

Both studies showed confusion about what constituted positive touch. For example, 'play fighting', oxymoronic in the very juxtaposition of those two words, oscillated between perceptions of being 'good touch' that is, amicable fun, and 'bad touch', that is, violent. Playfighting could therefore switch momentarily back or forth, or turn permanently, from harmless 'play' or 'larking around' to aggressively vying for physical dominance or being part of grooming processes for abuse. Moreover, the meanings of touch as positive, negative (and/or, both) shifted during and across daily encounters. While categorisations of 'good' and 'bad' touch, as per the literature, illuminate different meanings of touch, generally read through their physical form, different receptions and interpretations of the same touch incident, alongside touch forms that children appear to deem better and/or worse depending on context, and/or who was touching them, were evident. This corroborates the spectrum and continuum approach to touch. Silences about not liking being 'affectionately' touched by certain staff were often couched in humour, with no deeper explanation being forthcoming.

Interviewer: So what do you feel about being hugged by staff?

Joshua: Depends.

Interviewer: On what?

Jamie: if it's off Dianna, you want to get away as quick as possible. . .  
[Laughs] (Joshua and Jamie, male residents, 2017).

Alternatively, children appeared to silently uncomfortably endure rather than actively reject some staff's seemingly affectionate touch. The following observation pertains to the same staff member mentioned above and her interaction with a different child. It also

suggests abusive staff power dynamics may have been operating as sometimes children were not able to avoid or pre-empt the touch.

Before we left Dianna hid behind Sam and gave him a huge hug. He stood straight and rigid and did not appear to reciprocate the affectionate touch (Field notes, 2017).

In situations of restraint, that in ordinary circumstances would be conceived of as *bad* or *undesirable* touch, children craving touch were sometimes interpreted by staff as engineering such restraints as a substitute for affectionate touch. In such a scenario, this touch could be considered by the child as relatively 'good' and preferable to no touch. However, the interpretation and meaning the incident had for the child depended on the child's relationship with who restrained them, the aggressive or empathic intent underlying the restraint from the staff member, and how sensitively the restraint was handled in both physical and verbal terms. In other scenarios workers and children described restraints being perpetrated punitively and aggressively and causing pain. It seems less likely in those situations (although not impossible, given these children's largely abusive backgrounds), that many children would gain something from an encounter that they perceived as deliberately violating them. In another conversation a RCW described some teenage boys becoming sexually aroused when restrained, but organisational and worker silences surrounded the boys' reactions.

There were a couple of lads who enjoyed it. It wasn't even said in the risk assessment or anything, 'this young man he gets aroused when restrained' but we were never told not to [restrain them]. That was strange (Jake, male RCW, 2017).

The observed sexual arousal does not mean the boys were necessarily sexually enjoying the restraint, as the RCW suggested. The arousal could have been unwanted but linked to previous or even ongoing physical or sexual abuse, or the boys could have been sexually attracted to the person restraining them and hugely embarrassed. This represents another example of seemingly bad touch that may or may not have been positive in the child's eyes in some ways. However, in other situations, as described by the children, attempts to touch them in supportive or nurturant ways by staff that they liked were received with unequivocal appreciation. These touch instances therefore came closer to notions of 'good touch' as explicated in the literature.

I just felt like he cared for me. It made me feel, there's not evil in the world, there's happiness (Mark, male resident, 2017).

When I'm having a breakdown, staff that I know. . . Like a comfort, it's going to be alright. If you're happy, and tap on the back (Sue, female resident, 2017).

At the other end of the scale were more ambiguous touch incidents where hypothetical meanings derived from ethnographic observations contradicted the residents' comments. In the following extract, the interviewer asks Amelia about her feelings when two female RCWs brush her hair:

- Interviewer: Chloe was brushing your hair before you went to bed. Is that something you like?
- Amelia: No, I don't have a choice in it, because it keeps her happy and shuts her up if she's brushing my hair. . .
- Interviewer: Is it something like that you like or dislike?
- Amelia: I don't know. Sophie does it too and it shuts Sophie up. So I'm kind of just letting them do it.
- Interviewer: So it's not something that you actively, would you say that you wanted it, or you didn't want it?
- Amelia: I don't know. . .
- Interviewer: Does it make you feel anything?
- Amelia: No. . .
- Interviewer: Not relaxed or anything before bed or. . .?
- Amelia: Not really.
- (Amelia, female resident, 2017)

Although the interviewer persists in attempting to discern Amelia's feelings, Amelia silences her by blocking the questions, despite the researcher having previously observed her becoming calmer and more relaxed when her hair is being brushed. This reticence eludes clear comprehension. Did Amelia experience the hair brushing positively, negatively or ambivalently, and why did she not disclose her emotions? Perhaps Amelia was honestly indifferent to the touch, could not process how she felt, or believed admitting enjoying this touch would render her vulnerable. Solely from this information, we cannot know which interpretation, if any, or indeed if all of them, are partially correct. However, because of the temporal and contextual situationality, at a later point in time, more information may offer a clearer understanding.

### **Speaking out, silences and multivalent communication**

Silence was located on a continuum/spectrum in form, meaning and antecedents, and dynamic changes occurred from clearly enunciated verbal communication to voluntary silence or being silenced or muted, or vice versa. Frequently, possible meanings associated with touch were communicated nonverbally through bodily gesticulations and idioms, or via metaphors or covert language, suggesting silence or partial silence was never completely about words, sounds or direct speech. Humour was also often invoked, to deflect attention away from an issue, to minimise its potential seriousness, or conceal embarrassment or vulnerability. In the section on absent/present touch, children were vocally silent about desiring affectionate touch, but inventively procured substitute touch in different ways, often unrecognised as such by staff, creating another silence. In the second section, the relativity, dynamism and contextual and relationship-based nature of what constituted good or bad touch was illustrated. Interpretation was, however, complicated by the layered multiple silences touch was encompassed within. In these two sections the meanings underlying many touch forms were communicated nonverbally as they occurred. In situations even when touch was unequivocally reported positively, within the research, there was still silence surrounding it from both parties at the time it

occurred. In other situations, involving both staff and children, there were previous (to the research) attempts to verbally communicate concerns about negatively experienced touch incidents. These verbal utterances were frequently either silenced or were wavering and partial, often accompanied by non-verbal gesticulations. Interestingly in all the following examples, negative touch with potentially uninvited sexual connotations, is involved, suggesting children do sometimes actively verbally communicate about unwanted touch that they perceive as sexual.

In the first study some children tried to disclose previous sexual abuse to workers, but they were silenced through being misunderstood because the children did not possess the vocabulary to accurately convey the situation.

I tried to tell them many times why. I said, 'my uncle comes over and he likes to play with me' and they said, 'that's nice'. I said 'he takes me for walks down the cemetery and buys me ice creams' and they never picked up. I never had the words to say he was abusing me (Louise, female ex care resident, 1998).

However, even well comprehended lucid disclosures could be ignored and thereby silenced. A 15-year-old boy in the second study, Jamie, had to disclose to three RCWS that the manager frequently stroked his legs under the bed covers when he was asleep and had kissed him on the neck on Christmas Eve, before action was taken.

Jamie also said he had told Sharon (RCW) and Diana (RCW) before me, but neither said anything. . . They were relieved though, when I spoke up (Mike, male RCW, 2017).

Some RCWs raised concerns about the sexual/physical peer behaviour of residents and questioned what they should do, but they too were silenced through being disregarded.

The older boy kept play fighting with the younger one and grabbing him between the legs and the younger one got really upset, so I went to the manager and asked her what to do and she ignored me. So, I was left wondering what was normal for boys that age (Saffron, female RCW, 1998).

Staff later formally found to have sexually abused children also bullied lower grade workers into silent fearful acquiescence through racism, sexism and humiliation, or through uncovering others' vulnerabilities and weaponising that knowledge against them. The following quote is from a West Indian RCW who suffered racial stereotyping and bullying when he complained.

When I stood up for my and the children's rights, the manager kept saying I wasn't pulling my weight and that I was aggressive. And he had me relentlessly doing menial jobs unnecessarily, cleaning the gutter, litter and cleaning the house four or five times a day. At meetings they also gave me a cup with a monkey on it and expected me to find it funny (Simon, male ex-RCW, 1998).

This next example involved two RCWs who complained about the home manager behaving inappropriately with children. They were ignored by senior management and then

disempowered and silenced through being publicly denounced as adulterers by the same manager. They left their posts shortly afterwards.

These caseworkers, both married but having an affair, complained about the manager. In the dining hall he told everyone about their affair and denounced them as being immoral and untrustworthy. He then asked the kids to let him know if they were making moves towards each other, and the kids just disrespected them and started teasing them after that (Stella, female RCW, 1998).

In the second study, the worker who formally reported a teenager's allegation also received repercussions, but these were more covert.

He's applied for a full-time post on three occasions and hasn't got the job, despite regularly working over full-time hours. He knows why . . . and so does everyone else (Peter, male RCW, 2017).

These examples show that silencing those who may or do attempt to speak out about abusive touch is achieved through multiple strategies. These include ignoring them, manipulation, bullying, harassment and discrimination. In the second study, after the disclosures of abuse by Jamie in relation to the manager, the incidents were eventually formally investigated but the manager was cleared and returned to the home. Although some RCWs described the manager as 'creepy, when the researcher tried to discern their views on the 'abuse' incident, their verbal responses were curt and appeared fearful, with them consolidating their silence by physically exiting the situation. This represents a double silence, involving both visual and auditory vanishment.

- Frank: As we found out recently. . .  
 Jane: With the incident here?  
 Frank: As we found out recently with an incident here. . .you know?  
 Interviewer: How do you think this was handled?  
 Frank: How do I what?  
 Interviewer: How do you think this was handled?  
 Jane: Badly.  
 Interviewer: Why do you think badly?  
 Frank: (points to tape recorder) I'm wary. . .  
 Jane: Mm. I think it's time for a cigarette (stands up and leaves).

The following conversation between Jamie, the boy who made the allegation, his friend, and the researcher, also reveals the complexity of and different forms of communication deployed. The boys' responses are channelled through body language, attempts at humour, pauses, homophobic verbalisations and commands (e.g. *tell her!*) and involve both silences and veiled or partial disclosures.

- Interviewer: In your ideal staff team, who would you have?  
 Joshua: Joe, Rachel . . . . . Dave can go. . .  
 Jamie: (laughs)

- Interviewer: Why can Dave go?  
 Joshua: Gay boy man.  
 Jamie: What?  
 Joshua: Full on gay boy.  
 Interviewer: What are your thoughts on Dave?  
 Jamie: I don't like Dave.  
 Interviewer: You don't like him?  
 Jamie: No.  
 Interviewer: Not ever?  
 Jamie: No he's just . . . (laughs)  
 Joshua: (Laughs)  
 Jamie: He knows!  
 Interviewer: You what?  
 Jamie: He's a dick. He's a fucking weirdo.  
 Interviewer: You think he's weird?  
 Jamie: Yeah!  
 Interviewer: Why do you think he's weird?  
 (Both laugh)  
 Jamie: Tell her! (to Josh)  
 Interviewer: You don't have to tell me.  
 Jamie: You know when, someone wakes you up and they start doing this on your leg (*demonstrates moving hand up and down in floppy manner*).  
 Interviewer: Yeah.  
 Jamie: What you going to think of? (Laughs)  
 Joshua: And then on Christmas giving you a kiss on the neck.  
 (Jamie and Joshua, male residents, 2017)

This extract is characterised by several pauses (silences) between saying who can stay and *'Dave can go'*. Silence is also invoked through indirect speech in describing the alleged perpetrator as *'you know when someone does . . .'* rather than stating Dave did this to him. Significantly, Jamie is silent and not silent on abuse. Jamie indicates it happened but more through gesticulations and homophobic language than clear explanation. He also asks the interviewer to contemplate their thoughts if it had happened to them, rather than using direct speech. Jamie also asks his friend to explain the situation to the researcher, on his behalf. Here there are verbal silences around directly naming the abuse and the abuser but denunciations of Dave and bodily enactments of what happened seem to convey a definitive, but not clearly vocalised message. It is also possible that since an investigation had cleared the manager of impropriety and he had returned to manage the home, that some of the boys' silences were associated with their self-perceived powerlessness and a resignation to the situation and status quo.

## Discussion and conclusions

Although previous research developed separate touch and silence categorisations (Aquino and Lee, 2000; Kirrane et al., 2017), this paper shows silence and touch's conjoined

meanings and forms are sometimes overlapping, multidimensional, fluid and ambiguous. *Touch-silence constellations* developed in this paper illuminates how different and competing silences emerge and develop over time from various touch practices, both being bound to institutional and personal biographies, that are in turn historically and socially grounded. From this perspective, silence and touch need to be examined together as intersecting continuums and located within their emergent historical and institutional context, rather than understood as discrete and static, generic categorisations. However, the complexities involved in interpreting touch and then deciphering its links with silence, are manifold in our analysis, exacerbated by the difficulties in recognising, naming and interpreting hitherto largely disregarded or unnoticed types of silences and touch.

These insights are significant, showing that existing categorisations, identified largely by external appearance, such as 'good' and 'bad' touch, do not have solid, uniform meanings. Many silence categories within extant literature similarly conceptualise silence as soundlessness or a lack of vocalisation. Some vocal silences in our work could be linked to extant silence categorisations, showing overlapping elements of, for example, organisational, acquiescent, privileged and defensive silence (Kirrane et al., 2017; Morrison and Milliken, 2000). However, our conceptualisation of silence extended, like Spyrou (2015), beyond these literal one-dimensional understandings. Silences were not only evident in quietude or overt refusal to discuss touch-related issues or incidents, but were inherent within humour, pauses, verbal attempts to deflect and reframe, the use of indirect speech, meta-language, slang, metaphorical speech, bodily expressions and in physically exiting the situation. Silence also occurred through a lack of recognition of or the misrecognition of touch. Silence could therefore at different times or even simultaneously be used to both block communication and to actively communicate, albeit being a form of communication that was inevitably difficult to decipher.

As Foucault (1979: 27) asserts, '[perhaps] there is no binary division to be made between what one says and what one does not say; we must try to determine the different ways of not saying such things, [and] how those who can and those who cannot speak of them are distributed'. Taking our cue from Foucault's exhortation, we revealed the complexities of and distributions of generational and organisational power when touch and silence are entwined within institutional settings, where traumatised children live, and where historical precedents engendered disproportionate fear about potential institutional abuse. Silences (about the desire for touch) were deployed by the children, as a form of resistance to power which might further disempower them if their vulnerabilities were exposed. These silences were also simultaneously evidence of the children's powerlessness to overtly express their needs and have them met, with a further twist revealing them exercising web-like subterfuge power to procure substitute touch in hitherto unrecognised and creative ways. Some staff in higher managerial positions exercised their organisational and rank power to silence their subordinates through ignoring them, manipulation, harassment and veiled threats. The RCWs' anxiety about their actions being misinterpreted, or of adverse organisational repercussions, manifested itself both in their silence around the children's touch needs and their general reluctance to proactively proffer nurturant touch, as well as the fearful silences of some staff who children had disclosed abuse to. However, RCWs still exercised considerable potential positive and negative power over the children, illustrated by both deployment of nurturant affectionate touch and sadistic restraints and micro aggressive incidents.

Our analysis also underlines the role of tacitly-based social conventions embedded in cultures of secrecy, which simultaneously construct and confound cryptic touch/silence incidents. Across both studies, many staff and children ‘knew’ or operationalised tacit and/or explicit cues, regulating when to stay silent about touch issues and when to say something and to whom, knowledge that sometimes resists verbalisation. An inability to verbalise or being misunderstood can also be located within established power hierarchies (McLaren, 2016) whereby some issues are illuminated and others suppressed or unrecognised (Lukes, 2004) and where marginalised groups’ voices, including children’s, may be incomprehensible, muted or misconstrued (Wagner, 2012). The construction of silence is therefore contingent (partially) on sounds (e.g. language and laughter) and on non-verbal knowledge cultures (e.g. bodily knowledge, *hexis* and *doxa*) (Bourdieu, 1992). We therefore conceptualise silence as contested and evolving; as bodily and embodied.

The touch/silence convergences examined here and linked through the novel concept of *touch/silence constellations*, differ from where children are not in public-sphere residential settings, being cared for by paid staff. The occupational ‘emotional labour’ (Hochschild, 2012) and ‘body work’ (Twigg et al., 2011), expected from residential workers, engenders greater involution than normative parent/child kinship touch in ordinary domestic settings. We are not suggesting attempts to foster nurturing ‘touch’ in residential care should be abandoned, because of these complex issues, nor that all silences in residential care involve touch, or that all touch evokes silence. However, these children strive to have their unmet needs for physical affection satisfied, often through silent unacknowledged means. Silences also pervade many directly touch-abusive and sometimes non-abusive situations. As there are no previous theorisations of touch/silence interactions, this study makes a valuable contribution to the literature on both silence and touch, with specific reference to residential childcare. It illuminates the multiplicity of silences around different forms and ways of touching in residential care; the overtly complex character of both concepts, along with cultural nuances in how both are framed theoretically, and contested meanings relating to context. Although more research and theorisation on touch/silence interactions in children’s homes and other settings are required, our findings and the implications drawn from them strongly suggest child-centred and flexible policy and practice initiatives need to be developed for residential child care. Our insights may also have relevance in other situations involving children’s health and wellbeing.

### **Declaration of conflicting interests**

The author(s) declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

### **Funding**

The author(s) received no financial support for the research, authorship, and/or publication of this article.

### **ORCID iD**

Lorraine Green  <https://orcid.org/0000-0001-7861-4991>

## References

- Aquino A and Lee S (2000) The Use of Non-erotic Touch with Children: Ethical and developmental considerations. *Journal of Psychotherapy in Independent Practice* 1(3): 17–30.
- Baeza S, Butler S, Smith S, et al. (2019) Trampolines and Minefields: The use of touch during home-based child protection visits in England. *Practice* 31(3): 187–203.
- Berridge D, Biehal N and Henry L (2011) *Living in Children's Residential Homes*. London: Department of Health.
- Biehal N, Cusworth L, Wade J, et al. (2014) Keeping Children Safe: Allegations concerning the abuse or neglect of children in care. Final report, NSPCC/University of York, June.
- Bourdieu P (1992) *The Logic of Practice*. Cambridge, MA: Polity.
- Braun V and Clarke V (2006) Using Thematic Analysis in Psychology. *Qualitative Research in Psychology* 3(2): 77–101.
- Bunkers S (2013) Silence: a double-edged sword. *Nursing Science Quarterly* 26(1): 7–11.
- Caranfa A (2013) Socrates, Augustine, and Paul Gauguin on the reciprocity between speech and silence in education. *Journal of Philosophy of Education* 47: 577–604.
- Eßer F (2018) Touch in residential child care: Staff's bodies and children's agency. *European Journal of Social Work* 21(2): 285–295.
- Ferguson H (2011) *Child Protection Practice*. London: Palgrave Macmillan.
- Field T (2014) *Touch*, 2nd edn. London: MIT Press.
- Foucault M (1979) *The History of Sexuality Volume 1: An Introduction*. New York: Pantheon.
- Government of Ireland (2019) *The Report of the Commission to Inquire into Child Abuse*. Available at: gov.ie (accessed 25 November 2020).
- Green L (1998) *Caged by force, entrapped by discourse: A study of the construction and control of children and their sexualities within residential children's homes*. Unpublished PhD Thesis, University of Huddersfield, UK.
- Green L (2005) Theorising sexuality, sexual abuse and residential children's homes: Adding gender to the equation. *British Journal of Social Work* 35(4): 453–481.
- Green L (2017) 'The trouble with touch?' New insights and observations on touch for social work and social care. *British Journal of Social Work* 47(3): 773–792.
- Green L, Butt T and King N (2002) Taking the chaste out of chastisement: An analysis of the sexual implications of the corporal punishment of children. *Childhood: A Global Journal* 9(2): 205–224.
- Green L and Day R (2013) 'To touch or not to touch? Exploring the dilemmas and ambiguities associated with touch in social work and social care settings. In: Carey M and Green L (eds) *Practical Social Work Ethics: Complex Dilemmas in Applied Social Care*. Aldershot: Ashgate.
- Green L and Moran L (in press) Covid-19, social distancing and the 'scientisation' of touch: Exploring the changing social and emotional contexts of touch and their implications for social work. *Qualitative Social Work*. DOI: 10.1177/1473325020973321.
- Hammersley M and Atkinson P (1995) *Ethnography: Principles in Practice*, 2nd edn. London: Routledge.
- Hochschild A (2012) *The Managed Heart: Commercialization of Human Feeling*, 3rd edn. California: University of California Press.
- Jackson S and Scott S (2013) Childhood. In: Payne G (ed.) *Social Divisions*, 3rd edn. Basingstoke: Palgrave Macmillan.
- Jaworski A (1993) *The Power of Silence: Social and Pragmatic Perspectives*. London: SAGE.
- Johansson C (2013) Views on and perceptions of touch avoidance: An exploratory study. *Current Psychology* 32: 44–59.

- Kendrick A and Smith M (2002) Close enough? Professional closeness and safe caring. *Scottish Journal of Residential Child Care* 1(1): 46–54.
- Kirrane M, O’Shea D, Grazi A, et al. (2017) Investigating the role of discrete emotions in silence versus speaking out. *Journal of Occupational and Organizational Psychology* 90(3): 345–378.
- Lewis A (2010) Silence in the context of child voice. *Children and Society* 24(1): 14–23.
- Linden DJ (2015) *Touch: The Science of Hand, Heart and Mind*. London: Viking.
- Lukes S (2004) *Power: A Radical View*, 2nd edn. London: Red Globe Press.
- Lynch R and Garrett P (2010) ‘More than words’: Touch practices in child and family social work. *Child and Family Social Work* 15(4): 389–398.
- McLaren HJ (2016) Silence as power. *Social Alternatives* 35(1): 3–5.
- Mazzei L (2003) Inhabited silences: In pursuit of a muffled subtext. *Qualitative Inquiry* 9(3): 355–368.
- McNeil-Haber FM (2004) Ethical considerations in the use of nonerotic touch in psychotherapy with children. *Ethics and Behaviour* 14(2): 123–140.
- Moran L and Green L (2020) Social distancing as ‘Scientization’: UK and Irish Policy responses to Covid-19, touch and emotions. *Irish Journal of Sociology*. Epub ahead of print 13 July 2020. DOI: 10.1177/0791603520941455.
- Morrison EW and Milliken FJ (2000) Organizational silence: A barrier to change and development in a pluralistic world. *The Academy of Management Review* 25(4): 706–725.
- National Statistics (2019) Children looked after in England including adoption, year ending 31 March 2018. Available at: [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/757922/Children\\_looked\\_after\\_in\\_England\\_2018\\_Text\\_revised.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/757922/Children_looked_after_in_England_2018_Text_revised.pdf) (accessed 25 November 2020).
- O’Malley-Halley J (2007) *Boundaries of Touch: Parenting and Adult-Child Intimacy*. Chicago, IL: University of Illinois Press.
- Owen PM and Gillentine J (2011) Please touch the children: Appropriate touch in the primary classroom. *Early Child Development and Care* 181(6): 857–868.
- Paterson M (2007) *The Senses of Touch: Haptics, Affects and Technologies*. Oxford: Berg Publishers.
- Sakson-Obada O (2014) Body ego and trauma as correlates of comfort in the physical proximity of others. *Polish Psychological Bulletin* 45(1): 92–100.
- Scott S (2017) A sociology of nothing: Understanding the unmarked. *Sociology* 52(1): 3–19.
- Spyrou S (2015) Researching children’s silences: Exploring the fullness of voice in childhood research. *Childhood* 23(1): 7–21.
- Twigg J, Wolkowitz C, Cohen RL, et al. (2011) Conceptualising body work in health and social care. *Sociology of Health and Illness* 33(2): 171–188.
- Van Elferen I and Raeymaekers S (2015) Silent dark: The orders of silence. *Journal for Cultural Research* 19(3): 262–273.
- Wagner R (2012) Silence as resistance before the subject, or could the subaltern remain silent? *Theory, Culture and Society* 29(6): 99–124.
- Warwick L (2017) *Touching matters: An ethnographic study of adult/child relationships and the use of touch in residential child care*. Unpublished PhD Thesis, University of Nottingham, UK.
- Wilkins D, Shemmings D and Pascoe C (2019) *Child Abuse: An Evidence Base for Confident Practice*, 5th edn. London: Oxford University Press.
- Winter K, Cree V, Hallett S, et al. (2016) Exploring communication between social workers, children and young people. *BJSW* 47(5): 1427–1444.
- Wyness M (2011) *Childhood and Society*, 2nd edn. Basingstoke: Palgrave.
- Yoshida K and Shanouda F (2015) A culture of silence: Modes of objectification and the silencing of disabled bodies. *Disability and Society* 30(3): 432–444.