

When Stories Seem Fake

Tacit Mistrust in Domestic Violence Counselling in South Africa

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While it is commonly agreed that trust plays a major role in counselling and therapeutic interventions, mistrust as a constitutive component has largely been overlooked in the literature.¹ Drawing on ethnographic material obtained in urban South African women's shelters and other institutions offering counselling to victims of domestic violence, this chapter discusses counsellors' generalized mistrust towards women's stories of abuse and the ways in which mistrust materializes in the counselling encounter.

I suggest that in the context of domestic violence counselling, generalized mistrust brings forth a specific mode of interaction characterized by a tacit structure. To use an image from the realm of the magician, I refer to interactions guided by mistrust as inherently *doppelbödig* (engl.: double-layered). Like the magic hat that hides objects in an invisible compartment, mistrusting actors assume another person to purposefully hide "the truth".² As will be shown, suspecting a client of lying provoked counsellors to follow a hidden agenda themselves: quietly looking for clues in clients' stories or behaviour, counsellors attempted to find out the truth that they assumed beneath the surface of a made-up story. I suggest that in order for mistrust to remain tacit and not to become explicit – for example, in the form of accusations – mistrusting actors need to be able to walk a thin line, engaging in concealment and information-generating practices simultaneously.

In the course of my research on institutionalized domestic violence counselling in South Africa, many of the counsellors I spoke to reported that they

1 | Many thanks go to my colleagues who significantly helped to strengthen the text's line of argumentation with their valuable feedback and constructive criticism. Special thanks go to Jay Campbell for assisting the copy-editing process.

2 | In this chapter, single quotation marks are used for highlighting quotations and emic terms, while double quotation marks are used in a distancing manner alluding to the term's ambiguity.

were regularly confronted with women who used ‘fake stories of abuse’ in order to receive accommodation at shelters. Commonly, they cited the high levels of poverty, homelessness and a lack of social services as well as dysfunctional families, or the interplay of these factors, as source of the problem. Therefore, I consider how counsellors’ generalized mistrust is connected to socio-political structures and how it inspires specific practices at shelters in turn. Here, in particular, the procedures of ‘screening’ and ‘monitoring’ are discussed. It will be shown that these bureaucratically and therapeutically legitimized practices serve a double purpose. Firstly, they serve to determine if women meet the shelter’s intake criteria and to outline the further course of counselling. Secondly, and less obviously, these practices give counsellors the opportunity to check the veracity of women’s accounts when in doubt. It will be shown that certain characteristics like incoherent stories or (too) common narratives are likely to foster counsellors’ suspicion and scepticism.

Counsellors and social workers offering support for victims of domestic violence agreed that the truth would always come out eventually, it would just take time. Mistrust in the area of my research is thus linked to the conviction of an objective truth that is out there and that can be revealed. As will be shown, when counsellors mistrust, they embark on a truth-hunt (see Brand forthcoming).³

Focusing on how allegedly fake stories of victimhood cause counsellors to mistrust clients, I neither deny the importance of trust in counselling nor question counsellors’ general aim of creating trustful relationships with clients. Rather, attention is brought to the structural conditions that are likely to generate mistrust. In this respect, the overall high levels of mistrust in South African society must be taken into account in order to avoid making mistrust a characteristic unique to shelters. Given South Africa’s colonial history, experiences of racial oppression throughout the apartheid era and current political scandals, the prevalent mistrust of citizens toward the government, authorities and politics in general is hardly surprising (see Askvik and Bak 2005). Numerous newspaper articles as well as scholarly publications have discussed the phenomena of absent trust and prevailing mistrust toward the various spheres of South African society. Take, for example, academic work on mistrust in transnational education projects (Le Grange 2003), in the health sector (Froestad 2005, Richter 2015: 118-121), and of course in the context of security (Kirsch 2010, Landman 2004).

3 | Parts of the empirical material and some of the observations that I discuss in the following appear in the German publication: ‘Praxeologien der Wahrheit im Kontext häuslicher Gewalt in Südafrika. Von Narrativen Identitäten, Authentizität und Evidenz’ (Brand forthcoming).

Given the elusiveness of mistrust as a social phenomenon this contribution begins with methodological notes on how tacit mistrust can be the object of qualitative empirical research. After a brief overview of the current state of the literature discussing trust and mistrust in therapeutic settings, I lay out some conceptual considerations on mistrust. These considerations lay the groundwork for the subsequent analysis of counsellors' generalized mistrust in domestic violence counselling. It will be discussed why mistrust is common amongst domestic violence counsellors and which indicators are likely to provoke suspicion among counsellors towards women's stories. Emphasis is placed on what counsellors do when they mistrust and how they use the practices of screening and monitoring in order to generate information. The text closes with a suggestion to conceptualize mistrust as a trigger for double-layered interactions, thus introducing the German term *doppelbödig* as a heuristic metaphor.

METHODOLOGICAL NOTES ON RESEARCHING TACIT MISTRUST

During a total thirteen months of fieldwork in urban South Africa, I spoke to social workers, counsellors and other professionals offering support services in the area of domestic violence, and when possible took part in their daily routines. At times, I was a silent observer, like at the Domestic Violence Court. At other times, I actively participated, for example, by volunteering at women's shelters. As it became clear during fieldwork, service providers regarded establishing a personal and trustful relationship with clients as a prerequisite for successful counselling.⁴ However, it also became apparent that mutual mistrust affected counselling, especially during the initial counsellor-client encounter.

In her monograph on figures of mistrust, Sinje Hörlin (2016: 19-20) notes that endeavours to empirically research mistrust were complicated by the topic's implicitness and societal taboo. However, 'truth', 'suspicion' and a general doubtfulness about clients' stories were re-occurring topics in most of my interviews, frequently broached by my interlocutors without a targeted inquiry.

Furthermore, after having spent considerable time among counsellors and social workers, I learned to recognize their suspicion on the basis of specific indicators. Depending on the person and circumstances, these could be detailed inquiries during screening, sometimes the tone of voice, or a questioning smile. In this vein, I conceive of mistrust as an attitude that gains social relevance in observable practices making tacit mistrust a viable topic for participant observation. In quiet moments, counsellors would discuss cases with their colleagues and also with me. In staff meetings, information about clients

4 | Most counsellors followed Carl Rogers' (1951, 1961) humanistic, person-centred approach.

was discussed in more detail. Such conversations presented an opportunity for insight into what would provoke counsellors' suspicion, and, therefore, enabled me to recognize suspicion, scepticism and doubt in specific contexts. Therefore, I suggest that long-term ethnographic research offers the opportunity to observe and to analyse tacit mistrust in everyday interactions on the micro-level. In order to do so, researchers must be able to identify context-specific expressions of mistrust and their normative purport.

THE COUNSELLOR-CLIENT RELATIONSHIP IN THE LITERATURE

The relationship between therapist/counsellor and client has inspired a wide range of studies in different disciplines. A large corpus from the field of psychology indicates the importance of the 'therapeutic alliance' – the relationship between therapist and client – for a positive therapy or counselling outcome (see Ardito and Rabellino 2011). In this respect, it has been shown that the therapist's ability 'to instill confidence and trust within the therapeutic frame' (Ackerman and Hilsenroth 2003: 4) is crucial for the formation of a bond that in turn influences the therapeutic process positively. Compared to studies focusing on trust within the therapeutic context, less attention has been paid to the role of mistrust (see Cook et al. 2004). Especially in the 1980s and 1990s, mistrust in therapy or counselling was widely discussed in respect of 'cultural mistrust' analysing the relationship between "black clients" and "white therapists" (Terrell and Terrell 1984, Nickerson et al. 1994).

While it is widely acknowledged that clients' mistrust towards therapists or counsellors impacts negatively on therapeutic performance, knowledge about how counsellors' mistrust towards clients affects treatment is scarce. From interdisciplinary research conducted in medical settings we know that mistrust between physicians and patients increases reciprocally (see Cook 2004). Furthermore, research from medical anthropology reveals the need to closely examine counsellors' and therapists' mistrust, which would point to a connection between mistrust and treatment insecurities (Merrill et al. 2002).

In this respect, it is important to take a closer look at the role of the counsellor. The everyday work of the domestic violence counsellors I did research with was mainly characterized by two areas of responsibility: the offering of socio-psychological counselling, and the adherence to and practice of bureaucratic rules and procedures. As domestic violence counsellors at the same time offer social services and, rather autonomously, regulate access to these services, they fall under the rubric of street-level bureaucrats (Lipsky 2010, see also Kelly 2016 for doctors allocating disability grants). This positioning in a double-role is fraught with conflict. With each role demanding and operating according to specific logics, practices, rhetoric and truth-assumptions, counsellors often

found themselves in dilemmas that called for nuanced decision-making. Given their moral identity as helpers (see Kolb 2014), having to restrict their services to women who met the legal definition of “the domestic violence victim”, constituted a challenging aspect of their everyday work for many.

In this sense, the presence of generalized mistrust towards women’s stories of abuse allowed counsellors to reduce complexity, at least in the long run. The discussion of the empirical material will show that in developing habitualized practices and simplifications, like the use of stereotypes in decision-making processes, counsellors were able to discriminate between those who deserved assistance and those who did not. However, Niklas Luhmann’s (1979, 2014 [1968]) understanding, according to which mistrust is to be seen as a functional equivalent of trust inspiring complexity-reducing strategies, fails to acknowledge the analytical potential of mistrust. It is my aim to go beyond this conceptualization and to show that, at least with regards to action-theory, interactions driven by mistrust are fundamentally different to those based on trust. In the following, I will discuss how I use mistrust on a conceptual level.

CONCEPTUAL CONSIDERATIONS

In light of what little attention mistrust has received as a distinct phenomenon in the social sciences, I will spell out some conceptual thoughts before engaging in the analysis of the ethnographic material. In the literature, diverse conceptualizations of mistrust can be found that mostly make sense of the phenomenon in relation to trust, usually describing mistrust as its flipside (Van de Walle and Six 2014, Hörlin 2016). Moreover, it is commonly assumed that while trust is an inherently positive force fostering social integration and sociality, mistrust evokes social fragmentation and is, therefore, potentially dangerous or even contagious (Hosking 2014, Hörlin 2016: 9-14). In most of these studies, trust and mistrust are understood to form an equilibrium: diminishing levels of trust are thought to result in an increase of mistrust and vice versa.

However, to equate the absence of trust with the presence of mistrust would suggest that social actors are always engaged in either trust or mistrust relationships. This paints a rather simplistic picture of the social world. Philosopher Edna Ullmann-Margalit offers a more nuanced perspective. According to her ‘if I do not trust you, this could mean either that I distrust you – that is, that I have reasons to positively distrust you – or, more minimally, that I just have no reasons to trust you (nor to distrust you either)’ (Ullmann-Margalit 2001: 61). What Ullmann-Margalit describes as the absence of both distrust and trust, corresponds to Alfred Schütz’s notion of the ‘natural attitude’ in which ‘every state of affairs’ is taken for granted and remains ‘unproblematic until further notice’ (Schutz & Luckmann 1973: 4). I suggest that it is the ‘until further no-

tice' that arouses people's suspicion and introduces the need to switch from a natural attitude to an attitude that allows the conscious problematizing and scrutinizing of one's lifeworld. In this respect, I subscribe to the perspective of historian Geoffrey A. Hosking, who conceptualizes mistrust and trust as attitudes:

It is a more or less lasting view held about some object, event, or person(s) in the outside world. It is a frame of mind, outlook, or perspective which influences one's behaviour or one's disposition to act or think in certain ways. (...) The attitudes may well be shared by others, and in that way are part of the social fabric. (Hosking 2014: 27)

In line with Hosking's definition, I argue that mistrust is an attitude (German: *Haltung*) that enables and demands from actors a critical engagement with the world and the people with whom they interact. Furthermore, mistrusting actors are inclined to perceive – or rather, to identify – specific phenomena as suspicious, as indicative of an allegedly purposefully hidden truth. Which phenomena are likely to arouse one's suspicion is highly contextualized and dependent on the situation as much as on one's classification of past experiences.

Being aware of their subtle differences, I treat the terms suspicion, scepticism and doubt as part of the same semantic field and use them interchangeably. All three terms occur in the context of actors' normative evaluations of phenomena or people and point to uncertainty and ambiguity. Hence, I regard suspicion, scepticism and doubt as part of a process in which actors form or lose convictions about reality (see Pelkmans 2013, and this volume). In comparison, I conceive of generalized mistrust as a fundamental attitude that develops and persists over time.

For the analysis of counsellors' mistrust towards clients' stories, I prefer to speak of generalized mistrust in order to distance my observations from psychologizing accounts that focus on actors' individual characteristics. Furthermore, the term points to the socio-political conditions and constellations that may foster counsellors' suspicion of certain narratives or a woman's demeanour. As will be shown, service providers' generalized mistrust is based on knowledge about cases in which women were identified as having accessed shelter services by means of fabricated stories. This knowledge was mostly based on first-hand experiences and was substantiated by experiences that had been made by other counsellors and service providers. Hence, generalized mistrust is an attitude that develops over time and that – as it is shared among counsellors across institutions – has become part of the social fabric.

As Luhmann observes, there are social systems in which participants' mistrust cannot be avoided and may even be needed. He further suggests that these systems necessarily need mechanisms preventing mistrust from prevailing. A strategy for achieving this may be found in rationalizing acts of mistrust as

systemic necessities, professional duties or as factual interventions (Luhmann 2014 [1968]: 100). Mistrust then becomes a feature of the system itself and is not attributed to actors individually. In this vein, at women's shelters, practices of mistrust are framed as institutional requirements and become attributed to external structural causes, so losing their otherwise personal implications. Most importantly, they allow mistrust to remain tacit while enabling counsellors to generate information.

As these conceptual remarks make clear, I regard mistrust as a social phenomenon requiring analysis in its own right, without its being situated in normative orders *ex ante*. Unlike in most debates, in the case of counsellors' generalized mistrust towards clients, mistrust did not appear as a "bad" inclination that needed to be overcome in favour of fostering trustful relationships. To the contrary: it enabled counsellors to differentiate between those who qualified for support services and those who did not. In this way, mistrust was constitutive and linked to the allocation of meagre resources. However, as will be shown in the following, there was room for manoeuvre, for 'being out of line', and for making exemptions. It is these exemptions that highlight the conflicting positions of the counsellor as street-level bureaucrat.

With these considerations in mind, I will now turn to the analysis and discussion of my empirical material. To begin with, I will introduce the field of domestic violence counselling explaining the legal framework that forms the basis for victims' rights to counselling and assistance.

THE FIELD OF DOMESTIC VIOLENCE COUNSELLING

In South Africa, violence is a phenomenon that permeates various spheres of people's mundane reality. According to a survey commissioned by the South African Government in 2007, it is a country characterized by a 'culture of violence' and, furthermore, by a pervasive and normative acceptance of violence (CSVR 2010: 4). The survey emphasized that, especially among young men, violence was seen as a legitimate tool whereby to gain respect. Today, these observations still hold true. Among the high levels of interpersonal violence, the prevalence of (reported) cases of violence against women is particularly alarming. Despite progressive legislation and a vast number of initiatives tackling the issue on the national, provincial and local level, governmental attempts to counteract incidences of domestic violence have encountered severe difficulties in practice (Watson 2014, Moeketsi 2013, Bendall 2010).

In comparison to the vague policies regulating the allocation of disability grants (Kelly 2016), the South Africa's Domestic Violence Act (1998) seems to offer a relatively precise and extensive legal framework on first sight. According to the Act, domestic violence is not limited to physical assaults, but also in-

cludes sexual, emotional, verbal, psychological and economic abuse as well as intimidation, stalking, harassment, damage to property and entering the residence of the complainant without consent. However, which actions constitute emotional or verbal abuse is open to interpretation. Moreover, some women's shelters specifically render services to 'women in crisis'. Again, what constitutes a crisis is far from clear and rather elusive.

Reflective of the dominant transnational rights-based approach of measures against domestic violence against women (Merry 2003), in South Africa, awareness raising campaigns like '16 Days of Activism Against Gender-Based Violence' encourage women who have experienced abuse to exercise their rights. Hence, in identifying oneself and, more importantly for the purposes of this contribution, in being identified as a victim of domestic violence by authorities and service providers, women become part of a collective subject – a status that entails certain rights and entitlements. As stated in the Service Charter for Victims of Crime in South Africa, as a victim 'you have the right to request assistance and, where relevant, have access to available social, health and counselling services, as well as legal assistance.' A victim of domestic violence therefore has the right to receive counselling and, if needed, the right to be accommodated at a women's shelter. In the province of Gauteng where I conducted most of my research, women's shelters received governmental subsidies via the Victim Empowerment Programme that prescribes minimum standards for shelter services. Consequently, shelters are required to offer accommodation, toiletries and food as well as counselling and skills programs. These services are either offered free of charge or for comparatively small financial contributions. Given the high levels of poverty and homelessness in South Africa, for many women in need, staying at a women's shelter offered securities and opportunities to improve their lives – regardless of whether they had experienced abuse or not.

Women who have experienced domestic violence may need a wide range of support including medical treatment, legal assistance, therapeutic services and emergency or long-term housing. These needs reflect in the highly diversified and specialized institutional landscape of domestic violence support services. Consequently, clients pass through different institutional contexts as they are referred for complimentary services from one institution to another.

With regard to the formation of generalized mistrust, the referral system plays an important role. For instance, being referred from the South African police to the Department of Social Development, to NGOs offering counselling, to women's shelters or the Domestic Violence Court, women who have reported domestic violence will be passed along a chain of institutions, each encounter demanding their story of abuse to be told according to a distinct logic. As will be shown in the following, service providers suspected that in the process of

bureaucratic socialization incorporated by the referral system, women learnt how to relate and how to adjust their stories in order to increase credibility.

LOOKING FOR AN ASSUMED HIDDEN TRUTH. WHAT COUNSELLORS DO WHEN THEY MISTRUST

When counsellors mistrust their clients, their suspicion and disbelief towards women's stories gain social relevance in the form of 'screening' and 'monitoring'. These practices allow counsellors to ask for details and make further inquiries as part of bureaucratic and therapeutic routines employed to determine whether women qualify for shelter services. Thus, in this setting, mistrust is connected to the realm of the formal, to bureaucratic and therapeutic practices largely unquestioned by shelter clients. In the following, it will be discussed how counsellors make use of screening and monitoring as part of shelter procedures. The discussion will show how counsellors' everyday work is structured and influenced by both therapeutic and bureaucratic affordances. Furthermore, it will become clear how screening and monitoring allow mistrust to remain tacit during counselling.

The initial encounters between counsellor and prospective client largely follow a bureaucratic protocol. When women arrive at a shelter, firstly, a counsellor or social worker fills in a drop-in form to gather basic information – a process that can be seen as a short assessment. For example, women will be asked to provide their contact details and identification of which a copy will be made and retained in their file. For each woman who comes to stay at the shelter, a file is compiled in which all information relevant to her case is kept. If after the first assessment there are no apparent reasons not to admit a woman – for example, if it is obvious to the counsellor that the woman is homeless or mentally challenged – a full assessment, called 'screening', will follow.

The screening process is structured by an 'admission form' and serves to establish if women qualify for shelter services. The form covers clients' biography and information regarding the current living and working situation. As part of the process, counsellors ask clients about their experiences and note relevant information in the form's respective columns. Though the exact form will differ from one institution to another, it will usually ask for similar details. In the following, an admission form used by Samaria Women's Shelter⁵ is discussed exemplarily.

The first page of the admission form refers to personal, yet basic information regarding children, employment, and former contact to shelters. The next

5 | Names of institutions and individuals have been anonymized.

two pages are focused on retrieving more sensitive information and are prefaced with an explanation:

The following questions are very personal and are aimed at assessing the most appropriate counselling that you will require and not aimed at judging you in any way. Please be honest and discuss with your interviewer if you have any queries. This information will be kept confidential and only shared with your consent.

The preamble is interesting as it explicates what for many women coming to the shelter is a concern: the fear of being judged or not taken seriously. Addressing the non-judgmental approach in such a bureaucratic way, however, clearly produces an ambiguous quality. On the one hand, it explicates and attempts to negate the client's assumed fear and hesitation towards counsellors. On the other, it introduces the possibility of any judgement at all and may heighten women's wariness by default.

In the subsequent section on abuse and trauma, women have to tell their individual 'history of abuse' covering physical, sexual, and emotional abuse as well as whether or not they have experienced domestic abuse in the past. An open section follows in which 'any other traumatic experiences' may be noted, as well as 'any other comments you feel are important from a counselling point of view'. The questionnaire closes with information regarding if, when and where abuse was reported. The client then needs to sign the form confirming that questions were answered 'honestly and openly'.

Samaria's admission form explicitly refers to the need for truthfulness twice: first in the context of 'assessing the most appropriate counselling' before asking details regarding the 'history of abuse', and secondly at the end of the form where women must sign. This legally binding signature serves as a technique that aims to secure truthfulness via a contractual element. Moreover, women have to give specifics regarding if abuse was reported, adding the case number of the protection order if already applied for. Having opened a case at the South African Police Service was regarded an important indicator of truth: for counsellors, the more institutional involvement, the more likely for the client's story to be true.

As was explained to me by social workers, the aim of screening is to identify whether clients meet the shelter's intake criteria. Shelters receiving government subsidies via the national Victim Empowerment Programme may only offer services to victims of domestic violence or human trafficking as part of the funding scheme. Furthermore, shelters set their own intake criteria. Most commonly, homeless women, substance users, sex workers and women with mental challenges did not qualify for shelter accommodation. Shelter staff explained that women with such difficulties were not fit to participate in shelter programs and counselling due to having issues for which the shelter was

not equipped. Therefore, as opposed to what was stated in the preamble above, counsellors were constantly judging – in the sense of evaluating – clients during screening and the selection process.

The consequences of these intake policies are far-reaching and contribute to the further marginalization of women in precarious living situations. Although a couple of homeless shelters exist in Gauteng, they are usually not regarded as a viable option for women. It is well known that women at homeless shelters are more likely to be exposed to sexual violence and theft. Given these circumstances, it is not surprising that homeless women try to be accommodated at women's shelters by using fabricated stories.

For many counsellors, having to exclude certain women from shelter services because they were homeless did not sit easy. While talking to Lisa, a social auxiliary worker, her moral dilemma became clear. Hinting to the elusiveness of shelter regulations prescribed to limit services to women 'in crisis', Lisa explained: 'We, we are not doing homeless women. [We are doing] women who are in crisis. Domestic violence. Homelessness can be a crisis as well (laughs).' (Interview with author, Sept 2014) She added that domestic violence may lead to homelessness in the first place. Lisa's reflections made it clear that the one-dimensional categorization of beneficiaries did not match the complexity of reality she faced in her everyday-work. But, as shelter funding is dependent on governmental subsidies, shelters have to be careful when making exemptions and taking in women who do not match the criteria.

Aside from external indicators, screening presents an opportunity for counsellors to examine women's 'stories' – as the narration of violent experiences are usually called. In the course of screening, women need to tell their biographies through the lens of violence and trauma and must share very personal and sensitive information with the counsellor in order to demonstrate that they are genuine victims of domestic violence. Inconsistencies and disruptions in clients' narratives are usually regarded as indicators of lying. When I asked one of the social workers at a women's shelter how she knew whether a woman was telling the truth, she stated that clients' 'stories would change and then differ after some time. Because they would not remember what they said last time and you would know they have been lying.' (Interview with author, Jan 2014) In these cases, the admission form serves as evidence as it captures relevant aspects of women's stories. The quotation also alludes to Alois Hahn's (2010: 138) observation that it is usually assumed that liars are not capable of organizing their statements in a coherent manner.

Furthermore, the observation of clients' body language was a common technique amongst counsellors in order to identify if clients were lying. As one para-legal counsellor phrased it: 'facial expressions give people away' (Interview with author, Feb 2014). Another social worker confirmed the need to pay

close attention to body language during screening as in most cases, it was too difficult to only tell from the story if a client had been honest. She explained:

Yo, it's hard. It's really hard. It's difficult because you have to make thorough investigations to really determine if this person is really a victim or not. But merely telling from the story of what they are saying to you, it's very hard. 'Cause you have to look at the, some do have signs, you know, the signs of abuse, you could tell. Or this person has been abused psychologically or physically if you listen to her, the gestures, the physical gestures or whatever, this person has really been abused. And some, you could even tell already they are just making up stories but it's not a simple thing to do. It's difficult. (Social worker, Pretoria. Interview with author, Nov 2014)

At the heart of these truth-telling techniques lies the assumption of an “authentic victim” showing specific observable behaviour. In this sense, being a victim was seen to be an embodied and hence observable experience.

For social workers and counsellors, telling “real” from “fake victims” apart was a challenging aspect of their everyday work. Most of my interlocutors reported that they also relied on ‘gut feeling’ and years of experience. Staff meetings as well as regular shelter network meetings, during which staff members from all shelters in the Province convened, would give counsellors the opportunity to exchange experiences and talk about difficult cases. These meetings were also useful in helping to identify ‘shelter hoppers’ – women, who repeatedly made use of shelters, sometimes even under the use of pseudonyms. In one of the shelters, a ‘black list’ was hung on the wall next to the telephone. The list featured names of clients who were not to be admitted to the shelter anymore. Next to some of the names, aliases that clients had used in the past were added to ensure none slipped through.

In some cases, however, it was not easy to differentiate between true stories and fiction as there was also an in-between, as a social worker reported:

The women who just come for accommodation and go from one place to another, they speak the language of the shelters because they know from experience which questions will be asked and which answers they have to give so that the social worker becomes empathetic and wants to help that beautiful woman who has been beaten by her husband. Sometimes victims take advantage of their status. Sometimes their stories are very real and you are empathetic with the women. Mostly, their cases are real but not new. Many women re-use their stories and make them sound recent to get accommodation.

(Social worker, Pretoria. Interview with author, Jan 2014)

The first part of the quotation shows that how to tell a story is a learnable skill (see Garro and Mattingly 2000: 25) and a skill that women may use. Women ei-

ther learn how to tell their story as part of a bureaucratic socialization prompted by the referral process, making necessary for them to repeatedly narrate their experiences when facing different service providers. Counsellors also suspected women of having learned from each other through circulation of promising narratives. The counsellor's quote above also points to the importance of knowing one's rights and knowing the procedures at women's shelters as this knowledge facilitates placement at a shelter. The last part of the quotation refers to the problem of re-used stories that are told in a way that makes them 'sound recent'. This phenomenon is especially interesting as the violent experience in these cases "really" was part of a woman's biography although it may have occurred long ago. Here, altering the element of temporality introduces the possibility of what might be coined a "white lie".

Another way to gain further information about clients is the procedure of monitoring. Monitoring takes place throughout a woman's stay at the shelter and refers to the gathering and compiling of relevant observations with regards to her demeanour. It includes the counsellor's impressions during one-on-one or group sessions that are noted in the client's file. A client's willingness to take part in counselling sessions could serve as another indicator of being a so-called real victim. As a social auxiliary worker explained, people who were not abused would most likely not want to participate in programs. From their reluctance, one could tell who the real victims were, as 'real ones need healing'. Furthermore, clients' behaviour was discussed at shelter staff meetings. Housemothers who, by turns, were present at the shelter for twenty-four hours and helped organize the routine of everyday life, reported incidences that occurred in the shelters' after-hours or over the weekend. For example, if housemothers suspected that a client was depending on substances, they would share this information with colleagues during staff meetings. Counsellors could then pay special attention to the client concerned and decide whether to confront her with the allegations or to continue observations.

As already mentioned, the special attention paid to clients' truthfulness is mainly grounded in socio-political reasons and related to shelters' funding regulations. Due to State funding policies via the Victim Empowerment Programme, shelters may not take in women who do not match the set criteria. However, counsellors will at times bend the rules to take in women they know do not qualify for their services. These could be women who are homeless or who are suffering from illness with nowhere else to turn to (see Shively 2011 for shelters in Turkey). At other times, counsellors would accept women at the shelter even when they did not believe their stories. One woman, for example, came to the shelter claiming to be a refugee fleeing from the female genital mutilation practiced in her home country. Although the social worker who handled the case told me after the intake session that she did not believe the story, she still decided to take the woman in. In this case, her decision-making was prag-

matic: there was enough room at the shelter and the woman had mentioned that she only needed to stay for a week. The social worker explained there was no need to 'dig deeper' at this point since the woman was only passing by. What makes this situation interesting is that although the counsellor mistrusted the client, pragmatic motives kept her from further inquiries and from the attempt to reveal what was "really" going on. In this case, accepting non-knowledge had a productive function (see Kirsch and Dilley 2015).

Nevertheless, accepting clients who did not match the set criteria remains a risky undertaking as governmental funding comes with the need to account for all clients housed at the shelter. Information about shelter clients is regularly checked by the funding department. If shelters are caught 'being out of line', as one of my interlocutors phrased it, it may result in funding cuts, damaging the shelter's operability.

Aside from occasions in which counsellors decided to bend the rules, service providers sensed an increase in people who fraudulently took advantage of social and welfare services. Emerald, a social worker who offers counselling and support to victims of crime at police stations, had been confronted on a regular basis throughout her career with cases in which she suspected fraud. Her following statement reflects the insecurity faced by many service providers when working with victims of crime:

That [clients who are lying] is also our challenge here in [this police station], 'cause we find many of the cases where people just come in and say, I don't have money, I am from somewhere far away and people have robbed me. And you never know, is it a true story or is this person just making this thing up. 'Cause, sometimes, when you follow up the story to the end, you find out this person was just lying. And you find, we have assisted that person with money. The next day you meet her in the street just walking carefree, forgetting that she has been there crying, saying I don't have money, I have been robbed. So, the people themselves are also abusing the system.

(Social worker, Pretoria. Interview with author, November 2014)

Emerald's depiction shows that the experience of being lied to increases counsellors' general mistrust towards the stories they hear, as they can never know if they are being presented with "the truth" or a story that was made up to receive assistance.

Furthermore, in the course of my research at the Domestic Violence Court and at an organization that offers free paralegal advice for applicants of protection orders, the professionals I spoke to expressed a general discontentment with the granting of protection orders. Arguing that they were facing a huge amount of applications, they claimed that, to a large degree, applicants 'abused' protection orders to push through hidden agendas, like taking revenge on ex-partners, ensuring child custody by discrediting the other parent or gaining

financial benefits.⁶ Therefore, generalized mistrust is not a unique characteristic of domestic violence support services. Rather, it is a phenomenon linked to the rights-based definition of victimhood, according to which being a victim constitutes legal entitlement and a source of power. In this vein, studying clinical trial settings in Johannesburg, Stadler et al. (2016: 504) view women's lies as a 'source of power and as a performance'.

If, during screening, it was detected that women were lying, counsellors reported they would still try to discuss the situation and find alternative solutions. If possible, counsellors referred clients to more suitable organizations. As one of the counsellors concluded: 'People will not be chased away immediately after lying was discovered but they will have to go soon' (Social Worker, Pretoria. Interview with author, Jan 2014).

In a nutshell, a variety of factors play into the formation of counsellors' generalized mistrust towards clients. These include the unavailability of welfare services when a huge proportion of people are in need of assistance; funding dependencies and policies that bind shelter services to specific criteria of victimhood; the lack of resources to care for clients with special needs; and the widespread discourse of prevalent welfare fraud that is substantiated by counsellors' personal experiences. As has been shown, indicators likely to raise counsellors' suspicion include inconsistent and incoherent narratives, a lack of documentation or evidence, low levels of institutional involvement, "atypical" body language and reluctance to partake in counselling. Over-common narratives that sounded "truer than true" aroused suspicion as well. These characteristics match the truth-criteria Carolina Kobelinsky (2015) and Melanie Griffiths (2012) respectively observe for asylum-seeking processes in France and the UK. This observation again stresses the link between mistrust and the legal notion of victimhood according to which the victim status constitutes an entitlement to benefits.

Furthermore, professionals' use of stereotypes has been noted in other bureaucratic contexts as well, as for example Anna Louban (forthcoming) exemplifies based on her study of humorous encounters between case-workers and migrants at the German foreigners' registration office in Berlin. Moreover, the ways in which counsellors' highly subjective notions of victims' authenticity influences their interactions with clients corresponds with Kelly's (2016) findings stemming from the field of doctors' decision-making about the allocation of disability grants in South Africa. She shows that doctors' decisions were influ-

6 | The magistrates and clerks who made these claims referred to their personal experiences and impressions they had gathered throughout their careers. When asked why they believed somebody was just pushing through their own agendas, mostly, they referred to 'gut feeling' and the overall impression that there was something wrong with the applicant's story, that the story in some sense was suspicious.

enced by a multitude of characteristics, including personal norms and values, notions of justice, views about the welfare system and the institutional environment, to name but a few (see Kelly 2016: 12).

The discussion of ethnographic material highlighted that counsellors' techniques to gather information about clients occur within a bureaucratic and therapeutic context that serves to legitimize inquiries masking them either as institutional requirements or as information needed for effective treatment. Thus, the practices of screening and monitoring allow mistrust to remain tacit. In the following, it will be discussed how this tacit dimension of mistrust can be conceptualized from the perspective of action theory.

THE TACIT DIMENSION OF MISTRUST, OR 'LISTENING WITH THE SECOND EAR'

With regards to its implications for action theory, interactions guided by mistrust are inherently different from interactions guided by trust as the latter lacks the double-layer characteristic of the first (see Hörlin 2016). In order to illustrate this argument in more detail, I will borrow a German term from the realm of magic tricks and use it as heuristic metaphor: interactions guided by mistrust are fundamentally *doppelbödig*.⁷ Like the magic hat that has been prepared to hide a coin underneath a false bottom – concealing it from the eyes of the audience – mistrusting actors assume the other person purposefully hides relevant information or “the truth”. At the same time, actors' mistrust remains tacit, which in turn produces an interaction that is *doppelbödig*.

With regards to the initial counselling encounter during which a counsellor might become suspicious of a client's story, the visible interactional layer would be the counsellor's engagement in the usual shelter routine, including filling in the intake form and informing the client about rules. Purposefully hidden, however, remains the counsellor's interest in digging deeper in order

7 | The literal English translation would be ‘double-bottomed’ or ‘false-bottomed’. However, the English expression lacks the figurative component the German term carries. For example, the German proverb ‘ohne Netz und doppelten Boden’ roughly translates to ‘without safety net and without double bottom’ and is used to express that something is done at great risk and without tricks. Looser translations would be ‘ambiguous’ or ‘double-layered’. However, both equally fail to capture the intentional covering or misrepresentation of information which is why the German term *doppelbödig* is better suited for the present analysis. In her analysis of cinematic representations of mistrust, Sinje Hörlin (2016: 115) also uses the term *doppelbödig* to characterize interactions in which actors do not wish to lay their cards on the table (to use yet another related metaphor).

to further investigate the client's story. As earlier discussed, the therapeutically and bureaucratically legitimized practices of screening and monitoring enable counsellors to engage in information-generating practices that go beyond what would have been necessary to fill in the intake form. These observations make it clear that once counsellors become suspicious and adopt an attitude of mistrust, the suspected *Doppelbödigkeit* is mirrored in their own behaviour provoking implicit truth-telling practices.

Consider the following explanation from the social worker Emerald during our conversation on welfare fraud:

Melanie: I've come around this quite a lot that social workers grow very suspicious of the stories they hear.

Emerald: That's what I predominantly tell my auxiliary [social worker]. So, you should listen to, you listen to the stories of your clients with the second ear because in most cases, you find that the person is just taking a free ride. So, you'd never know how to distinguish between a real victim and somebody who's just making up the story. Because, we also did a research at a shelter and most of the people who are staying at this shelter, it's supposed to be a homeless shelter for people who are homeless who don't have any home, who don't have any means of living. But the majority of people who are staying there were working. They had their own jobs, they could rent flats but they didn't or they were making use of that homeless shelter to save for accommodation. Every day, they would wake up and go to work and come back and sleep in the shelter, pretending to be homeless. So you could see already.

(Social worker, Pretoria. Interview with author, November 2014)

Emerald's advice to her social auxiliary worker – to listen to stories 'with the second ear' – perfectly illustrates how the quality of mistrust prompts interactions that are *doppelbödig*. Based on her experience of welfare fraud at a homeless shelter, Emerald illustrates the difficulty of telling so-called real victims from fake ones. Along with observing body-language, 'listening with the second ear' refers to looking for an assumed hidden truth. This truth-telling capacity is not part of formal curricula; in fact, younger social workers are trained by more experienced co-workers on the job.

But why were counsellors interested in keeping mistrust tacit in the first place? According to my understanding, the main factors contributing to the tacit nature of mistrust in domestic violence counselling are the following. On the one hand, counsellors are committed to professional ethics and a therapeutic paradigm that follows the ideal of non-judgmental counselling. While counsellors' generalized mistrust towards clients' stories of abuse is tied to intricate institutional and socio-political circumstances, their moral identity as helpers (see Kolb 2014) and the overall importance of trust within counselling does not allow them to openly judge or question credibility.

On the other hand, counsellors in their position as street-level bureaucrats need to adhere to institutional, bureaucratic structures that regulate who is eligible for social services and who is not. Convinced that “the truth” would always come out, counsellors employ screening and monitoring practices in order to establish who qualifies for shelter services and who presents a fake story. Although following different logics, their roles as both therapists and bureaucrats motivate counsellors to keep mistrust tacit and to rather ‘listen to stories with a second ear’.

However, if counsellors sensed clients were lying, this did not automatically lead them to believe that those clients were so-called fake victims. In the course of my fieldwork, I came to understand that counsellors differentiated between fake victims who were seen to be ‘abusing the system’ and women who lied about their situation in view of shelters’ strict intake criteria and their own ill-matched current circumstances. Also, clients’ lack of trust towards helpers could be a reason for reluctance or dishonesty at the outset of a counselling relationship. A client who was ‘not ready’, who did not trust the counsellor, was likely to ‘use another person’s words’, as one counsellor reported. In any case, if counsellors caught women lying, this was never reported to authorities nor usually did it incur negative consequences. Depending on their evaluation of the situation, counsellors would rather refer women to other institutions or help them to find alternative solutions. Nonetheless, if counsellors felt women were fake victims who were abusing the system by trying to take advantage, they acted in a less cooperative fashion.

CONCLUDING REMARKS

Counsellors’ position as street-level bureaucrats (Lipsky 2010) oftentimes puts them in a moral dilemma. Many of the counsellors I spoke to referred to their work as a calling grounded in faith. Therefore, the need to identify so-called fake victims was in conflict with their general aim of assisting people and helping them overcome whatever challenges they were facing in life. Still, from both, the therapeutic and bureaucratic perspective, identifying “fake victims” forms an integral part of their everyday work.

Counsellors’ generalized mistrust towards clients’ stories heightened their sensitivity to specific phenomena that they evaluated as suspicious and indicative of a hidden truth. Through examining stories, body language as well as further contextual information, counsellors tried to draw the line between truth and lie and assessed whether women were eligible for support services. However, this differentiation was based on subjective interpretation, further complicated by counsellors’ double-role as therapists and bureaucrats. What constitutes a crisis? Under which circumstances do women deserve assistance?

What counts as emotional abuse? Clearly, the bureaucratic and legal guidelines suggested different evaluations from those of the person-centred humanistic approach at the basis of most counsellors' professional paradigm.

Given the complex and precarious living realities in the post-apartheid State, service providers regarded women's attempts to benefit from shelter accommodation and social support as a coping strategy. As a consequence, this has resulted in a balancing act in which counsellors must decide between lying that is acceptable and lying that is not. In this respect, their decision-making is context-specific and influenced by personal notions of neediness, but also informed by situational circumstances such as how much time they have on their hands or how many other clients are staying at the shelter.

In this chapter, I sought to bring forward three arguments. Firstly, I understand generalized mistrust as an important driving force in the initial counselling encounter. This observation does not negate the importance of trust in counselling. However, as I have shown, the two need to be considered separately as they result in very different actions and social relations. Secondly, I argue that counsellors' mistrust towards clients is structurally generated. Therefore, I speak of generalized mistrust in order to highlight the socio-political dimension of mistrust in this setting. Thirdly, it was demonstrated that mistrust usually remains tacit and is rarely outspoken during counselling. In this respect, the present chapter focused on screening and monitoring practices that, being bureaucratically and therapeutically legitimized, enable counsellors to conceal their suspicion while allowing them to simultaneously engage in information-generating practices. Applying the notion of *Doppelbödigkeit*, this contribution suggested a possibility of conceptualizing mistrust with regards to action theory.

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