Elusive Publics: knowledge, power and public service reform

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Elusive publics: knowledge, power and public service reform.

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This chapter draws on a research project on the relationship between images of citizens as consumers and the reform of public services in the UK. We explore how ‘the public’ represents a problematic subject for public services and their reform (Newman, 2005a). It is shape-shifting, unstable and unpredictable. It embodies conflicting or ambivalent desires and doubts. This view of the public challenges accounts of public service reform that explain it as an adaptation to a more individualised or consumerist public (Office for Public Service Reform, 2002) or as the creation of a more marketized set of relationships between state and citizens (Marquand, 2004). In such accounts - whether enthusiastic or critical - changes towards marketized, privatized or consumerist orientations in public services are largely seen to be driven by forces beyond the national level: globalization or neoliberalism, for example (Clarke, 2004). However, our study suggested that national political projects and forces play a decisive role in shaping public service reform, not least in translating international policy and political discourses into national settings. This suggests the need for some care in ‘trend spotting’ in public service reform, in particular not assuming that processes of reform sharing similar orientations produce the same outcomes in different places.

At the same time, our study revealed that people using public services in England were reluctant to identify themselves as consumers or customers of public services. Respondents stressed identities as users of particular services (such as patients) or as members of publics or local communities (Clarke et al., 2007; Clarke and Newman,
This indicates something of the troublesome character of the public in relation to public services. Singular narratives of its changing identity at best obscure its recalcitrant and intractable tendencies. For us, understanding the complicated identifications of the public - and the multiple relationships to public services that they reflect - form a critical focus for processes of public service reform, and for the place of public service professionalism within them. Professionalism has re-emerged as a central issue for debates about the further reform of public services in the UK, USA and Europe (Evetts, in this volume; see also Duyvendak et al, 2007; Freidson. 2001).

Many of the pressures around public service professionalism have come to bear on - and are condensed in - what we have called the ‘knowledge-power knot’. In this we follow Foucault in stressing the intimate, and mutually productive, relationship between forms of knowledge and modes of power. Professionalism’s claim to distinctive forms of expertise seems to us to be an exemplary instance of the knowledge-power relationship. Our terminology here - linking knowledge and power in the image of a knot - is intended to convey a more tangled view of multiple threads, rather than a simple, stable and singular relationship between knowledge and power. In particular, we intend to draw attention to the ways in which multiple forms of knowledge contest dominant professional institutionalizations. We might put this crudely: people no longer believe - or are willing to accede to - the proposition that ‘professionals know best’. In the process both the situational and wider social authority enjoyed by professionals (even public service professionals) has become more fragile or contingent.

In exploring these issues and their implications for public service professionalism we have used the framing device of a diamond:

**Fig 1: Framing knowledge/power knots.**
The vertical axis (governmental-public) locates two of the primary sources of pressures or forces acting on professionals. Governments articulate views of reform; identify lines of social development; lay claim to particular conceptions of the public and how it is changing; and - of course - develop and administer policies for public services. In the UK, both Conservative and Labour Governments have announced themselves as the ‘People’s Champions’ against the ‘Producer Interest’ (Clarke et al, 2007). At the other end of this axis, the public is also a complex entity. It is an ‘imaginary unity’ with which (some) people identify, as in our study, many people who used public services identified themselves as ‘members of the public’ in their relationship to public service use. But the public is also a highly differentiated entity - traversed by systems of inequality and differentiation that have been profoundly consequential for the politics, policies and practices of public services.

The horizontal axis relates more directly to the sites of professional formation in public services. Public service professionalism is formed at the conjunction of occupational and organizational dynamics (Evetts, this volume, see also Johnson, 1973, on the idea of ‘mediating professions’). Each profession has distinctive occupational characteristics (resulting from training and both formal and informal modes of occupational socialization) and is enacted in particular organizational locations. Public service reform programme, especially those shaped by the New Public Management, have involved struggles to unlock the power, prestige and autonomy associated with professionaism in state-based bureau-professional organizations. Managerialism involved an attempt to construct a new configuration of power along this organizational-occupational axis (Clarke and Newman, 1997).

Conflicting imperatives
If we consider the logics that shape each of the four points, we might sketch three relatively clear concerns for the governmental, organizational and occupational imperatives. In doing so we can see some of the characteristic strains and potential disjunctures that make the governance of public service a field of political difficulty. When we turn to the fourth point we might see how those difficulties are deepened by a complex and unpredictable public. But first, governmental imperatives: New Labour’s commitment to ‘modernising’; public services has typically meant a search for a new ‘organisational settlement’ based on fragmented and dispersed systems of providing services organised horizontally through competition or ‘quasi-competition’ (league tables, etc) and organised vertically through principal-agent models of target setting and expanded scrutiny systems (Clarke, 2005).

Organizational imperatives are increasingly framed by these relationships, such that they become ‘success’ focused (Schram and Soss, 2002). In managerial terms, they strive to become ‘high performance’ organisations, since both material and symbolic resources are tied to performance. This does not mean that they are simply ‘implementers’ of government policy - the spaces involved in ‘arm’s length’ regulation allow the possibility of local translation and adaptation (Newman, 2005b). But the management of performance (or at least the management of the representations of performance) is a key element in the organizational culture of public service provision (Clarke, 2005). This directs attention inwards to the management of resources - especially the human resources of the organization. It also means attention to the environment: competitors, collaborators, and the symbolic context (how the organization is seen by others). And, of course, they face the problem of managing their consumers/customers/users. Here one key objective is to stabilise their unsettled relationships with the public. Problems include managing unpredictable and excess demand; dealing with varieties of acquiescence and assertiveness; and managing modes of access and interaction. In our study senior managers were preoccupied with the challenge of how to match demand and resources (Vidler and Clarke, 2005). Managing expectations (and thus reducing some sorts of demand) was combined with processes of prioritising some demands over others.
For occupations, we would emphasise two dominant imperatives - or at least the imperatives that command attention once the continued existence of the occupation has been secured. Autonomy has remained one critical focus of concern, whether this is the space of ‘clinical judgement’ for doctors or the discretion built into the ‘office of the constable’. Most studies of managerialisation in public services have pointed to the attempts to control, constrain and diminish the sites and forms of professional autonomy, although evaluations of the success of managerialism’s impact on public service professionalism vary (e.g., Exworthy and Halford, 1999; Kirkpatrick, Ackroyd and Walker, 2004). The second imperative concerns the legitimacy of public service occupations. Challenges to public services have called into question to the ‘public service ethos’ but it remains a focal point both for public service workers and for the users of public services. Despite the decline in deference and the rise of mis-trust, public service professionals tend to command a relatively high degree of public trust and confidence in surveys (especially by contrast with other occupations that sometimes claim the ‘public interest’ defence - politicians and journalists, for example). But legitimacy now appears more fragile and more contextually contingent, rather than being available ‘en bloc’ to a public service organization or occupation. As a result, the exercise of authority has become more problematic - the consent of those subjected to professional authority is more explicitly at issue in the encounters between the public and public services.

These different concerns and objectives are summarised in Figure 2.

Fig 2: Competing Concerns.

Governmental

New organizational settlement

Occupational Autonomy/legitimacy

Organizational Success
Public

Satisfaction?

Of course, the most problematic element in this figure is the Public. ‘Satisfaction’ may mean many different things in shaping people’s relationship to public services. It may include ‘customer satisfaction’ – which has been and remains a focus of governmental and organizational attention as a measure of performance. But satisfaction may mean a complex of other things – the satisfactory resolution of a problematic condition; the satisfaction of being taken seriously; the appreciation of well-conducted processes; the sensibility of being a ‘member of the public’ – part of a collective identity that is being served (rather than an individualised consumer). People who use services in our study combine a concern for their own needs and desires with a complex understanding that public services have other calls on their attention and resources and a view that - at times - other people’s needs and problems may be more pressing than their own. This is a key element of what we have called ‘relational reasoning’ about public services (Clarke, 2007a).

Unsettled relationships

We now turn to the unsettled relationships formed on each of the sides of the diamond. The governmental-organizational dynamic might be said to centre around the question of ‘who represents the public?’ In processes of public service reform, the government has consistently claimed to act as the ‘People’s Champion’, pursuing better quality public services through a variety of means. But organizations are not merely the passive vehicle for government action. They may inflect or interpret policy directions to fit with organizational, managerial or local predispositions. In the process, they are likely to draw on other representations of the public - or at least those sections of the public who use the service. Being ‘closer to the customer’ is an alternative source of legitimacy - particularly where such closeness is institutionalised in the form of participation or consultation processes. ‘Local knowledge’ is significant for the formation of organizational plans or strategies, but is also rhetorically vital for constructing ‘wriggle room’ in relation to central government.
Both central and local representations of the public lay claim to being the product of transparent processes of knowledge production, from the ballot box to customer surveys to participation exercises. Nevertheless, the public remains a troublesome collective entity in a number of ways (Newman, 2005a). Its membership is uncertain (how does anyone get to be a ‘member of the public’?). It may be constituted out of many different publics, counter-publics and sub-publics - and may be highly mobile as a result (Warner, 2002). It is fractioned in many different ways in attempts to identify the key variables or distinctions that account for differences of interest, expectation or opinion (ranging from socio-demographic factors through to marketing derived life style categorizations). It is continually sampled, surveyed and evoked in public/political discourse.

The relationship between organizations and the public involves a dynamic of unpredictability around the question ‘who knows what the public wants?’ Organizations have an interest in two aspects of this issue. First, they have an interest in maximising their knowledge of what the public want, both to organize services, and to use the knowledge as leverage with central government. Secondly, they have an interest - in terms of managing resources and performance - in trying to stabilise their encounters with the public. Our interviews with managers are rich in concepts of ‘reasonable’, ‘responsible’ and ‘informed’ users of their services - through which an emphasis is placed on making the public manageable (Clarke et al., 2007: 117-120).

The public combines predictability and unpredictability in unpredictable ways. This mixture tends to outrun the modelling capacity of service organizations. It is the new ‘common sense’ that public service users have shifted from the deferential to the assertive; from the ignorant to the knowledgeable; from the passive to the active voice - in short, from citizens to consumers. But such shifts are profoundly uneven - they may be socially distributed (by class, by age or generation, by ethnicity); but they may also be distributed experientially (shaped by involvement in previous struggles or movements, for example). They may be distributed between different sorts of people; but people are themselves neither stable nor unitary in their encounters with services. The same person may combine being a knowledgeable expert of their own condition; a rights bearing and assertive citizen; an anxious
dependent and a seeker after professional help and advice across a series of encounters with the health service. These are ‘unstable encounters’ (Clarke, 2007b) in which the possibilities of getting it wrong have multiplied as both the public and service organizations try to manage each other in more uncertain times.

The other line of relationship at stake here is between the public and public service professionals. We can identify this as organised by the question of ‘who owns needs?’ Perhaps it would be more accurate to say ‘who owns the definition of needs?’ It is here that the contested character of knowledge/power (or combinations of authority and expertise) is most visible. Certainly in health and social care, the assumed dominance/deference relationship has been disturbed by alternative claims to be knowledgeable - the capacity to be ‘an expert of one’s own condition’. The extent to which such claims are made - and the extent to which they are accepted or recognised - remains highly variable. And it remains the case that, for many people, professional expertise is highly valued, although whether that also means a tolerance of professional authority (or paternalism) is more doubtful.

It will be clear that a whole range of governmental initiatives have played a part in reconfiguring these professional-public relationships - disrupting the claims of professional expertise and authority. ‘Choice’ - in both health and social care - has become a critical element in this, dislocating the professional control of assessment, evaluation and intervention as an integrated structure of decision-making. While we might note that the mythology of professions always overstated the integrated (and untainted) character of such decision-making, the rhetoric and institutionalization of ‘choice’ is (and is intended to be) disruptive. In a number of ways, the line of relationship between public service professionals and government can be characterised as a tension around ‘who owns users?’ Both government and professionals lay claim to be the ‘patient’s friend’ - with government serving the user interest by challenging the knots of professional power; and professionals stressing their place close the user that allows them to both serve and defend the user interest (against a distant and intrusive government).

We have summarised the four lines of relationship in Fig 3. Each of them, we suggest, remains the site of continuing contestation and uncertainty.
FIG 3: Contested relationships

**Governmental**

*Who owns users?*  
*Who represents the public?*

**Occupational**

*Who owns needs?*  
*Who knows the public’s wants?*

**Organizational**

**Public**

Knowledge-power knots: resistance, recalcitrance and tangles.

In this paper we have dealt with public service professionalism in relatively general terms. But it is clear that the formations and trajectories of specific public service professions differ greatly: in our study, the medical and related professions are characterised by sets of tensions - and particular forms of knowledge/power knot - that set them apart from the issues faced by police staff and social workers. All of them have in common governmental and organizational efforts to constrain their scope for autonomy (in part by organizational rules, or by job redefinition for these groups
and related occupations). All of them have to deal with shifting knowledges - about needs, conditions and rights - that interrupt the smooth combination of professional expertise and professional authority. Equally, the organizations we have studied face some of the same challenges: how to manage their interactions with the public; and how to deal with government demands for performance, for greater consumer/customer responsiveness and other initiatives (new partnerships; new geographical boundaries) at the same time.

However, at the level of specific services, the particular tensions and tangles of the knowledge/power knot become more visible. In our study we asked people how comfortable they were about challenging providers of service (making complaints; being demanding if they felt they were not being dealt with properly). We also asked staff in the three services how comfortable they were being challenged by people using the service. The results (represented as an index of readiness to challenge/be challenged that is scaled between +100 and -100) are in Table 1:

<table>
<thead>
<tr>
<th></th>
<th>Health Staff</th>
<th>Health User</th>
<th>Police Staff</th>
<th>Police User</th>
<th>Social Care Staff</th>
<th>Social Care User</th>
</tr>
</thead>
<tbody>
<tr>
<td>Challenge</td>
<td>-100</td>
<td>-80</td>
<td>-60</td>
<td>-40</td>
<td>-20</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>0</td>
<td>20</td>
<td>40</td>
<td>60</td>
<td>80</td>
<td>100</td>
</tr>
</tbody>
</table>

(In a questionnaire, staff and users were asked to agree/disagree (on a 5 point scale) with a series of statements about aspects of consumerism: challenge, choice, inequality and...
responsibility. If all respondents responded very positively to all four statements around challenge, the result would be +100.

While the largest mis-match appears between police users and police staff, social care users seem less willing to challenge staff than in other services (despite the apparent readiness of social care staff to be challenged). Health users are slightly more willing to challenge than health staff are to be challenged.

More broadly, we can sketch some of the particular forms taken by the current state of the knowledge/power knot in the three services. In health care, the knowledge problem is particularly visible around the figure of the ‘expert patient’. Ideally this person is equipped with medical expertise and granted ‘regulated autonomy’ in the management of her own condition. But other sources of expertise may interrupt this transmission belt model (which sees knowledge being downloaded from doctor to patient). The Internet and self-help groups, for example, circulate ‘unlicensed’ knowledge that enables other forms of ‘expert’. At the same time, the ‘choice’ agenda threatens to disrupt both organizational and occupational forms of control over treatment processes (and the processes of priority setting and resource allocation that are embedded in them). Nevertheless, such relatively restricted enactments of choice may satisfy neither public/patient nor professional desires for effective treatment relationships. These issues are explored more extensively in Kuhlmann and Newman (2007) and Newman and Vidler (2006).

In policing, the tensions and tangles appear to be rather different. Although police services register a general pressure to be more ‘customer friendly’, the dominant pressures are perceived to be about building new or better relationships with local communities. Both managers and front line staff in the police see two linked problems about the relationship between knowledge and power. First, policing is seen to depend upon the application of a specific knowledge (the Law) in situations that may be contentious, conflictual or dangerous. In such contexts, authority - embodied in the person of the Constable - needs to be unchallenged. Secondly, the process of policing is seen to combine occupational and organizational knowledges in a way that renders it opaque to outsiders. How to police; what to police; and what priorities are to be set are seen to be largely ‘internal’ knowledges, though the question of priorities
increasingly involves intersections with governmental demands. As a result, the problem for community ‘dialogue’ is how to construct a community that understands enough of the ‘internal wisdom’ to take part in an informed conversation (Westmarland and Smith, 2004).

Finally, in social care we can see a number of contradictory tendencies that bear on the knowledge/power knot. One of these concerns the less than solid or secure status of social work as an occupation. For some time, social work has been subject to processes of splitting (especially between work with children/families and vulnerable adults); dilution (through the redefinition of many of its tasks as ‘care work’ rather than ‘social work’); and towards organizational control (accelerating with the organizational dispersal of social work). It has been challenged ‘from above’ and ‘from below’ in many ways over the last twenty years (Clarke, 1993), and is still engaged by groups and individuals arguing for a rights-based rather than needs-based approach to social care. At the same time, both organizational issues of managing resources and priorities and occupational issues of having professional judgments of ‘need’ and ‘risk’ form focal points for resisting rights-based approaches.

Yet, in some ways, social work’s occupational culture precedes and prefigures some of the government’s reform agenda: values of independence, autonomy and empowerment have both a long history in social work theory and practice. They have been reshaped and reinvigorated as part of the profession’s adaptation to some of the challenges since the 1980s (particularly from black and ethnic minority groups and disabled people). So, there is sometimes a sense that New Labour’s consumerism goes with the ‘grain’ of social care. Nevertheless, the model of choice advanced for adult social care (Clarke, Smith and Vidler, 2006) appears to place a model of individualised consumer choice into the middle of these complex occupation-organizational-user relationships, coopting the model of ‘independent living’ developed in the disabled people’s movement.

We have tried to sketch some of the distinctive forms and trajectories of the knowledge/power knots at the heart of the three organisational-occupational formations of public service provision in our study. Each of them is subject to forces that both untangle and re-tangle them. We think that one focal issue that they have in
common is the problem of how to imagine and create the ‘informed’ subject of the service. Concepts of the expert patient, the informed community, and the responsible choice-maker circulate constantly through governmental, occupational and organizational discourses. Such terms point to a certain nervousness about the public in the current period. As Gabriel and Lang argued, the consumer, once evoked and brought into being, risks being an unpredictable and ‘unmanageable’ figure (1995). The expert patient, the informed community and the responsible consumer look like ways of trying to stabilise the knowledge/power relationship: the expert patient’s expertise is to be derived from the ‘real’ experts; the informed community will be informed by what the police already know; and the responsible consumer will make choices that are reasonable, predictable and normalised. Whether the public is ready to be so responsible is another matter.

The future for public services, those who staff them and those who use them looks profoundly uncertain. The tendency towards services organised around mixed economies of competing Small to Medium Enterprises (whether schools, surgeries, hospitals or communities of safety), driven by models of individualised market-like choice, staffed by flexibilised employees (and/or volunteers) promises to eviscerate older conceptions of the public. It may be that there is no ‘going back’ - and indeed it is hard to generate much nostalgia for the mean and discriminatory paternalism of much public service provision of the 1970s. But where might we find expansive conceptions of the public and how it is to be served to set against the narrowly ‘marketized’ vision of New Labour?

Note:

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References:


