

**THE ROLE OF SELF-CONSCIOUS | A CASE STUDY OF A LOCAL
EMOTIONS IN CHILD PROTECTION | AUTHORITY
SOCIAL WORK PRACTICE | SAFEGUARDING SERVICE**

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ABSTRACT

This thesis reports on the first study into the role of self-conscious emotions, namely pride, shame, guilt, humiliation, and embarrassment, in social work practice. Employing a qualitative case study research design, involving the safeguarding service of one local authority, ethnographic constructionist grounded theory methods were used to develop a conceptual understanding of these emotional experiences in the practice of the social workers involved. Integrating data from 246.5 hours of observations, 99 diary entries, 33 assessments written by the social workers, 19 interviews, and 329 pages of documents relating to the organisation, this study analyses the context for these emotional experiences within the case study site, how they were experienced, and their influence on the social workers' practice. It argues that these emotional experiences are inherently part of practice, influencing what the social workers did and how they did it, which could be manipulated by others to regulate the social workers' identities so that they acted in institutionally 'appropriate' ways. While some social workers felt proud to act in such a manner in some contexts, often resulting in a difficult experience for the parents, most social workers felt constrained, believing they were no longer doing social work, and in some contexts sought to resist the institutional expectations.

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CONTENTS

| | |
|---|-----------|
| INTRODUCTION | 1 |
| PRAGMATISM AS A FOUNDATION FOR SOCIAL RESEARCH | 2 |
| CHAPTER SUMMARIES | 4 |
| CHAPTER 1: CONCEPTUALISING SELF-CONSCIOUS EMOTIONS | 9 |
| THEORIES OF SELF-CONSCIOUS EMOTIONS | 9 |
| A CONSTRUCTIONIST PERSPECTIVE OF EMOTION | 13 |
| DEFINING THE EMOTION CONCEPTS | 18 |
| <i>SHAME</i> | 19 |
| <i>GUILT</i> | 22 |
| <i>EMBARRASSMENT</i> | 25 |
| <i>HUMILIATION</i> | 27 |
| <i>PRIDE</i> | 29 |
| SELF-CONSCIOUS EMOTIONS: A SUMMARY | 32 |
| CHAPTER 2: THE ROLE OF SELF-CONSCIOUS EMOTIONS IN THE DEVELOPMENT OF CHILD PROTECTION SOCIAL WORK PRACTICE | 34 |
| SELF-CONSCIOUS EMOTIONS IN INSTITUTIONAL WORK | 34 |
| CREATING AND INSTITUTIONALISING CHILD PROTECTION PRACTICE | 38 |
| DISRUPTING CHILD PROTECTION PRACTICE | 40 |
| CREATING A NEW CHILD PROTECTION PRACTICE | 48 |
| CHILD PROTECTION SOCIAL WORK PRACTICE: A SUMMARY | 50 |
| CHAPTER 3: STUDY DESIGN AND METHODOLOGY | 53 |
| DEFINING THE CASE | 53 |
| DATA COLLECTION METHODS | 58 |
| <i>DOCUMENTARY DATA RELATING TO THE WIDER SERVICE</i> | 58 |
| <i>OBSERVATIONS AND DISCUSSIONS IN-SITU</i> | 59 |
| <i>DIARY ENTRIES</i> | 60 |
| <i>DOCUMENTARY DATA RELATING TO INDIVIDUAL PRACTICE</i> | 62 |
| <i>SEMI-STRUCTURED INTERVIEWS</i> | 63 |
| ETHICAL CONSIDERATIONS | 63 |
| DATA ANALYSIS | 65 |
| LIMITATIONS | 69 |
| THE STUDY DESIGN AND METHODOLOGY: A SUMMARY | 71 |
| CHAPTER 4: CREATING THE RIGHT ORGANISATION | 73 |

| | |
|--|------------|
| THE COUNCIL'S ORGANISATIONAL IDENTITY | 74 |
| DISRUPTING AND CREATING A NEW PROFESSIONAL IDENTITY | 79 |
| DISRUPTING AND CREATING A NEW PUBLIC ADMINISTRATION IDENTITY | 81 |
| CREATING THE NEW SERVICE | 82 |
| CREATING THE NEW SAFEGUARDING SERVICE..... | 84 |
| <i>LEADING THE NEW SAFEGUARDING SERVICE.....</i> | 86 |
| <i>CONSTRUCTING AND EMBEDDING INTERVENTIONIST PRACTICE AS ETHICAL PRACTICE</i> | 87 |
| <i>CONSTRUCTING AND EMBEDDING ADMINISTRATIVE PRACTICE AS ETHICAL PRACTICE</i> | 89 |
| <i>CONSTRUCTING AND EMBEDDING ADMINISTRATIVE PRACTICE AS PERFORMANCE</i> | 91 |
| <i>DEFINING THE BOUNDARIES FOR MEMBERSHIP.....</i> | 93 |
| <i>RECONSTRUCTING THE RULE SYSTEMS THAT PROVIDE STATUS</i> | 95 |
| THE NEW SERVICE: AN OVERVIEW | 98 |
| CHAPTER 5: CREATING THE RIGHT PROFESSIONALS | 101 |
| CREATING AND REGULATING THE SAFEGUARDING SOCIAL WORK ROLE | 103 |
| <i>SETTING PROTECTING CHILDREN AS THE PRIMARY AIM.....</i> | 103 |
| <i>SETTING RESPONSIBILITY AS A PRIMARY EXPECTATION.....</i> | 107 |
| <i>SETTING COMPLIANCE AS A PRIMARY EXPECTATION</i> | 109 |
| <i>SETTING ADMINISTRATION AS THE PRIMARY TASK</i> | 111 |
| CREATING AND REGULATING THE CHARACTERISTICS OF A SAFEGUARDING SOCIAL WORKER..... | 115 |
| <i>CONSTRUCTING A MORAL COMMUNITY.....</i> | 115 |
| <i>CONSTRUCTING A COMMUNITY IN ADVERSITY.....</i> | 119 |
| <i>CONSTRUCTING A COMMUNITY OF COMPETENCE</i> | 122 |
| POLICING AND DETERRING DEVIATION FROM THE INSTITUTIONAL REPRESENTATION..... | 125 |
| THE INSTITUTIONAL REPRESENTATION OF A SAFEGUARDING SOCIAL WORKER: A SUMMARY | 128 |
| CHAPTER 6: A CONCEPTUAL FRAMEWORK FOR THE STRATEGIC RESPONSES TO INSTITUTIONAL PROCESSES OF IDENTITY REGULATION | 131 |
| THE ANALYTICAL FRAMEWORK..... | 131 |
| <i>THE LEVEL OF CONFLICT BETWEEN IDENTITY-MEANINGS AND THE INSTITUTIONAL REPRESENTATION</i> | 134 |
| <i>THE LEVEL OF EMPATHY FOR THE FAMILY</i> | 136 |
| <i>THE LEVEL OF EMOTIONAL SAFETY IN A SITUATION</i> | 138 |
| RESPONDING TO THE INSTITUTIONAL PROCESSES OF IDENTITY REGULATION | 140 |
| CHAPTER 7: FORMS OF IDENTIFICATION..... | 142 |
| ENACTING THE INSTITUTIONAL REPRESENTATION | 143 |
| <i>ACCEPTING THE INSTITUTIONAL INTERPRETIVE FRAMEWORK</i> | 143 |
| <i>ASSIGNING RESPONSIBILITY FOR WRONG-DOING</i> | 144 |
| <i>ACQUIESCING TO INSTITUTIONAL EXPECTATIONS TO CREATE EMOTIONAL SAFETY.....</i> | 147 |
| <i>CONSEQUENCES OF ENACTING THE INSTITUTIONAL REPRESENTATION</i> | 149 |
| A) COMMITTING TO A CONCEPTUALISATION | 149 |

| | |
|--|------------|
| B) A SHAMING AND HUMILIATING EXPERIENCE FOR PARENTS | 151 |
| <i>A CASE ILLUSTRATION OF ENACTMENT</i> | 155 |
| COMPLYING WITH THE INSTITUTIONAL REPRESENTATION | 157 |
| <i>FEELING UNSURE</i> | 157 |
| <i>PRIORITISING SHAME AVOIDANCE</i> | 158 |
| <i>ALLEVIATING FEELINGS OF SHAME AND GUILT THROUGH COLLECTIVE EMOTIONAL WORK</i> | 160 |
| <i>CONSEQUENCES OF COMPLYING WITH THE INSTITUTIONAL REPRESENTATION</i> | 163 |
| A) FEELING ASHAMED AND DISILLUSIONED | 164 |
| B) PRACTICE AS SOCIAL ADMINISTRATION | 165 |
| <i>A CASE ILLUSTRATION OF COMPLYING</i> | 169 |
| FORMS OF IDENTIFICATION: A SUMMARY | 171 |
| CHAPTER 8: FORMS OF RESISTANCE | 174 |
| COMPROMISING INSTITUTIONAL EXPECTATIONS..... | 175 |
| CONCEALING ACTS OF RESISTANCE..... | 178 |
| INFLUENCING INSTITUTIONAL SOURCES AND PROCESSES..... | 181 |
| RESISTANCE: AN OVERVIEW | 184 |
| <i>RECOGNISING OTHERS AS HUMAN</i> | 185 |
| <i>A CASE ILLUSTRATION OF RESISTANCE</i> | 187 |
| RESISTANCE: A SUMMARY | 190 |
| CHAPTER 9: A RETURN TO EXPERIENCE | 192 |
| WHAT IS THE CONTEXT FOR SELF-CONSCIOUS EMOTIONAL EXPERIENCES IN CHILD PROTECTION SOCIAL WORK PRACTICE WITHIN THE COUNCIL AS REPRESENTED BY THE TWO TEAMS INVOLVED?..... | 192 |
| HOW ARE SELF-CONSCIOUS EMOTIONS EXPERIENCED IN THE CONTEXT OF CHILD PROTECTION SOCIAL WORK PRACTICE WITHIN THE COUNCIL AS REPRESENTED BY THE TWO TEAMS INVOLVED?..... | 196 |
| <i>PRIDE AND ACCEPTANCE</i> | 197 |
| <i>SHAME</i> | 198 |
| <i>REJECTION, HUMILIATION, AND SHAME</i> | 200 |
| <i>GUILT</i> | 201 |
| <i>EMBARRASSMENT</i> | 203 |
| <i>RELIEF</i> | 204 |
| <i>SUMMARY</i> | 205 |
| HOW DO SELF-CONSCIOUS EMOTIONS INFLUENCE THE WAY SOCIAL WORKERS PRACTICE WITHIN THE COUNCIL AS REPRESENTED BY THE TWO TEAMS INVOLVED? | 207 |
| WHAT ROLE DO SELF-CONSCIOUS EMOTIONS PLAY IN CHILD PROTECTION SOCIAL WORK PRACTICE: A SUMMARY | 211 |
| CHAPTER 10: CONCLUSION | 212 |
| SO WHAT DOES THIS STUDY CONTRIBUTE TO RESEARCH?..... | 212 |

| | |
|---|------------|
| SO WHAT DOES THIS STUDY CONTRIBUTE TO PRACTICE? | 216 |
| REFERENCES | 221 |
| APPENDIX 1: DIARY SHEETS..... | 255 |
| APPENDIX 2: INTERVIEW GUIDE | 257 |
| APPENDIX 3: THE DATA COLLECTION PROCESS | 259 |
| APPENDIX 4: INFORMATION SHEET FOR PARTICIPANTS | 260 |
| APPENDIX 5: RESEARCH STATEMENT FOR PARTICIPANTS..... | 261 |
| APPENDIX 6: CONSENT FORM FOR PARTICIPANTS | 264 |
| APPENDIX 7: CONSENT FORM FOR PARTICIPANT INTERVIEWS | 265 |
| APPENDIX 8: RESEARCH INFORMATION SHEET FOR INDIRECT PARTICIPANTS | 266 |
| APPENDIX 9: CONSENT FORM FOR PARENTS/CARERS..... | 267 |

LIST OF FIGURES

| | |
|---|-----|
| FIGURE 1.1: THE CORE AFFECT..... | 14 |
| FIGURE 1.2: THE RECURSIVE RELATIONSHIP BETWEEN THE INDIVIDUAL AND THE COLLECTIVE..... | 16 |
| FIGURE 3.1: DIAGRAMMATIC REPRESENTATION OF THE CASE | 56 |
| FIGURE 4.1: INTERACTION BETWEEN ORGANISATIONAL IDENTITIES, IMAGE, AND REPUTATION | 78 |
| FIGURE 5.1: EXPECTATIONS FOR THE SAFEGUARDING SOCIAL WORK ROLE..... | 114 |
| FIGURE 5.2: INSTITUTIONALLY ACCEPTABLE CHARACTERISTICS FOR THE SAFEGUARDING SOCIAL WORKER | 125 |
| FIGURE 6.1: CONCEPTUAL FRAMEWORK FOR THE STRATEGIC RESPONSES TO INSTITUTIONAL PROCESSES OF IDENTITY REGULATION | 141 |
| FIGURE 7.1: ASSIGNING OF WRONG-DOING AND RESPONSIBILITY TO SELF | 145 |
| FIGURE 7.2: DISTINGUISHING BETWEEN SOCIAL WORK AND SOCIAL ADMINISTRATION | 166 |
| FIGURE 9.1: CONTEXTUALISING SELF-CONSCIOUS EMOTIONAL EXPERIENCES..... | 195 |

LIST OF TABLES

| | |
|---|----|
| TABLE 1.1: A POSSIBLE SCRIPT FOR ANGER | 17 |
| TABLE 1.2: THEORIES OF SHAME..... | 20 |
| TABLE 1.3: A CULTURAL SCRIPT FOR SHAME | 22 |
| TABLE 1.4: THEORIES OF GUILT | 24 |
| TABLE 1.5: A CULTURAL SCRIPT FOR GUILT | 25 |
| TABLE 1.6: THEORIES OF EMBARRASSMENT..... | 26 |
| TABLE 1.7: A CULTURAL SCRIPT FOR EMBARRASSMENT | 27 |
| TABLE 1.8: THEORIES OF HUMILIATION | 28 |
| TABLE 1.9: A CULTURAL SCRIPT FOR HUMILIATION | 28 |
| TABLE 1.10: THEORIES OF PRIDE | 31 |
| TABLE 1.11: A CULTURAL SCRIPT FOR PRIDE | 32 |
| TABLE 2.1: SELF-CONSCIOUS EMOTIONS IN INSTITUTIONAL PROCESSES | 38 |
| TABLE 3.1: DEFINING THE CASE | 58 |
| TABLE 3.2: BREAKDOWN OF OBSERVATIONS | 60 |
| TABLE 3.3: BREAKDOWN OF DIARY ENTRIES | 62 |
| TABLE 3.4: A BREAKDOWN OF THE DOCUMENTS COLLECTED | 63 |

INTRODUCTION

If I ask you to consider a time that you felt proud, ashamed, guilty, or embarrassed, the likelihood is that you will be able to recall such occasions. You may also recall how pleasant or distressing such experiences were or how they altered your perception of yourself. If I ask you to think of a time where you have been praised, shamed, humiliated, or embarrassed by someone else, the likelihood is that you will also be able to recall such situations. You may also remember how these experiences have altered how you now act in similar situations. Certainly, such emotional experiences have been theorised and identified within psychological and sociological research findings to be a common experience, at least for those who speak English (e.g. Cooley, 1902; Lynd, 1958; Goffman, 1959; Lewis, 1971; Scheff, 1988; Tangney and Dearing, 2002). Such experiences have generally come to be referred to as 'self-conscious emotions' (Tracy et al., 2007), as the focus of one's consciousness in such emotional experiences is the 'self', although it is probably more accurate to say it is the 'self' in relation to 'others' (Goffman, 1959; Lewis, 1971). We, perhaps, all have a desire to present ourselves in a way that makes us feel good and encourages us to be included and accepted as a friend, a lover, or team member. While at the same time we, perhaps, all have a desire to present ourselves in a way that avoids feeling bad about ourselves and avoids being socially rejected and isolated. Indeed, to these ends, the theory and research suggests that self-conscious emotional experiences play a significant role in what people do and how they do it (e.g. Cooley, 1902; Lynd, 1958; Goffman, 1959; Lewis, 1971; Scheff, 1988; Tangney and Dearing, 2002).

In my own experience of being a social worker, I was aware that, on occasion, I felt such emotions, while my experience of being a lecturer of post qualifying social work has indicated to me such experiences may be commonplace for social workers. But what influence, if any, did such emotional experiences have on my own, or others', practice? What role do these self-conscious emotions play in practice? To explore this issue, I undertook a scoping review to examine the

nature and extent of the research evidence specifically for these experiences in social work practice (Gibson, 2016). While there were no studies which specifically investigated the role self-conscious emotions played in practice, and only three studies explicitly identified such experiences, there were a wide range of studies which implied their presence. Without a specific focus, however, the role they played and the influence they had on what social workers did and how they did it was lost. This study, therefore, seeks to fill this gap by specifically investigating the role these emotional experiences have in one area of social work practice, namely child protection work. In seeking to provide an answer to this overall aim, three questions are considered: (1) what is the context for self-conscious emotions in child protection social work; (2) how are these emotions experienced; and (3) what is their influence on practice? This introduction provides a brief overview of the philosophical foundations for this study and an outline of the chapters that follow.

PRAGMATISM AS A FOUNDATION FOR SOCIAL RESEARCH

The foundation for this study is pragmatism. For pragmatists, reality is not 'out-there', ready and available for discovery. Instead, it is considered to be in a state of indeterminacy, from which a person is able to conceive determinate objects and familiar patterns through experience (Peirce, 1878). It is through active engagement with our environment that we come to develop experiential knowledge in the form of statements or theories which can be used as instruments or tools to cope in our environment (James, 1907). Experience and action, or practice, is of central importance in pragmatic thought. Consequently, it is the practical effects of objects, ideas, and theories that are considered to constitute their meaning (Peirce, 1878). We come to know what a 'rock' is not only because of how it looks and feels but also because of what it does. Our idea of what a rock is, or, indeed, a colour, a sound, etc. is a practical accomplishment of our experience, not only to make sense of our experience but also to be able to act in our environment. Such knowledge enables us to continuously adapt our actions in response to

perpetually evolving situations allowing us to change the environment to satisfy our practical needs. Our actions can, therefore, be considered to be affected by the environment as much as the environment can be considered to affect our actions. As Mead (1908) said, "the individual and environment – the situation – mutually determine each other" (p.315).

Because of its indeterminate nature, it is possible to conceive the world in many different ways. Our conceptions are, however, mutually constituted in the context of community (Peirce, 1877). It is through community that we can come to understand our experience, and consider what we believe to be true, through shared meanings, beliefs, and frames of reference. Furthermore, such meanings can only be created and embedded within a community through language. And as Rorty (1989) argues, it is our language that enables us to create descriptions of the world and it is only these descriptions that can be considered true or false (Rorty, 1989). Our reality is, therefore, constructed through a specific cultural and linguistic context, which creates a range of different social worlds, brought into being by different communities that provide different ways of being and distinguish one group from another (Shalin, 1986). An individual may question and even disagree with the shared meanings and understandings of their community, but they still have to act in relation to them; they cannot be ignored.

This pragmatic perspective has certain implications for social research. Firstly, given that a person's understanding of the world is developed within a specific context, any perspective of reality is not only social but also historical. Wright Mills (1959) argues, therefore, that another's reality can only be understood through a sociological analysis. Secondly, as the world can only be understood through a particular cultural and linguistic context, Dewey (1929a) argued that there are no fixed points from which to observe reality and there can be no universal and context-free claims to truth. Knowledge is useful in a particular situation or it is not (Dewey, 1929b). All knowledge, including that derived from research, can always be refined, revised, or rejected in light of future inquiry and experience and, therefore, should always be considered fallible. And

thirdly, that as we are in an eternal relational state with our ever evolving environment, the sharp dichotomies between thought and experience, mind and body, fact and value, etc. break down (Dewey, 1929b; Rorty, 1979). So while Dewey (1929a) argued that there is no way to access 'raw experience', Emirbayer and Maynard (2010) argue that pragmatic research requires a holistic approach to study human experience.

CHAPTER SUMMARIES

Given the implications of pragmatism, this study first sets out to define what is meant by the terms pride, shame, guilt, humiliation, and embarrassment in chapter one. The dominant theories of these self-conscious emotions are considered and critiqued drawing on contemporary pragmatic thinkers in the field of emotion theory and research. Rather than consider these emotions to have been developed through evolution and are, therefore, universal, existing in the mind, which can be 'triggered' by certain conditions or events. They are argued to be social and psychological constructs that are experienced as a unified conscious field, constituted by internal thoughts, bodily sensations, and actions, together with external situations, events, and meanings (Barrett, 2006a). In other words, they are patterned responses that tell us something about our relationship to our environment (Burkitt, 2014). Such constructs are developed within a specific cultural and linguistic context that enables those within that context to understand and communicate their experience. Different cultures provide different ways of organising and labelling their experiences because they have different ways of interacting with their social world. The terms pride, shame, guilt, humiliation, and embarrassment can be considered to be meaningful experiences to those who speak English, which tell us something about how we view ourselves and our relationship to others.

Given that pride, shame, guilt, humiliation, and embarrassment, have both social and psychological components, most empirical inquiries into such experiences are rooted in the field of social psychology. A pragmatic study into such emotions, however, necessarily starts from the

outside in, i.e. starting with the social and cultural context and studying how this affects individuals, rather than the inside out, i.e. starting with an individual and studying how they respond to social stimuli. This study can, therefore, be considered to be a study in sociological social psychology, rather than a study in psychological social psychology (House, 1977; DeLamater, 2006). From this perspective, to consider the role that these emotions play in child protection social work practice, we first have to understand the context in which this practice takes place. This necessarily requires a sociohistorical analysis of child protection practice in England, where this research was undertaken, to identify and understand the meaning and purpose of the actions to those who perform them. Chapter two, therefore, provides an analysis of the social work profession, locating child protection work within it, drawing on the sociology of the professions (Larson, 1979; Macdonald, 1995; Power, 1997) and the more recent field of institutional work (Lawrence and Suddaby, 2006). It is through this latter body of work that an initial analysis of the role that these self-conscious emotions have played in the development of child protection social work practice can be explored. Indeed, using Creed et al.'s (2014) framework as a useful starting point, the development of social work as a profession can be considered in response to the societal changes that altered what was considered shameful and praiseworthy behaviour for social workers. While the social workers developed a sense of shame in line with these boundaries, which guided their behaviour in institutionally prescribed ways, this was supported by praising social workers if they adhered to these boundaries and shaming social workers if they transgressed them. Such an analysis provides a way of understanding how self-conscious emotions were involved in disrupting some actions, while also being involved in creating and maintaining others, to form what we know as child protection social work practice today.

To understand social workers' self-conscious emotional experiences and how these influence what they do and how they act, it is necessary to gain an in-depth understanding of the social workers' thoughts, feelings, and actions, in the context of their social situation. Flyvbjerg (2006)

argues that a case study provides a useful approach for such an aim, particularly considering there are no exemplars within social work to date relating to this topic. Chapter three, therefore, outlines the case study design and methodology, which involved two child protection teams, in one local authority. Ethnographic methods were used to study social workers in-situ for one to two days a week for a period of six months, to understand what they did, how they did it, why they did it, how they experienced and solved-problems in their real world context, with me developing relationships with the research participants to learn about their problems, feelings, and thoughts (Shalin, 1986; Emirbayer and Maynard, 2010). I also sought to distinguish between what the groups were doing and what they thought they were doing (Lindeman, 1924), together with the role different concepts had on their practice. Methods from constructivist grounded theory (Charmaz, 2006) were used to inform the ongoing data collection and data analysis to develop a conceptual understanding of the participants' experience and actions.

Chapter four reports on the findings of how the established arrangements for the child protection service within the local authority were disrupted by politicians and the media in response to economic and societal changes, which altered what was considered shameful and praiseworthy behaviour for such organisations. Supported by a regulator, which had publically shamed other organisations for failing to comply with this new set of expectations, leaders and senior managers within the local authority sought to refashion their child protection service to avoid being shamed and gain organisational legitimacy. To achieve this, the boundaries of what was considered shameful and praiseworthy behaviour for the social workers working in the child protection service had to be altered. Chapter five, therefore, provides an analysis for how these were changed and maintained to create an ideal-typical child protection practitioner, i.e. an institutional representation of a safeguarding social worker, which was used by the leaders and managers to evaluate the actions of the social workers. While the leaders and the managers provided a new interpretive framework for the social workers, and praised and rewarded practice that conformed to its boundaries, failure to comply with these new institutional meanings and

expectations provided legitimacy to leaders and managers to use shame and humiliation to reassert the institutional prescriptions. The leaders and managers could, therefore, be considered to be regulating the identity of the social workers, refashioning them in the image of the institutional representation.

The social workers, however, did not necessarily identify with this new way of working and at times resisted the institutional processes of identity regulation. Chapter six provides a conceptual framework by which the social workers came to identify with, or resist, this ideal-typical form of practice. In some situations, some social workers could be seen to willingly identify with it and, therefore, enacted the institutional representation, resulting in feelings of pride and acceptance. Some, however, could be considered to reluctantly comply with the institutional expectations to avoid being shamed, resulting in feelings of shame and guilt for what they had done. While different, both could be considered as identification with the institutional representation as both provided what the organisation required and chapter seven details this analysis. In contrast, a social worker may not have felt able to comply and sought ways to resist what they were being asked to do through compromising the institutional expectations by working to the minimum standard, which ensured they avoided being shamed. This freed up some of the social workers' time, which they could spend on tasks that they could feel proud of. Furthermore, a social worker could be seen to exert greater levels of resistance to defy the institutional expectations to practise in a manner that they felt proud of, yet, due to the anxiety of being shamed or humiliated as a consequence, concealed such acts. And further still, social workers could be seen to exert even greater levels of resistance, seeking to influence, control, or defy those who sought to exert the institutional expectations. While they risked the distinct possibility of being shamed or humiliated, they at least avoided doing something they felt they could not live with. Together, these forms of action could be considered to constitute resistance to the institutional processes of identity regulation and chapter eight provides this analysis.

Chapter nine considers the data specifically in relation to the research questions to provide a summary of the context for self-conscious emotions within the teams, how these were experienced by the social workers, and what influence they had on their practise. This study concludes that these emotions had a controlling influence on what the social workers did and how they did it. By manipulating the social and cultural context in which the social workers operated, the boundaries for what were considered shameful and praiseworthy had been altered so that, generally, the social workers performed in an institutionally acceptable manner. The consequence of this, however, was that, generally, the social workers felt constrained to perform tasks that they did not consider to be social work, and there were many occasions where the parents were left feeling dehumanised and the social workers feeling disillusioned. While this study provides only a snapshot of practice within one organisation, it provides the first exemplar of the specific role of pride, shame, guilt, humiliation, and embarrassment within the field of social work, providing knowledge which can be used for, and developed within, future research. From the perspective provided by the analysis in this thesis, chapter ten concludes by considering what this study contributes to both research and practice, providing some suggestions for how we may begin to change social work organisations and the institution of child protection social work more generally.

CHAPTER 1: CONCEPTUALISING SELF-CONSCIOUS EMOTIONS

Pride, shame, guilt, humiliation, and embarrassment are commonly used emotion terms to describe a complex array of situations, thoughts, and feelings resulting from our perception of ourselves in relation to others. They have, however, been difficult to classify. They have been termed ‘social emotions’ (Scheff, 2000), ‘self-referential emotions’ (Zinck, 2008), ‘self-evaluative emotions’ (Shaffer, 2009), and ‘moral emotions’ (Tangney et al., 2007). More commonly, however, these emotional experiences have been grouped under the term ‘self-conscious emotions’ (Tracy et al., 2007). This connotes the emotional experiences resulting from a person’s consciousness of the ‘self’ in the moment, embedded within one’s social situation and, therefore, often relates to one’s relationship between the ‘self’ and others, whether real or imagined. This chapter provides an analysis of what is meant by the specific terms that constitute this group of experiences. Firstly, it outlines the current theories on these emotions; secondly, it provides a constructionist account of what an emotion is; and thirdly, it defines what is meant when someone says “I feel shame” (or pride etc.). This analysis provides the theoretical foundation for these experiences used throughout this study.

THEORIES OF SELF-CONSCIOUS EMOTIONS

While shame has been theorised and studied for well over a century (e.g. Darwin, 1872; Freud, 1905)/1962), it was arguably the psychotherapist and research psychologist Lewis’ (1971) analysis of shame and guilt in transcripts of therapy sessions that has provided the foundation for many subsequent theorists and researchers. Lewis treats shame and guilt as discrete emotions, with embarrassment and humiliation being considered as variants of shame. Her focus was on how certain appraisals resulted in these emotions, arguing that shame resulted from a negative evaluation of the self in contrast to guilt, which resulted from a negative evaluation of a specific behaviour. With Lewis incorporating some of the sociological ideas of shame through the work of

Lynd (1958), however, she placed the social context as equally significant as psychological processes in experiences of shame. She, therefore, believed that one could feel shame because one did not live up to personal ideals, but one could also feel shame because one felt rejected or devalued as a result of not living up to the expectations of others.

Lewis' theory provides the foundation for Tangney and colleagues' work (see Tangney and Dearing, 2002), who arguably provide the dominant theory for self-conscious emotions in psychology. Again, their argument is that shame, guilt, and embarrassment are discrete emotions, evoked by specific appraisals. They propose that shame and guilt are evoked as a result of moral transgressions, with an individual experiencing shame when they believe the self is the reason for their moral failure or lapse, which results in a desire to hide, escape, or strike back. In contrast, they consider that an individual experiences guilt when they believe their behaviour is the reason for their moral failure, which results in a desire to confess, apologise, or repair. Such a perspective argues that for a person to experience shame they would need to evaluate themselves negatively, rather than it resulting from a negative evaluation by another (Tangney et al., 2007). Such a view is supported by others within psychology, for example Gausel and Leach (2011), who argue that the emotion resulting from a negative evaluation by others is not actually shame at all, but rather another discrete emotion they term rejection. Contrary to such views, however, studies which have asked people about their experiences have identified that they have felt shame due to both non-moral issues (such as doing badly in an exam or having an epileptic fit) and as a result of feeling negatively evaluated by others (such as feeling rejected) (e.g. Brown, 2006; Skårderud, 2007; Turner and Husman, 2008; Chase and Walker, 2012; Leeming and Boyle, 2013).

Lewis' theory also provides the foundation for Scheff's work (2000), which arguably provides the dominant theory for self-conscious emotions in sociology. Scheff provides an essentialist account of shame, incorporating Lewis' ideas into those of Tomkins (1962, 1963). Tomkins proposed that

humans have only nine distinct “affects”, which are biological, genetically transmitted mechanisms that are hard-wired within every human’s brain: interest-excitement, enjoyment-joy, surprise-startle, distress-anguish, anger-rage, fear-terror, dissmell¹-disgust and shame-humiliation, where the first term is the mild manifestation of the affect and the second the more intense manifestation. He argues that these affects can be triggered to create a biologically based, and therefore universal, pattern of sensations and behaviours. For Tomkins, these affects provide the foundation of emotions, which he considered to be the experience of an affect along with a set of past memories associated with that feeling. Taking Tomkins’ idea of biological affects, Scheff argues that shame relates to the ‘bond affect’, where threats to a social bond results in shame (Scheff, 2003) and secure social bonds result in pride (Scheff, 1990, 1997). Scheff’s theory relegates the psychological processes relating to the perception of whether a person has been able to live up to one’s standards, resulting in pride (e.g. Tracy and Robins, 2007), or not, resulting in shame (e.g. Tangney and Dearing, 2002), to promote the social processes. Contrary to some of the psychological theories, for Scheff, shame simply relates to rejection and pride to connection. Rather than such a perspective being exclusively sociological, however, the same arguments have been used by some psychologists (see Elison, 2005). Furthermore, such a perspective contrasts with more traditional sociological accounts of shame which relate to threats to one’s identity (e.g. Lynd, 1958; Goffman, 1956, 1959, 1963). Furthermore, theorising shame to be a biologically hardwired affect, results in the argument that guilt, humiliation, and embarrassment, along with a whole range of other related words, such as inferior, incompetent etc., are simply different intensities of the same emotion (Scheff, 2000, 2003). Further still, Scheff argues that any threat to a social bond, no matter how slight, results in an experience of shame; or vice versa for pride. For Scheff, therefore, a person would feel shame because someone else seemed mildly irritated at them. Equally, at the other end of the spectrum, for Scheff, a person would feel shame because their partner had a terminal illness. Both are

¹ A reaction to a bad smell

threats to the social bond but, arguably, the resulting experiences of both of these situations would not be described as shame by many.

There are, of course, many other theories for the self-conscious emotions providing debate regarding what these emotions are and how to research them. As indicated in the discussion above, there is debate as to whether the experiences of shame, guilt, humiliation, and embarrassment can be differentiated. On the one hand, these emotional experiences cannot be easily classified as similar experiences. For example, the experience from tripping up in front of others or snorting while laughing feels very different to being ridiculed by a senior manager at work in front of others in terms other than simply in intensity. Indeed, embarrassment often results in fleeting and humorous experiences (Miller, 1996), while humiliation may result in an enduring sensation of anger and rage with a desire for revenge, even if only within one's imagination (Klein, 1991). While on the other hand, it is difficult to find the criteria to differentiate between them. For example, making a mistake at work and being reprimanded as a consequence may result in shame, guilt, humiliation, and/or embarrassment. Indeed, Crozier's (2014) review of the evidence failed to identify the criteria by which one could differentiate shame from embarrassment. Research has, therefore, sought to find the 'true nature' of these emotions by determining the criteria by which these emotions can be identified and differentiated. The foundation for most theoretical approaches seeking to achieve this, however, can be seen to theorise emotions as somehow existing in the mind, independent of a human perceiver. This allows the researcher to be the final arbiter of a person's experience as they believe they have knowledge of the essential 'criteria' to identify another's emotions accurately. This enables Scheff, and others, such as Lewis and Tangney, to argue that people can experience shame without knowing it, leading to the argument that emotions can be repressed or unacknowledged. The approach taken here, however, is that such a perspective does not provide a useful account for the complexity of emotional life.

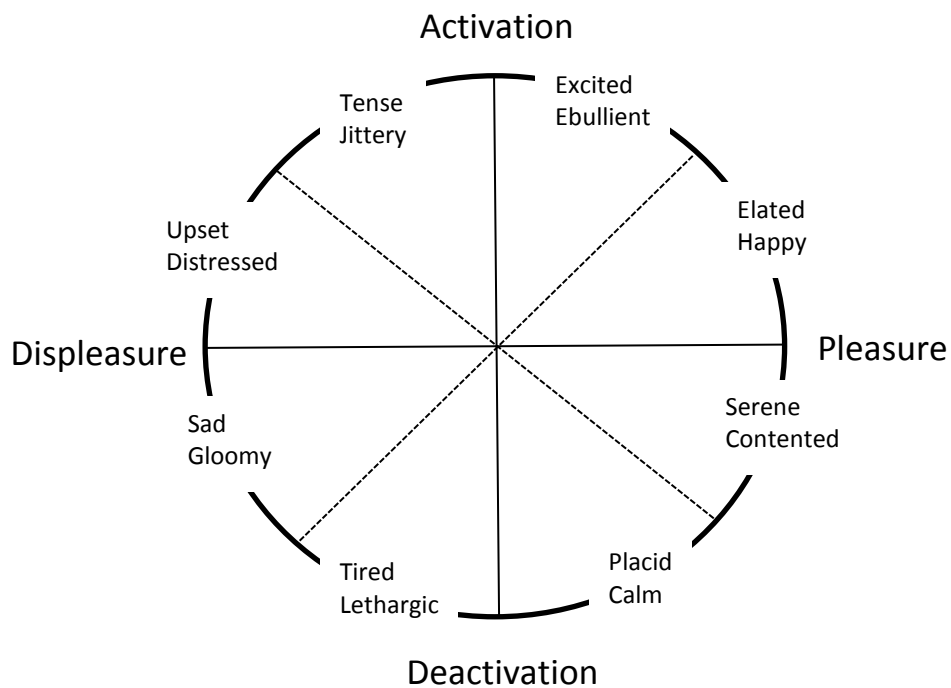
A CONSTRUCTIONIST PERSPECTIVE OF EMOTION

These theories, like the majority of theories of emotion, are founded on the idea that emotions exist in the mind as 'natural-kinds' (e.g. Ekman and Friesen, 1971; Izard, 1971; for a review see Ortony and Turner, 1990). This foundation can be thought of as analogous to the theory of primary colours. This theory posits that there exists a set of primary, or basic, colours in nature which cannot be made up of any other colour. These colours then form the basis of all other colours in nature by mixing them together in different combinations to form secondary or tertiary colours. Similarly, the primary, or basic, emotions are considered to be irreducible and can be triggered together to form combinations of emotions that make up different experiences that can be considered secondary emotions. Such a view is commonly shared within sociology, for example, Kemper (1987) argues that shame is a secondary emotion socially constructed from the primary emotion of anger, and guilt the secondary emotion constructed from the primary emotion of fear. While Turner and Stets (2006a) take a different perspective and argue that shame and guilt are socially constructed, principally, from the primary emotion of sadness. While these latter theories are ostensibly social constructionist, they are grounded in essentialist ideas of emotions as 'natural-kinds'.

Barrett's comprehensive review of the empirical evidence, however, concluded there is little evidence to support this perspective (Barrett, 2006a, 2006b, 2006c; Barrett and Wager, 2006). This finding led Barrett to propose the "emotion paradox" that "people are compelled by their own experiences to believe that emotions exist as natural-kind entities, yet a century of research has not produced a strong evidentiary basis for this belief. To date, there is no clear, unambiguous criterion for indicating the presence of anger or sadness or fear" (Barrett 2006a, p.27). What Barrett's review did support was that the basis for emotional life could be considered to stem from whether a person experiences the environment as pleasant or unpleasant, i.e. valence, with a degree of sympathetic and parasympathetic activation, i.e. arousal. Together,

these two dimensions can be considered as a circumplex, which Russell (2003) terms the ‘core affect’ (see figure 1.1). Russell (2003) and Barrett (2006a) argue that we are permanently in an ever changing core affective state which provides information about the person in the environment, with awareness of this affective state resulting in a ‘feeling’. Russell and Barrett (1999) argue that while it is possible to communicate one’s affective state with words, it can exist without being labelled and can therefore function unconsciously. And while changes in the core affect can be non-cognitive, such as via hormones, hunger, pharmacological agents, changes mainly result from the continual and automatic process of evaluating situations for their personal value and relevance (Bargh and Ferguson, 2000; Barrett, 2006a).

Figure 1.1: The core affect (Russell, 2003, p.148)

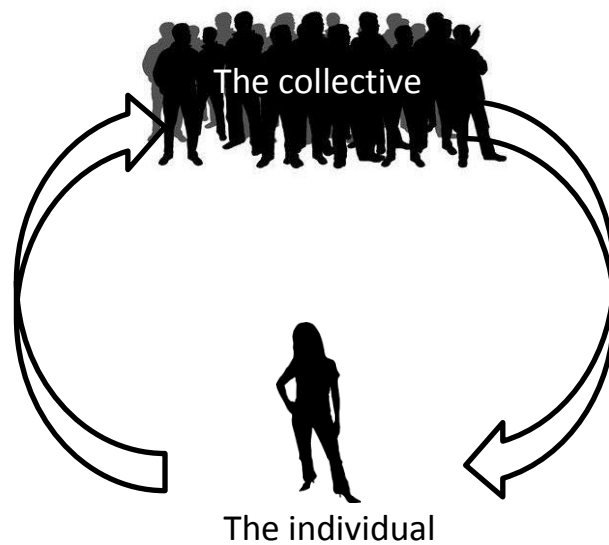


The affective state, however, cannot be considered to be an emotion or even an emotional experience. Indeed, feeling tired, for example, has not traditionally been considered to be an emotional experience. Furthermore, the emotional experiences of what the English language refers to as anger, fear, or shame may all be considered to possess the same core affective characteristics, being unpleasant high-activation states, yet we are still able to distinguish

between these experiences. Sociologists have argued that what we mean by emotions is a combination of situational cues, physiological changes, expressive gestures, and an emotion label (Gordon, 1981; Thoits, 1989). And psychologists have argued that it is a combination of the core affect, changes in somatosensory sensations, behaviour, and cognition (Russell, 2003; Barrett 2006a). From such perspectives, what is clear is that while the core affective state provides the biological foundation for the bodily sensations, what we experience as an emotion also involves a range of psychological, social, and cultural factors, which combine to provide a unified conscious experience (Barsalou, 2009; Burkitt, 2014). To say one feels an emotion, such a shame, one is communicating that the situation fits a socially agreed upon set of knowable features such as specific situations, thoughts, and feelings (Wierzbicka, 1992).

While we can consider an emotion to involve biological and psychological processes, an emotional experience is founded within ongoing social interactions. Such interactions are embedded within the relationships of the individuals and the institutions that constitute their society. The cultural beliefs and rules, therefore, form as much a part of the experience as the immediate interaction (Boiger and Mesquita, 2012). We all learn to emote, however, much like we learn a language, not from direct teaching, but from imitation and trial and error immersed within a particular culture (Averill, 2012). There are, therefore, individual differences in the understanding, expression, or performance, of an emotion. Indeed, Parkinson (2012) argues that emotional experiences can change within a person's lifetime (ontogenesis) and within the history of a culture (sociogenesis). It is necessary, therefore, to consider emotion through the inter-relationship between the individual and the collective, where there is no beginning and no end to the ongoing social system (see figure 1.2). Individual's attitudes, beliefs, and emotional experiences are constructed by those of the collective, which is, in turn, constructed by the individual.

Figure 1.2: The recursive relationship between the individual and the collective



At the collective level we can consider an emotion as a social representation (Moscovici, 1961, 1981, 2001): a set of circumstances, situations, meanings, feelings, thoughts, and behaviours which are shared among the members of a specific social group “for the purpose of behaving and communicating” (Moscovici, 1963, p.251). By collectively elaborating on personal experiences, over time, societies are able to construct a shared, but not consensual, way of understanding and communicating about their emotional lives, which includes categories of experience, such as shame, and the typical content of those categories, such as the circumstances, situations, meanings, feelings, thoughts, and behaviours (Barrett, 2006a). As a result of the socialisation process (e.g. Elias, 1978), an individual internalises these social representations, which become the basis for emotional life. Deviations in individual understanding of a particular term can occur, however, as a result of inconsistencies in communication within different groups of the same culture and/or because of personal experiences that provides additional personal meaning to the term (Moscovici, 1961). Nevertheless, individuals within a society still hold sufficient shared meaning to be able to understand what is meant when a person uses a specific label or term, such as shame or pride in English.

We develop knowledge, however, through experiencing and acting in the physical world (Burkitt, 2014). As the neuroscientist Damasio (1994) argues, it is difficult to separate the mind from the body. Or as the field of situated cognition argues, it is difficult to separate the person from the environment (Dewey, 1938; Lave and Wenger, 1991; Clark and Chalmers, 1998; Rowlands, 2010). The social representation can, therefore, be seen to provide the blueprint for individuals to develop knowledge that is both embodied, involving the mind and body, and embedded, within specific social and cultural contexts (Rosaldo, 1984; Csordas, 1994; Barsalou, 1999; Zwaan, 2004; Rowlands, 2010). At the individual level, therefore, we can consider an emotion to be the experience of an embodied representation either through enactment, within the continually evolving interaction between the person and their environment (Dewey, 1929a; Gergen, 1994; Burkitt, 2014), or simulation, in the imagination of the individual (Barsalou, 1999; Barrett and Russell, 2015). Enactment and simulation can be considered to be a result of an effortful process of reflecting on one's interaction with the world, or it can be automated and habitual. From this perspective, an emotion cannot be considered a thing, but rather a scenario that can be thought of much like a script (Abelson, 1981; Tomkins, 1987; Russell, 1991; Gergen, 1994), with a beginning, middle, and end, made up of causes, beliefs, feelings, physiological changes, desires, actions, and expressions that occur in sequence. Russell (1991) outlines a script for anger to illustrate this point (see table 1.1).

Table 1.1: A possible script for anger (Russell, 1991, p.39)

| Step | Subevent |
|------|--|
| 1 | The person is offended. The offense is intentional and harmful. The person is innocent. An injustice has been done. |
| 2 | The person glares and scowls at the offender. |
| 3 | The person feels internal tension and agitation, as if heat and pressure were rapidly mounting inside. He feels his heart pounding and his muscles tightening. |
| 4 | The person desires retribution. |
| 5 | The person loses control and strikes out, harming the offender. |

As Wittgenstein and Anscombe (1958) argued, however, we cannot adequately express our experiences with words, and so all theories are perhaps inadequate to fully capture the complex nature of specific emotional experiences. Indeed, it may be impossible to convey an embodied representation and the script for anger above is perhaps better understood as one possible way of conveying the social representation for anger. Furthermore, not all of the features of a script are necessary for someone to have an experience of that emotion but the more features that are present, the closer the resemblance and the more appropriate the script label. Some emotional scenarios may closely resemble a person's script, which Russell (2003) calls an emotional episode, or it may loosely follow the script, which Russell (2003) calls a prototypical emotional episode. Despite its limitations, the script concept arguably provides a useful way to conceive of what we mean by a specific emotion label, which enables a person to understand and communicate their experience. To say one 'feels' an emotion, such as shame, for example, is to mean that they have had an experience of their embodied representation of that term. So given this perspective what do we mean by using the terms pride, shame, guilt, humiliation, and embarrassment? Rather than discount historical research and past and present theories of these terms that are founded in the idea of 'basic' emotions, however, collectively these theories can be considered to provide evidence for a loose agreement between speakers of the English language as to what we mean when we use these terms.

DEFINING THE EMOTION CONCEPTS

How we come to understand who we are, where we belong, what we should do, and how good or bad we are at different tasks, is through our interactions with other people. A child may be praised for being attractive by their parents and teachers and consequently develop an identity of being an attractive person. Through interaction with a range of others in different situations, a person can come to develop a set of identities that provide meaning for who that person is in relation to others in these different situations (McCall and Simmons, 1978; Stryker, 1980; Tajfel,

1981). These internalised meanings, attitudes, and expectations are then stored as a complex concept of who that person is, i.e. the self-concept. This set of ideas of who they are can then be used to interact with themselves and with others. The 'self', therefore, is inherently linked to others; they are two sides of the same coin (see figure 1.2). While Cooley argued (1902) that the "imagined judgement" of another "moves us to pride or shame" (p.152), to reduce these experiences to issues either of the self or social bonds, is, perhaps, to deny our relational nature. We may be focused on one or the other in the moment, yet a judgement on one's 'self', or identities, can also lead us to consider the state of one's social bonds, and vice versa. Self-conscious emotional experiences can, therefore, be considered through this self-social system.

SHAME

Shame is perhaps the most widely researched and theorised emotion term. The potential potency of the displeasurable feelings related to this term can be seen in Brown's (2006) grounded theory study on shame involving 215 women in the USA. Participants described the feeling of shame as "devastating, noxious, consuming, excruciating, filleted, small, separate from others, rejected, diminished, and the worst feeling ever" (Brown, 2006, p.45). Such a description is consistent with other qualitative studies relating to experiences of shame (e.g. Skårderud, 2007; Turner and Husman, 2008; Chase and Walker, 2012; Leeming and Boyle, 2013). Collectively, speakers of the English language seem to understand that to say one feels shame is to mean that they feel a painful, bodily sensation. Linked to these bodily sensations are a set of other attributes, which can be identified by reviewing a range of views that span different theoretical positions (see Table 1.2). Notwithstanding the ontological debates within emotion theory as discussed above, the general themes which shame can be considered to be associated with can be identified from these theories as: (1) a negative evaluation of the self, which could be by either the person themselves or someone else; (2) that this negative evaluation is as a result of the person failing to live up to a standard. This standard, however, has to be important to the person.

For example, to tell someone they are not very good at drawing would be unlikely to result in shame if the person didn't think they were very good at drawing. Thus the standard can be considered an identity standard; (3) the person believes they are responsible for having failed to live up to this standard (e.g. Ferguson et al., 2007); and (4) the person believes this threatens the status or quality of their relationship to the other(s). While such a construction of shame accounts for both identity and social bonds and, therefore, how one can feel ashamed of themselves or be shamed by someone else, given the issues of constructing shame around threats to social bonds as discussed above, issues of identity are of central importance.

Table 1.2: Theories of shame

| Author | Discipline | Definition |
|--|--|---|
| Cooley (1902) | Sociologist | The feeling resulting from a perception that the self is not verified in the minds of others |
| Goffman (1956) | Sociologist (dramaturgical theory) | The feeling resulting from responsibility for failed projected claims about one's identity |
| Lynd (1958) | Sociologist | The feeling of responsibility for one's inferiority |
| Lewis (1971) | Psychologist (psychoanalysis) | The feeling from a negative self-evaluation |
| Kemper (1978) | Sociologist (power and status theory) | The experience when one claims or receives more status than he deserves |
| Sabini & Silver (1997) | Psychologists | The feeling from a flaw in one's character being revealed |
| Scheff (2000) | Sociologist | The feeling from a threat to the social bond |
| Tangney and Dearing (2002) | Psychologists | The feeling from a negative self-evaluation due to a moral failure or transgression |
| Tracy & Robins (2004) | Psychologists (Cognitive attribution theory) | Negative feelings about the stable, global self |
| Elison (2005) | Psychologist (Affect Theory) | The feeling from an appropriate devaluation of the self by another |
| Ferguson et al. (2007) | Psychologists | The feeling from being held responsible for a threat to one's identity |
| Turner (2009) and Burke and Stets (2009) | Sociologists (Symbolic interactionism) | The feeling from failing to meet expectations or negative sanctions as a result of salient identities |

While these definitions of shame do not include the behavioural responses associated with such an experience, just as emotion theory has always linked emotions to actions (e.g. Aristotle and Bywater, 1894), so has shame theory sought to consider the behaviours associated with

experiences of shame. Indeed, just as essentialist accounts of emotions have argued that fear leads to fleeing and therefore protects the self in a physical sense, essentialist accounts of shame have argued that it leads to hiding, which protects the self in a social sense (e.g. Tangney and Dearing, 2002). Reviews of such direct causation models of emotion and action, however, have failed to find strong evidence to support such views (e.g. Schwarz and Clore, 1996; Baumeister et al., 2007). Indeed, while shame has been considered to lead to avoidance behaviours such as withdrawing from social situations, hiding from others, and attempting to escape from the experience through the use of alcohol, drugs, or self-harm (for reviews, see Gilbert and Andrews, 1998; Tangney and Dearing, 2002; Tangney et al., 2007), it has more recently been considered to lead to approach behaviours such as seeking to repair any perceived damage done or seeking to improve themselves and their behaviour (e.g. de Hooge et al., 2010; Gausel and Brown, 2012; Shepherd et al., 2013; Lickel et al., 2014; Tangney et al., 2014; Berndsen and Gausel, 2015). It is perhaps more useful to consider the role emotional experiences play in individual behavioural responses within the context of the person's historical experiences, how they imagine the future, and therefore what they think they need to do in the current situation (Emirbayer and Mische, 1998; Baumeister et al., 2007). For example, a person who has many historical experiences of being criticised may perceive criticism from their boss differently to someone who has not. The person with greater experience of criticism may imagine the future as one in which they will be criticised further, while the other person may not. The person who imagines they will be criticised further may display avoidance behaviours, while the other person may display approach behaviours. Both may state they experienced shame from the criticism but the behavioural responses can only be understood through how they conceptualised the situation (Barrett et al., 2014).

Notwithstanding the complexity of individual behavioural responses in the context of emotional experiences, we can still consider the typical behavioural responses associated with experiences of shame as part of the shared understanding and communicative intentions of those who speak

English. As discussed above, to use the word shame is to communicate using a shared understanding of what that word means. Indeed, qualitative studies which ask participants about their responses to experiences of shame identify a link with a desire to hide (Brown, 2006; Skårderud, 2007; Turner and Husman, 2008; Chase and Walker, 2012; Leeming and Boyle, 2013), which is consistent with the traditional theories of shame (see Gilbert and Andrews, 1998; Tangney and Dearing, 2002; Tangney et al., 2007). While it may be that those who classify their experience as shame may not display such avoidance behaviours, arguably at least, we understand it to mean this. Putting this together with the other components typically associated with shame, we can provide a possible script for shame that provides the social representation for the term (see table 1.3). Of course, there may be other ways of representing the script, a person's embodied representation may differ from this, and, as discussed above, a person does not necessarily have to experience all of these components to state they have experienced shame.

Table 1.3: A cultural script for shame

| Step | Subevent |
|------|---|
| 1 | The person holds an identity standard A situation occurs whereby the person is perceived to have not met this standard |
| 2 | The person feels responsible for not meeting this standard The person feels inadequate/inferior |
| 3 | The person believes this threatens the status of their relationship with others The person feels devalued/rejected |
| 4 | The person starts to feel hot. Their heart begins to race. |
| 5 | The person wants to hide or disappear |

GUILT

Guilt is arguably the second most researched and theorised emotion term, often being considered in comparison to shame. Similarly to shame, qualitative studies of experiences of guilt indicate that it is a displeasurable affective state, often with highly activated bodily sensations, such as increased heart rate and feeling hot (e.g. Lewis, 1971; Silfver, 2007; Karlsson and Sjöberg, 2009; Behrendt and Ben-Ari, 2012). While people often use the terms shame and guilt together

or, indeed, to refer to the same emotional experience, there is arguably sufficient evidence to suggest that what we mean by these two terms is indeed different. Table 1.4 brings together a range of different theoretical positions on guilt from which the general themes for a prototypical experience of guilt can be identified. While the focus in a prototypical experience of shame is on the 'self', the focus in an experience of guilt is on (1) one's behaviour; (2) which is seen to have transgressed a moral boundary; (3) which adversely affects another person. Indeed, a person would typically feel responsible for disadvantaging another, as they could 'be' guilty in the eyes of another's evaluation but not 'feel' guilty if they did not accept their actions were responsible. Consequently, experiences of guilt have been found to relate more to the person taking the perspective of the other than in experiences of shame (e.g. Leith and Baumeister, 1998). Furthermore, typically (4) the person would feel bad about the impact their actions have had, as a person may not feel guilty if their intention was to harm or disadvantage another. Therefore, while usually the term shame indicates that a person feels a threat to their identity, the term guilt does not typically indicate such threats. For example, one may feel guilty after seeing a stranger being hurt because they did not do what they believed they could have done to prevent it happening. While this may be inconsistent with an identity standard, it is not necessarily a threat to their identity or their relationships. The focus is on how the person's action or inaction adversely affected another.

Table 1.4: Theories of guilt

| Author | Discipline | Definition |
|----------------------------|--|--|
| Lynd (1958) | Sociologist | The feeling from a specific act of wrongdoing |
| Lewis (1971) | Psychologist (psychoanalysis) | The feeling from a negative evaluation of a specific behaviour |
| Kemper (1978) | Sociologist (power and status theory) | The feeling resulting from using excessive power against another |
| Baumeister et al. (1994) | Psychologists | The feeling from hurting, neglecting, or disappointing others or when the person benefits unfairly in relation to others at their expense |
| Sabini and Silver (1997) | Psychologists | The feelings relating to transgressions |
| Tangney and Dearing (2002) | Psychologists | The feeling from a negative evaluation of a specific behaviour |
| Tracy and Robins (2004) | Psychologists (Cognitive attribution theory) | Negative feelings about a specific behaviour or action taken by the self |
| Elison (2005) | Psychologist (Affect Theory) | The feeling of personal responsibility for an offense or wrongdoing |
| Turner and Stets (2006b) | Sociologists (Symbolic interactionism) | The feeling from a perception that one has violated a moral code |
| Ferguson et al. (2007) | Psychologists | The feeling from a self-perception of responsibility for an untoward outcome or state of affairs which disadvantages the 'self' or 'other' |

Most theories of guilt identified above emphasise the approach type behaviours that come along with an experience of guilt. Indeed, the typical qualitative findings have identified that such experiences leads a person to want to make amends, reparations, or apologise (e.g. Lewis, 1971; Baumeister et al., 1995; Silfver, 2007; Karlsson and Sjöberg, 2009; Behrendt and Ben-Ari, 2012). There are some studies, however, which also identify avoidance type behaviours following experiencing guilt, such as attempting to avoid others or avoid talking about the situation (e.g. Freedman et al., 1967; Ferguson, 1991; Baumeister and Wotman, 1992). Similarly to the discussion with shame and behavioural responses above, it is necessary to consider the individual's perception and their social, cultural, and historical context to understand the person's behaviour. So while it is perhaps not useful to consider guilt, or indeed any emotion, as necessarily producing a specific set of behaviours, it is arguably useful to consider what behaviours we may, collectively, associate with the term guilt so we can understand and communicate this emotional experience. Putting the dominant view, that guilt leads to approach

type behaviours, together with the other components typically associated with guilt, we can provide a possible script for guilt that provides the social representation for the term (see table 1.5).

Table 1.5: A cultural script for guilt

| Step | Subevent |
|------|--|
| 1 | A person is aware of a societally held moral standard Through their action or inaction, the person transgresses this moral boundary |
| 2 | The person believes another has been disadvantaged in some way The person is concerned about the consequences for the other person |
| 3 | The person believes that their action or inaction has been responsible for this situation The person feels bad |
| 4 | The person starts to feel hot. Their heart begins to race. |
| 5 | The person wishes to make amends |

EMBARRASSMENT

Despite Goffman’s seminal work, there has perhaps been less attention paid to embarrassment within the theory and research, particularly within sociology (Lizard and Collett, 2013). Studies on embarrassment suggest it relates to surprising, trivial accidents, which engender humour, smiles, and jokes with a need for a public audience, whether real or imagined (Miller and Tangney, 1994; Tangney et al., 1996). While some argue that embarrassment stems from the perception of a negative evaluation from another, which threatens one’s social bonds (e.g. Elison, 2005). Others argue that embarrassment can equally stem from the perception of a positive evaluation, such as being praised, which arguably strengthens one’s social bonds (Tracy and Robins, 2004). Despite these seemingly contrasting experiences, we use the term embarrassment to indicate that there is something similar about them.

Table 1.6 provides a range of views on embarrassment from which the common themes associated with such an experience can be identified. While an evaluation by the ‘other’ is considered necessary in an experience of embarrassment, the focus is on how the ‘self’ is perceived by the ‘other’ against certain standards the person holds for themselves. Arguably one

would not feel embarrassed if one did not believe the standard to be important. For example, a person may feel embarrassed if they accidentally burped in public only if they felt this is something they should not do. Embarrassment can therefore be considered to relate to (1) a person's identity standard; (2) a discrepancy between their presentation and this standard. This discrepancy, however, does not necessarily threaten one's identity more generally. For example, one can feel embarrassed and not feel that there is something wrong with that identity, which may be more typical of an experience of shame; and (3) a belief that this discrepancy is, or at least could be, perceptible by another.

Table 1.6: Theories of embarrassment

| Author | Discipline | Definition |
|--------------------------|---|--|
| Goffman (1956) | Sociologist (dramaturgical theory) | The feeling in situations where one has multiple roles to fulfil in a social interaction but the multiple 'selves' used to fulfil these roles conflict |
| Miller (1996) | Psychologist | A signal that some aspect of the self or one's behaviour is amiss |
| Sabini and Silver (1997) | Psychologists | The feeling from other's perceiving a flaw in one's character |
| Tracy and Robins (2004) | Psychologists (Cognitive attribution theory) | The feeling resulting from becoming aware of a discrepancy between public aspects of the self, such as one's appearance, and others' evaluations |
| Elison (2005) | Psychologist (Affect Theory) | The feeling from an appropriate public devaluation |

The typical behaviours considered to be associated with an experience categorised as embarrassment are blushing (Miller, 1996; Buss, 2001), giggling and laughter (Miller and Tangney, 1994; Buss, 2001), smiling (Buss, 1980; Lewis, 1992), looking at the other then looking away, and nervous self-touching (Lewis, 1992; Miller, 1996). For some, such avoidance behaviours have also been closely linked to experiences of shame (see Crozier, 2014). Rather than seeking the essential nature of such experiences, the constructionist view is that these behaviours can be categorised together with the above criteria to provide the experience that we refer to as embarrassment. One may not need to blush or laugh following a public misrepresentation of the self to feel embarrassed. Yet speakers of the English language understand this is typical of such experiences. Together, the social representation of embarrassment can be presented as a script in table 1.7

Table 1.7: A cultural script for embarrassment

| Step | Subevent |
|------|--|
| 1 | The person holds an identity standard A situation occurs whereby the person's presentation is inconsistent with this standard The person does not believe this threatens their identity more generally |
| 2 | The person believes others can perceive this discrepancy |
| 3 | The person starts to feel hot and blushes |
| 4 | The person seeks relief and hides or makes a joke |

HUMILIATION

Humiliation is perhaps the least well researched and theorised emotion term within this family of emotional experiences, particularly within sociology. While empirical investigations into humiliation associate it with a sense of unfair treatment, public exposure, anger at others, and a desire for revenge (Jackson, 2000; Elison and Harter, 2007; Combs et al., 2010), table 1.8 provides a list of theoretical perspectives of humiliation from which the themes can be identified to construct what we mean by the term. Similarly to embarrassment, humiliation is generally considered to relate to how one perceives themselves in relation to others. Unlike embarrassment, however, it is much more related to the purposeful actions of the other to devalue them in a social context. It is considered to be like shame, therefore, in that it relates to a threat to one's identity; that is, it relates to who one *is* rather than what one *does* (Klein, 1991). Unlike shame, however, it is not considered to relate to the person believing this threat to their identity has validity. Overall, humiliation can be considered to relate to (1) a person's identity; (2) that someone else rejects or invalidates; (3) which is done publically; (4) and intentionally; and (5) where the person does not believe there is a valid reason for this devaluation.

Table 1.8: Theories of humiliation

| Author | Discipline | Definition |
|------------------------------|------------------------------|--|
| Silver et al. (1986) | Psychologists | The feeling from the other undermining one's sense of identity |
| Klein (1991) | Psychologist | The experience of some form of ridicule, scorn, contempt, or other degrading treatment at the hands of others |
| Hartling and Luchetta (1999) | Psychologists | The feeling from one's identity being demeaned or devalued |
| Elison (2005) | Psychologist (Affect Theory) | The feeling from an appropriate public devaluation and usually the hostile intent of others |
| Gilbert (2007) | Psychologist | The feeling of anger at others for devaluing the self in situations where there are no grounds for assuming responsibility for such devaluation |
| Smith (2008) | Sociologist | A process of degradation, the feeling of being pushed downwards within the social hierarchy of respectability and worth and expulsion or exclusion from 'proper' society |
| Torres and Bergner (2012) | Psychologists | The feeling from public denial, and rejection, of a claim for a particular social status by someone with the power to deny or reject such a claim |

Empirical investigations have identified that experiences labelled humiliation can result in avoidance behaviours through feelings of powerlessness and hopelessness (Ginges and Atran, 2008; Fernandez et al., 2015). The typical motivation within humiliating experiences, however, has been that of approach behaviours (Elison and Harter, 2007; Thomaes et al., 2011; Torres and Bergner, 2012). Usually, the term humiliation is associated with the person feeling angry and enraged with a desire for revenge. Such typical associations with the term can be included as part of the social representation of humiliation, which can be outlined as a script in table 1.9.

Table 1.9: A cultural script for humiliation

| Step | Subevent |
|------|--|
| 1 | The person holds an identity standard This identity is publically rejected or invalidated by another |
| 2 | The person believes the other's actions are intentional and unjust or unfair The person feels devalued and degraded |
| 3 | They feel their heart pound and muscles tense |
| 4 | The person desires retribution |

PRIDE

In contrast to shame, guilt, humiliation, and embarrassment, pride is often viewed as a pleasurable self-conscious emotion. Indeed, many theorists simply consider pride to be the opposite of shame (e.g. Cooley, 1902; Scheff, 2014). Opposing the debates within shame theory, theorists, whether sociologists or psychologists, consider pride to relate to evaluations of the 'self', whether by the 'self' or an 'other', which indicates a positive evaluation that promotes and maintains the person's status and social worth (e.g. Mascolo and Fischer, 1995; Lewis, 1992; Turner, 2009; Scheff, 2014). At the same time, however, pride has also been considered an undesirable experience, as demonstrated in the proverb 'pride comes before a fall' (Tracy and Robins, 2007). Such cultural messages tell us that while pride may be experienced positively, it can blind us to the evaluations of others who may perceive us as arrogant, misguided, or somewhat deluded about ourselves. Furthermore, Oveis et al. (2010) argues that the focus on one's self or achievements can inhibit the person's ability to take the perspective of the other.

It has mainly been within the field of psychology which has sought to provide a theory from this perspective. Tracy and Robins (2004, 2007) suggest that while we may use the term pride to describe our pleasurable experiences about the 'self', we can consider there to be two different types of experience, one which can be described as authentic pride and one as hubristic pride. They argue that pride can be seen not just as opposite to shame but also to guilt. Authentic pride is thought to be like guilt in that it relates to a focus on one's behaviour, while hubristic pride is thought to be like shame in that it relates to a focus on the self. Within psychology, guilt and authentic pride are considered healthy, pro-social emotions, while shame and hubristic pride are considered unhealthy, anti-social emotions (Tangney and Dearing, 2002; Tracy and Robins, 2004, 2007). Such perspectives, however, treat these terms as emotions as natural-kinds, enabling their 'true' nature to be identified. As discussed above, such a perspective is not necessarily a useful one. Indeed, while guilt cannot simply be considered to contrast with shame on the basis of the

negative evaluation being attributed to one's 'self' or one's behaviour (e.g. Elison, 2005; Scheff, 2000), pride cannot simply be split into two along similar lines. People rarely, if at all, say "I feel hubris", which questions whether it can be considered to be a category of emotional experience. Hubris is a term more often reserved as a judgement about someone else, much like the term arrogant. It is perhaps more useful to say, therefore, that we feel pride, which can be interpreted as hubristic in certain contexts.

Table 1.10 provides a range of perspectives on pride from which themes can be identified that relate to an experience of pride. While some simply state that it relates to secure social bonds (e.g. Scheff, 2014), others simply state it relates to living up to one's own standards (e.g. Tangney and Dearing, 2002). Similarly to the discussion on shame above, however, the complexity of experiences of pride can be demonstrated within the following examples. A politician may feel proud of introducing certain reforms believing they are morally right despite them being deeply unpopular and subject to widespread criticism. A person may feel proud of their behaviour which results in them being sent to prison. A person may feel proud of having an argument with their romantic partner instead of staying silent. Such examples demonstrate that while we can feel proud of meeting the expectations of others, strengthening and securing our social status, we can equally feel proud of actions that result in threats to our social bonds. In considering pride experiences, it is perhaps necessary to consider the inter-relationship between the self and their social bonds. One can feel proud of living up to the expectations of others only if these expectations are incorporated into an identity-standard. Pride can, therefore, be considered to relate to (1) a positive evaluation of the self, which could be by either the person themselves or someone else; (2) which is as a result of the person living up to an identity-standard; (3) the person is considered to be responsible for living up to this standard; and (4) the person believes this verifies their identity and/or the quality of their relationships to the others.

Table 1.10: Theories of pride

| Author | Discipline | Definition |
|----------------------------|---------------------------------------|---|
| Cooley (1902) | Sociologist | The experience of the self being verified in the minds of others |
| Mascolo and Fischer (1995) | Psychologists | The experience of believing that they are responsible for a socially valued outcome or that they are a socially valued person |
| Lawler (2001) | Sociologist (exchange theory) | The experience of exchange successes being attributed to the self |
| Tangney and Dearing (2002) | Psychologists | The experience from a positive self-evaluation |
| Tracy and Robins (2004) | Psychologists | The experience of having lived up to some actual or ideal self-representation |
| Turner (2009) | Sociologist | The experience of receiving positive sanctions from others and/or meets expectations about what did and should occur |
| Scheff (2014) | Sociologist (symbolic interactionist) | The experience of a secure bond |

Pride has been considered to encourage people to behave in a manner consistent with their identity standards and social expectations, as it has been considered to enhance their sense of self-worth, self-esteem, and self-authenticity, while also maintaining or even improving their position in the social group (Cooley, 1902; Mascolo and Fischer, 1995; Tracy and Robins, 2007; Scheff, 2014). While pride has generally been associated with approach type behaviours, as discussed, these behaviours have been considered to be both pro-social and anti-social depending on the perspective of the person evaluating the situation. No matter the perspective, however, experiences of pride have typically been considered to be linked to such behavioural responses as an expanded and upright posture, head tilted slightly upward, a small smile, and arms raised above the head or hands on the hips (Tracy and Robins, 2004, 2007). Equally, these experiences have been considered to include telling others of one's achievements (Kovacs, 1990). Such actions can be considered to be a part of what we understand to mean by the term pride and can therefore be included in the social representation of pride in table 1.11.

Table 1.11: A cultural script for pride

| Step | Subevent |
|------|---|
| 1 | The person holds an identity standard A situation occurs whereby the person is perceived to have met this standard |
| 2 | The person feels responsible for meeting this standard The person feels pleased |
| 3 | The person believes this strengthens the status of their relationship with others The person feels important |
| 4 | They start to smile and straighten their posture pushing their chest out |
| 5 | The person wants to tell others about the situation |

SELF-CONSCIOUS EMOTIONS: A SUMMARY

The test of any emotion concept is whether it is able to offer a plausible explanation of emotional life. It has been argued here that a constructionist account provides the most useful conception of emotional experiences. While we are permanently in a biological affective state, fluctuations in this state are mostly as a consequence of how we perceive and construe the self in the environment. One's sociocultural context provides the means to structure our emotional experiences through a shared set of concepts. We are therefore able to understand a situation, who we are within it, how to evaluate ourselves, and how we are being, or would be, evaluated by others within a given situation, along with the bodily sensations associated to these specific situations. As Dimaggio and Markus (2010) suggest, people think, act, and feel in culture specific ways. The terms pride, shame, guilt, humiliation, and embarrassment, as well as other emotion terms, can be considered to be labels for shared cultural scripts, i.e. social representations, which enable speakers of the English language to understand and communicate their experience. Despite individual differences, a person is able to use their embodied knowledge of these cultural scripts, i.e. embodied representations, to conceptualise the self-in-situation to make sense of the experience.

Once a person has developed knowledge of these emotion labels, they are able to use this knowledge not just to understand their emotional experience in the moment but also

retrospectively. For example, one can become ashamed of what one has done sometimes years after the event. Furthermore, in deciding on how to act, a person can consider the possibility of experiencing self-conscious emotions in their imagined future and act accordingly. Further still, such embodied representations enable a person to understand wider socioemotional processes and, therefore, to feel vicarious or group-based shame, pride, etc. For example, one may feel a threat to their identity as a result of another's behaviour if this other person is seen to represent them somehow, such as by sharing a social identity. Such a situation may share sufficient characteristics with their embodied representation of shame for them to say they feel ashamed of the other person (e.g. Lickel et al., 2005). Our embodied representations can therefore be considered to play a role in how we understand our present, our past, and our future, which leads us to particular views and feelings about ourselves and our social relationships. Given these definitions, we can now outline the field of child protection social work to begin to consider these experiences in the context of practice.

CHAPTER 2: THE ROLE OF SELF-CONSCIOUS EMOTIONS IN THE DEVELOPMENT OF CHILD PROTECTION SOCIAL WORK PRACTICE

While there is no unified approach to the study of practice, Schatzki (2001) argues that it can be considered to be arrays of human activity. In other words, it is what people do. Yet what social workers do, and how they do it, has always been contested (Humphries, 1997; Moriarty et al., 2015). This chapter, therefore, seeks to provide a sociohistorical analysis of child protection social work practice and the role that self-conscious emotions have played in the creation, maintenance, and disruption of the arrays of activity that social workers have done in their attempts to protect children from harm. The institution of social work, and child protection practice within it, is therefore the focus of this discussion. After outlining a framework to inform this analysis, a brief discussion on the foundations for the institution of social work and the creation of child protection as a formalised practice within this institution is provided. Following this, an analysis is outlined of how these institutional arrangements have been disrupted and reformulated to create modern child protection social work practice and the forces which support it.

SELF-CONSCIOUS EMOTIONS IN INSTITUTIONAL WORK

Freidson (1970) defines a profession as “an occupation which has assumed a dominant position in a division of labour, so that it gains control over the determination of the substance of its own work” (p.xvii). To achieve this, he argues that an occupational group has to be privileged by the power of the state and, therefore, needs, at least initially, to be sponsored by those who hold such power. Gaining legitimacy for a particular domain and social acceptance amongst those with power is, therefore, necessary. Freidson (1970) argues that this is achieved by developing a cognitive basis, i.e. a body of knowledge and techniques which professionals apply in their work, and a normative basis, i.e. a service orientation and set of ethics, for the occupation, which

enables it to establish the boundaries for both their occupational domain and the membership to this domain. Or as Larson (1979) states, legitimacy is founded on a system of education and credentialing. The emerging profession is then able to gain autonomy and establish a position of social prestige independent of the original sponsors (Macdonald, 1995). Following Freidson, Larson (1979) argues that a profession attempts to constitute and control a market for their expertise, so the professionals are able to translate one set of resources, i.e. knowledge and skills, into another, i.e. social and economic rewards; a process she calls the “professional project” (p.18). Such action to organise and proceduralise a set of standardised interaction sequences that seeks to control the production, dissemination, and use of a particular knowledge base is referred to by Jepperson (1991) as institutionalisation.

The field of neoinstitutionalism (see DiMaggio and Powell, 1991) provides a useful foundation from which to understand the rise of a profession. Building on a range of ideas from cognitive psychology, cultural studies, phenomenology, and ethnomethodology, neoinstitutionalists conceive institutionalisation to occur in the environment of organisations, often at the field level (Berger and Luckmann, 1967; Silverman, 1971; Garfinkel, 1974; Meyer and Rowan, 1977; Zucker, 1977; DiMaggio and Powell, 1983; Meyer and Scott, 1983). The emphasis can be crudely perceived to be on cultural and constitutive processes, routines and schemas, legitimacy processes, and formal structures (Scott, 2014). Within this context, Lawrence et al. (2009) argue that we cannot understand the action of institutional actors, like social workers, without understanding the templates for action provided by the institution and the regulative mechanisms which enforce those templates. Yet, they also argue, we cannot understand an institution, like social work, without understanding how the action of the institutional actors affects those templates and regulative mechanisms. It is a recursive relationship as represented in figure 1.2. What we know as social work today can be understood through this perspective, considering the purposive action aimed at creating, maintaining and disrupting institutions, or

what Lawrence and Suddaby (2006) refer to as “institutional work”, that has established social work as a legitimate institution which continues to evolve and adapt.

Creed et al. (2014) have sought to consider the role of shame in institutional work, which provides a useful starting point for this study. Drawing on Foucault’s (1990) notion of power as an effect of social relationships, i.e. it is relational, distributed, and often invisible within a social group, Lawrence (2008) argues that this power serves to establish a specific social reality that comes to be considered objective by those within it. In other words, we come to understand what is normal, and what is not, within a certain group from our interactions. Power, therefore, can be considered to be systemic, in that it can be ever-present and all-encompassing, and disciplinary, in that it has the effect of establishing conformity to established understandings within the community. Creed et al. (2014) argue that the shared rules that constitute shameful behaviour within an established group, which come to be taken for granted as objectively correct and natural, can be considered as systemic shame. Such an analysis could equally be extended to include systemic pride: the shared rules that constitute praiseworthy behaviour. The notion of systemic shame and pride provides a useful way of considering how the threat or promise of being shamed or praised “penetrate community members’ identity constructions as they strive to meet conditions for ongoing membership through enacting praiseworthy rather than shameful ways of being” (Creed et al., 2014, p.282). Systemic shame and pride can, therefore, be considered to provide the foundations for the construction of a particular identity.

Of course, systemic shame and pride could only have an effect on how a person behaved if they were aware of it. Creed et al. (2014), therefore, argue that individuals learn the conditions for being shamed (or praised) within the context of interactions within the group. They argue that with such knowledge, individuals can assess the potential to be shamed (or praised) by others in a given situation, which can be considered a form of intersubjective surveillance. Furthermore, such intersubjective surveillance can be considered to underpin a person’s self-regulation, as they

manage their actions to account for the possibility of being praised or shamed. Creed et al. (2014) consider these components, i.e. one's capacity for self-conscious emotions, one's knowledge of the conditions for such experiences within the group, one's intersubjective surveillance, and one's self-regulation, to constitute one's sense of shame (and pride). It is through one's sense of shame that theorists, such as Goffman (1963) and Scheff (2000), can claim that shame (or pride) plays an important role in the production of social order and social control, as people actively attempt to avoid being shamed, thereby complying to social expectations, norms, and ideals.

While a sense of shame ensures that most social transgressions are avoided, where transgressions occur, and are noticed, others within the social group may seek to use shame as a mechanism to induce compliance to the community's expectations, which Creed et al. (2014) term episodic shaming. Of course, this could be equally applied to pride through the notion of episodic praising. A person, or a number of people, who have cognitive, emotional, and/or moral commitments to existing institutional arrangements, which Creed et al. refer to as institutional guardians, can police the boundaries of acceptable behaviour through attempts to make someone feel shame or pride, thereby coercing compliance (Creed et al., 2014). While Lawrence (2008) considers such action a form of agentic power, Creed et al. (2014) assert that the use of such power is purposeful and strategic. Given the discussion in the previous chapter, however, a person may feel guilt, humiliation, or embarrassment as a result of such actions, rather than shame, or indeed an experience that could be categorised as a number of these. Given these arguments, episodic praising can be considered action by a person that induces pride in another, while episodic shaming can be considered action by a person that induces shame, guilt, humiliation, or embarrassment in another. Such action may be intended to elicit conformity and reassert institutional prescriptions, yet Creed et al. (2014) argue that such action may have unintended consequences, as a person may re-assess the value of the institutional arrangements or the relationships they have within it. Consequently, self-conscious emotions can be considered to, potentially, play a significant role in the creation and maintenance of institutions, as well as

the disruption and re-creation of them. These concepts are summarised in table 2.1 and it is from this perspective that we can begin to consider the role these experiences have played in the development of child protection social work practice.

Table 2.1: Self-conscious emotions in institutional processes

| | Positively valenced experience | Negatively valenced experience |
|----------------------------|---------------------------------------|--|
| Systemic power | Systemic pride | Systemic shame |
| Self-consciousness | Sense of pride | Sense of shame |
| Agentic power | Episodic praising | Episodic shaming |
| The felt experience | Pride | Shame, Humiliation, Guilt, Embarrassment |

CREATING AND INSTITUTIONALISING CHILD PROTECTION PRACTICE

The foundations of modern social work began in the eighteenth century and stemmed from changes in social attitudes towards the suffering and the poor (Young and Ashton, 1967). With greater acceptance of the need for help and support, social work became a praiseworthy activity and charity and voluntary organisations began to increase their administration of poverty relief, some began to work directly with individuals, and others sought collective action to improve the lives of the poor (Woodroffe, 1962; Young and Ashton, 1967). Furthermore, as the middle and upper classes began to be concerned about the abuse of children among the working classes, some people began to police the streets and inspect the homes of the poor for suspected cruelty to children (Ferguson, 2011). Consequently, these ‘inspectors’ became colloquially known as the ‘cruelty men’ (NSPCC, 1912). By the turn of the nineteenth century, a cognitive and normative base for work with the poor, the sick, the elderly, the protection of children, the care for orphans, and those suffering mental ill-health had been established (Woodroffe, 1962).

While all social workers were seen to help and support people, for conservatives, social workers supported the established social order, while for radicals and progressives, social workers challenged the dominant ideology of the time (Young and Ashton, 1967). With the changing societal attitudes, pre and post Second World War, perceptions of social work as a necessary, legitimate, and socially acceptable form of work increased, gaining social and legal support for its practices within the emerging welfare state (Payne, 2005). With the proliferation of separate and specialised personal services which employed social workers (Donnison, 1969), dissatisfaction grew at the lack of coordination and overlapping of services, and a committee was appointed in 1965 to review the organisation and responsibilities of local authority services. The resulting Seebohm report (1968) advocated for a shift in practice from focusing on the individual and their problems, to the community, its needs, and rights (Donnison, 1969); a perspective more closely associated to social work's progressive and radical roots.

Seebohm's (1968) main argument was for the need for a single local government department, with social work at its heart, to deliver a community based, family service, available to all (Payne, 2005). This was enacted through the Local Authority Social Services Act of 1970, creating a new social work practice, one that worked with all social problems, from the young to the old, which required a new generic social worker and a new generic qualification, which the expanding University sector provided (Payne, 2005). Within this new arrangement, child protection practice was the responsibility of all social workers, and a shared view had become established that the practices of the cruelty men were now shameful and any work with families should be founded on a relationship-based, therapeutically-informed, partnership approach (Ferguson, 2011). Indeed, the police were considered to play a marginal role in cases of child abuse, if they were considered to have a role at all (Baher et al., 1976). Parton (2014) argues that the end of the 1960s marked the high point of optimism, confidence, and pride in the profession. Indeed, Adams (1998) states that the new arrangements for social work services were administered as a professional bureaucracy that respected professional expertise and provided social workers a

high degree of discretion. Other than for exercising statutory powers, such as applying for a Court order, Munro (2004) states that there was very little paperwork and what records were kept were used to improve professional practice through supervision. Furthermore, the new central Government inspectorate was designed to provide a “promotional, consultative and advisory” function to the new departments (Seebohm Report, 1968, p.185).

The creation of these new arrangements, however, created new challenges. Satyamurti’s (1981) ethnographic study of children’s social work services prior to, and following, the reorganisation demonstrates the significant changes in their work role, responsibilities, clientele, agency policies and procedures, and she highlights the uneasy relationship between the social workers and the new administrators. While Payne (2005) argues that some local authorities sought to undermine the vision of social work provided in the Seebohm report, such as by not appointing a director of the new department with social work experience or qualifications, Parton (1991) argues that much of what was considered good social work in the children’s departments was disappearing in the new departments, as social workers sought to manage the high demand for limited resources. Certainly Satyamurti’s (1981) study indicates a hardening of attitude towards those considered difficult or undeserving. While these issues may have caused doubt and uncertainty, trust and confidence in the profession was more seriously damaged through a number of different factors.

DISRUPTING CHILD PROTECTION PRACTICE

The 1970s saw changes in social and political attitudes that arguably stemmed from the economic crisis that saw the British economy suffer as a result of the 1973 oil crisis, a budget deficit, a currency crisis, and industrial unrest, which local authorities and social workers became heavily involved in (Payne, 2005). Henkel (1991) argues that, for some in the Conservative party at least, questions arose about the sustainability of the welfare state and whether it hampered economic growth. Furthermore, many in the Conservative party developed a belief that the welfare state was self-serving and unresponsive to those it served (Munro, 2004). And further still, Power

(1997) argues that many presumed that hierarchical bureaucracies, such as the new social work service, were inherently inefficient, which, it was argued, could be replaced with the principles of the more efficient market. Such attitudes were fuelled by perceived personal and system failures within the profession. A series of studies throughout the 1960s and 1970s threatened social work's theoretical foundations, which was mainly based in psychoanalytic theory (Yellolly, 1980). These studies failed to find that the methods used by social workers were effective and in some cases even made things worse (Fischer, 1976). Furthermore, Fischer (1976) concluded that professionally trained social workers were no more effective than non-trained social workers, leading some to criticise the evidence base of social work and attack the pretensions of its training (e.g. Brewer and Lait, 1980).

The death of Maria Colwell at the hands of her step-father in 1973, after being placed back with her mother and step-father on a supervision order to the local authority, further contributed to erosion of trust in the profession. The subsequent inquiry gained widespread media attention and public concern (Parton, 2014), leading to criticism of the social worker and the profession. The experience of Maria's social worker of being cross examined for twenty five hours and requiring police protection as she went in and out of the hearing (Greenland, 1986) could be considered to be an example of episodic shaming as it publically threatened her identity as a competent and ethical social worker. The failings of Maria's social worker, however, were not considered to be an isolated case and the profession was shamed through public criticism by politicians and in the press (Parton, 1991). Bailey (1977) considers such criticism to be akin to a myth, i.e. "an oversimplified representation of a more complex reality" (p.7). Bailey (1977) argues that in attempts to promote and preserve one's own views, contrary views are derided, creating what Wallace (1993) refers to as a discourse of derision. The death of Maria Colwell provided the opportunity to construct a discourse of derision around the profession, which shamed the relationship-based, support function of social work practice, through the creation of a myth that such practice was inadequate, inappropriate, and dangerous. A clear message was provided that

social workers needed to use their authority to intervene in the lives of families to prevent such tragedies ever happening again (Ferguson, 2011; Parton, 2014; Warner, 2015). Arguably, such messages provided a new set of boundaries for the systemic shame and pride in operation within child protection social work and social workers were placed under unprecedented levels of scrutiny to ensure they adhered to these boundaries. Externally, Greenland (1986) argued that “hostility towards social workers, fuelled by the press... became an occupational hazard following the inquiry into the death of Maria Colwell” (p.164). While internally, Payne (2005) argues that extensive administrative procedures were set up to monitor the work of social workers, including multiagency child protection conferences and a register to keep a record of children considered to be at risk of non-accidental injuries. The erosion of trust and confidence in social work, distrust of hierarchical bureaucracies, and a lack of commitment to the welfare state saw the new Conservative Government in 1979 bring in reforms to public services with the intention of making them more efficient and effective (Munro, 2004).

There were attempts to challenge the myths that constituted the discourse of derision that had developed around social work. Indeed, the Barclay Report (1982), commissioned by the Government to address what was seen as a growing crisis in social work, opened with “too much is generally expected of social workers. We load upon them unrealistic expectations and we then complain when they do not live up to them” (p.vii). Many more inquiries into the deaths of children as a result of abuse by their parents, however, followed that of Maria Colwell and perpetuated the discourse of derision. Indeed, there was continued public criticism of social workers as being overly optimistic and having failed to protect children by doing too little too late (Parton, 1991). Arguably, with this new systemic shame now in operation, supported by a discourse of derision and policed by episodic shaming within the press, practice was refocused to avoid being shamed and the surveillance and social control functions of social work practice were prioritised. Indeed, while Harris argued in 1987 that such pressures could lead to defensive practice, that same year 121 children in Cleveland were removed from their homes due to

concerns they had been sexually abused (Parton, 2014). Concerns about the practices of the social workers, such as removing children from their homes in the middle of the night, were criticised within the media and an inquiry was set up (Butler-Sloss, 1988), which concluded that most of the medical diagnoses were incorrect and the children should not have been removed. This time the social workers, and the profession, were episodically shamed through public criticism for a perceived overreaction and inappropriate use of statutory powers. Indeed, some politicians shamed social workers by likening their work to that of the SS (the Nazi's Schutzstaffel, which translates as the 'protection squadron'), which was subsequently amplified within the media (Parton, 1991). Such criticisms of not doing enough or doing too much fed into the wider debates of the day relating to the role of the state in family life, leading to the Children Act 1989, which sought to re-establish confidence in the profession and the public service by balancing the need to provide family support with that of child protection work (Parton, 1991). While this new piece of legislation and subsequent reforms emphasised the need to provide support and to negotiate and develop partnerships with parents, Ferguson (2011) argues that "the impact of child deaths and the pressure to avoid making mistakes and blame led to the work being dominated by child protection concerns" (p.35). In other words, the systemic shame embedded within the institution of social work undermined the intentions of these new reforms by reconstructing social workers' sense of shame and pride, which directed their actions towards avoiding the possibility of further shaming.

Power (1997) argues that where Governments' lack trust in a service, forms of checking are developed to ensure that professionals are doing what they were 'supposed' to be doing. By making organisations, and therefore the individuals within it, account for what they do, Governments could ensure professionals were 'accountable' to those who funded the service. Inspections were not seen, however, as the mechanism to ensure accountability. In the 1970s and 1980s, inspections were used to provide advice and guidance to the professional services and Gilroy (2004) states that there was reluctance in some Government departments to increase the

powers of the inspectorate for fear it would provoke defensive reactions in practice. Instead, the Audit Commission was established in 1982 to fulfil this function, with a principal aim to be the driving force in the improvements of public services (Munro, 2004). Rather than use the methods of the inspections and review the work of individuals, however, audits reviewed the work of the organisation as a whole. The objectives for practice, standards of good practice, and indicators of good performance were defined so that the auditors could use these standards to make a judgement about the organisation. This imposed a standardisation on social work the likes the profession had never seen before, which Munro (2004) states were based on “a number of theoretical assumptions that have no clear authority from empirical research or professional consensus” (p.1083). Nevertheless, the judgement of the auditors was trusted, despite questions about the process and results of such judgements, elevating the audit process to the status of highest importance (Power, 1997). Legitimacy as an organisation, and therefore pride in one’s profession, required a positive judgement. As Dezalay and Sugarman (1995) have argued, the rise of auditing has meant that the sociology of regulation and the sociology of the professions are now inseparable.

For organisations to be able to provide the evidence the auditors needed, they had to implement new policies, procedures, and internal monitoring, recording, and data management systems in order to control what its employees did. Power (1997) argues that through a process of regulating and policing these structures, the auditors control the control systems inside organisations, resulting in organisations being “constructed around the audit process itself” (p.51). Such moves deliberately sought to challenge the organisational power and discretion of the professionals that had developed over the post-war period to provide the Government more control of what professionals did and how they did it (Power, 1997). Under the guise of creating greater effectiveness, efficiency, and value for money, local authorities were encouraged throughout the 1980s and 1990s, through the audit process, to move away from the generic model of social work services to provide more specialist services, which saw the proliferation of teams which worked

exclusively with children and their families and those who worked with vulnerable adults (Parton, 1996; Munro, 2004). Furthermore, the local authorities were encouraged to separate the commissioning from the delivery of services. Parton (1996) argues that through this process, “no longer are social workers constituted as caseworkers drawing on their therapeutic skills in human relationships, but as care managers” (p.12), monitoring and reviewing the packages of care they have put in place.

The work of the inspectors took on the methods of auditing and began to change from one of inspecting the professional practice of social work, to auditing the management, organisation, and delivery of the services (Gilroy, 2004). Indeed, Power (1997) argues that inspections have simply become audits with the power for independent escalation. Dimaggio and Powell (1983) refer to such a process as institutional isomorphism, as one set of organisations seek to resemble others in their attempts to gain legitimacy and social acceptance. Perhaps unsurprisingly, the work of the Audit Commission and the inspectorate began to overlap and they began undertaking joint inspections from 1996 (Gilroy, 2004). Munro (2004) argues that these developments only intensified under the new Labour Government elected in 1997. ‘Performance’, ‘outputs’, and ‘outcomes’ were further quantified to drive and measure improvement through audit and inspection, which produced for the first time, a grade for the local authority, a league table, and the possibility of being placed in ‘special measures’. Such measures could be seen to formalise and embed the systemic shame and pride for social work, as those within and outside the organisation now knew the boundaries for shameful or praiseworthy behaviour, which legitimised episodic shaming and praising of organisations that were considered to conform, or not, to these boundaries. Rather than improve the efficiency and effectiveness of professional services, however, Sieber (1981) argues that such measures can create a ‘fatal remedy’ through the construction of a dysfunctional system set up to satisfy the auditing system rather than the people it was intended to serve; a process Power (1997) refers to as colonisation. While such methods were criticised by some (e.g. Cutler and Waine, 2003) and the Audit Commission (2002)

identified that social workers were leaving the profession because of bureaucracy, paperwork, targets, lack of autonomy, and unmanageable workloads, such methods had come to be seen as the most effective way to ensure the best value for money was provided to the state (Gilroy, 2004).

The effect of these changes in child protection social work practice was, perhaps, best exemplified in the case of Victoria Climbié, who was known to social services at the time of her death in 2000. To Victoria's social worker, the case was not out of the ordinary and her practice was as diligent as any other case (Taylor, 2007). The subsequent inquiry, led by an ex-chief inspector, identified an authoritarian management style and an ethos of meeting targets, statistics, and getting cases through the system rather than considering what the child and family needed (Laming, 2003). Rather than the system in which practice operated being a legitimate target for criticism, instead, the blame was placed on the organisation for not having implemented their statutory responsibilities appropriately or providing effective leadership and the social worker for her poor practice (Laming, 2003). With greater demand for professional accountability, we can perhaps suggest that the process of episodic shaming had reached new proportions at this stage. Under significant criticism within the press, supported by a discourse of derision, the local authority placed a large proportion of the blame on Victoria's social worker who was not only sacked but also placed on the Protection of Children Act (POCA) list, preventing her from ever working with children again (Fairweather, 2008). The social work regulator, the General Social Care Council (GSCC), later refused to register Victoria's social worker on the grounds of incompetence. Victoria's social worker explained the personal impact of such public shaming when she disclosed that she frequently considered suicide, was admitted to hospital for psychiatric care, and stated "I hated myself so much" (Fairweather, 2008, n.p.).

The Government's response to the scandal and subsequent inquiry was similar to that of previous Government responses to widely publicised child deaths, which was to implement major reforms

to ensure that such a thing could never happen again (Parton, 2014). The resulting Children Act 2004 sought to encourage partnership between, and “sharpen accountability” (Parton, 2014, p.50) of, all agencies that came into contact with children. This involved significant organisational changes, including the dismantling of the generic local authority social work service set up after the Seebohm Report to create a new local authority department for children’s services. New administrative requirements were made to make it easier to retrieve information through the use of technology, which served to increase the level of control over what the social workers did and how they did it by forcing them to follow a specific workflow of documents, within a specific timeframe, embedded within a computer system (White et al., 2010). Indeed, Wastell et al.’s (2010) ethnographic study identified practice revolving around the computer system in an atmosphere of performance management, with highly formalised rules and procedures, an empowered management system, and diminished professional discretion. The amount of time social workers had to spend on the computer significantly increased as a result (Baginsky et al., 2010; White et al., 2010).

Despite the intention of these reforms, Peter Connelly died in 2007 from abuse, in the same local authority Victoria Climbié had, while subject to a child protection plan. The case had conformed to all of the statutory requirements, policies, and procedures, and two months after Peter had died the local authority was graded as good by the Office for Standards in Education (Ofsted), the new inspectorate for children’s services. Inevitably, the political and media outrage criticised not only the individual workers, the local authority, and child protection practice across the country, but also the inspection process itself (Parton, 2014; Warner, 2015). As Ed Balls, the responsible Government minister, stated, “once it moved into the debate about the integrity of the inspection process... I had no choice... I had to manage that situation” (Balls, 2014, n.p.). So while Peter’s social worker and her team manager were sacked by the local authority following a Serious Case Review (SCR), which stated there had been a lack of authoritative child protection practice, the head of the children’s services was removed from her post live on television by Ed

Balls following the publication of the revised inspection report he had commissioned, which now graded the service as inadequate (Parton, 2014). As the inspection process had become symbolic of the Government's ability to provide good quality services (Power, 1997), the Government sought to shame the individual worker, the head of the service, and arguably the institution of social work, rather than the system they had created and the inspectorate that supported it.

CREATING A NEW CHILD PROTECTION PRACTICE

Parton (2014) argues that the death of Peter Connelly marked a watershed in child protection practice and policy. While the Government set up the Social Work Task Force in 2008, which countered the discourse of derision by reaffirming the importance of the profession and setting out a vision for an improved system. The death of Peter Connelly damaged the Labour Government's reputation for managing public services, which combined with the financial crash of 2007/8 which had damaged its reputation for managing financial services, and a Conservative led coalition Government came to power in 2010 committed to reforming the system in the context of austerity (Parton, 2014). The newly commissioned review of child protection (Munro, 2010, 2011a, 2011b) criticised the overreliance on procedure, guidance, and targets, and argued for a more child centred system based on relationship-based practice. Arguably, the work of the Munro review and the Social Work Reform Board redefined the systemic pride in operation within the field, providing clear boundaries for praiseworthy behaviour, reminiscent of Seebohm's vision. While such work informed the subsequent changes, with frontline practitioners seeing a relaxing of timescales and less rigidity in the paperwork they had to complete, these new changes encouraged an authoritarian form of practice perceived to be absent in the case of Peter Connelly.

Under the auspices of transparency, all SCRs were required to be made public, which, while explicitly not about apportioning blame to individuals, served to highlight the most serious mistakes in child protection, arguably heightening the sense of shame of all those in the field.

Furthermore, the inspection regime was reformed, introducing unannounced inspections, while making it more difficult to attain the higher categories in a new grading system: Inadequate, Requires Improvement, Good, and Outstanding (Ofsted, 2015). Being graded as Inadequate, or even Requires Improvement, could be considered a threat to the identity of the organisation and those who work within it. Indeed, Perryman's (2007) study of teachers' experiences of inspections identifies they exert a panoptic and disciplinary force precisely because they lead to "fear, panic and loss of self" (p.177). In other words, the inspection becomes symbolic of the systemic shame and pride in operation, which heightens one's sense of shame during periods of increased scrutiny, knowing that one could be shamed for failing to conform to legitimised practices. The introduction of unannounced inspections, by this stage only undertaken by Ofsted, only served to place all local authorities under an atmosphere of continuous inspection (Perryman, 2007). Furthermore, the language of partnership, inherent to the Seebohm vision and embedded in the Children Act 1989 and subsequent statutory guidance, was absent from the renewed statutory guidance, and in its place the idea that social workers should "rescue children from chaotic, neglectful, and abusive homes" (HM Government, 2013, p.22); language more familiar to the cruelty men of the late 1890s/early 1900s. While Devine and Parker (2015) examined the referral and assessment data across England over the last 22 years and identified an increase of 311 per cent in referrals and 302 per cent in assessments since the introduction of the Children Act 1989, they failed to find an increase in the detection of child abuse. Despite this, there has been a significant rise in (1) the number of children subject to child protection plans, (2) the number of children placed in local authority care, which is now the highest it has been since 1985 (Vickerstaff, 2014), and (3) the number of children placed for adoption (Parton, 2014). Indeed, observing the changes in practice, the President of the Family Division, Judge Munby, recently noted:

"until the late 1960s, the typical adoption was of an illegitimate child born to a single mother who, however reluctantly, consented to the adoption of her child. Non-consensual adoption was comparatively rare... The result of various changes in the system of public childcare, culminating in

the implementation in October 1991 of the 1989 Act, has led in recent decades to a correspondingly dramatic increase in the number of non-consensual adoptions. The typical adoption today is of a child who has been made the subject of a care order under the 1989 Act and where parental consent has been dispensed with" (Re N (Children) (Adoption: Jurisdiction) [2015] EWCA Civ 1112, para. 16).

Such changes in policy and practice and these recent trends has led Featherstone et al. (2014a) to argue that these reforms have sought to reconstruct child protection social work practice through a "focus on using the law, removing children decisively and getting them placed for adoption early" (Featherstone et al., 2014a, p.1736).

CHILD PROTECTION SOCIAL WORK PRACTICE: A SUMMARY

Social work was born out of the desire to help those in need. Who has been thought to be in need, what has been considered help, and how best to provide this help has, however, been shaped by the dominant attitudes, values, and opinions of the time. These collective attitudes and opinions, and the structures that support them, can be considered to have created a cultural, or systemic, force that has ensured that what is considered praiseworthy and shameful behaviour is known (Creed et al., 2014). Social work practices have been created and maintained within these systemic forces because they achieved, and continue to achieve, cultural legitimacy and social acceptance (Lawrence and Suddaby, 2006). Other forms of practice have become delegitimised as a consequence of the changing attitudes and norms (Oliver, 1992).

Until 1970, child protection social work consisted of a social worker seeking to develop a therapeutic relationship with the parents, with the social worker providing practical help, counselling, and group work to effect change within the family (Parton, 1996). It would have been considered inappropriate to have someone else provide the help and support the social worker considered the family needed. Furthermore, there was a high degree of trust in the practitioners and their organisations, with social workers undertaking little administration other than as an aid to improve their practice. Dissent of these institutional arrangements existed but remained a

minority view (Payne, 2005). Since the 1970s, however, the practices, knowledge, and skills base of the profession has been challenged and criticised, with individual workers and organisations being subject to increasing levels of public shaming and humiliation (Warner, 2015). Increased levels of administrative control have been put in place by politicians to restrict and direct the actions of social workers to be more in line with what they consider to be praiseworthy behaviour. These arrangements are policed by auditors/inspectors who can be considered to use episodic shaming of organisations to instil a sense of shame in both institutional actors, i.e. the social workers, and institutional guardians, i.e. those who manage the organisations, to comply with these arrangements (Creed et al., 2014).

Child protection social workers are more likely to be seen today undertaking assessments, inputting data into a computer, and making referrals to others to undertake practical help, counselling, or group work to effect change (Parton, 1996). Their work is subject to more monitoring than previously through scrutiny by their manager and senior managers, child protection conference chairs, independent reviewing officers, and children's Guardians, which all require greater levels of administration to evidence their work. There has also been a significant change towards a more authoritarian form of social work that would have been considered shameful in the 1960s. Yet, despite the criticism (e.g. Featherstone et al., 2014a), it can be a source of praise for a social worker to remove a child from their parents without parental consent and place them for adoption (Narey, 2011). Such changes in practice arguably suggest fundamental changes in organisational and individual identity.

This analysis has argued that shame and pride can be considered to have disrupted old identities and created and maintained new ones. It has argued that the systemic shame and pride that operates within the field has provided the background for organisational and individual action within the institution of social work. These systemic forces have provided legitimacy for episodic shaming and praising of certain actions, which instils a sense of shame and pride within

institutional actors to conform to the boundaries of the new identity. What this analysis does not tell us though, is how external forces reconstruct the systemic shame and pride within an organisation, how this new systemic force contributes to the process of delegitimising established organisational practices and embeds new ones, or what the impact of these processes on the experiences of those subject to these new forces are. It is the exploration of these that will enable us to answer the question of what role do self-conscious emotions play in child protection social work practice.

CHAPTER 3: STUDY DESIGN AND METHODOLOGY

As discussed in the introduction, pragmatism calls for a focus on experience in relation to contexts, language, and how people solve problems (Emirbayer and Maynard, 2010). This necessarily involves collecting data about the lived experience in real-world contexts, which in this case is of self-conscious emotions in the context of child protection social work practice. To explore this topic, however, it is important to understand the context for these emotional experiences; how they are experienced within this context; and how these experiences influence the way social workers practice within this context. While it is possible to design a study in a number of ways to investigate such questions, a number of scholars argue that case study research provides a flexible approach that is able to collect multiple sources of evidence in real-world contexts suitable for answering such questions (e.g. Stake, 1995; Flyvbjerg, 2001; Thomas, 2016). Following such arguments, this study has been designed as a case study and this chapter, firstly, defines the case and the rationale for this definition; secondly, outlines the approach and methods used to collect the data; before finally outlining the approach and methods used to analyse the data to develop an analytical narrative.

DEFINING THE CASE

Thomas (2010) argues the purpose of case study research is to produce “exemplary knowledge” (p.576), i.e. knowledge of an example understood within the context of the researcher’s own experience. He argues that an example is used not because it is representative or typical of anything, but rather because it provides a specific representation within a specific context. The meanings within exemplary knowledge are then “malleable and interpretable in the context of varieties of experience. The case study thus offers an example from which one’s experience... enables one to gather insight or understand a problem” (Thomas, 2010, p.578). Or as Eysenck (1976) put it, “sometimes we simply have to keep our eyes open and look carefully at individual

cases—not in the hope of proving anything, but rather in the hope of learning something” (p.9). Given the distinct lack of research on the role of self-conscious emotions in child protection social work practice (Gibson, 2016) this study simply aims to learn something about child protection practice and self-conscious emotions. A case study is not a research method (Simons, 2009), however, rather it is what Thomas (2011) refers to as a “design frame” (p.512) that may incorporate a number of methods. Indeed, he defines case studies as “analyses of persons, events, decisions, periods, projects, policies, institutions, or other systems that are studied holistically by one or more methods” (Thomas, 2011, p.513). While Wieviorka (1992) argues that a case study requires a “theoretical, scientific basis” (p.159), which for this case study is the role of the self-conscious emotions in child protection social work practice, he also argues that a case requires a “practical, historical unity” (p.159), or what Ragin (1992) refers to as the “boundaries around places and time periods” (p.5).

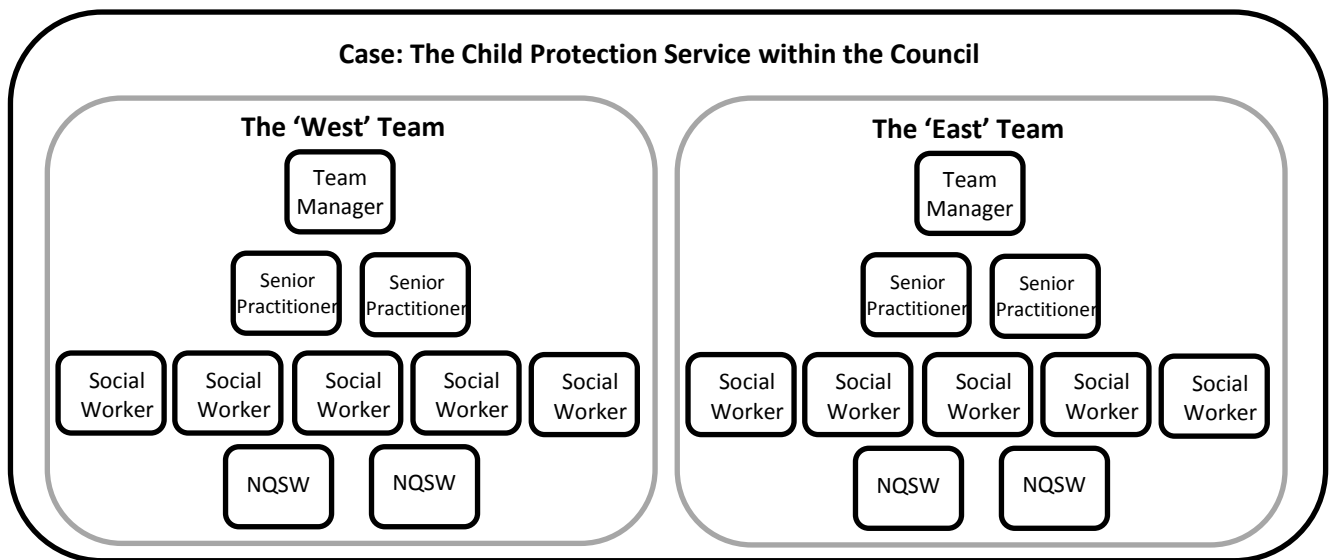
As this study is interested in the practice of the social workers, the primary focus of this case study is the action of the social workers in their efforts to undertake child protection work (Mead, 1934; Shalin, 1986; Charmaz, 2006; Lawrence and Suddaby, 2006). Given the inspectorial arrangements as described in chapter two, the grading provided by Ofsted tells us something about the perceived quality of the institutional arrangements of that particular organisation. To keep a focus on the role of self-conscious emotions in what is considered legitimate and socially acceptable child protection practice, any organisation with an ‘inadequate’ inspection grading was excluded as a possible site. On grounds of practicality, i.e. my ability to visit the case study site, the Principal Social Worker (PSW) of an English local authority, referred to as ‘the Council’ within this study, which had just received a ‘good’ rating by Ofsted was contacted and the management of the child protection service agreed to be involved. This study can therefore be considered to be a “key case” (Thomas, 2016), as it can be considered to be an exemplary case of child protection social work practice through which the role of self-conscious emotions can be considered. Ethnographic methods were considered appropriate to get close to the experience of

the social workers and record the actions of the practitioners in context. Indeed, Charmaz (2006) argues that “the goal of much ethnography is to gain an insider's depiction of the studied world” (p.21). The world in this study, however, is emotional experience and I therefore sought to move beyond description of the setting to provide an insight into the internal states and experiences of the social workers both through the data collection methods and my interpretation of these data. Thus, this study was explanatory in nature, seeking to provide a conceptual understanding of the interrelationships between these emotions and practice through exploring how and why the social workers did what they did (Thomas, 2016). Charmaz (2006) argues that constructivist grounded theory, developed in the pragmatic tradition (Mills et al., 2006; Bryant, 2009; Strübing, 2013), provides the methods to “move ethnographic research toward theoretical development by raising description to abstract categories and theoretical interpretation” (p.23). Grounded theory ethnography, therefore, provided the means to construct a framework of ideas to answer the research questions (see below) and the resulting framework is offered as an instrument for improving practice through supporting and facilitating the understanding of practice (Stake, 1995).

Two child protection teams were chosen, known as specialist safeguarding units within the Council, at both the request of the management and for ethical considerations. While the management wanted the research to have a broader coverage of practice within their Council than a focus on one team would have provided, by reporting on the findings as one team, greater anonymity for the participants has been ensured (see below). The teams were selected on the basis of which team agreed to participate. I sent information about the research to the PSW who passed it on to the child protection teams. Two teams invited me to discuss it further at their team meetings. All those in both teams agreed to participate following these meetings. A team consisted of one team manager, two senior practitioners, five social workers, and two newly qualified social workers (NQSW). While the teams did not strictly adhere to this prescription, and there were some changes throughout my time within the teams, these are not reported to

ensure anonymity to participants. Overall, there were 19 social workers and 2 team managers involved in the study. Experience ranged from less than one year to 24 years, age ranged from 24 years to 63 years, there was one male and the rest were female, and there was one Black-Caribbean social worker and the rest were White-British. As the child protection service within the Council provided an example of what was considered good child protection social work practice at the time, this service provided the boundaries for the overall case. The teams, and the individuals within the teams, fitted into this service and were therefore considered to be nested within this wider case (Thomas, 2016), as illustrated in figure 3.1.

Figure 3.1: Diagrammatic representation of the case



Data were collected for each team separately, stored separately, and analysed separately (see below). While there were differences between the teams, such as gender and ethnicity for some members, and one team was situated within the main Council building with the head of the service and the Councillors nearby, while the other was some distance away, there were also many similarities. Indeed, both teams performed the same function within the service and were subject to the same policies, procedures, pressures, and expectations, all of the social workers were female, and they were both fully staffed, stable teams. While I acknowledge that the differences between the teams played a role in the experiences of the individuals within the

teams, these differences were less significant when analysing these data for the purposes of answering the research questions. Indeed, comparing the codes, categories, and memos (see below) constructed from the data for each team presented a very similar picture. The data for each team were therefore amalgamated so that the individuals were treated as nested within the wider case irrespective of which team they worked in. This has served two purposes. Firstly, it has provided a more focused analysis for the purposes of answering the research questions and, secondly, it provides an additional layer of anonymity to the individuals as they cannot be identified by which team they worked in. To ensure anonymity, any identifying details relating to the individual or the team has been removed throughout the reporting of the findings

In seeking to gain an insiders perspective of what it was like to undertake child protection social work within this service I observed those within the teams for one to two days per week over a six month period. I started and finished the day at the same time as the social workers, which was usually from 8.30am until 5.30pm, although this sometimes went on until later. This provided a bounded timeframe, i.e. a snapshot (Thomas, 2016), through which to observe practice within the service. To place this perspective in context, however, I also sought data relating to the history of the service, the teams, and the individuals. This provided a retrospective element to the study (Thomas, 2011). Using Thomas' (2011) typology for case studies which outlines the subject, purpose, approach, and process, this case study can be defined as shown in table 3.1. Furthermore, given these boundaries to the case study, the research questions can be adapted accordingly:

- Main Question: What role do self-conscious emotions play in child protection social work practice within the Council?
- Sub-Question 1: What is the context for self-conscious emotional experiences in child protection social work practice within the Council as represented by the two teams involved?

- Sub-Question 2: How are self-conscious emotions experienced in the context of child protection social work practice within the Council as represented by the two teams involved?
- Sub-Question 3: How do self-conscious emotions influence the way social workers practice within the Council as represented by the two teams involved?

Table 3.1: Defining the case

| | | |
|-----------------|--------------------------------------|--|
| Subject | A Key Case | The child protection service within the Council is an exemplar of what is considered good child protection social work practice |
| Purpose | Instrumental | This case study is an instrument to facilitate the understanding of child protection social work practice |
| | Explanatory | It seeks to develop a tentative and context-specific explanation of the role that self-conscious emotions play in child protection social work practice |
| Approach | Theory Building | This case study seeks to develop a conceptual framework to explain the role that self-conscious emotions play in practice |
| | Interpretive | It is assumed that the social world is complex, indivisible, and should be studied in its completeness. It is assumed that there are multiple realities; meaning is indeterminate; facts and values are inextricably linked; truth is provisional; and social life is processual (Charmaz, 2006). My role in the construction of the resulting theory through interpretation of the meanings and actions of others is acknowledged |
| Process | Single, nested, case study | The child protection service within the Council is considered a single case, with individual social workers nested within this wider case |
| | Snapshot with retrospective elements | The case provides an illustration of the practice within the teams over a 6 month period contextualised through retrospective data |

DATA COLLECTION METHODS

DOCUMENTARY DATA RELATING TO THE WIDER SERVICE

Data were collected on the child protection service within the Council to gain a historical perspective of the service and to understand the current arrangements. All publically available Council documents that related to the child protection service were collected that dated from 2005 onwards. This included policy documents, minutes of meetings, reports from committee meetings, reports from the lead Councillor, Chief Executive of the Council, and head of the service, briefings for internal and external audiences, as well as current policies and procedures,

employee structures, and intended service aims and outcomes. Audit/inspection reports that related to the child protection service in the Council were also collected from 2005 onwards. These data were available on publically available databases related to the Council or the inspectorate, while some were collected during field visits. Together, these documents totalled 329 pages.

OBSERVATIONS AND DISCUSSIONS IN-SITU

Principally, however, data were collected from me sitting with the social workers in the team room and observing what they did, how they did it, their facial expressions, body language, and general presentation. I observed the environment and the social situations in which they were engaged. I asked them what they were doing and both why they were doing it and why they were doing it the way they did. I asked them about how they were feeling while they were doing it as well as asking about how they perceived themselves or how they thought they were being perceived in these moments. I listened to their conversations, their use of language, gestures, and tone. I enquired about the background to their conversations and how they perceived themselves or how they thought they were being perceived in the situation they were referring to. I would go with the social workers when they went to talk to their manager, to meetings, on home visits, to schools, or to the Court. This was either on an ad hoc basis, with me being invited by a social worker as they were leaving, or through me organising to attend with them at the start of the day. Such organisation ensured that I was able to collect data that related to all components of the work they had to undertake. My position as an overt researcher in the field, with minimal involvement in the observed situations, and where I would not normally be part of such situations, is considered by Gold (1958) as one of an observer-as-participant. What I observed can be summarised in table 3.2. Fieldnotes were taken throughout the day according to advice provided by Emerson et al. (1995) in a note book that I carried around with me. These

notes were then typed up when I got home that same night. In total, I conducted 246.5 hours of observations across the two teams.

Table 3.2: Breakdown of observations

| Observations with no client contact | |
|---|--|
| Observation/interaction/discussion <i>(observations, discussions with colleagues, discussions with managers, discussions in the kitchen, social talk, case talk in corridors, walks to office, telephone calls, talks in car, reading emails, reading reports, walks to town etc.)</i> | 324 discrete interactions ² |
| Social worker discussion with team manager | 37 discrete interactions ² |
| Supervision | 5 in total ³ |
| Legal Gateway Meeting | 4 in total ³ |
| Team Meeting | 3 in total ³ |
| Strategy Meeting | 1 in total ³ |
| Observations with client contact | |
| Home visit | 18 in total ³ |
| Office visit | 5 in total ³ |
| Child in Need meeting | 3 in total ³ |
| Child Protection Conference | 4 in total ³ |
| Core Group Meeting | 8 in total ³ |
| Hospital visit | 1 in total ³ |
| Public Law Outline meeting | 1 in total ³ |
| Court Hearing | 1 in total ³ |

DIARY ENTRIES

To gain a more specific focus on the participants' internal self-conscious emotional experiences I designed a semi-structured log, i.e. a diary sheet (see appendix 1), that was given to each member of the team at the end of the day to complete and give back to me before they left the office. Not everyone was in the office at the end of the day, so the number of diary entries I received each day varied. Furthermore, some participants were more willing than others to complete the logs. The diary sheet was designed along constructionist lines, as described in chapter one. Participants were provided with two logs, one for positively valenced self-conscious

² These are recorded in discrete interactions as they occurred fluidly in and around the office; they did not occur as discrete episodes such as in the case of a meeting

³ These are recorded as episodes, which had a beginning and an end with a number of interactions in between

experiences (asking participants to “describe any situation which made you feel good about yourself today”) and one for negatively valenced experiences (asking them to “describe any situation which made you feel bad about yourself today”). From these situations, the participants were asked to describe what they were thinking at the time along with any bodily sensations they felt. Following Scherer’s (2005) methodology on collecting data on emotions, participants were then asked to write down what word or words they would use to describe how they felt in that situation and then to choose which word or words most closely corresponded to their experience from a list of commonly used terms for self-conscious emotions. While this list included the terms under study (pride, shame, guilt, humiliation, and embarrassment), given the debates regarding these experiences as discussed in chapter one, further terms were also provided from these debates to explore their wider experience (acceptance, valued, and important were included from Scheff’s (2014) theory on pride; mortified was included from Cooley’s (1902) theory on shame; rejection was included from Scheff’s (2000) theory on shame; anxiety was included from Scheff (2000), Lewis (1971), and Tangney and Dearing’s (2002) theories on shame; and anger was included from Lewis’ (1971) theory on shame). Finally, the diary sheet asked participants how these thoughts and feelings influenced what they said or did at the time and how this may have changed things for them in the future.

Each diary entry was typed up on to a computer that same night. In total, I collected 99 diary entries. A breakdown of the diary entries by term is provided in figure 3.3. Together, these logs provided data with greater detail on the internal experiences of specific situations which I could combine with my observations and discussions with the social workers to build a more comprehensive picture of the role of self-conscious emotions in their practice. Asking the social workers to complete the diary entries at the end of the day, and to focus on only one positively valenced and one negatively valenced experience, rather than to complete a diary entry straight after a relevant experience as suggested by some (e.g. Reis and Gable, 2000; Bolger et al., 2003)

was considered the most practical approach to take. It gathered data close enough to the actual experiences without being too obstructive to their work.

Table 3.3: Breakdown of diary entries⁴

| Positively Valenced Experiences | | Negatively Valenced Experiences | |
|---------------------------------|-------|---------------------------------|-------|
| Term | Total | Term | Total |
| Pride | 29 | Anxiety | 15 |
| Acceptance | 19 | Guilt | 15 |
| Valued | 17 | Shame | 7 |
| Relief ⁵ | 9 | Embarrassment | 6 |
| Important | 3 | Rejection | 5 |
| Anxiety | 3 | Humiliation | 3 |
| Anger | 2 | Mortified | 3 |
| Embarrassment | 2 | Anger | 6 |
| Rejected ⁶ | 1 | Valued ⁷ | 2 |
| Guilt ⁸ | 1 | Important ⁹ | 2 |

DOCUMENTARY DATA RELATING TO INDIVIDUAL PRACTICE

While observations of practice, discussions, and diary entries about their experience of practice provided data in respect of what they did and how they did it, any written work produced as part of their practice remained hidden from such methods. I therefore sought to collect a sample and asked each participant to provide me with two pieces of their written work. As I had no knowledge of the content of this work, I asked them to decide which documents they wanted to supply. Most of the social workers took their time to think about which piece of work to give me and some commented that they were proud of the work they eventually decided upon.

Interestingly, a number of the assessments and reports provided related to the cases that I had knowledge of through my observations and discussions. This provided an added element to the analysis through comparison between my observations, discussions, logs, and then how the case

⁴ Most logs were categorised by participants using multiple terms, e.g. a person could feel important and guilty at the same time

⁵ Relief was not included in the forced choice list but was written by participants in the free text section

⁶ This was recorded as a positive experience being felt alongside acceptance, valued, and embarrassment

⁷ This was recorded as a negative experience being felt alongside anxiety (1 entry) and mortified (1 entry)

⁸ This was recorded as a positive experience being felt alongside pride and valued

⁹ This was recorded as a negative experience being felt alongside guilt (2 entries)

had been formally presented (see below). A breakdown of the documents that were collected is provided in Figure 3.4.

Table 3.4: A breakdown of the documents collected

| Assessment Type | Number |
|--|---------------|
| Review Child Protection Conference Report | 10 |
| Initial Child Protection Conference Report | 7 |
| Section 17 Assessment | 7 |
| Section 47/Core Assessment | 6 |
| Parenting Assessment | 1 |
| Initial Visit Form | 1 |
| Temporary Approval of Connected Person as a Foster Carer | 1 |
| Total | 33 |

SEMI-STRUCTURED INTERVIEWS

I collected the data and began to analyse it as the research progressed (see below). From my initial analyses I developed a semi-structured interview schedule which looked at the three areas which had become most pertinent in answering the research questions, namely: (1) how they perceived themselves and their practice within the context of the Council; (2) their experience and perception of the context in which they practised; and (3) specific examples of practice where self-conscious emotions were salient (see appendix 2). Seventeen social workers¹⁰ and two team managers were interviewed. Each interview was conducted in an interview room within a Council building. Interviews lasted between 55 and 100 minutes and were recorded on a digital recording device, transferred to a computer, and transcribed verbatim. The chronology of how the data were collected is provided in appendix 3.

ETHICAL CONSIDERATIONS

Any research that seeks to collect data in relation to such experiences as shame provides ethical issues in relation to observing, discussing, and recording such highly personal experiences from

¹⁰ Two social workers stated that they could not find the time to be interviewed due to their workload

the possibility of participants re-experiencing such feelings in the retelling of them or in experiencing what Levin (1967) calls secondary shame, i.e. the shame about feeling shame. The participants, therefore, not only had to be well informed of the research but also to feel comfortable with me as the researcher. I therefore took time with each team to explain the purpose and outcome of the study. I provided an information sheet, sent to them by the PSW, in the first instance (see appendix 4). I then met with the teams to provide more detailed information about the research (see appendix 5), explained it further and answered any questions before they signed a consent form (see appendix 6). The social workers were made aware that they could withdraw their consent for specific incidents, or even entirely, from the research at any point during the time I was collecting data and some social workers did indeed request that some incidents or discussions were not included. A further consent form was provided for the semi-structured interviews (see appendix 7). My discussions and the interview with the social workers required me to make the participants feel comfortable in discussing their experiences with me, which included developing trust that I would not judge, criticise, or shame them and that their comments would remain anonymous. The interview guide was provided to the participants a number of days prior to the interview so they could familiarise themselves with the questions and content. This was intended to allow them more control over their responses in the interview and reduce any potential psychological harm the discussion could create had they not known about the material beforehand. I made sure I was aware of the support that was available to them should they need it and in the event a number of the social workers did indeed ask for more support. I was, therefore, able to refer them to the Council's confidential emotional support service, which was not advertised and no one seemed to be aware of.

Child protection work necessarily involves highly sensitive issues as it operates within the intimate spaces of family life (Ferguson, 2011) and relates to highly personal information. All information has, therefore, been kept strictly secure and anonymous. Observations including parents, carers, or children were only undertaken following a discussion with the social worker as

to the capacity of the parent/carer to consent to me observing the session. The social worker then spoke to them about the research before the session and provided them with an information sheet (see appendix 8). If they agreed to me observing I then spoke to them immediately prior to the session on their own to explain the research further, answer any questions, and confirm they were in agreement that they were happy for me to observe. I then talked them through a consent form which they signed (see appendix 9). Some parents declined to be involved and I did not observe or record any information that related to them. Children were only seen in the presence of their legal parent/carer who had agreed that I could observe the session. Occasionally, I went with the social worker to speak to the child(ren) on their own in the family home if the parent/carer and the child(ren) agreed to this. In some situations there were others involved in the observed situations. Where these were other professionals, the social worker spoke to them first and then I spoke to them and provided them with the information sheet (appendix 8). If anyone objected to my presence I did not observe the situation. Mostly, however, these were other Council employees who worked in the buildings of the teams. They were made aware of the research at the start of the data collection period when I was given a tour of the buildings and I explained my role to them and the possibility of them becoming an indirect participant in the research, i.e. they could be part of the situation but would not be the focus. I provided them with a research information sheet (appendix 8) and informed them that they could let me know at any point if they did not want to be involved or if they did not want specific situations to be included. Ethical approval was granted through the University of Birmingham ethical review panel and the research was approved by the Council's research governance process.

DATA ANALYSIS

Charmaz (2006) states that an ethnographic grounded theory strategy is to “seek data, describe observed events, answer fundamental questions about what is happening, then develop

theoretical categories to understand it” (p.25). A case study, however, provides boundaries to such a strategy that would not ordinarily be present in a grounded theory study (Glaser and Strauss, 1967). Furthermore, the focus of the study was established prior to the collection of data, which guided the collection of data and ongoing analysis that would not ordinarily be consistent with grounded theory (Glaser and Strauss, 1967). Further still, a ‘classical’ grounded theory study would have perhaps continued the process of data collection/analysis further than I have here. Notwithstanding such inconsistencies, case study researchers have found grounded theory methods extremely useful to case study research (e.g. Eisenhardt, 1989). Following Eisenhardt’s (1989) arguments and Charmaz’s (2006) advice, I have used such methods to organise the data collection and analysis within this case study. The aim of this process was to start with what Blumer (1969) calls, sensitising concepts, i.e. theoretical ideas about the research topic, and to move on from these to construct an analysis grounded in the data. When I began visiting the teams I had little in the way of direction for my observations and discussions other than my initial research topic and a few sensitising concepts. I therefore wrote large quantities of fieldnotes. By visiting the teams on one or two days a week, however, I had time between visits to study the data, write memos, and read relevant literature to inform my understanding of the data.

Following Charmaz’s (2006) advice, the ethnographic data was initially coded line by line in a Word¹¹ document using a gerund that best represented the action within that line. As Glaser (1978) argues, coding in such a manner helps the researcher to stick to the data and detect processes. Rather than code the diary data in gerunds, however, any word or words that best described the content of each line was used. Within the documents I had collected, any data that related to the development of the child protection service were extracted and also coded in this manner. The initial coding of the data guided what data to collect in subsequent observations and discussions allowing me to identify patterns and significant processes, to compare experiences

¹¹ All analysis was undertaken in Microsoft Word documents

within and between individuals, and to find similarities and differences (Charmaz, 2006); what Glaser and Strauss (1967) refer to as the constant comparative method. As the analysis/data collection progressed, more data could be compared to more data and the most significant codes, i.e. those which made the most analytical sense to understand the actions of the social workers, could then be used to categorise the data; a process Charmaz (2006) calls focused coding. Data could then be compared to these codes enabling further refining. As I learnt more about the emotional experiences of the social workers in their specific context, I found it useful to categorise the data using a further set of codes so that I had an overall category, subcategories, and initial codes.

Memos were written throughout the data collection and analysis process (Charmaz, 2006) and helped consider the possible theoretical explanations for the data, develop hypotheses, test these hypotheses in the field, and come to the most plausible explanation; a process Peirce (1903) termed abduction. I wrote memos to help me formulate ideas about the data. I used them to make comparisons between data, codes, subcategories, categories, and concepts. I wrote memos in the back of my notebook when I had a spare moment while with the teams, on my phone when an idea came to me and I was not near my notebook or my computer, and while I was studying the data, coding, or reading the wider literature. At first I wrote memos to consider the codes and guide my observations and discussions. They also helped keep a focus on the role of self-conscious emotional experiences in practice by enabling me to continually ask the data questions about these experiences in this context. As I began to construct the categories, the memos aided my collection of relevant data through, what Glaser and Strauss (1967) refer to as, theoretical sampling, i.e. seeking data to develop the emerging theory. As Dey (2013) argues, categories are constructions with fuzzy boundaries and it is not always easy to categorise data. Theoretical sampling enabled me to define the categories, outline the properties of the categories, specify the conditions under which the categories arose, were maintained, and changed, and describe their consequences (Charmaz, 2006). The memo writing was able to bring

the fieldnotes, diary entries, documents, and interviews into an integrated analysis. All memos were typed up and stored on a computer for later retrieval and sorting. I did not aim for theoretical saturation, however, as is the aim in classical grounded theory (Glaser and Strauss, 1967), but rather what Dey (1999) terms “theoretical sufficiency” (p.257). Following Charmaz’s (2006) advice on gaining sufficiently rich data for constructing a theory grounded in the data, I stopped collecting data when: I believed that I had enough background data about persons, processes, and settings to understand and portray the contexts of the study; I had gained detailed descriptions of a range of all of the participants’ views and actions; I had confidence in my interpretation of what lay beneath the surface of these views and actions; and I was able to develop analytical categories and make comparisons between them to generate and inform my ideas in answering the research questions.

The final stage of the process was to sort, compare, and integrate the memos through theoretical sorting (Glaser, 1998; Charmaz, 2006). The memos were considered in relation to a range of theoretical codes that had become pertinent either through the data collection and analysis phase or in the sorting of the memos. The theoretical codes were identified from my own background knowledge, the reading I undertook throughout the data collection/analysis, or discussions with my supervisors. Glaser’s (1978, 1998, 2005) theoretical codes were considered for their fit with the data and the developing analysis, most notably: ‘the 6 Cs’¹²; the ‘type family’¹³; the ‘strategy family’¹⁴; the ‘identity-self family’¹⁵; the ‘means-goal family’¹⁶; the ‘cultural family’¹⁷; the ‘consensus family’¹⁸; the ‘mainline family’¹⁹; and the ‘unit family’²⁰. Creed et al.’s

¹² causes, contingencies, consequences, contexts, covariance, conditions

¹³ ideal type, constructed type

¹⁴ strategies, tactics, mechanisms, techniques, dealing with, handling, arrangements, managed goals, means

¹⁵ self-image, self-concept, self-worth, self-evaluation, identity, social worth, transformations of self, conversions of identity

¹⁶ end, purpose, goal, anticipated consequences, product

¹⁷ norms, values, beliefs, sentiments

¹⁸ agreement, cooperation, definitions of the situation, opinion, conformity, conflict, perception, non-conformity, mutual expectation

(2014) categories of systemic shame (and pride), a sense of shame (and pride), episodic shaming (and praising), and the felt experience were found to be useful theoretical codes. So too were Lawrence and Suddaby's (2006) categories for institutional work, i.e. creating²¹, maintaining²², and disrupting institutions²³. As were Oliver's (1991) strategic responses to institutional processes, i.e. acquiesce²⁴, compromise²⁵, avoid²⁶, defy²⁷, and manipulate²⁸. Finally, Alvesson and Willmott's (2002) categories for identity regulation were also considered useful theoretical codes²⁹. The memos were sorted (and resorted) by using tables and diagrams according to different theoretical codes to create the best possible balance between the studied experience, the categories I had constructed, and my theoretical ideas about them (Charmaz, 2006). Sorting the memos enabled the integration of these categories into a conceptual framework. While the core of this study has always been about self-conscious emotional experiences, these codes have helped to construct a coherent analytical story, grounded in the data, about their role in child protection social work practice within the Council.

LIMITATIONS

As a new male figure within an all-female team, and one with experience of practising and teaching child protection social work, I acknowledge that my presence altered the dynamics within the teams. Observing and asking questions about their work while they undertook it, and

¹⁹ social control, socialization, social organization, social mobility, stratification, social institutions, social interaction

²⁰ collective, group, organization, situation, context, behavioural pattern, family positional units i.e. status, role, role relationship

²¹ defining, constructing identities, changing normative associations, constructing normative networks, mimicry, theorizing, educating

²² enabling work, policing, deterring, valorizing and demonizing, mythologizing, embedding and routinizing

²³ disconnecting sanctions, disassociating moral foundations, undermining assumptions and belief

²⁴ habit, imitate, comply

²⁵ balance, pacify, bargain

²⁶ conceal, buffer, escape

²⁷ dismiss, challenge, attack

²⁸ co-opt, influence, control

²⁹ defining the person directly, defining a person by defining others, providing a specific vocabulary of motives, explicating morals and values, knowledge and skills, group categorization and affiliation, hierarchical location, establishing and clarifying a distinct set of rules of the game, defining the context

asking participants to construct textual data, inevitably altered some of what they did and how they did it. The data can, therefore, be considered to have been contextually co-constructed (Charmaz, 2006). In order to minimise the effect I had on their practice, I sought to develop positive relationships with each team member to allay any anxieties about the research process and outcomes and to make myself a familiar figure within the teams. I therefore spent two to three days a week, over a number of weeks, exclusively in one team at the start of the data collection period to normalise my presence and activities and then repeated this in the other team. The majority of those in the teams told me that they wanted to tell me about what it was like to do their work and a number of the social workers commented to me early on that they had accepted me as a social member of their team, albeit temporarily, and involved me in social activities such as going out for lunch or the work Christmas party. I also acknowledge that by asking questions about how they were feeling could change how they perceived the current, or even future, situations. Indeed, I was told by a number of the social workers that over the time I was with the teams they had started to think more deeply about how they felt and that they found it therapeutic talking to me. Rather than seeing this as a limitation, however, I considered this to be a benefit to the study as the participants provided a richer, more reflexive, account of the role of their self-conscious experiences in their practice.

While all efforts went into gaining as holistic a picture as possible into the role of self-conscious emotions in the practice of those within the teams, the resulting picture has been limited by the amount of time I spent in the field and the types of situations I observed. Not only were the situations I was able to observe limited by the amount of time I could spend with the teams but they were also limited by the social workers themselves who invited/agreed to me observing certain situations and not others. Clearly, the more time I spent in the field, the more diverse situations I could have observed and the more corroborating data I could have collected for the evolving and ongoing analysis. Furthermore, being an observer-as-participant (Gold, 1958), with no formal role in the situations I was observing, made some situations inappropriate for me to be

present within, which a complete participant role (Gold, 1958) would have gained legitimate and appropriate access to. Such limitations are acknowledged. Furthermore, while I have sought to collect data which provides as close a representation of the emotional experiences of the participants as possible, given practical considerations, the resulting data and analysis can only be understood within the context of my interactions and interpretations within the teams, within the Council, at that specific time (Thomas, 2010). Indeed, it is an ontological commitment within this study that the resulting theory is interpretive, contingent, and tentative (James, 1907; Dewey, 1929a; Mead, 1934; Rorty, 1979).

THE STUDY DESIGN AND METHODOLOGY: A SUMMARY

Given the pragmatic foundations of this study, I have argued that to answer the question of what role self-conscious emotions play in child protection social work practice a qualitative case study research design provides a useful mechanism. Indeed, as emotions are highly context dependent (Burkitt, 2014), it is necessary to bring evidence together from a wide variety of sources to understand the internal experience of the individual in the context of their current situation and historical experiences. Case study research is arguably, therefore, highly suitable for answering questions that relate to understanding the context for self-conscious emotions, how they are experienced, and their influence on the practice of social workers. In following Thomas' (2010) arguments, I have sought to develop 'exemplary knowledge' through abduction, gained and offered through constructing a conceptual framework (Charmaz, 2006), which is able to answer these research questions. By way of making clear the rationale for both the research design and the approach and process for how this was achieved, I have sought to define the case and outline the methods used to collect and analyse the data. This has not been in an attempt to demonstrate some form of validity or reliability to the research, as this is not the aim of a study of one particular case (Thomas, 2016) or culture (LeCompte and Goetz, 1982), rather to

demonstrate the credibility of my interpretation and analysis. The following chapters provide this interpretation.

CHAPTER 4: CREATING THE RIGHT ORGANISATION

“I want the Council to become one of the best performing local authorities in the country”

The above statement made to local Councillors by the leader of the Council in 2007 (Council meeting minutes) provides a clear indication of the standard being set for the Council by its leaders. With changing circumstances, pressures, and contexts, both within and outside of the Council, however, achieving and maintaining such a standard becomes a never ending process of change and renewal. This chapter provides an analysis of the data relating to the development of the child protection service within the Council so that it was able to present an image of itself consistent with its organisational identity-standards. It will, therefore, provide an analysis of the organisational identity and how the child protection service became a threat to this identity requiring institutional work to disrupt the established arrangements to create and embed new ones. Self-conscious emotions can be considered to be at the heart of this process. Indeed, they can be considered to provide the boundaries through which the new arrangements were conceived, guiding the leaders in the development and establishment of this new service. Most importantly they can be considered to be at the heart of how the boundaries for membership of this new service were defined, how the normative associations were changed, i.e. administrative practice became central to performance, while administrative and interventionist practice became ethical, and how the rule systems that provided status were constructed to support these changes. Together these can be seen to create a service that was considered socially acceptable to audiences within and outside of the Council, which contributed to the Council being able to achieve its stated aim of being one of the best performing local authorities in the country.

THE COUNCIL'S ORGANISATIONAL IDENTITY

As discussed in chapter two, the death of Victoria Climbié could be considered to have reaffirmed the boundary that it was shameful for a child that was involved with a local authority to be killed by their carers (Warner, 2015). The introduction of the Children Act 2004 could be considered to not only provide the statutory framework to prevent such incidents but also the societal expectation (Parton, 2014). Full compliance with the 2004 Act was not required, however, until 2008. While the Council sought to implement changes to comply with this Act, the central message from leaders and senior managers of children's services within the Council from 2005 was that they were providing high quality services to children and young people and were performing better than many local authorities. Indeed, the leader of the Council stated in 2007 that "The good news is that the information paints a very positive picture. It tells us that we are improving our performance faster than other Councils" (Council meeting minutes). While the Cabinet Member for Children and Young People reported to the local Councillors on their plan for services to children in 2008 that "We are already beginning to see some positive outcomes as a result of our Children's Plan" (Council meeting minutes)

Such proclamations can be considered to be attempts by the leadership team to provide a positive image of the Council and instil a feeling of pride. A similar image was presented to me by the social workers, with Donna's statement in her interview that "I know [the Council] is one of the best authorities to work for" being a typical sentiment. Such a view was supported by social workers with experience of other local authorities, as Mandy explained:

"I've had a taste of two different local authorities and this local authority you have the freedom to social work and make decisions rather than be micro-managed" (interview)

Such beliefs are consistent with Albert and Whetten's (1985) notion of an "organisational identity", which they defined as the collective understanding by members of the organisation of its central and enduring attributes and that which distinguish it from other organisations. From

such a perspective, we can consider the Council's positive identity claims to have been routinely verified by Ofsted who generally graded them as providing good services to children and young people. The resulting legitimised organisational identity was then used to reinforce a positive image of the organisation, both internally and externally. Press releases were provided to the media and the Director used these judgements in reports to local councillors and communications with frontline staff as evidence that they were "making a real difference to children and families" (Council meeting minutes). Such validated and legitimised claims created and supported a shared belief that the Council was doing a good job and was a good place to work, which enabled social workers to feel proud of working there, as demonstrated by Linda's statement:

"when I was in [a neighbouring local authority] I didn't have a pride because what I was seeing was, I was embarrassed about the service that the families had received, so no the, you know, if I'd have had to stay, if I hadn't been rescued, cos that's how I feel, yeah I am proud to be a social worker" (interview)

The neighbouring local authority had a poor organisational reputation within the Council, which Whetten and Mackey (2002) consider to be a reflection of the organisational identity, and Linda's suggestion that the neighbouring local authority provided poor services to children and families prevented her from being able to feel proud of herself as a social worker. This was in contrast to the Council's positive reputation, as shown by Lucy's comments:

"To me the reputation of [the Council] has always been very good but I come from [a] University where [the Council] was thought of as a good local authority" (interview)

For Linda, moving to work for the Council felt like being rescued as she was now able to feel proud about what she did as she was able to verify her identity as a social worker. Indeed, the positive organisational identity was demonstrated by Carol, a senior practitioner with 14 years of experience:

"I've always stayed with [the Council]. I like the authority. I've nothing to compare it to but I haven't left because I like the authority" (interview)

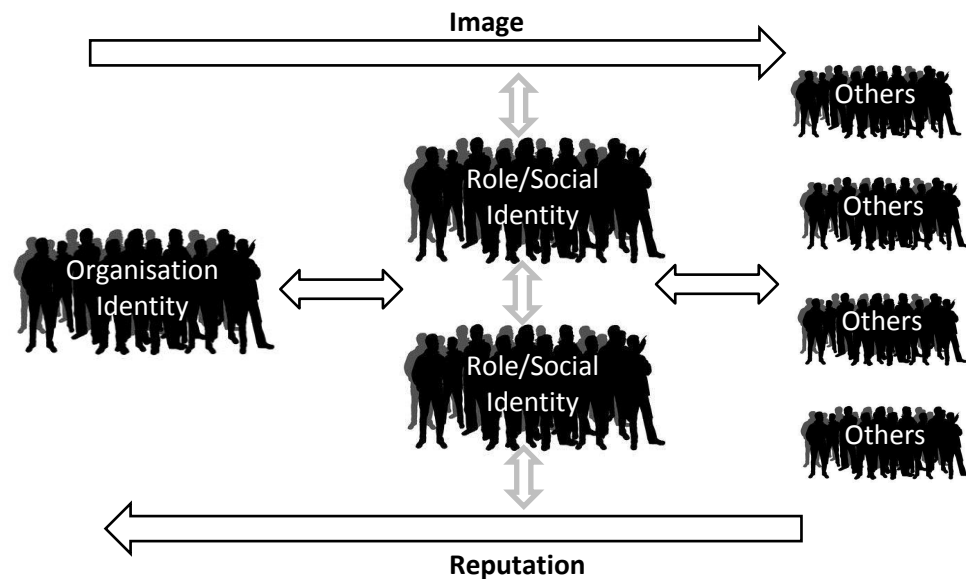
Given such sentiments, we can suggest that the central and enduring beliefs about the Council were that it provided high quality services to children and families, kept children safe, and was therefore a good place to work, distinguishing it from other local authorities, which were inferior in comparison. Yet despite this positive organisational identity, the Director wrote to local councillors in 2010 stating that “doing nothing or staying as we are currently is not a viable option” arguing “that there needs to be a new paradigm to improve outcomes for [the Council]’s children and young people” (Council meeting minutes). A proposal was made to the councillors for a “transformation and radical reshaping of existing provision” (Council meeting minutes). Two separate arguments were presented by the Director and the senior managers to the local Councillors and Council employees for the rationale for these changes. The first was that there was a need to “improve services for children, young people and families” while the second was that there was a need to “achieve financial savings” (Select Committee meeting minutes).

To understand this radical plan for the redesign of the service it is useful to consider the Council as an institutionally plural organisation (Kraatz and Block, 2008) in that it has more than one ascribed identity and more than one societally sanctioned purpose. The significant roles of the Council, relevant to this study, were as an administrator of public policy together with providing professional social work services. Different institutional constituencies were interested and invested in different activities of the organisation providing different meanings about what the organisation is and does. These different roles, with their different goals and sets of values embedded into their practices, can be considered to be different organisational identities (Cheney, 1991), similarly to the notion of an individual having multiple identities (James, 1892; Cooley, 1902; Mead, 1934). Many within the Council had central and enduring beliefs that the Council was effective at administering public policy, while many had central and enduring beliefs that the Council performs good social work practice and provides good services to children and families. The different identities may influence one another but they can be considered to be separate having different goals and being relevant to different constituencies, audiences, and

contexts. Furthermore, these identities can be considered as role identities (McCall and Simmons, 1978), in that they identify what the organisation *does*, as well as social identities (Tajfel 1982), in that they identify what the Council *is*. However, to understand the Council's rationale for change we must consider the organisation to have a further organisational identity, one that involves the organisation seeing itself as different from others (Burke and Stets, 2009); what we can call an 'organisation identity'.

Taking Pratt and Foreman's (2000) application of identity theory to organisations further, we can consider the 'organisation identity' to be a higher level identity than role and social identities (Burke and Stets, 2009). From such a perspective, lower level identities can be considered to set the specific goals that a certain set of constituents need to achieve, while the higher level identities, containing the abstract goal states such as values, beliefs, and ideals, impose certain goals on the lower level identities (Burke and Stets, 2009). Within the Council there was a belief that it was a high performing innovative local authority which did things differently. This influenced different constituencies to seek to be innovative, resulting in a number of projects which were promoted internally and externally as such. Considering the Council to have multiple identities organised in a hierarchy, we can see how they interacted in attempts to control its image and reputation to verify its identities, as represented in figure 4.1.

Figure 4.1: Interaction between organisational identities, image, and reputation (adapted from Whetten and Mackey, 2002, p.401)



From 2005 to 2008, the structure and practices within the Council were able to provide a positive image and reputation, thereby verifying its identities. However, in 2008/9 significant changes were taking place in the circumstances and dominant discourses in both the fields of social work and public administration. These pressures provided the impetus for, what Oliver (1992) calls, “deinstitutionalisation”. These new conditions lay the foundations for the deterioration of the consensus within the Council around the value of the current arrangements which now posed a threat to the Council’s higher level organisation identity. In order to verify this identity, there needed to be a rejection of the old structures and practices and a forming of new ones in both the professional and public administration spheres. In response to these pressures the Council formed a new project in 2009, made up of a number of managers and frontline workers, with a view to a complete service redesign. This was coupled with a strategic board made up of local Councillors, chaired by the Cabinet Member for Children and Young People, to ensure that the project had “clear political ownership” (Council meeting minutes).

DISRUPTING AND CREATING A NEW PROFESSIONAL IDENTITY

As discussed in chapter two, following the Court case into the death of Peter Connelly in 2008, the boundaries for the systemic shame in operation had been sharpened and there was now significant mounting social pressure on all local authorities to demonstrate that they were competent at protecting children. While the organisational arrangements in place in 2008 had been designed exactly to prevent such perceived system failures, this new systemic pressure cast doubt over whether the established arrangements were appropriate for the task of protecting children. Observing the episodic shaming of specific social workers and organisations nationally, the leaders and senior management team sensed the possibility of being shamed themselves and classified all their social workers as “an “at risk” staff group” (Council publication), supporting the perceived need to change the established arrangements.

The beginnings of the disruption of the established organisational arrangements could be seen in November 2008, with the cabinet member for children and young people stating that “Integrated Service Delivery for Children’s Services is essential within [the Council]” and that coordination between services “needs to be taken a step further forward” (Council meeting minutes). A consultation was opened on a model for integrating and improving services. In 2010 the Director claimed that successful joining up of services had only been achieved at a senior management level and that these changes had not been translated into a more joined up service at the “frontline” (Council meeting minutes). This claim was then supported by feedback from service users that suggested “that the Council’s services needed to be more joined up at the point of delivery” (Council meeting minutes). At the same time, the Social Work Task Force and Munro review of child protection, while casting further doubt over the arrangements established from the reforms following the death of Victoria Climbié, defined and heightened the systemic pride in the field by reaffirming the importance of the profession and setting out a vision for an improved

system (Social Work Task Force, 2009; Munro, 2011b). The Director, therefore, stated that the new service needed to:

“re-affirm the role of professional social work in safeguarding the most vulnerable children”
(Council meeting minutes)

The Director argued that this would be achieved through addressing the complexity of social problems with a “whole family” approach and stated that the new service would be informed by national research and the belief that services needed to be provided to families early. The project board worked with a national children’s charity to develop the vision and plan for the new service and Family Group Conferencing was included as a significant tool for intervention and support. In further appeal to the social work constituency it was argued that the teams would be “remodelled” providing “a manageable caseload supported by consistent reflective supervision” enabling social workers “to take responsibility for planned interventions” (Council meeting minutes). This would be achieved by returning to “patch” based services (see Barclay Report, 1982), with teams being responsible for a specific area, and investing in family support services to work with families before they reach the “threshold” for social work services. Furthermore, the Signs of Safety Approach to child protection social work (Turnell and Edwards, 1999), an approach developed by social workers for social workers, was implemented in the safeguarding service. While the rationale for the new service was framed positively, the systemic shame that contributed to the disruption of the current arrangements was evident, being outlined by the Director as a risk to the Council:

“A potential failure to intervene at an earlier stage would have very high risk consequences for the child (ren) involved, the reputation of the local authority and poor Ofsted inspection results. Whilst it is never possible to prevent all injuries inflicted upon children and young people by their carers, the local authority aims to minimise the likelihood of an avoidable child protection failure by ensuring that it has skilled, resourced and well-scrutinised robust services for children, young people and families” (Council meeting minutes)

Responsibility for the death of a child at the hands of their carers was clearly placed at the door of the local authority. From the Director's perspective a child being harmed equated to a failure of the system, which jeopardised the legitimacy of the whole organisation.

DISRUPTING AND CREATING A NEW PUBLIC ADMINISTRATION IDENTITY

Meanwhile, functional pressures in the economy, following the fallout of the financial crash of 2007-8, created a new national political context of austerity. The first budget of the new Government in 2010 meant local authorities were facing a reduction in funding by about a third (HM Treasury, 2010) making it a political necessity that all local authorities reduced their spending. While the Council considered itself to be "well managed and financially sound" in 2007 (Council meeting minutes), following this budget there was an admission that "there would be considerably less funding available to the Council over the next few years and that the Authority needed to take urgent action to deal with this" (Council meeting minutes). The new emphasis in the dominant discourse for public services provided a new context in which the public administration organisational identity claims were being made. Saving money had become a new identity-standard imposed upon the Council's services for children and young people as any part of the local authority which did not achieve these standards would be perceived to be failing the local authority. This potentially negative image of the service would directly threaten its claims to be a well performing Council. Saving money was therefore perceived to be objectively correct and became a shared rule within the Council, defining the systemic shame for the public administration constituency. A failure to achieve financial savings was, therefore, identified as a "main risk" to the new service in the Director's report to the councillors, which further reinforced the need for reform, as the Director argued:

"In the long-term, [new service] will achieve financial savings as fewer cases will require intervention from costly specialist services" (Council meeting minutes)

Additionally, the election of the new Government placed further political pressure on local authorities to commission more of its services (Horton and Gay, 2011) and in line with its identity as an innovative organisation, the Council committed itself to becoming a “commissioning orientated organisation” (Council report). The Council, therefore, sought:

“to develop a robust joint commissioning process and to strengthen the role of the Third Sector to deliver services on behalf of [the Council]” (Council meeting minutes)

It was believed that this would achieve some financial savings and improve services but that it required a cultural shift to achieve this. This imposed standard on the new service provided clear boundaries for systemic shame and pride: saving money for the local authority and commissioning services were necessary, with a failure to achieve this constituting shameful behaviour. In line with the Council’s identity claim to be an innovative organisation, the Director and senior leadership team planned for the whole service to be commissioned out to a third party organisation. While such a move would be arguably controversial within the field of social work (Butler, 2014), it was not only sanctioned within the field of public administration but was a central theme in the dominant discourse for public services of the Government at the time (Horton and Gay, 2011; Department for Education, 2014).

CREATING THE NEW SERVICE

A significant amount of work was undertaken at an inter- and intra-organisational level to construct and promote the new service through consultations, briefings, and communication with a wide range of staff and partner organisations. Furthermore, a significant amount of work was undertaken at a political level through both defining and promoting the new service to local politicians and Government departments presenting an image of an innovative Council with a “new way of working” (Council meeting minutes). However, a few months before the start of the reorganisation Ofsted undertook an unannounced inspection which, as an acknowledged threat

to the Council's reputation, heightened the sense of shame within the Council. As a team manager told me in her interview:

“...the nightmare here is that you fail Ofsted. If you were here at the time, you'd think everybody was going to have a heart attack...” (interview)

The Council's nightmare came true as Ofsted found the Council “to be failing children needing help and protection” (Ofsted report). The Council's services to children and young people were graded as performing poorly, the lowest possible rating, not only on the basis of the unannounced visit but also as some areas for development had not been adequately addressed from earlier inspections. This episodic shaming of the Council by Ofsted led to a failed identity claim which was described as a “shock” by the Director (Director's report). In attempts to provide a positive organisational image and mitigate any reputational damage, the positive comments within the Ofsted report were highlighted and used for internal communication and press releases. The message was that many of the services for children and young people were in fact good; the problem was the child protection service, a message which was received by all those working in that service, as the team manager goes on to say:

“...the pressure, and it's because of the safeguarding. I get that. We're the problem but we're the bit that keeps the children safe...” (interview)

What started as episodic shaming by Ofsted led to episodic shaming by those within the Council of the child protection service. The fact that the team manager now perceived herself, and all those she worked with, to be the problem presented her with a threat to her identity as doing a really important job of protecting children. While the Council had identified the social workers as “at risk” and had sought to design a system to reaffirm their professional status, this action of organisational self-protection had the effect of spoiling the child protection identity within the Council (Goffman, 1963). Coupled with the possibility of being outsourced, the team manager felt her role was unvalued and unwanted, as she explained:

“I don’t think this Council here particularly want social workers and the risks that come with safeguarding and Children’s Services is like a weight round their neck, isn’t it? It’s easy to build houses and roads and schools than have Child Protection in your building, isn’t it?” (interview)

While systemic shame already operated within the child protection service, the nightmare scenario of failing an inspection served to further define and strengthen it within the Council. The new service was always intended to verify the Council’s identities and for these identities to be legitimised by the inspectorate. The only way to achieve verification and legitimisation would be to ensure that the Council could present a positive image of the new service to Ofsted, which included having addressed the issues they had highlighted together with providing them with the information they required for a positive evaluation. The Council’s political leadership and senior management team therefore decided to provide time and resource “specifically committed to address the issues identified by the inspection” (Director’s report to local councillors). The effect of this was for the public administration identity to become more important within the new service (McCall and Simmons, 1978; Stryker, 1980). In the hierarchy of identities within the Council, the public administration identity was now set as higher than the social work identity, as a team manager, reflecting on the new service, told me:

“I think the loopholes have perhaps been tightened but in terms of children, I think I would say we’re probably less about children and more about performance and bureaucracy than we’ve ever been, although that’s probably not the general tone being expressed” (interview)

CREATING THE NEW SAFEGUARDING SERVICE

While there was a significant amount of practical and physical reorganisation to create the new service, it was constrained by the legal, social, and cultural forces already in place. Indeed, everyone in the new service was very conscious of their social and legal position in the wider social structure, as a team manager explained:

“the fact is we do work in a hierarchy organisation and we’re part of public services. And if the government says, you know, we want you to do X, Y and Z of assessments then we have to do it, we can’t negotiate, we can’t pick and choose” (interview)

Given this socio-legal position, the structure of the new service remained largely reflective of the historical settlement of the social work profession that had enabled it to gain legitimacy as a profession and provide status to its practitioners (Larson, 1979). Therefore, the new structure continued to resemble an administrative office with the social work teams working in a Council building, with desks, phones, and computers and with the teams working office hours. The social workers had frequent issues relating to the administrative structure of the service. There was insufficient parking meaning social workers had to park in car parks far from the office making it difficult when they had children, bags, or had to drop in for a short while and go out again. Some took to parking on the side streets but residents put letters on their cars asking them not to or even shouted at them not to park there. The computer system was a constant issue with social workers complaining it was difficult to use and often crashed. And despite having to undertake computer work requiring concentration, the environment was often noisy making it difficult to work in, as particularly demonstrated to me on one day:

“All the social workers were in the team room and were working on their computers. Some were on the phone and some started talking and the volume was quite loud so [Linda] took some tissues and pushed them into her ears. She continued to work with large tissues sticking out of her ears”
(fieldnotes)

While those involved in the creation of the new safeguarding service were constrained by these wider forces they were able to alter some structures, disrupt practices considered inappropriate, and create and maintain new practices that would verify the Council's identities. The first change was to define the context for practice (Lawrence and Suddaby, 2009) through reorganising all services for children and young people, which came under the responsibility of the Head of the new service, into four distinct service areas, each managed by a "strategic lead". Building on the current arrangements, one of these services was termed a "specialist" safeguarding service, which employed social workers to work with the families where there was the highest potential of a child being harmed. Subordinate to the strategic lead were area managers who were

responsible for the teams in their geographic area. And subordinate to the area managers were the safeguarding teams.

LEADING THE NEW SAFEGUARDING SERVICE

In *Leadership in Administration*, Selznick (1957) paints a picture of the leader as a politician, having to appeal to different interests, values, and ideals within the organisation as well as having to make deals, build coalitions, and take pragmatic action in order to effectively lead the organisation. Grounding his analysis in the pragmatism of Dewey and James, Selznick argued that the leader comes to identify with the organisation, becoming its steward, concerned with the integrity of the organisation's identity. He considered the leader to be a person who comes to define the organisation's missions and values, create the structures which embody these values, and adapt the organisation to changing circumstances. While Selznick's argument related to the leader of a whole organisation, from the team managers' and social workers' perspective such ideas were applicable to the 'strategic lead' of the safeguarding service. Despite being subordinate to the Head of the new service, who in turn was subordinate to the Director, who in turn was subordinate to the Chief Executive, the leader was considered as the person at the top by those in the teams. Such an opinion was reinforced by the belief in the teams that if the Council didn't get a good Ofsted judgement the leader would have to resign; a clear boundary for the systemic shame in operation personally for the leader. The leader was therefore perceived within the teams to not only be the architect but the guardian of the new arrangements.

Selznick's argument was that the leader's role was to create and maintain the integrity of the organisation by satisfying the different constituencies' needs, knitting together the different purposes, and creating a coherent structure. At times this meant creating practices that the social workers objected to, as demonstrated in a team meeting:

“[The team manager] discussed a new 'business process' which was that a new referral from the [family support team] – known as a 'step up' – now had to be completed by the social worker

rather than the family support worker. [The team manager] referred to it as a “done deal” even though she said people have been “up in arms about it”. [Julie] says “we’re snowed under” and referred to the people who have implemented the new policy as “these idiots upstairs” having no clue about their work. [The team manager] replies by saying “we have to comply”. [Sally] says “everything comes to us” and [Julie] says “we just get dumped on” (fieldnotes)

There were also instances, however, where the leader made value commitments to the professional constituency, which Kraatz (2009) argues is designed to win over trust and sustain cooperation:

“At the end of the day I go into the team manager’s office to say good bye and we have a conversation about how things are. She describes the situation like Sisyphus pushing a boulder up the hill only for it to roll back down again and so she has to push it back up again over and over. She said she was pleased [the strategic lead] has got some more funding from the Council which will pay for a team coordinator which will help her do her work, which she said would be ‘the worklist’ and supervision. She said this will give better quality supervision” (fieldnotes)

Such actions indicate a moral obligation not only to the manager and the team, by easing the pressure of the workload, but also to the profession of social work, by improving the quality of supervision. The fact that she was seen to have obtained the money for this extra help from ‘the Council’ indicates that she was seen to be on ‘their’ side, rather than ‘the Council’s’, championing ‘their’ interests. Haslam et al. (2011) argue that it is through being seen to be one of ‘us’, and to be doing things for ‘us’, that leaders gain influence and power within a social group. Indeed, both team managers accepted the legitimacy of the leader which eased the process of institutionalisation within the new service. While the leader’s identity was perceived by those within the teams to be intertwined with that of the safeguarding service, the team managers merely exercised power within the service without being identified with it. They were therefore involved in the ongoing institutionalisation process whether they liked it or not (Kraatz, 2009), hence the managers reply to the social workers protestations at the new business process above that they have to comply. Having faith in the leader provided an element of trust that decisions and changes that were being made were, in a wider sense, in the interests of those in the team.

CONSTRUCTING AND EMBEDDING INTERVENTIONIST PRACTICE AS ETHICAL PRACTICE

The death of Peter Connelly was described by a team manager as having an immediate and direct impact on frontline practice:

“you would have to really convince [the assistant director] if you needed a section 20 placement³⁰ and he would really put you through your paces... you’d have to fight for it and people said there were occasions when they’d ask for a placement and it was refused, they wouldn’t do it. When baby Peter happened all the senior managers reviewed all the child protection cases in late ’09, the difference immediately was certainly very obvious to me. We’d send off an email think, “well yeah we do need a section 20, we might have a bit of a fight on our hands to get it”, placement agreement, two line email, placement agreed on every case that I dealt with” (interview)

Following the death of Peter Connelly, the redefined systemic shame provided the Council with the message that their cultural practices associated with providing a child with accommodation (Section 20, Children Act 1989) were potentially unsafe. The moral foundations underpinning these practices were therefore undermined and a new moral foundation put in place that suggested that a safe organisation always provided accommodation to a child where there was any doubt about a child’s safety. The tension between this new practice and the values of the profession, related to keeping children within their families, was evident in a team manager’s comments:

“...I think we were all of us from the highest levels down saying you want a placement, okay let’s do it, let’s protect this child. Is that a good thing? No it isn’t because we’re not questioning, we’re not looking, I mean we’ve got the intensive prevention service that works to keep children out of care but I think our thresholds have come down” (interview)

Despite the tension, the desire to avoid being shamed provided a stronger motivation in decision making, meaning the “threshold” for child protection intervention and for a child to come into the “looked after” system had been lowered. The leader sought to embed this new practice into the new safeguarding service through remaking the moral foundations for these practices, as a team manager told to me:

“...what [the strategic lead] said about the increase of child protection plans surprised me somewhat because she said for years and years and years [the Council] were around 400, 420, 430

³⁰ Section 20 of the Children Act 1989 provides the local authority the power to accommodate a child in their area, with the consent of all those who hold parental responsibility

at any one time on CP [child protection] plans. It's now over 600 so there's been an increase there of 160, 170 something like that and it's consistently now at that level. And [the strategic lead]'s take on it I believe is we were always too low compared to comparator authorities and what's happened is actually good, it's positive because this is the number of children you should expect in an authority of our size to be on child protection plans. I'm not sure about that" (interview)

The old practices were now cast as dangerous arguing that they should have had more children subject to child protection plans all along and now they have more children on child protection plans the Council can be considered to be doing well. The conflict with the old social worker identity-standard left the team manager in some doubt about whether to believe this, although the effects were still evident in her team having the highest number of children on child protection plans in the Council. Inevitably the result of increasing numbers of children subject to child protection plans and a lowering of the threshold for children to be looked after by the Council led to increasing numbers of children in care. Having had the old practices associated with removing children undermined, the moral and cultural foundations for these practices disappeared within the new service, as a team manager stated:

"...with children in care I can remember for years and years and years being told we've got to keep the LAC population down that's why we had family support teams set up in 2004, that's why we had 'fast' teams in 2007, "we've got to keep the LAC population down". They were having kittens at headquarters when it went above 600 for the first time and now it's typically 969, 970, why I don't know, I'm not in a position where I can analyse all the data... Numbers of proceedings I'm not sure, is it a key factor? Maybe, maybe it is, I'm not sure but some of the language that was used in years gone by about we must reduce our LAC population, I don't hear that language very much nowadays" (interview)

CONSTRUCTING AND EMBEDDING ADMINISTRATIVE PRACTICE AS ETHICAL PRACTICE

Social workers with over ten years of practice made reference to past practices of recording in paper files and contrasted this with the current requirement that they record everything on the computer system. The Council had to ensure that it was keeping children safe and that it could provide evidence of any work with families to Ofsted, who may choose any case to audit within the Council. The primary method for evaluating practice by the Council's management and Ofsted was through the recording on the computer system. Up to date and comprehensive recording of

all activities was required with failing to do this resulting in criticism and potential discipline. This systemic shame was embedded through the phrase “if it’s not written down, it didn’t happen”, which served to join the administrative practice of recording with the practice of social work. Being a good safeguarding social worker was doing things to keep children safe but if it wasn’t recorded then in effect they hadn’t done their job, as explained by Monica in her interview:

“Monica: ...if it’s not written down, it didn’t happen

Me: what do you think of that statement?

Monica: it’s true isn’t it? It’s a farce because... all my notes are all on my notepad etc. so I do just need to transfer it on to the computer, but... if you were in Court and it wasn’t evidenced in a case note then that’s it. When I was at Court for 2 days on that EDS [Emergency Duty Service] work, I knew then I’d asked mum about where dad was, I knew that I had but I hadn’t documented it and that I didn’t trust myself to say in Court, because I was being criticised for not asking where dad was when we were doing the PPO [Police Powers of Protection]... so I think that has changed the way that I practise... I just make sure that on a case note I put in as much information as possible” (interview)

The threat of being shamed for not having undertaken the taken-for-granted practice of recording brought the phrase “if it’s not written down, it didn’t happen” to life, with Monica acting in Court as if she had not done what she believed she had. Further attempts were made by the leader to infuse the administrative work that the social workers were required to perform with long established and cherished social work practices, as explained by Amy:

Amy: “when the new Working Together came out, and Single Assessment Framework, and I went on training... and [the strategic lead] said, in the training, “If you don’t do your paperwork, you don’t have empathy”. What the hell has paperwork got to do with your empathy?

Me: What do you think of that?

Amy: Well, she followed it by, “You don’t have empathy, so you shouldn’t be here, and leave”. I just thought, my initial thought was, “Fuck off”. Because paperwork is important, it’s very important, but it doesn’t mean you don’t have empathy, it means you don’t have time. I thought it was a disgusting statement, if I’m being quite frank. I thought it was disgusting” (interview)

These attempts to remake the moral foundations for professional practice were resisted by Amy who saw these as separate components of the work. Given social work’s history, the moral

foundations for empathy were considered a core component of the identity of being a social worker. One could consider themselves to be an empathic social worker no matter how much work they had. In the old arrangements, the administrative work was not a direct threat to their identity as a social worker. While the moral foundations for the paperwork were accepted by social workers, it was not directly linked to their social worker identity. Empathy and paperwork were therefore not seen as belonging in the same category. By attempting to infuse the two together the amount of work a social worker had was now a direct threat to their identity as a social worker, as by not being able to do the paperwork they could be perceived as not being empathic. Despite Amy's, and other social workers', resistance, within these new arrangements, administrative practice had been re-set as a moral and cultural foundation for social work practice (Lawrence and Suddaby, 2006).

CONSTRUCTING AND EMBEDDING ADMINISTRATIVE PRACTICE AS PERFORMANCE

Those who had been practising for over ten years frequently made comparisons between their experiences of practice some years ago and their experiences of practice today, as one team manager demonstrated in her interview:

“I mean I can remember my first team manager, you'd go into his office, there'd be a pile of children's files on the floor and he'd say, it was a common phrase in that office, “this case is on the floor”, and it meant it hadn't been allocated, and he was saying his child protection cases come over from the child protection team, “I'm going to allocate it to [name] maybe in two weeks' time”. Whoah hang on, if the child protection comes in here today I've got to give it to somebody immediately but the timescales don't allow you to hang around” (interview)

In the 1980s and 1990s it was not unusual to have unallocated child protection cases (see Secretary of State, 1993). This was argued by some to be safer than overloading social workers with cases, as they could do their job properly with a manageable caseload, with the unallocated cases being monitored by the team manager (e.g. Hearn, 1991). Such practice of having unallocated cases, however, has been criticised for leaving children in unsafe situations (Brandon et al., 2008) and the inspectorial regime reports on the number of unallocated cases, which can

potentially lead to a negative judgement of the service (Ofsted, 2012). The Council therefore had a policy of having no unallocated cases. While the foundation for this policy was argued to me by the leader and senior managers to be a moral one, in that this was believed to make children safer, it also served to protect the organisation from being shamed by Ofsted.

The normative association between the administrative practice of having all cases allocated to a social worker and the moral foundation that this was necessary to keep children safe was defined as “performance” for the team manager. A team manager would not be performing adequately if they did not adhere to the policy. Performance was monitored through regular ongoing audits with failure to comply with the policy resulting in criticism and potential discipline. This ensured that the team managers’ developed an understanding of the conditions for being shamed, thereby developing an appropriate sense of shame for the new context. We can consider this process one of aligning their sense of shame to the wider systemic shame, which ensured that the organisation’s priorities were attended to by ensuring they acted in a manner that avoided being shamed. With their sense of shame aligned, the need to allocate all cases immediately seemed objectively correct. The old practice of ensuring social workers had a manageable caseload and having unallocated cases was now something to be shocked by, while the new practice, which turned this on its head, went unquestioned, as shown by a team manager’s comments:

“It’s a bit of a difficult balancing act because... I will say to people you’ve got too much work on but I also have to say “I know you’ve got too much work on and I’m very sorry about this but here’s some more” and that’s not nice because if we could organise things, which we can’t, completely rationally I’d be saying well you might be on duty but I know you’ve got far too much work on, I’ll do that occasionally but in general I can’t because I’ve got to allocate” (interview)

The practice by the team managers was, therefore, to allocate any case that came into the team immediately. Often there was a discussion with the social worker about the case prior to the formal allocation through the computer system, but at times the formal allocation was done without the knowledge of the social workers, who later found out when they logged onto the

computer system. Social workers were provided with timescales to undertake the work allocated to them, which was defined as “performance” for the social workers, as Carol stated:

“Carol: we've obviously got to perform, haven't we... You've been here long enough to know we've got the duty tracker and there's a requirement from the organisation that they're to be doing timely assessments. It's all right, it's all relevant, it's something I agree, that everybody agrees, with

Me: So when people talk about performance, what does that relate to?

Carol: Well, I guess the indicators, what they're measuring you by. It's the percentage of assessments that you do on time, how often you see children. Are you seeing them all the time in a timely manner? Are you giving reports out to parents? It's all that that's being constantly collected and collated” (interview)

As indicated by Carol, the social workers were keenly aware of the Council’s auditing practices and that their “performance” was being monitored. They were also aware that they would be criticised and potentially disciplined for not “performing” providing a boundary for the systemic shame in place for them. Nationally the timescales for undertaking a social work assessment have been changing from seven working days prior to 2010 (HM Government, 2006), to ten working days from 2010 to 2013 (Department for Children, Schools and Families, 2010), to forty five days from 2013 to today (HM Government, 2013). The Council had implemented a two tiered system of assessments depending on the complexity of the situation, with less complex situations being given twenty days and more complex situations being given forty days. With a boundary for the systemic shame in operation within the Council relating to meeting these timescales, being aware of these boundaries, together with a desire not to be shamed, the social workers aligned their sense of shame to them. The cultural practice of adhering to these timescales within the teams was, therefore, rarely questioned. What was questioned was the amount of work they had to do.

DEFINING THE BOUNDARIES FOR MEMBERSHIP

In what can be considered a parallel process (Searles, 1955), i.e. a reflection of the emotional experience of the leader onto the social workers, the pressure on the leader to gain a positive Ofsted judgement was placed onto the social workers. This was initially achieved by setting the

boundaries for membership to this new service (Lawrence and Suddaby, 2006). The leader did not want just anyone in the safeguarding service, she wanted people who could do what she considered to be the “basic requirements”, as a team manager explains:

“I’ve found that if you do the basic requirements, as [the strategic lead] calls them, and ‘if you can’t do them please give in your P45’ ... they tend to leave me alone more” (interview)

The term “basic” serves to make these expectations seem reasonable and achievable. Indeed, any person unable to meet them could be cast as not being competent and therefore not belonging to the new service. Such actions are defined by Crowley (1999) as the politics of belonging, a form of “boundary maintenance” that is concerned with the boundaries that separate ‘us’ from ‘them’. Yuval-Davis (2006) argues that the central question in the politics of belonging is “what is required from a specific person for him/her to be entitled to belong, to be considered as belonging, to the collectivity” (p.209). In this case, it is being able to provide the organisation with evidence that it is meeting the standards they are measured against, as Christine tells me:

“I’m doing a good job for the department if I’m ticking all the boxes. I’m doing a good job for [the team manager] if I’m keeping in all the timescales and that she can go through supervision and I’ve done everything she’s asked of me” (interview)

Evidencing meeting these standards was most often an administrative exercise meaning a boundary for membership of the new service was having good administrative skills. The new service required this of every social worker to ensure that the new professional organisational identity would be verified and legitimised by Ofsted; an expectation explained by a team manager:

“Team Manager: I don’t think everybody should be exactly the same because we’re individual people and this dream that we’re going have 18 safeguarding units that perform exactly the same, the social workers are all exactly the same – it’s ridiculous. We’re all people and you bring yourself with you to work, don’t you?”

Me: Is that the dream?

Team Manager: Consistent service – everything’s exactly the same standard by every single person. That’s what they want” (interview)

Providing firm boundaries for membership based on what was argued to be reasonable and achievable standards provided all those involved in creating and maintaining the new service with a vocabulary of motives (Mills, 1940), which discounted the protestations of the social workers, as Faye told me:

“all they’re concerned about is the statistics really, I think, and they just think that everything should be done on every case and then that’s not always realistic due to the workloads that we have and I don’t know to what extent that is taken into consideration? So I think they’re very black and white about it” (interview)

The institutional work of defining the boundaries for membership provided a clear message to the social workers that a failure to meet the basic requirements would be grounds for criticism, discipline, and potential dismissal. This ensured that the social workers aligned their sense of shame to these new boundaries for the systemic shame within the Council.

RECONSTRUCTING THE RULE SYSTEMS THAT PROVIDE STATUS

The systemic pressures were felt by the social workers as coming from those with more status and power, as explained to me by a team manager as I sat in her office when she said, “they [social workers] are under a hierarchy and that they feel it from above”. Certainly the social workers were consciously aware of the power and status hierarchy that operated within the Council, as Linda stated:

“there is a hierarchy in the local authority, the higher up you get, the more power you carry, the more important you are” (interview)

However, the social workers were also aware of the informal status hierarchy that operated within the new service and the social workers learnt that the value system in which they were situated was based more on the administration of social work. The cultural practices within the teams were such that there was significant oversight of the administration of social work and very little oversight of the direct work with service users. Team managers not only had to read the paperwork the social workers produced but had to sign it off confirming it was of an acceptable

standard. Team managers observed very little direct contact between social workers and children and families and what contact they did observe was usually a situation in which they had a formal role, such as chairing a meeting. The result was that social workers did not think that their team manager knew about their direct practice, as Lucy explained:

“she [team manager] doesn't get to see the day-to-day practice and the engagement with children or anything like that. But what she does get to see is the written side of things” (interview)

This was even more the case for more senior managers, as Amy told me:

“I don't think she [area manager] knows my practice, if I'm being completely honest... I think she knows about my paperwork practice, with regards to timescales. So I don't think she knows the quality of my assessments, but she knows whether I get them in there on time... I think quality comes second and time comes first, and that shouldn't be that way” (interview)

Earning status within the teams and the possibility of promotion, a stated aim of many of the social workers, was therefore directly associated to the production of timely outputs to satisfy the administrative constituency of the organisation. These boundaries for action were then embedded within a system of monitoring the “performance” of each team through administrative devices known as the “duty tracker” and the “report card”. The “duty tracker” was a spreadsheet of all the cases in the team linked to the allocated social worker with information on whether they were within timescales or overdue. This information then went together with a range of other information from the computer system to make up the “report card”, as a team manager explained:

“She said there is a team ‘report card’ which details all the information about the team. This is circulated to all team managers in [the Council] so everyone can see everyone else's. The teams are ranked according to the data. It is colour coded, with things highlighted in red meaning it was considered bad, and has a commentary from the area manager on the team performance” (fieldnotes)

The effect of the duty tracker and the report card was to provide a public league table which embedded the systemic shame and pride in each team. The social workers and team managers did not want to be at the bottom of the table, nor did they want a negative judgement from the

senior managers, and nor did they want to present a negative image of their team to the other teams. Equally, while not seen to be as important, the social workers and team managers could take some pride in being high in the table. The social workers and team managers' sense of shame and pride was therefore heightened within this context making the timescales and paperwork a significant feature of the work, if not one of the most important aspects of the work, as demonstrated by Linda's experience:

"She said that she had had an email from [the team manager] which had told her to do less visits to families and do more paperwork. She said she was upset getting it. I asked her what the upset was about. She said "I work really hard at home to get my paperwork done" ... She then shows me the 'duty tracker', a print out of all the cases in the team which has the statistics of how in date or out of date assessments are in relation to the timescale. Her name was against 2 children's names which said 'overdue'" (fieldnotes)

In this case, the duty tracker was used as a surveillance device for the team manager so that Linda's behaviour could be regulated to remain within the acceptable limits. Deciding to spend her time with the families at the expense of her paperwork received a message of disapproval from the team manager reducing her perceived status which could only be gained by refocusing her efforts on the paperwork. Such surveillance devices not only enabled effective policing of the boundaries of systemic shame and pride in the teams but also ensured that the social workers' sense of shame and pride was aligned to these boundaries. The social workers now knew the consequences for transgressing these boundaries so could regulate their own behaviour, as demonstrated by Amy when she described how it felt to be close to having something out of timescale:

"Amy: For me, I can go, "Yeah, I've got five assessments to do. Phew, I've got two days. It's not gonna happen." Done. And whilst making that decision, I'm like, "Fuck it. I don't care," and then after I'm thinking, "Shit, shit, shit, they're seeing that, shit. Right, [Amy]'s name's coming up". Do you see what I mean?"

Me: Who's they?"

Amy: [the strategic lead], [area manager], other teams, because of the bloody report card you get, which I think are absolutely ridiculous, that every other team manager sees. And, actually, that makes it dangerous, because teams become competitive with one another, as opposed to supporting one another. So when you go on training, "Oh, you're from

[team manager]'s team. Oh, you've got such and such percent." It makes people - because we are a well-performing team - it makes people, because of the duty tracker and the impact it has... So it brings, like, a professional jealousy to it, and it stops teams from helping one another" (interview)

While Amy may feel a sense of shame when close to the boundary and so acts to avoid being shamed, she also feels a sense of pride for being in a well-performing team, something that is acknowledged by others in the Council. However, the rule systems that provide or remove status and the devices to support these rule systems were described by Linda as "managerial" and by Amy as "business-like", indicating such practices were considered to originate from someone other than 'us'. Together with the other changes of providing clear boundaries for membership and reconfiguring the status hierarchies within the new service, the boundaries for organisational action were firmly embedded into the new system. These changes were felt by the social workers as an anxiety that one could be shamed for not meeting this standard, as Carol suggests:

"I do think they don't care. You've got to do it. That's it. You know the practice, you know the policy, you've got to do it. But what do they care about why you can't do it? I don't know. And that's not a helpful feeling, really, because that doesn't do anything to reduce your anxiety" (interview)

THE NEW SERVICE: AN OVERVIEW

It was envisaged that the practices of the social workers within the new service, and the moral and cultural foundations for those practices, would be founded within traditional social work values and ideals. Indeed, these were argued to be vital to improving the services to children and young people. The national and local social, political, and functional pressures in place at the time, however, created a systemic force that posed an ever-present threat to the Council's identity on the one hand and an ever-present possibility of attaining status, recognition, and reward if it performed to a particular standard on the other. Consequently, in order to avoid organisational shaming and attract praise, the logic of public administration dominated the definition of membership, the construction of the new rules systems that conferred status, and

the creation of status hierarchies, which had the practical effect of integrating the identities of social work and public administration (Pratt and Foreman, 2000). Consequently, not only was administrative practice perceived to be social work practice but it was ascribed a higher value. The result was that the new service was able to verify the Council's identities, being graded as 'good' in their next Ofsted inspection. The Director could now claim to the local councillors that:

"The Local Authority has developed effective services to investigate and manage both referrals and established concerns about harm to individual children and young people" (Council meeting minutes)

The senior managers and team managers praised their staff for achieving this result, as I observed in a team meeting:

"The team manager then asks for a review of the year and opens this by praising everyone for their hard work over this period and stated that Ofsted had been in and they got a Good rating which was one of the best Ofsted have given all year" (fieldnotes)

And the social workers could feel proud of the result as a consequence:

"Me: How did it make you feel that [the Council] got good in the Ofsted inspection?
Lucy: Proud. I did feel proud" (interview)

Yet despite this, the newly constructed service did not satisfy those within the teams. The new structures and practices undermined a commitment to the professional constituency to reduce social workers' workload. The actual result was a significant increase in the workload, both through an increased number of children they were responsible for and the amount of administrative tasks that needed to be undertaken. Furthermore, those within the teams felt that they were set up to fail, as demonstrated to me in a discussion I was having with two team managers in one of their offices:

"[A team manager] said the system is set up to try and avoid another Baby P but said that "we're not here to prevent deaths". [The other team manager] chipped in and said it is the same as blaming the police for the fact that there is crime... [the first team manager] stated that the stipulation in [the Council] is to visit a child subject to a child protection plan every 15 days which

is .01% of the time and so they don't know what is going on 99.9% of the time so how are they supposed to prevent deaths" (fieldnotes)

From the team manager's perspective the role they were expected to perform was not only an impossible task but also contrary to their understanding of the role of a social worker as they understood it. Social work was considered to be about helping and supporting people while they were being asked to prevent deaths. From the team manager's point of view the new system did not offer protection to the identified "at risk" staff group as they were being judged on grounds outside of their ability to control. Social workers' therefore continued to feel at risk of being disciplined and potentially losing their career, as Jane, providing a typical sentiment, explained:

"the child gets hurt or whatever it's gonna be on my back... a child's been hurt so it's me, it'll all come back on me... it would be a serious case review won't it, it'd go straight to the very top, and nobody protects, nobody protects us... I could end up getting disciplined or, you know, sacked and that, that then would be the end of me career. Nobody cares, that's it, you're gone ... I have to make doubly, triply sure that that child is adequately safe, more than adequately safeguarded, and to make sure that everybody's, every things in place, everything, apart from sitting outside the house 24/7, which I can't do" (interview)

As Whetten and Mackey (2002) argue, as organisations grow and mature, "they become institutions in their own right" (p.398) and the newly constructed service could claim to be the right kind of institution, similar to Rorty's notion (1989) of the right kind of human being. It was doing the right kind of things, in the right kind of ways, in the eyes of those with the power of definition. To achieve this, however, the right kind of organisation needed the right kind of professionals.

CHAPTER 5: CREATING THE RIGHT PROFESSIONALS

While we all have a part of us that defines us as different from others, what is termed a 'person identity' in identity theory (Burke and Stets, 2009), we also have parts of us which define us as similar to others. Indeed, as the self is reflexive, in that it can take itself as an object (Mead, 1934), one can categorise the self in relation to already established social categories, such as that of a social worker. People do not form their thoughts on what a social worker is and does in isolation, however, but are influenced by the beliefs, ideas, attitudes, and opinions of others. The idea of a 'social worker' can, therefore, be considered to be a collectively shared reification, i.e. a social representation (Moscovici, 1961, 1981, 2001). Categorising the self with such social representations (Breakwell, 2001; Duveen, 2001), i.e. identification, creates our identities (Stryker, 1980). Given the complex nature of social life, we may develop identities that define us as occupants of particular roles (role identities), or as members of particular groups (social identities) (Burke and Stets, 2009). Once formed, an identity can be understood as the set of meanings that one holds for each of these "internal positional designation[s]" (Stryker, 1980, p.60). As indicated in chapter one, these meanings and expectations associated to a particular identity are an important component of self-conscious emotions.

While all those within the teams categorised themselves as social workers, the reorganisation of the service had re-categorised all those working in the new service as 'safeguarding social workers'. Given the systemic shame and pride in operation within the Council as discussed in the previous chapter, a particular set of meanings and expectations, both explicit and implicit, had been constructed and associated to this new social category, creating an 'institutional representation' of a safeguarding social worker. This institutional representation can be considered both a role identity, in that it provided a set of meanings to guide how to carry out the task of doing safeguarding work (McCall and Simmons, 1978), and a social identity, in that it provided a set of characteristics that were considered necessary to undertake safeguarding work

(Hogg and Abrams, 1988). While Thoits and Virshup (1997) argue that the boundary between the two is a fuzzy one, as in real-world situations we are usually in a role and a social group at the same time, an analytic distinction could be made between the two depending upon the context and the primary focus of the social worker in that context. For example, the expectation for what a social worker should do (role identity) could often be distinguished from what characteristics the social workers were expected to possess (social identity). The effect of these institutionally constructed meanings and expectations was to provide institutional guardians with a standard to evaluate the social workers' practice and regulate the social workers' identities (Alvesson and Willmott, 2002). These processes not only ensured that the social workers learnt these meanings and expectations (Burke, 1980) but also, crucially for the institution, that they complied with them.

This chapter provides an analysis of the role of self-conscious emotions in the process of creating and embedding the institutional representation into the identities of the social workers through regulating and policing their actions. Consequently, the service was able to ensure that the social workers practised in institutionally 'appropriate' ways within and across different situations. Firstly, this chapter considers how the aims and expectations of the institutional role-identity were created and used to regulate the identities of the social workers through inducing self-conscious emotions; secondly, a similar analysis for the characteristics of the institutional social-identity is provided; and finally, how self-conscious emotions were used to police and deter deviation from the institutional representation is outlined, which together, sought to create the 'right' kind of practitioner.

CREATING AND REGULATING THE SAFEGUARDING SOCIAL WORK ROLE

SETTING PROTECTING CHILDREN AS THE PRIMARY AIM

Despite the wider meaning of the term 'safeguarding' (HM Government, 2013³¹) the dominant discourse used for identity regulation was of the narrower concept of protecting children. The expectation within the Council was, therefore, that the safeguarding social workers protected children from maltreatment. This meant investigating any allegations and assessing the level of risk to a child's safety. If there was no risk the case would be moved to the family support team. If a child was removed as a consequence of a Court Order then the case would be moved to the Court and Care Planning team. The effect was to refashion the role that these social workers performed, making a distinction between what they did and what other social workers did. They were the only ones to work with the families where there were risks to children while they remained at home. The social workers were, therefore, provided with the message that the focus of their work was on the more complex situations, identified in law as a child "suffering, or likely to suffer, significant harm" (Section 47(1b), Children Act 1989), as Donna explained:

"We're not supposed to go in and just talk about the one issue that comes in on the referral. We're supposed to look at the whole situation. And sometimes there is only one issue but more often than not with very complex families we're safeguarding at a significant harm level. We're not local support team" (interview)

The effect of this reclassification for those in the teams was that protecting children became *the* primary aim of their work, as demonstrated in the team room as the team manager was talking to a group of social workers:

"[The team manager] refers to a couple of cases recently where they have wanted to remove the children but they haven't been able to when it got into Court and she says "we might as well all give up" and quit their jobs and [Carla] says, "we're not protecting children", in an exasperated tone" (fieldnotes)

³¹ This has since been updated but the 2013 version was the guidance in place at the time

The message from the team manager was clear: they were defined individually and collectively on their ability to protect children. To not do so, or to be prevented from doing so, equated to not doing, or being, a safeguarding social worker. The expectation that the role was to protect children was further supported through the making of specific stories of child deaths, mainly Peter Connelly, and generalised stories of harm to children, mainly through reference to SCRs, readily available, providing a reminder to the social workers of the link between the boundaries for shame and protecting children from being harmed. The safeguarding role, however, needs to be considered in relation to a web of counter-roles, both internally and externally to the Council. With the primary aim of their work being defined as protecting children, the senior management, as the primary internal counter-role to those in the teams, could define the meaning of keeping children safe, as demonstrated by one team manager's experience:

"I'd been to the adoption panel on a particular case and the lay member of the adoption panel had said, "why didn't you remove these children earlier?"... That comment then made all its way to [the strategic lead] and she then told the [area] manager who said to me, "why aren't you removing more children? I'm hearing that you're not removing enough", and I said, I was absolutely stunned by this and I said, "we remove more than any other team"... I made a very robust defence of this and I put together an email and said, these are the children we've removed in the last 12 months, loads of them, there's no other team in the [West] of the County that's removed anything like that number of children, you ought to know this stuff so please take account of this and don't ask, I don't think I said don't ask me silly questions but I defended myself very strongly" (interview)

The accusation that the team manager was not removing enough children can be considered to be an act of episodic shaming, as it was an accusation that she was not performing her role appropriately. Despite the team manager attempting to protect herself from the feeling that she was incompetent by defending her actions, a form of identity work intended to defend her identity as a competent manager, the senior managers had successfully promoted a particular interpretive framework that embedded the removal of children as a symbol of protecting children. Such an interpretive framework stemmed from the construction of interventionist practice as ethical practice as discussed in the previous chapter. The practical effect of such an interpretive framework, however, was to provide a regulatory function on the social workers'

identities (Alvesson and Willmott, 2002), as all those within the teams learnt that not removing children considered to be at risk of harm provided legitimate grounds for being shamed. The social workers could be considered, therefore, to align their sense of shame to these boundaries and act in accordance with them. Consequently, the team manager's attempt to prove she was competent rested on the argument that she had removed a sufficient number of children rather than defend the decision of not having removed others. This interpretive framework, with societal and organisational support, legitimated state intervention where there were risks to a child's safety, which became a central feature of a successful role performance within the teams, as Jane explained:

“you're going into a child protection conference or you're going into a Court arena, and I know it's heart wrenching, you know, but we have to do these things and at the end of the day if you get what you need, you know, you're doing a good job, like if you put an ICO [Interim Care Order] in place or a child on a child protection or a child's had to be removed and placed in foster care, you know at the end of the day the child's safe and that, that for me, that's a good job” (interview)

Setting the primary aim of the safeguarding role as protecting children, and associating this with specific procedures, had implications for the relationship between the social worker and the primary external counter-role, the parents and carers of the children. A successful role performance necessarily involved collecting information from many sources, although this was mainly from the parent/carer. This was considered an “assessment” or, where there were allegations of abuse, an “investigation”. Good investigation skills were therefore valorised, as Donna explained by stating “the reason [the team manager] wanted me as a social worker is because I'm so good and so investigative” (interview). While the social workers all stated that they valued and sought to develop positive relationships with the people who used the service, given that protecting children was seen to involve difficult conversations, and at times having to remove children, developing a positive relationship was not always seen as possible or even desirable. Sometimes this was seen as a barrier to the aim of protecting children as it made it more difficult to find out certain information necessary to complete their assessments:

“[Monica] said also she works for EDS [Emergency Duty Service] and that she finds it easier to ask “cheeky” questions on EDS because you know you are not going to see them again. She said it is harder when you know the family as it can be more embarrassing asking them difficult questions” (fieldnotes)

A relational distance to the parents and carers ensured that the safeguarding identity remained most salient and repressed the activation of other identities, such as a friend identity, that could result in feeling embarrassed when asking personal and difficult questions. In situations where the relationship between the social worker and family was strained, an interpretative framework was provided that normalised the absence of a positive relationship, as demonstrated by the following observation in the team room:

“[Amy] tells [the team manager] she is going to see the mother with the alcohol problem later and [the team manager] says “we’re not paid to be liked but we like each other so it’s ok”” (fieldnotes)

And in situations where there was outright hostility towards social workers from family members, the interpretive framework was extended to suggest that this was an expectation for a successful role performance, as shown by Donna’s comment that “[the area manager] said I must be a good social worker because [the father] wants to change his social worker” (interview). Such discursive practices can be considered as intentional action to alter, and ease, the emotional experience of the social workers engaged in child protection work. For the uninitiated, however, such messages could come as a shock, as demonstrated by Melanie’s experience:

“I remember being a student and a social worker said to me, “you know, you’re not, you’re not doing your job until you get a complaint”. They actually said “you’re not doing your job properly until you get a complaint”!” (fieldnotes)

The message the social workers received was that a successful identity performance of the safeguarding role required a neutral or negative relationship with a parent or carer. Developing a positive relationship was therefore grounds to question one’s competence, as Mandy explained:

“I suppose I always worry when [parents] do like me because I’m not really meant to be liked and then I start thinking “am I doing this right?”” (interview)

It could be argued that such institutional messages had changed what was considered a relational profession, interested in building relationships in order to provide support and challenge to effect change, into a transactional profession, more interested in discrete transactions for the purposes of collecting information or ensuring agreed obligations had been met as laid out in some procedure or plan.

SETTING RESPONSIBILITY AS A PRIMARY EXPECTATION

Professional responsibility is, perhaps, a cornerstone of the modern professions with the meanings of professional responsibility in social work being provided by the regulator (Health and Care Professions Council, 2012) and the professional association (British Association of Social Workers, 2012). The social workers and team managers identified with being ethical and having a responsibility to the profession and those that used the service. Responsibility as a role expectation within the Council, however, can be considered to be distinct from these notions of professional responsibility. Being responsible in this context meant accepting responsibility for the work that was given to them. Despite the Council being held responsible as a collective by Ofsted for the work of individuals, the Council held individuals responsible for the work of the collective. Work was divided and allocated to specific individuals who could be held to account if the work was not completed. This expectation was embedded into the role at the birth of the new service, with a team manager explaining the effect of the reorganisation:

“...within a week of the new system we were being flooded, we were getting 100 referrals a month... it was absolutely terrible you know people had caseloads of, [Donna] was on 88, 89, [Christine] was on 80, it was a nightmare, it was an absolute nightmare” (interview)

While the team manager perceived this situation to be a result of the new system, and consequently felt no responsibility for the dire situation in which she found herself and her team in. The senior management, through an expectation for responsibility, considered it a failure by

the team manager and the social workers to perform their roles appropriately, as the team manager described:

“I just thought “whoah” there’s a different perception here, I’m saying we’re struggling because our new system isn’t working, you’re saying we’re struggling because we’re struggling and the inclination is that maybe this team manager isn’t on top of it, isn’t equal to the task. And it was never said explicitly but you can read between the lines, you’ve got to be very sensitive in this job... and when [the strategic lead] said once, “I lose sleep over the [West] team”, I thought I need to watch my step” (interview)

From the team manager’s perspective, the message was that the responsibility for the work rested with the individuals and not the organisation, providing firm boundaries for the systemic shame within the teams. A failure to manage ‘their’ work was grounds for legitimate episodic shaming. By ensuring that this was known, the team managers realigned their sense of shame to these boundaries embedding the responsibility for cases into their role-identity. With a reputation for shaming social workers, the leader could then be used symbolically to further embed the expectation for responsibility into this identity, as demonstrated by Donna’s conversation with her team manager about outstanding work:

“[Donna] said she has so many cases she can’t possibly get everything done and so it is the “organisation’s fault not mine”. She said she felt “panic” because “what about all the other things I’ve not done” and so she felt on her own. [The team manager] said that if [the strategic lead] were here she would ask very direct questions about what has been done and she would “erupt like a volcano” if things weren’t done” (fieldnotes)

In a parallel process to the team manager’s experience, Donna defended herself against the accusation of incompetence by placing the responsibility for not having done her work onto the organisation, a form of identity work to defend her identity as a responsible and capable worker. Donna felt humiliated, however, by the team manager’s response, with Donna recording this experience as rejection, humiliation, embarrassment, and anger in her diary entry. Despite such feelings, however, such action served to embed the expectation that social workers ‘take’ responsibility for ‘their’ work into the safeguarding role-identity. A ‘good’ social worker accepts responsibility for the work given to them, as Julie’s experience demonstrated:

“the clerk asked her if she had written the report for the LAC [Looked After Child] review next Tuesday. She said she hadn’t and she was going in 5 minutes and so she will have to do it next Monday. I asked if this bothered her and she said “come Sunday I’ll be panicking”... I asked “what would happen if you didn’t get the reports done?” [Julie] said “you have to get it done” and then “you’ll be hauled over the coals”” (fieldnotes)

Having firmly embedded the expectation into the safeguarding role, all those in the teams accepted the responsibility as their own. The social workers, therefore, routinely worked more than their contracted hours, often finishing late and still taking work home, with Linda one Saturday morning sending emails at 4.30am, Christine undertaking visits to families at 7am, and Donna summing the situation up as:

“The expectation is that you work your arse off into the ground and you do it until your work’s up to date. And if your work isn’t up to date, then sod you. But nine to five it’s not possible, or eight thirty to five, it isn’t physically possible to do what’s asked of us” (interview)

SETTING COMPLIANCE AS A PRIMARY EXPECTATION

Having embedded responsibility as a primary expectation, those performing the safeguarding role now needed to do their work in an ‘appropriate’ fashion. Scott (2014) argues that institutions are constituted through regulative and constitutive rules that provide a ‘right’ way of doing things. Those within the teams therefore had to ensure that they did things in the right way, as explained to me by a team manager:

“I feel it strongly there’s a big change and it’s, and I say ‘accountability’ because that’s how I feel, you know, if I do something wrong, they’d sack me. I don’t feel secure in this job anymore... I don’t know if it’s come from the government or what but this pressure that you’re always being looked at to be sure you’re doing it good enough, you know” (interview)

The boundaries for the systemic shame within the safeguarding service can therefore also be considered to relate to compliance to these rules, with failure to comply being legitimate grounds for episodic shaming. With knowledge of these boundaries, those within the teams sought to comply to avoid being shamed and to seek social acceptance, as a team manager told me:

“I certainly thought I’m under the microscope and I need to be seen to be complying with what’s going on. So when new ideas come up... I just thought yeah we need to try everything here, you want a duty tracker bring it on, let’s have a look at it, I don’t think it was going to make any difference really but I wasn’t going to say that. So yeah I looked at new ideas and I welcomed them and I think sometimes when you’re seen to do that that pleases people who are making the decisions” (interview)

Having internalised the expectation for compliance the team manager then relays this institutional message to the social workers, as demonstrated by one team manager telling Donna in supervision, “we have to do what those from on up high tell us” (fieldnotes). Indeed, such messages were embedded into the system through the separating of responsibility and authority. While the social workers had the responsibility to do the work they were given, they were not always provided with the power to be able to make the decisions to fulfil this responsibility. The authority to do this was often vested in the team manager, for example, to provide money to a family, or whether to request a child protection conference, and sometimes in more senior managers, for example, in whether to initiate Court Proceedings. The social workers, therefore, had to routinely seek the authority from a superior, embedding compliance into the system, as Melanie, explained:

“...it’s coming from the top down, you know, what’s expected, what isn’t expected, what’s acceptable and what isn’t. It’s process driven, isn’t it? You know, you have supervision, you talk it through “ok what’s next? Right we’ve got to do this”” (interview)

This expectation for compliance was then further embedded into the safeguarding role through an annual review of “performance”, whereby the social workers were judged on how well they had been perceived to have performed this role, as demonstrated to me in Lucy’s annual review by her team manager:

“[The team manager] explains the point of the review to [Lucy] and says that one part is how workers fit with what the local authority want to do and that all workers are signed up to the local authority’s values and vision. [Lucy], looking at the paperwork, comments that the grading system, by which she is evaluated, looks just like the Ofsted grades” (fieldnotes)

The annual performance review further reinforced the boundaries for the systemic shame making them explicit to the social workers enabling them to align their sense of shame accordingly. Therefore, and consistent with Menzies' (1960) analysis of anxiety in hospital settings, the social workers felt anxious about not getting it 'right' and being shamed, creating what Menzies described as "upward delegation". It was routine behaviour for the social workers to ask their team manager what to do and how to do it and I spent a lot of time following social workers around buildings looking for their manager, sometimes peering into key holes to see if they could see them, before undertaking a particular task. The role expectation for compliance could be considered to be symbolically represented by the wearing of an identity tag around their necks, which held an identity card detailing their name and role, and a swipe card which gave them access to restricted parts of the Council building, as Monica explained to me:

"I ask [Monica] about her identity tag and she says "you have to wear it" because they are told to. When I ask "what happens if you don't", she says they "get into trouble if you don't". She says she sometimes takes it off if she is in the street so other people don't see it and sometimes she takes it off if the parent has a visitor in the house" (fieldnotes)

While Monica links wearing the tag with the expectation for compliance, she also shows that it is also a display of the professional identity by taking it off when she wants to hide that identity. Indeed, it was the tag rather than the identity card that could be considered to be a symbolic display of identity, as social workers who had lost both their identity and swipe cards continued to wear the tag with nothing in the card holder.

SETTING ADMINISTRATION AS THE PRIMARY TASK

Despite the efforts of the leader and the managers, as detailed in chapter four, the social workers not only made a distinction between professional practice and administration but also considered administration to be a hindrance to professional practice, as Carla's comment demonstrates:

"I prefer to be out seeing the children and everything, more so than doing the paperwork, I don't mind, I know that, you know, you have to back up your evidence of seeing the children with the

paperwork but sometimes I find myself in not giving the families, children and families, the time that they require because I'm worried about going back to complete the assessment" (interview)

While administration may be seen to be an inherent component of institutional and social life, Wilson argued back in 1887 that the methods of administration are only a part of society in the same way that "machinery is part of the manufactured product" (p.210). We can, therefore, separate out the practice of using administrative methods and the practice of a specific knowledge base, skill set, and value commitments that reflect the historical, cognitive, and practical traditions of the profession. Given the changes in the new safeguarding service, as outlined in the previous chapter, we can understand the primary task of a safeguarding social worker within this new service to be one of administration, as demonstrated by the experience of those in the West team:

"[Jane] tells me that I should have been here last week when they got an email from [the strategic lead] she said they were "not happy" and "it went down like a lead balloon". [Jane] and [Jemma] told me that [the strategic lead] had sent an email to all teams in [the area] that their statistics were not good and it stated that "this will be addressed". [Jemma] said that it was not the statistics but the tone of the email that upset them. She said [Christine] has been coming in at 5.30am, [Monica] and [Julie] have been working late, and everyone else has been taking work home" (fieldnotes)

All of the teams in that area of the service had been shamed for their poor "performance", and in efforts to avoid future shaming the social workers sought to improve their statistics, which primarily involved administrative methods, such as record on the computer when visits had been conducted, write up notes, minutes, or assessments, or close cases, which involved completing three forms. There were further opportunities to be shamed for what could be considered to be poor administrative practice within formal meetings, such as child protection conferences or Looked After Child reviews, which were chaired by Independent Reviewing Officers (IRO). Indeed, the IRO as shamer was made explicit by Knowles and Sharpe (2012) who stated that, "the point needs to be made clear to all concerned: the IRO is someone who not only carries a big stick but also has direct access to those whose sticks are even bigger" (p.1381). Within the Council the IRO

service had co-opted Ofsted’s rating system to grade cases, which social workers internalised as the IRO grading them personally, as Helen explained:

“if you get an ‘inadequate’, you feel like you’ve done a crap job then... If it was an ‘inadequate’, they always email it to your manager, with you cc’d into it, to say this is why I scored an ‘inadequate’. But even if you just get, if you put your heart and soul into a report, and you get a ‘good’, sometimes I just think, “I want an outstanding, because I’ve done everything that you’ve asked me to do. What do I need to do?”” (interview)

Cases could be graded as ‘inadequate’ for such things as one visit being one day out of timescale or a report not being provided to the family or the IRO within timescale. To avoid being shamed the social workers organised their time to ensure that they did not miss a deadline, embedding administration as the primary task of the safeguarding identity, as Lucy explained:

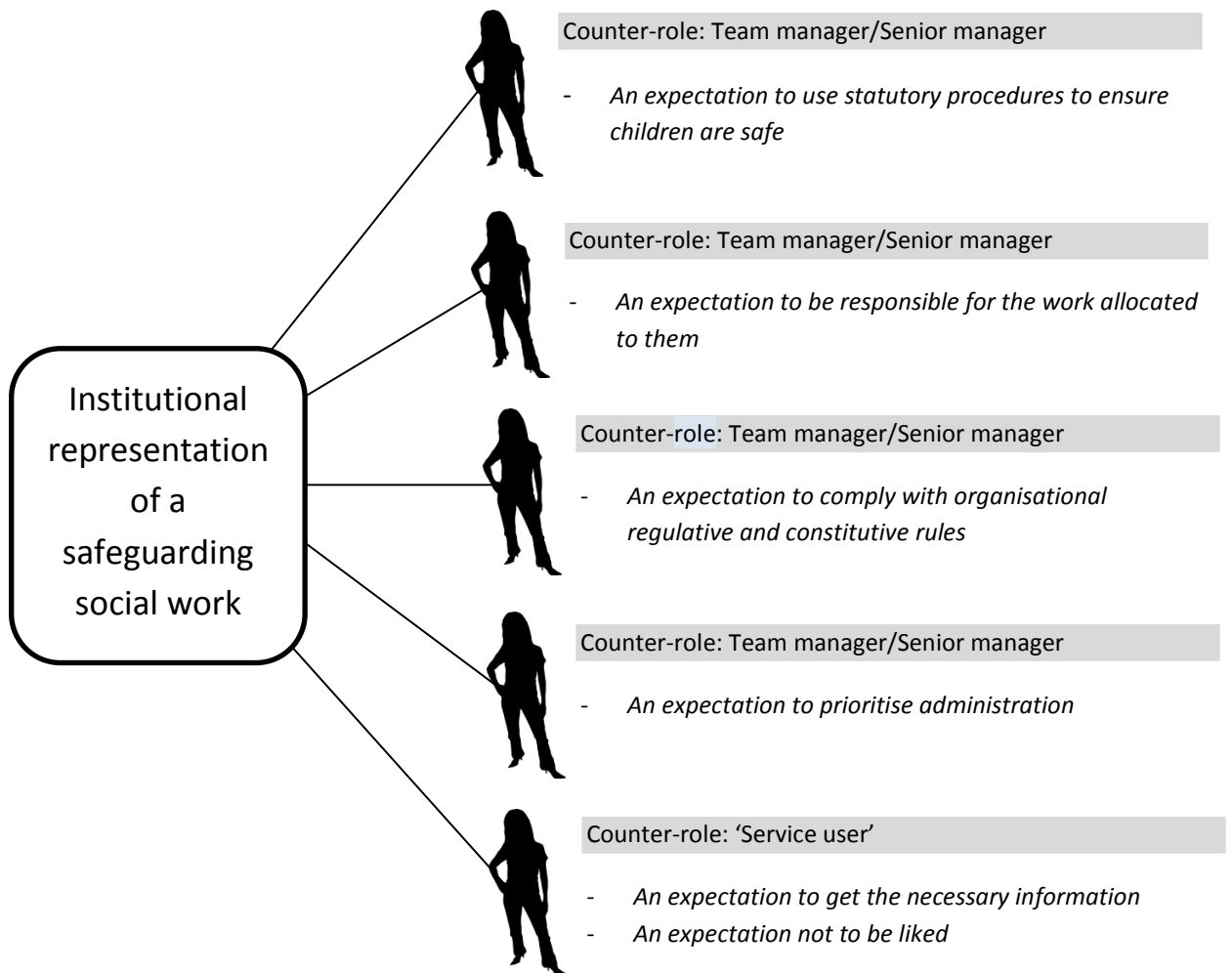
“I’d like to spend a lot more time actually doing social work rather than typing minutes, typing reports, writing case notes, especially the direct work with the children. I think we all find that the hardest to fit in because for everything there’s a deadline or you’re graded or you’re marked on it, so we all prioritise trying to meet ‘stat’ [statutory] visit requirements or requirements for your conference report to be in on time. So we all focus on those tasks because we’re told that’s what we need to do. So sometimes the things that get missed are the real social work bits of working with the children in school. We don’t have indicators or targets to do that” (interview)

The primacy of the administrative role for the social workers was evident in the team rooms where the vast majority of the walls were covered by an array of policies and procedures, telephone numbers and contact details of services they could refer to or professionals they may need to contact, information on timescales, instructions on how to use the computer system, and other general administratively important information. In one of the team rooms, this was sharply contrasted by the family support team at the other end of the room which had much fewer, but more practice relevant, posters on display with the most prominent being in the centre which outlined the teams approach to “family intervention”, which said:

| | |
|---------------------------------------|-----------------------------------|
| “One worker dedicated to a family | Consider the family as a whole |
| Practical, hands on support | |
| Persistent, assertive and challenging | Common purpose and agreed action” |

While much of these meanings and expectations associated to the institutional representation of a safeguarding social worker were created to ensure that the Council performed its statutory functions, this was achieved by ensuring that the social workers knew the boundaries for being shamed and praised within the institution, providing a concept of an ‘acceptable’ safeguarding performance, which can be summarised in Figure 5.1.

Figure 5.1: Expectations for the safeguarding social work role



CREATING AND REGULATING THE CHARACTERISTICS OF A SAFEGUARDING SOCIAL WORKER

CONSTRUCTING A MORAL COMMUNITY

Dwyer (2010) argues that children should be ascribed the highest moral status in British society because they are perceived to be “more innocent, more beautiful, more full of potential, and on the whole simply more empathy provoking and awesome than adults” (p.181). A number of scholars have highlighted the evolving trend within Western cultures to recognise and seek to protect children’s rights, with tragedies relating to children today provoking highly emotional responses (Payne, 2005; Ferguson, 2011; Parton, 2014; Warner, 2015). Indeed, Warner (2015) argues that “children are *the* moral referent” (p.7, italics in original) in Western society, providing a moral settlement that considers prioritising children’s needs as the ‘right’ thing to do. Certainly, in all matters relating to the Children Act 1989, the primary piece of legislation governing the work of child protection social workers, the court is compelled to consider the child’s welfare as the paramount consideration (section 1(1)). And consistent with these changes, Featherstone et al. (2014a) and Parton (2014) argue that the dominant discourses within the field of child protection have become child centric. Indeed, the new safeguarding service was constructed within this context, with those within the teams considering themselves to belong to a unique community of practitioners with a moral foundation, as a team manager explained:

“we’re here doing good in a moral sense and that pleases me and I’m glad I’m part of it. Yeah definitely I’ve never lost sight of that, I’m not burnt out, I believe in what we do, the way we do it can drive you to distraction but I believe in what we’re doing definitely” (interview)

Larson’s (1979) analysis of the professions argued that professionals receive equivalent social status as their ‘clients’. Historically, social workers have been considered to primarily work with those experiencing poverty (Woodroffe, 1962) with research suggesting that those experiencing poverty feel shamed by wider society (Walker, 2014). In line with Larson’s (1979) argument, given the widespread negative attitudes towards those in poverty, some social workers have felt

ashamed to tell others that they were social workers (Walker, 2011). By creating a moral community based on protecting children from harm, the principal 'client' base of the social workers was refashioned away from people with low-status towards the high-status of children. This was explained to me by a team manager who stated that "social work doesn't only apply to the poor; it's a misconception" (interview). As Warner (2015) argues, "the face of the child has the ultimate power to transcend boundaries between 'us' and 'them'" (p.7) making the safeguarding identity not only a morally important one but also a socially acceptable one. The social workers could, therefore, be proud of who they were, as shown by one team manager who said "I do actually feel proud to be a social worker" (interview).

This moral foundation was supported through the interpretive framework (Alvesson and Willmott, 2002) for the community that 'we', i.e. the safeguarding community, protect children. Occasionally, the leader would seek out good examples of work that was child-focused and would praise the social worker or very occasionally send it around the service as a good example. This provided support for the belief that a safeguarding social worker was there principally for the child and not the parents, carers, or wider family. With knowledge that being child-focused received praise and acceptance within the group, social workers sought to consciously develop an 'acceptable' attitude, as Jane explained:

"I try very hard to focus, as is my job, to focus on the children, and not just on what the parents are telling us. Because I think there is a danger, that working in child practice, that you can get, sort of, veered more towards the parents, than you can sometimes, towards the children. And I think I do subconsciously try to make an effort to not let a parent's views overtake the views of the children. And I think I'm quite conscious of that" (interview)

Given that social work can operate in morally ambiguous situations (McDonald, 2006), where the social workers have to navigate complex moral questions about the right course of action, it was often that they experienced what Dahlqvist et al. (2009) refer to as a troubled conscience. However, consciously invoking the moral supremacy of children constructed of a vocabulary of motives (Mills, 1940) based on "the child's best interests". This served to resolve such complex

moral questions, thereby alleviating their troubled conscience, as demonstrated by Paula's first experience of applying for an Interim Care Order (section 38, Children Act, 1989) with the intention of removing the children from their mother:

"She said the solicitor is moving things too fast and she is not comfortable with it. She began to cry and reached for a tissue. She said she is not sure it is the right thing to do. During this conversation [Faye] had come in and sat down next to [Paula] and she tried to comfort her by saying that you always question if you're doing the right thing even when you know it is in the best interests of the children. [Paula] said "really?" and [Faye] said "you have to keep the best interests of the child at the centre"" (fieldnotes)

Faye was able to alleviate Paula's anxiety about doing the wrong thing while at the same time reinforcing the message that to be one of 'us' is to keep the child at the centre. Such consistent messages ensured that the social workers knew the conditions to be praised and aligned their sense of pride accordingly. For those who had done so successfully, it was both important and natural to remain 'child-focused'. Consequently, pictures children had drawn for them were displayed proudly on the walls by their desks, as demonstrated by Jane:

"she said she "loved" the pictures from the children she works with and tapped a new one that was not up last time I was there" (fieldnotes)

While interactions with children were legitimate grounds for interrupting the team to tell them the story, as demonstrated by Amy:

"[Amy] is sitting at her desk and she interrupts everyone in the room to tell them that she had seen a little boy today who had taught her how to say "I am [Amy]" in Indian. She said "I could have taken him home"" (fieldnotes)

For the newer members of the safeguarding team, it took time to align their sense of pride to the systemic pride in operation within the service through the conscious application of the interpretive framework. This was demonstrated by Paula's first experience of removing a child from their parents:

"Paula: I can remember that as we - there was [sic] three social worker cars, and we drove over the Bridge, to head towards the address - and I can remember thinking, "child snatcher".

Because we were all in convoy, one car after the other, I really felt like I was living up to that image of a child snatcher

Me: What did it feel like when you thought that you were living up to this idea of being a child snatcher?

Paula: I felt an element of shame and, sort of, “Well, what would my next door neighbours think of me, if they knew I was doing this? And my friends, what would they think? you know, they’re Mums themselves and what would their perception of me be?” (interview)

Being a newly qualified social worker, Paula’s sense of shame and pride were not fully aligned to the boundaries of the systemic power in operation in the safeguarding service. She therefore felt ashamed about living up to the negative image of social workers as child snatchers. While the construction and application of the interpretive framework for the purposes of identity regulation can be considered to be a form of institutional work, once internalised by the social workers it became a form of identity and emotional work as they sought to alter how they felt and who they were. Consequently, Paula was able to turn her shame into pride, and verify her new safeguarding identity, as she goes on to say:

“although it wasn’t easy to remove the children, it made me feel quite good, in knowing that now these children were going to be in a place of safety” (interview)

Overall, the safeguarding social work identity was considered within the teams to be a distinct, morally superior, social grouping within the Council. Others, therefore, had a moral obligation towards them to ensure they were able to carry out the important work of protecting children, as Amy demonstrated one morning when she was unable to find a parking space:

“[Amy] is sitting at her desk talking to a family support worker about the parking this morning. [Amy] was recalling what she said to the parking attendant in the morning and she said she had said to him, “I didn’t think being a councillor was more important than child protection”, and in the end she had got into the car park and had parked blocking 3 Councillors’ cars in” (fieldnotes)

Hierarchically the Councillors were Amy’s superior within the structure of the organisation.

Morally, however, Amy considered her role to be of more worth and therefore more worthy of the parking space, hence her justification for blocking three Councillors in the car park to enable her to fulfil her role.

CONSTRUCTING A COMMUNITY IN ADVERSITY

The inevitable consequence of the reorganisation was that the safeguarding social workers would be the ones who had to hear stories, and see the effects, of abuse and neglect, as Carol described:

“neglect, the abuse and listening to the trauma. And not just listening to the trauma, it's seeing the impact of the trauma. Witnessing it, I guess, about abuse. Witnessing the effects of abuse on a child and listening to adults talk about - it's not just children, is it, but parents can be victims and it's listening to their traumatic history as children themselves and what kind of life experiences they've had. And when you listen to that, that's not particularly very pleasant” (interview)

The leader told me that it takes a particular sort of person to be able to do safeguarding work and one area manager told me that she believed the social workers needed “emotional continence” to do the work effectively. Indeed, not being affected by difficult emotional situations was considered to be a core characteristic of the safeguarding identity and if the social workers were unable to display this characteristic then institutional guardians could legitimately attempt to regulate the social workers' emotions and/or identity through episodic shaming. Episodic shaming provided a direct threat to the social worker's identity by presenting the social worker as not coping, as demonstrated by Donna's experience of being accused of not being emotionally resilient by her team manager:

“Ever since this, “it's been noted that you're struggling and you've lost your emotional resilience and you're not who you were and you're always down”, and this, that, and the other. And I find it quite offensive to be told that you've lost your emotional resilience... I think what was a response to feeling really frustrated about a case and not being able to do anything for the kids [which] got “[Donna]'s weak and she's emotionally unstable”. I can't stop thinking about that comment and it will haunt her [the team manager] forever because it just makes me feel really small and depressed” (interview)

Such experiences not only served to directly regulate Donna's identity but also to indirectly regulate the identity of others in the team who observed or heard about such experiences ensuring that those within the teams were aware of the boundaries for being shamed and for being accepted as a legitimate member of the group. This embedded the expectation of being

unemotional as an appropriate characteristic for the professional identity, as Carla's experience showed:

"[Carla] turns around on her chair to talk to [Amy] and says she has just been out on a duty case and spoken to a teenage girl who told her about the domestic abuse her father gives to her mother. She said this is the one child who has really touched her and it makes her feel sad. She said "I felt like crying but I had to remain professional". The girl had disclosed the father strangling the mother and hitting her since the girl was 3 years old" (fieldnotes)

Despite feeling moved by the suffering of another, Carla demonstrates the intentional emotional work she undertook in her attempts not to feel upset and, therefore, to remain "professional". However, while she acknowledged that she did actually feel upset, the retelling of the story presented a picture of herself as someone who was able to endure emotional hardship and still demonstrate the appropriate institutional characteristics of a safeguarding social worker, thereby claiming to be one of 'us'. Indeed, being upset was seen within the teams as a weakness, as Monica showed when she told me, "I'm not usually a weak person, please let me just tell you this, it is very rare that I get upset" (interview). The institutional message that to be one of 'us' one must be able to survive adversity constructed the conditions for worthiness, as Paula explains:

"when you come into this, there you are, you're a newly qualified social worker, and, okay, you get some guidance, but it is very much about learning about yourself as you go along, and that does help you to just... help you to feel that you're better in – not better in your practice – but that you're a worthy individual, of being a social worker, and I imagine that when you get some really difficult stuff to cope with, that that's really essential, that you feel that you're good enough to be there. I would say especially in Child Protection" (interview)

Having aligned her sense of shame and pride to the institutional boundaries for being shamed and praised, Paula only felt an authentic member of the group, a sense of worthiness, or of being good enough for the group, if she thought she could face and cope with adversity. Further conditions were placed upon the notion of worthiness, however, which provided the message that the social workers had to come into work no matter what the situation, as Amy stated, "you're made to feel like an arsehole for not coming in" (fieldnotes), when she couldn't come in due to the snow. Equally, taking time off for illness could be considered an indication of

weakness, as explained to me by a team manager, “the message is loud and clear: you can’t take time off for illness, well you can, but there are consequences” (fieldnotes). Furthermore, given the potential risk for a child death and the negative media attention, a safeguarding social worker was expected to be able to live with such personal risks. It was not just surviving adversity, however, that was considered an important characteristic of the safeguarding identity but thriving in it, as shown in the message provided by a team manager to her team:

“[The team manager] tells the team that her daughter who is doing a social work degree is going on a placement to a fostering team and says “fostering is where you go to retire, it’s not for when you are young” and makes a comment about the adrenaline of child protection work. [Linda] talking to [the team manager] says she loves “it” in relation to the adrenaline” (fieldnotes)

By defining safeguarding work as more exciting than other types of social work, the team manager defines their work as superior, and one that requires a certain type of person. The social workers often had a higher caseload than the Council’s guideline providing them with more work than they could undertake in the hours they were paid for, and at times it required them to do things which had not been planned, making managing their workload difficult. The dominant narrative about the work in the teams was that it was fast paced, high volume, and complex. To thrive in such conditions it was believed that the social workers had to have a lot of energy and drive, which was represented through youth, as demonstrated by Linda’s experience:

“Linda: When [the team manager] first took me on, [the area manager] asked her if I’d be able to keep up the pace

Me: Why do you think she said that?

Linda: cos of my age, yeah, I was mortified, and me and [the team manager] have shown her... she made a judgement of me before she’d even known me” (interview)

By not possessing the characteristic of youth, sufficient grounds were provided to question the appropriateness of Linda’s appointment within the safeguarding service. The effect was to shame Linda and embed the notion that to be accepted she had to “keep up the pace”. Overall, the construction of a community in adversity and the concomitant characteristics that were considered necessary to survive and thrive in such conditions served as the standards by which

the management sought to regulate the identity of the social workers. Once these had been internalised the social workers not only used these as the standards to evaluate themselves, but also others within the group, as demonstrated to me at the end of a working day as I overheard a conversation between a number of social workers as I walked with them towards the car park:

“They then start talking about [Faye] and said that she come back from leave on Monday and sat at her desk and burst into tears while reading her emails... [Linda] said she has told [Faye] to get out of safeguarding and they discussed that she may be better off in fostering and adoption as she is good with children” (fieldnotes)

While Faye was seen to *be* a social worker (social identity) *doing* safeguarding work (role identity), her claim to *be* a safeguarding social worker (social identity), to be one of ‘us’, was in question as she was not perceived to possess sufficient characteristics to resemble a safeguarding social worker.

CONSTRUCTING A COMMUNITY OF COMPETENCE

The leader was considered within the teams to be a very competent person, as were the team managers, and competence was considered a key characteristic of the safeguarding identity, as demonstrated to me by a team manager:

“there’s no case that comes through here that is even the most complicated, messy, bizarre, horrible ones, there’s no case that we can’t deal with, we know what to do, I know what to do, the social workers know what to do” (interview)

Indeed, they considered themselves to be more competent than other workers given the same situation, as Jane demonstrated:

“I get escalated cases from the [the family support team], “we can’t get in, they’ve been verbally abusive, I can’t get in, oh, they’re screaming, shouting, and swearing, duh, duh, duh”. I go knock at the door, first visit and I’m in the house” (interview)

Being competent meant being able to work on your own, as Faye stated, “[area managers] sort of think you should be able to manage your case load and just get on with it” (interview), while Paula commented, “if you took a worker with you to every single appointment, you’d never get

anything done” (interview). A competent safeguarding worker was therefore someone who knew what to do and how to do it, and usually that they could do this without much support.

Confidence was a key component of competence for this social group. The system required the social workers to be confident about their assessments to ensure the organisation could do what was necessary to keep children safe. To be confident about one’s assessment, the social workers felt they had to be authoritative, as shown by Paula:

“I feel that I can ask virtually any question without feeling embarrassed or worried about saying something. I can be very direct. I speak as I find, to some degree, obviously, with restrictions, because of the profession. But, you know, I can be very open with people. And I can say, “Okay. So why are you doing that?” And, “Why are you in a relationship with this person?” you know, sort of, sometimes difficult questions that we might, generally, as people, find difficult to ask” (interview)

Being a ‘safeguarding social worker’ enabled Paula to ask, with pride and confidence, questions that wouldn’t be asked, or would be embarrassing to ask, as a ‘person’, i.e. not a safeguarding social worker. Such authoritative practice was valorised through those with greater experience who provided stories as a reference point for what could be considered important and natural for a safeguarding social worker to do, as demonstrated by a team manager’s story to me in front of others in the team:

“[the team manager] tells me she had to lock the building when the mother was here to prevent her from running away with her baby. [The team manager] said she took the baby off her there and then” (fieldnotes)

While the display of this authoritative practice was sometimes resisted, not displaying such in-group characteristics were grounds for personal questioning about whether one measures up sufficiently to the in-group, as demonstrated by Monica:

“I do worry that I’m not authoritative enough, but then the families make the changes that they need to so I suppose you don’t have to speak to people like shit in order to get your message across” (interview)

Another significant aspect of the work of a safeguarding social worker was the need to work with other professionals, which brought with it further characteristics associated with being competent, as Carol explains:

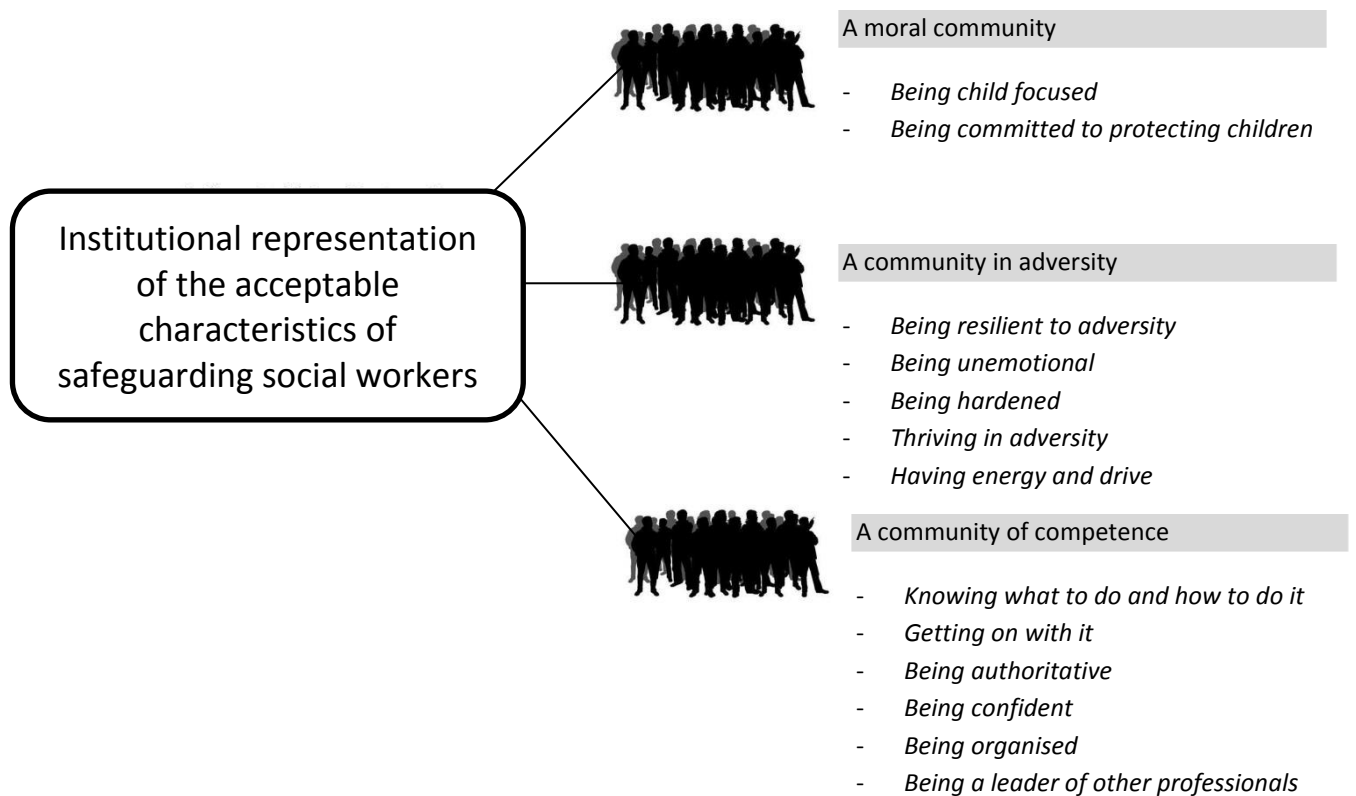
“I think some professional networks see you as that lead person and they see that you should be that - we are really. I know we are the lead agency, that's what we are” (interview)

With the legal and policy framework providing the Council with the main responsibilities within the child protection system, the delegation of work to the safeguarding social workers transferred the ‘lead agency’ into individual ‘leaders’ of multiagency teams. The social workers had to organise and chair the meetings, take the minutes and distribute them, and make the recommendations in relation to the child protection issues. Given the need to organise their own time and work, with the constant pressure of being allocated new cases and the concomitant deadlines, as well as organising other people, organisation was also a key characteristic of competence. Furthermore, being a ‘leader’ enabled the social workers to fulfil the Council’s aim to become a commissioning authority. The social workers were expected to lead the multiagency team, collect information, and have an overview of the situation to be able to refer families to the right service, rather than do the work themselves, as Paula explained:

“a lot of the work that we do is about recognising what services we can put in place for those kids, you know, and just, sort of, being able to have that knowledge and information, so we know where to resource it from” (interview)

The construction of a specific community within the Council that had to operate within certain conditions provided a set of characteristics that were considered important to do the work effectively, defining them as a distinct social group within the Council. Through interaction, the social workers learnt the acceptable or praiseworthy characteristics, and conversely the unacceptable or shameful characteristics, which provided a clear institutional representation of a safeguarding social worker that can be summarised in Figure 5.2.

Figure 5.2: Institutionally acceptable characteristics for the safeguarding social worker



POLICING AND DETERRING DEVIATION FROM THE INSTITUTIONAL REPRESENTATION

The primary mechanism for the institutional reproduction of the safeguarding service was the safeguarding identity. The above discussion outlines the general process for identity regulation, namely using discursive practices to construct an institutional representation of a safeguarding social worker and using episodic shaming and praising to support and embed this into the social workers' identities by making known the conditions for being shamed or praised, which, once learnt, aligned one's sense of shame and pride to these conditions. In attempts to avoid being shamed, and seek to be recognised and accepted, the social workers operated within the confines of these boundaries, thereby becoming 'safeguarding social workers'. A useful metaphor for this process is that of a road. A road has boundaries that define where a car can legitimately and safely drive, the road has rules that define how a car can be legitimately and safely driven on the road, and one can be considered to be an excellent or a poor driver. With the social workers

learning the conditions for shame and pride they learnt the boundaries of the safeguarding identity that defined what and how they could legitimately and safely do, and could be considered to be excellent and poor in doing it. However, just as there needs to be processes to maintain the rules of the road, Lawrence and Suddaby (2006) argue that “relatively few institutions have such powerful reproductive mechanisms that no ongoing maintenance is necessary” (p.229). Just as driving is policed and drivers deterred from breaking the rules, Lawrence and Suddaby (2006) go on to argue that policing institutional arrangements and deterring institutional change are some of the tactics used by institutional guardians to maintain the institution. Given that the primary mechanism for institutional reproduction was the safeguarding identity this meant policing the boundaries of this identity and deterring deviation from it.

Policing the safeguarding identity can be marked out as a distinct form of identity regulation on the basis of it being a much more humiliating experience, akin to Garfinkel’s (1956) notion of a degradation ceremony. While the legitimacy for such institutional use of humiliation was argued to be on the grounds of transgressing a role expectation, it crossed the fuzzy boundary between the role and social identities to denounce the transgressor as a failure at performing the role and of not being one of ‘us’. Donna recalled such an experience in a team meeting, where the health and safety officer had attended to talk the team through the Council’s occupational stress risk assessment form. While the specifics of Donna’s experience were not typical, the process was:

“[Donna] explained to the health and safety officer that “I had 88 cases and I worked 9 til midnight every day”... She said at that time an email went round with a list of all the social workers names on with the number of cases they had... She said her name was on the top of the list highlighted in red and that she was told that she had too many cases because of her time management so she had to photocopy her diary and account for every minute of her time. She spoke with a slightly raised voice and spoke quickly and forcefully. She said “it was the most humiliating experience of my professional life” and said “it feels like being punched”. She said she acquired 300 hours toil [time off in lieu] during this time and one day when she was not at work “I was called and someone told me to cancel my 300 hours toil because how dare I have that amount of toil with 88 cases”, implying that it was her fault she had too many cases therefore she was not entitled to the toil she had accrued. She stopped talking, stared into space, bit her top lip and her eyes welled up.

No one asked her about how she was feeling or attempted to comfort her. She said “I was put on medication”” (fieldnotes)

Donna claimed that it was the effects of the reorganisation that threatened her identity as a social worker. This, however, was turned on its head by the managers who presented Donna as a threat to the identity of the organisation. From their perspective Donna had broken the role expectation for responsibility, while at the same time not displaying the necessary safeguarding characteristic of competence. Donna’s identity as a responsible and competent social worker was, therefore, publically denounced in such a manner, as to be a painful humiliating experience, constructing a new spoiled identity (Goffman, 1963) that was not one of ‘us’, as Donna told me in her interview:

“...your name goes round on a blacklist round [the Council] and that’s how you’re introduced to team managers, as the person in [the Council] with the most cases” (interview)

Donna’s options to validate her professional identity were either to leave and work for an inferior local authority, itself an identity threat, or to comply with the expectations and standards within the Council in an attempt to earn sufficient social acceptance and status to reclaim her identity. The systemic shame within the Council had been asserted and Donna’s sense of shame aligned accordingly. Such a process served to defend the institutional representation of a safeguarding social worker through deterring anyone from deviating from what was considered ‘professional’, as the threat of such an experience was widely felt through the retelling of the story by everyone in the team. Within both the teams, such experiences were not uncommon. For example, Christine, having been perceived by the area manager to have not followed certain procedures, which Christine denied, she was considered to have transgressed the expectation for compliance and the characteristic of competence. She stated that she was shouted at by a manager in the team room, was stopped from working on EDS for 3 months, which Christine believed was “to frighten me”, and was sent to occupational health for a cognitive functioning test. Her claim to be a safeguarding social worker was publically denounced by the manager who recast Christine as a

dangerous and incompetent worker, i.e. not one of 'us'. She said this experience had made her feel "worthless" and "hurt" and told me she felt "humiliated". To prove her worth as a safeguarding social worker to the senior managers, Christine had to work long hours, which took a significant personal toll with her saying she couldn't eat or sleep and that she dropped a dress size in a week. All those in the team were aware of this humiliating experience ensuring everyone knew that the boundaries for action would be policed through shame and humiliation, further heightening the systemic shame within the Council, ensuring all workers produced work to an 'acceptable' standard, in a 'professional' manner.

THE INSTITUTIONAL REPRESENTATION OF A SAFEGUARDING SOCIAL WORKER: A SUMMARY

Bourdieu and Wacquant (1992) argue that identities describe the relationship between the actor and the field in which that actor operates. The historical and traditional discourses within the profession provided the social workers with a fairly common view of their understanding of their relationship to those they worked with and their place in society, as Christine, a social worker with over ten years of experience, explained:

"my ideal social worker is [Alice] on the [other] team. She is a social worker's social worker. She's somebody who would put aside paperwork and spend time, at her own detriment, really... she's old-style social work, where she'll go in and she'll spend the time, and she'll have a phone, and she's on-call to the family, if needed, you know, 24/7. And, you know, we've moved away from that. We can't be like that anymore. But, if I wanted a social worker, it'd be [Alice], and most people I know would say that" (interview)

As Christine highlights, however, the new arrangements not only prevented the social workers from practising in a manner consistent with their idea of traditional forms of social work but also that *they* were no longer able to *be* the type of social worker that would practice that type of social work. Indeed, all those who had over ten years of experience commented on the change in what they had to do and how they now had to be. In other words, they believed there had been a

change in the relationship between the actor and the field, i.e. the identity, as Linda made clear to me in the team room:

“She said that “the worm has turned” in practice and that while Munro said they should bring the old social workers back to practise there would be no point because they don’t fit in with the new way of working. She said they would be like a fish out of water” (fieldnotes)

While the inspectorate can be considered to have undertaken purposive action to regulate the identity of the organisation, the organisation can be considered to have undertaken purposive action to regulate the identity of the social workers. Indeed, as Deetz (1995) argues, “the modern business of management is often managing the “insides” – the hopes, fears, and aspirations – of workers, rather than their behaviors directly” (p.87). It has been argued that the role of self-conscious emotions, specifically shame, humiliation, and pride have been central to these attempts to regulate the identities of the social workers to create what we might consider to be the ‘appropriate’ or the ‘right’ professionals. The systemic shame and pride embedded into the new service provided legitimate grounds for episodic shaming and praising, making the boundaries for the institutional representation of a safeguarding social worker known. In attempts to avoid being shamed and rejected and create the conditions for experiencing pride and acceptance the social workers aligned their sense of shame and pride accordingly, embedding the institutional meanings and expectations into the social workers’ safeguarding identity. Self-conscious emotions can, therefore, be considered to play a central role in the construction of the ‘right’ organisation and the ‘right’ professionals. The result was an institutional representation that can be considered to consist of prototypical characteristics that are shared within the social group (Hogg and Abrams, 1988) and standards for how to perform the role (McCall and Simmons, 1978). The culmination of these expectations can be considered to have created a Weberian ideal type (Weber, 1978), as one team manager explained:

“Me: If you were to describe the ideal type of social worker that you think the organisation wants, what would that look like?”

Team Manager: Somebody who ticks all the boxes and meets all the timescales, makes all the deadlines, satisfies the performance indicators, can work 60 hours a week and not get ill or complain they're tired, somebody who isn't affected by their emotions and their dealings with human nature. I think somebody robotic really... if you appear to meet all your timescales and you appear to be fully compliant and doing everything quietly, without complaint, not causing any problems anywhere, then you're pretty much what's required" (interview)

Self-conscious emotions can be considered to be at the heart of the institutional processes of identity regulation that created and maintained the desired institutional arrangements, actions, and practices. The implication of this new context was that anyone who failed to develop an adequate safeguarding identity in the eyes of the institution would not be able to do what was required in a manner that was considered appropriate or professional. Given this context, we can now consider the responses of the social workers to these processes of identity regulation to consider the experience of both the social workers and those who interact with the social workers.

CHAPTER 6: A CONCEPTUAL FRAMEWORK FOR THE STRATEGIC RESPONSES TO INSTITUTIONAL PROCESSES OF IDENTITY REGULATION

While we can conceive of the processes that construct and define an institutional representation of a safeguarding social worker, along with the processes to regulate and police adherence to this representation, the social workers could not simply be considered as institutional automatons. Even when they engaged in habitualised routines and practices that conformed to all of the meanings and expectations of the institutional representation, they did so with awareness and purpose (Battilana and D'Aunno, 2009). Furthermore, while a social worker could actively identify with the institutional representation, they could also actively resist it (Breakwell, 2001; Duveen, 2001), with a range of possibilities in between (Oliver, 1991). Further still, one social worker could actively identify with it in one context while actively resisting it in another. This chapter, therefore, provides a conceptual framework to understand the internal processes by which social workers came to identify with, or resist, the institutional representation. These processes can be considered to lay the foundations for the strategic responses to the institutional processes of identity regulation that are used to organise the following chapters.

THE ANALYTICAL FRAMEWORK

The pragmatic argument is that we are temporally embedded in a process of social engagement (Dewey, 1929a; Mead, 1934; Emirbayer and Mische, 1998). While we are continually receiving new sensory, bodily, and perceptual information (Barrett et al., 2014), we develop knowledge of our physical and social world by categorising this information to create concepts, memories, associations, beliefs, predictions, etc. which we can use to give meaning to new situations (Hobbes, 1651/1969; Peirce, 1878; James, 1898; Mead, 1922; Berger and Luckmann, 1967). This meaning is established by (1) relating sensory information to our past, i.e. our store of conceptual and experiential knowledge, to categorise the agents, objects, setting, behaviours, events,

properties, relations, and bodily states that are present (Emirbayer and Mische, 1998; Barsalou, 2009); (2) relating these situational meanings towards the future to imagine alternative possibilities (Emirbayer and Mische, 1998) and draw conclusions that go beyond the information given (Barrett et al., 2014); and (3) contextualising these past and future orientations within the present moment to conceptualise the situation and decide how to act (Emirbayer and Mische, 1998). This process can be considered to be a situated conceptualisation framework (Barsalou, 2009), as we construct novel 'situated conceptualisations' in the present which are informed by our past and imagined future.

The variations within and between the social workers' practice can be understood through their situated conceptualisations. For example, there was a belief within the teams that decisions were made based on the 'facts' of the case, as demonstrated within one of Helen's assessments:

"I considered the historical nature of the Local Authority's involvement with this family, exploring the support previously implemented to support [the mother] with the care of her children. I also gave consideration to the ages and individual needs of the children, [child 1] and [child 2] both falls within the most vulnerable age groups of children" (written assessment)

Yet the role of self-conscious emotional experiences in the process of conceptualising a case as either a 'safeguarding case' or not, as a 'high risk case' or not, etc. could be observed routinely, as Monica demonstrated following a visit to a mother who had ended a relationship with a man who had been violent towards her:

"[Monica] questions if she can trust the mother, as the mother had not told children's services that she had got back together with that man last time when she was not supposed to. [Monica] says she worries that something will happen and that she has missed something. I asked her what would happen if something does happen and she says "my practice will be questioned and I will end up on the front of the Sun"" (fieldnotes)

Despite the mother having ended the relationship, changed her phone number, and having called the police when the man came to the home, these 'facts', i.e. situational meanings, were related to her *past* experience that told her that things can go wrong and social workers can be blamed, and *imagined* that this could happen to her. Given that this posed a threat to her identity as a

safeguarding social worker, she was able to categorise the case as posing a risk to the child and use her resources to keep the case open, thereby offering some protection from being shamed by being beyond blame under scrutiny. This scenario can be contrasted with Donna's experience of a situation that she had categorised as a case of fabricated illness and had used her resources to call a child protection conference. Her manager, at first, disagreed with this course of action and asked her to cancel the conference, before then changing her mind and agreeing a conference was necessary. As the parents had made a formal complaint about Donna, rather than reorganise the conference Donna used her resources to protect her social worker identity from an *imagined* criticism for such action, as she explained to me:

“In the team room [Donna] is sitting at her desk doing work and says to me that [the team manager] had admitted to her that he had made a mistake by pulling the child protection conference on the fabricated illness case. I asked if that meant they were now going to go to conference and she said “no, I'd look like a right idiot”” (fieldnotes)

As these cases indicate, the role of identities and self-conscious emotional experiences were central to how the social workers perceived the situation and decided what they should do. As these cases also indicate, however, the social workers were embedded within the structure of the institution and subject to the institutional processes which exerted an influence on how they thought, felt, and acted. Given that the social workers were being evaluated against, and had been made aware of, a set of meanings and expectations, i.e. the institutional representation, social workers in some contexts can be considered to have identified with this institutional representation and therefore sought to practise in a manner consistent with these meanings and expectations. While social workers in other contexts disagreed with these meanings and expectations and, therefore, not only dis-identified (Pratt, 1998) with the institutional representation but also sought to resist the institutional processes of identity regulation. The factors that could be considered to have led to identification or resistance were (1) the level of conflict between the person's identity-meanings and those within the institutional representation; (2) the level of empathy they felt for the family they were working with; and (3)

the level of emotional safety they felt in the situation. Each of these factors altered how the situation was conceptualised, and are outlined below.

THE LEVEL OF CONFLICT BETWEEN IDENTITY-MEANINGS AND THE INSTITUTIONAL REPRESENTATION

Identities can be thought of as concepts, or representations, containing a set of meanings and expectations (Mead, 1934; Stryker, 1980; Burke and Stets, 2009). These then provide the means to make behavioural choices and decisions when that identity is activated (Burke and Stets, 2009). An identity is activated when the person perceives that situational meanings in the environment are relevant to the identity meanings (Carter, 2013). Being at work, for example, employed as a social worker, would activate one's social worker identity. Of course, each situation holds a range of different meanings activating multiple identities in the same situation. A social worker may have their identity as a woman, a moral person, a social worker, and an employee all activated at the same time. With multiple identities activated, there are many possibilities for how these identities interact with one another, influencing how one thinks, acts, and feels. For example, there may be conflicts between what a person believes they should do as a moral person and what they believe they should do as an employee. Furthermore, there are many possibilities for how these identities interact with other people. For example, a person acting as a social worker in the moment may interact with a parent very differently to how they might if they met them in a different role or social situation. One's representation of the self in the moment, therefore, stems from a process of relating the situational meanings *back* to their store of identities (their self-concept), towards the *imagined* future, while addressing the *presenting* issue.

Miller (2010) argues that the development of a person's social worker identity begins prior to, continues during, and develops further, following the formal socialisation process that leads to a professional qualification. While the discussion so far has mainly focused on the creation and maintenance of the safeguarding identity after formal socialisation, as Miller (2010) implies, the

social workers did not begin working within the Council as a blank slate, ready to accept cultural norms, values, and expectations without question. The social workers had all had experiences prior to successfully engaging in formal education programmes and attaining a recognised qualification, which provided them with a range of meanings they had already associated to their social worker identity. Consistent with the historical foundations and values of the profession, the shared characteristics that were considered to make one a social worker were being respectful, caring, and understanding, together with being open and honest with people. The social work role was considered to be “an important job to do on behalf of society”, as one team manager told me, which related to helping those in need, as Carol demonstrated:

“you can see that families can change. Change can happen and it can be sustained. It's not always sustained with some families but when it does you feel you are here for a reason, a purpose. We are serving a purpose and it's all the hard work you've put in to getting here into your job as that's what it's for” (interview)

Consistent with findings from identity theory research (e.g. Thoits, 1983, 2003), the above comment from Carol was typical of the social workers in the teams that performing the role of a social worker provided them with meaning and a sense of purpose. Social work was therefore seen as much bigger than the team, department, or local authority in which they worked, providing a sense of belonging to a wider community which offered possibilities for alternative meanings in constructing their professional identity (Yuval-Davis, 2006). In some contexts, therefore, the institutional meanings and expectations were inconsistent with a social workers' already established identity-standard, i.e. the set of meanings for that identity, while in others there was no conflict. The former contributed to social workers feeling prevented, or at least constrained, from practising in a manner that they wished to practise, which lay the foundations for resistance to the institutional processes of identity regulation. While the latter contributed to social workers identifying with the institutional representation, leading to comments such as, “there's nothing that's preventing or prohibiting me in practising in a certain way, which is how I practise now” (interview), as Melanie stated.

THE LEVEL OF EMPATHY FOR THE FAMILY

For the classical pragmatic philosophers³², empathy was considered to be an internal emotional experience resulting from taking the perspective of another. Indeed, Dewey argued that empathy required one “to put ourselves in the place of others, to see things from the standpoint of their purposes and values” (Dewey and Tufts, 1909, p.334). From such a perspective, empathy is an active imaginative process. One’s capacity for empathy can, therefore, be considered to be both temporal and contingent upon a range of situational factors that may help or hinder an individual’s imaginative engagement with another’s social world. What one is doing, such as being engaged in a difficult task or rushing to finish a piece of work for a deadline, can focus one’s attention on these tasks and reduce both the attentive and imaginative capacity that an individual needs for empathy, as demonstrated by Jane:

“when I have to visit places like [faraway place] and [faraway place] and [faraway place] and [nearby place] on the days when I’m supposed to be writing up, you know, I think everything else gets left and, you know, I should, you know, my minds back at the office, “I should be doing that”, rather than, you know, travelling 400 miles, you know, to do, to do a visit” (interview)

Furthermore, feeling shame can refocus one’s attention onto the self, reducing the focus on the experience of the other (Leith and Baumeister, 1998). What the social workers were doing, and how they were feeling, were observed to significantly affect the social workers’ capacity for empathy with the family. This was demonstrated by Melanie following a meeting where a father was angry at her for the children being made subject to child protection plans and he had heavily criticised her during the meeting:

“Sitting in the team area [Melanie] is talking to [Linda] and [Gill] and tells them about the core group meeting yesterday and describes it as horrendous saying it was a “beeline” for [Melanie]. [Gill] said “he’s horrible” and [Melanie] said “he’s vile”” (fieldnotes)

³² James, Dewey, and Mead often referred to sympathy rather than empathy. However, as the word ‘empathy’ was not introduced into the English language until 1909 (Greiner, 2015) it was not in use at the time of much of their writing. A review of their discussions can be considered to be closer to what we term today as empathy.

With Melanie being focused on following the child protection policies and procedures and feeling criticised/shamed by the father in the meeting, she had little capacity to foreground the father's frustration and experiences in her conceptualisation of the situation. Conversely, having time and space to proactively consider how another person may be experiencing a specific situation was observed to support the processes a person needed for empathy. Indeed, there were examples of significant contrasts between how some social workers spoke about service users in practice and how they spoke about them in the interviews. While this is long standing issue in social research (Bryman, 2012), the interviews could be seen to provide time and space from the institutional pressures for the moral identity of the social workers' to become more salient, as shown by Amy:

“we are all people. I'm no better than them. They're just in a situation where they need help, aren't they? I'm not in a situation where I need help with children or all of those things... And it's not because, you know, like a lot of people, like, my friends go, “how do you work with scumbags like that?” Well, they're not scumbags. They have had a different path to me. They have had a different way of doing things. Have had different parenting, all of those things, and they have a different education to me. And it's about a level of understanding of that. So it doesn't make me go in and go, “I'm better than you”, because I'm not. I'm not any better. We're all just people, aren't we? And that's important to remember that” (interview)

Accepting that the context affected the social workers' attentive and imaginative capacity, the ability of a social worker to empathise with family members could be considered to vary depending on the context. This variability can be thought of as a continuum, with high empathy at one end and low empathy at the other (Baron-Cohen, 2011³³), which affected a social workers' conceptualisation of the situation. This process can be seen in a conversation I observed in a team room:

“[Gill] says that the mother is a “dick”, which [Amy] repeats is true and adds that the mother and the father left the child in hospital after she had given birth and questioned why they didn't want to stay with their new born baby. [Linda] disagreed that this was a sign of not wanting the child or not caring saying that when you have had a baby you have hormones and they are all over the place and they are in a situation where social workers are saying they will remove the child if they try to take the child from hospital. [Gill] disagreed with [Linda] saying that the parents “could have worked with us and had a different outcome” adding “mum made her choice”” (fieldnotes)

³³ Baron-Cohen states his theory of empathy is grounded in psychology essentialism, which is rejected here; however, his notion of an empathy continuum is a useful one for this analysis

As this was Gill's case, she could be considered to feel the systemic pressures within the Council more keenly, heightening her sense of shame and pride. Her focus was on making sure the child did not come to harm in the future and that she was not criticised for making mistakes. Her capacity for empathy with the mother was therefore lowered, while Linda, less burdened by the institutional pressures and expectations for that case, was more able to foreground the experiences of the mother and imagine alternative possibilities. Their different positions, with different pressures, altered their situated conceptualisations by altering what was considered relevant from their *past*, how they imagined the *future*, and, therefore, how they understood the *present*. This led Gill to identify with the institutional representation, while Linda dis-identified with it.

THE LEVEL OF EMOTIONAL SAFETY IN A SITUATION

With the social workers knowing the conditions and consequences for being shamed and praised, inevitably the social workers sought to avoid being shamed. There were some situations, however, where the social workers felt more vulnerable to being shamed than in others, while there were other contexts in which the social workers felt more able to deviate from institutional prescriptions. While Edmondson (1999) uses the term "psychological safety" to refer to a shared belief within a team that it is safe for members to speak out and take risks without being criticised, Marx (2001) uses the term a "just culture" to refer to the belief within an organisation that an employee won't be blamed for making honest mistakes or failures in the system beyond their control. Both concepts indicate the threat of shame not only guides action in a direction to avoid practitioners being shamed but also that it silences them, limiting the individual and the organisation's ability to learn and improve. Linked to these concepts, Catherall (2007) explicitly identifies shame as the core component in his notion of "emotional safety". He confines this to a feeling two people have in their romantic relationship and defines it as a shared belief that there is no threat to their identities within the relationship or to the relationship itself. He argues that

such a feeling results in increased trust and greater benefit of the doubt in questionable situations. Where a person feels that their identity or the relationship is threatened, Catherall (2007) argues that those in the relationship feel emotionally unsafe and are therefore more suspicious and distrustful of the other's actions and motives. Expanding Catherall's (2007) concept, we can conceive of emotional safety in an institutional context as the feeling of being protected from being shamed, both in the present and in the future, as demonstrated by Donna:

"it is why I have faith in [the team manager] because she has had a child death and she couldn't possibly have predicted it and she wasn't found responsible. But, in that respect, I do think she would be, as much as she is able to be, there for you... I think it makes her the manager that she is... But that's how I've always felt about [the team manager]. It's why she's so cautious and that's why I feel quite safe being a practitioner on her team" (interview)

Donna feels "safe" because she believes the team manager not only understands the actions that she has taken, or will take in the future, but also supports her in making decisions that will protect her from being shamed. Feeling emotionally safe meant that her identity as a social worker, and her position within the Council, was not threatened, or at least the possibility of being shamed was reduced. Conversely, feeling emotionally unsafe was a negative experience resulting from a belief that they were vulnerable to being shamed and rejected, as demonstrated by Donna in a different situation:

"[Donna] told me she was "pissed off" but that she can't say too much because she doesn't feel that it is "safe". I ask why and she said that someone in the team has told [the team manager] that she has been having melt downs and she suspects this is [Jane]. She said [the team manager] spoke to her and told her she was emotionally unstable and [the team manager] then told the area manager who has arranged to go out for coffee with [Donna] and [the team manager] to sort it out. She said that she isn't going to say anything to [the team manager] or in front of others in the team room as she doesn't feel she can express her opinions saying "I thought that's what social work was about"... She said "I thought [the team manager] had my back but she doesn't, she has her own"" (fieldnotes)

Such contrasting views from Donna demonstrate not only the situational and contextual nature of emotional safety, but also the role of the institutional processes of identity regulation. It was the episodic shaming that the social workers sought sanctuary from. How emotionally safe a social

worker felt influenced the overall conceptualisation of the situation by altering what was considered relevant from their *past* to the current situation, how they imagined the *future*, and therefore the perceived possibilities for action in the *present*.

RESPONDING TO THE INSTITUTIONAL PROCESSES OF IDENTITY REGULATION

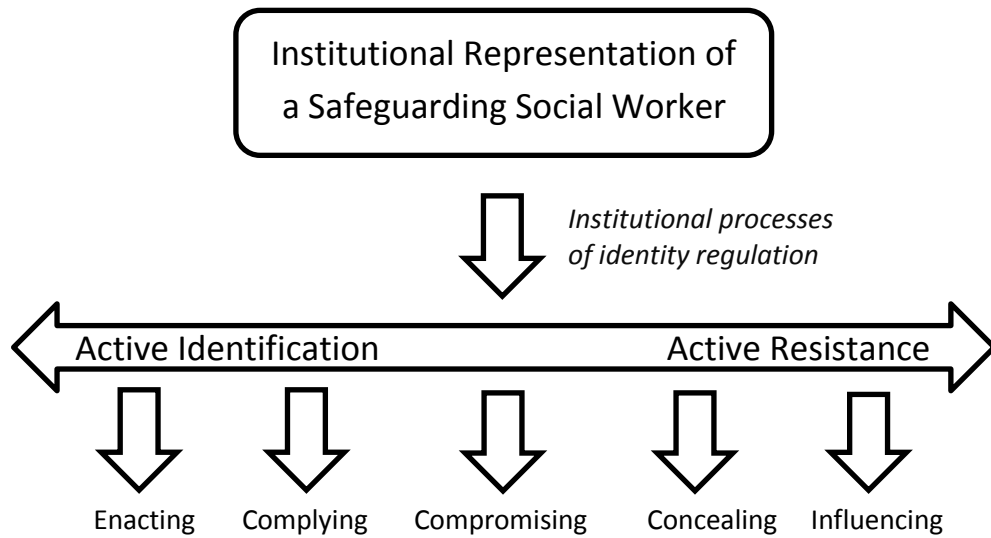
The systemic shame and pride provided a constant force on the social workers conceptualisation of the situation. The episodic shaming and praising served to reinforce the institutional pressures and expectations when these had been transgressed or adhered to. Together, these shaped the social workers sense of shame and pride, which influenced who the social workers thought they were in a situation, what they thought was expected of them, how vulnerable they felt to being shamed or humiliated, and how empathic they felt towards the people they worked with.

Considering these issues the social workers could identify with some aspects of the institutional representation while resisting others, creating a complex mix of possible internal responses.

Oliver's (1991) typology of strategic responses to institutional processes provides a useful foundation to analyse the external behavioural responses of the social workers, which could be categorised on the basis of shared characteristics. Where social workers reported thinking, feeling, and acting in a manner consistent with the institutional representation, even habitually, these could be considered as an enactment of the institutional representation. Social workers could, however, internally resist the meanings and expectations of the institutional representation yet still act in accordance with them, which could be considered as compliance. Greater levels of internal resistance were recorded in some situations that meant the social workers felt they could not adhere to the pressures and expectations and therefore sought to compromise, conceal, and influence institutional sources and processes, in behaviour that could be considered to express increasing levels of resistance. This view, provided in figure 6.1, provides an analytical framework to understand the role of self-conscious emotions in child protection

practice while exploring the experiences of the social workers and those who had to use the safeguarding service.

Figure 6.1: Conceptual framework for the strategic responses to institutional processes of identity regulation



The following chapters provide an analysis of these responses, with forms of identification, i.e. enacting and complying, being considered in chapter seven, and forms of resistance, i.e. compromising, concealing, and influencing, being considered in chapter eight.

CHAPTER 7: FORMS OF IDENTIFICATION

A social worker could be considered to have identified with the institutional representation of a safeguarding social worker when they practised in line with the institutional meanings and expectations. Some social workers, however, willingly practised in such a manner, which can be considered to be an enactment of the institutional representation, while others reluctantly so, which can be considered to be a conforming to the institutional representation. Enacting had minimal conflict between the social worker's identity-standards and the institutional representation through the social workers accepting the institutionally constructed and promoted interpretive framework; a low level of empathy for the family members as a result of holding them responsible for wrong-doing; while seeking to create emotional safety for themselves by acquiescing to the institutional norms, pressures, and rules. Social workers who complied, meanwhile, did not accept the meanings and expectations associated with the institutional representation as their own. Indeed, there were greater conflicts between the social workers' identity-meanings and the institutional representation, greater levels of empathy for the families, and a greater sense of vulnerability to being shamed. Consequently, compliance could be categorised on the basis of social workers feeling unsure of how to act but prioritising shame avoidance, while at the same time seeking to alleviate any subsequent feelings of shame and guilt so that they could continue to comply. This chapter outlines the conditions for enacting followed by an analysis of the effects of such a strategy on the social workers and the families they work with, before outlining the conditions for complying and the subsequent effects.

ENACTING THE INSTITUTIONAL REPRESENTATION

ACCEPTING THE INSTITUTIONAL INTERPRETIVE FRAMEWORK

As the institutional interpretive framework provided meaning to both the 'means' and the 'ends' of safeguarding work, a social worker willingly sought to enact the institutional meanings and expectations where they accepted it. The belief that a child would benefit from being placed in the care of the local authority provided the meaning for the 'ends', as demonstrated by a conversation within the team room:

“[Amy], [Linda], and [Gill] are sitting at their desks discussing removing children as [Amy] is due to remove a child later that day with [Helen]. [Amy] says that it is not nice but the conversation moves quickly to talk about certain children they know who have thrived in foster care. [Linda] chips in that it is like miracle grow for flowers” (fieldnotes)

While the belief that procedures could be used to change the behaviour of parents and carers provided meaning to the 'means'. Procedure could, therefore, be considered to be used as a mechanism to regulate the identity of parents to change their behaviour to something that was more acceptable, as shown by Lucy when she explained to me what she was doing:

““it's procedure. It's what we do when we have an incident. It also sends a message”. I ask “what message?” and she says “that it is serious so he won't do it again or he could lose his children”” (fieldnotes)

Being able to achieve behavioural change in the parents provided a foundation for pride in the social workers as this could then be perceived to have been beneficial, on the whole, for the children and family, as described by one team manager:

“I do actually feel proud to be a social worker, I'm glad I'm a social worker... I believe in what we do, I think we do make a difference, we're not perfect sometimes, we make things worse, but yeah I'm glad I'm a social worker” (interview)

The meaning of the day to day work of the social workers, however, was less clear. For example, they were routinely engaged in administrative work on a computer in the office. When asked, the

social workers generally stated that they spent about seventy to ninety percent of their time doing administrative tasks, which was supported by my observations and consistent with previous research (Baginsky et al., 2010). This administrative work, however, was still ascribed meaning because it was considered important for the family, as Carol explained:

“Timing is such a right. You've got to have timely assessments. Children and families need to know where they stand. They need to know what is expected of them. They need to know in a timely way. Not just that, but if the family needs support and help that needs to be put in in a timely manner, it's not delayed. That's the pressure. That's what you're doing it for. You try to get that service in or you're trying to get the risk management plans together because you know that the child's at risk and you should be doing that in a timely way” (interview)

Furthermore, the administrative work was ascribed meaning because it provided opportunities for the social workers to feel proud. For example, “Completed 2 assessments and closed 2 cases” and “Supervision – felt I have improved (got back up to date) and TM [team manager] pleased with progress” were recorded as pride in the diary entries. Equally, being prevented from being able to perform the administrative tasks to a high standard provided opportunity for shame, as Julie described:

“She complained that she had to complete 4 reports for the meeting next Monday but she works part time and has meetings all booked up in the days she is in. She put her head in her hands and said “I don't care” and then said “that's not true, the problem is that I do care”. She then said “I tell you what it makes me feel, inadequate, like I can't be a good social worker”, “I take pride in my reports being robust but it's not good enough” referring to the one she is writing” (fieldnotes)

Accepting the institutional interpretive framework provided meaning to the social workers for what they did and how they did it, reducing any conflict between the standards they evaluated themselves against and the standards they were being evaluated against by others.

ASSIGNING RESPONSIBILITY FOR WRONG-DOING

It was only necessary to perform safeguarding work if there was a child in need of protection. The work of the safeguarding social workers was, therefore, inherently tied to identifying the harmful actions of others towards children. Where there was no harm, or there was no person to protect

the child from, there was no role for a safeguarding social worker. The social workers, however, not only sought to identify the harm a child had suffered, but more often sought to predict the harm a child may suffer, which involved interpreting the motivation for such behaviours. As White (2003) argues, social workers are often engaged in moral judgements and issues of blame and responsibility. If a parent was considered to have been responsible for any wrong-doing that contributed to harm, or potential harm, to a child, either through omission or commission, then they were blamed and action needed to be taken to protect the child. The process of blaming a parent, or otherwise, can be understood through adapting the sociological accounts for personal behaviour in negative self-evaluative situations (Scott and Lyman, 1968; Tavuchis, 1991; Arluke and Hafferty, 1996). From this perspective, when a person breaks a social convention or does something immoral, they can engage in motive talk to recast the meaning of their behaviour and avoid the negative evaluation of the self (Mills, 1940; Goffman, 1971). While a person can accept responsibility and either accept wrong-doing, leading to apologies (Tavuchis, 1991), or deny wrong-doing, leading to justifications (Scott and Lyman, 1968). A person can deny responsibility and either accept wrong-doing, leading to excuses, or deny wrong-doing, leading to absolutions (Arluke and Hafferty, 1996). These accounts of personal behaviour are summarised in figure 7.1.

Figure 7.1: Assigning of wrong-doing and responsibility to self (Arluke and Hafferty, 1996, p.222)

| | | Wrong-doing | |
|----------------|--------|------------------|-----------------------|
| | | Accept | Deny |
| Responsibility | Accept | <i>Apologies</i> | <i>Justifications</i> |
| | Deny | <i>Excuses</i> | <i>Absolutions</i> |

This approach to the personal motive-talk, however, can be seen as one side of the evaluative coin. The other side relates to how the person interprets the situation and assigns or denies wrong-doing and responsibility to another. While a person could excuse, justify, and absolve the actions of another, they could also assign responsibility for wrong-doing and blame them. The legitimacy for blaming a parent was perceived as unambiguous in some situations, as the following interaction demonstrates:

“[Amy] is talking to [Mandy] while sitting at their desks about the “starved child” that [Amy] had written the Court reports for the other day. She says they got an ICO and [Mandy] punches the air and says “get in”. I ask her why she says that and she then says that she doesn’t usually do that when they remove children but this was a particular case. [Amy] says that it was “intentional abuse” and [Mandy] says she didn’t like the father and [Amy] responds saying “he’s a tosser that’s why”. [Mandy] said that the child was developmentally small for her age and that the parents must have done some damage to her future development. She said “that is reason I do my job” referring to removing the child from the abusive home” (fieldnotes)

To Amy and Mandy the father was clearly responsible for the wrong-doing towards his daughter, activating their safeguarding identity and motivating them to do something to protect her. Blaming the father and focusing on what they had to do to find and place the child in foster care reduced their capacity for empathy towards the father and the family. Being unhindered by feeling the distress for the parents, removing the child from their family did not trouble their conscience. Furthermore, as such actions lived up to institutional expectations, they were able to verify their safeguarding identity and feel proud of what they had done. It was, therefore, both legitimate and socially acceptable to express pleasure in being involved in removing the child from her family. While not all parents were blamed, indeed some were considered not to be responsible for wrong-doing and such cases were closed or referred to other services, it seemed to be a cultural response to assign blame even in ambiguous situations, as Melanie explained:

“She commented that the mother was “failing to protect” her children and then that “we blame the mother, because that’s what we do” recognising that the father was the person posing the risk but they expect the mother to protect the children” (fieldnotes)

The moral judgements behind such blaming were made clear in the discussions within the teams and in the documents the social worker produced, as demonstrated in one assessment that concluded, “this raises concerns regarding [the father]’s integrity”, while another, written by a team manager, stated:

“The social worker asserts that [the mother] loves her children and wants the best for them. I would question whether or not this is true as the parenting portrayed here is not that of a mother who wants the best for her son. What I read is that [the mother] is intractable and unmoveable, rigid in her thinking... [The child] is suffering from episodic punitive parenting and living in an environment that features high criticism and low warmth... [The child] receives inconsistent care and must be in a state of high arousal never knowing whether his mother is going to be kind or cruel” (written assessment)

This statement demonstrates how moral judgements contributed to a social worker’s conceptualisation of the situation. The perception that there was someone to blame for a child needing protection resulted in the meanings and expectations held within the institutional representation seem reasonable and desirable.

ACQUIESCING TO INSTITUTIONAL EXPECTATIONS TO CREATE EMOTIONAL SAFETY

As the social workers believed that they would be blamed if a child was harmed, the context was often described as a “blame culture”. Social workers also believed that they would be held responsible not just for the safety of the children in the present but for what happens in the future, heightening their sense of shame in the process of conceptualising a situation. Where a situation was categorised as explicitly posing a risk to a child’s safety, it was also categorised as implicitly posing a risk to the identity of the social worker, as demonstrated by Donna:

“I had a day where I was fairly upset about a case before I went away and I was genuinely concerned for the children's safety and I would have - because I always talk about the case, not once did I get given the time of day to ask me about why I was so worried. “Don't worry. Don't worry about it. It will be fine.” What if it's not fine? It's on my head and I don't feel like anybody's got my back above me” (interview)

Enacting the institutional representation increased their feeling of emotional safety by offering protection from being shamed or humiliated. For example, a typical situation was of a social

worker prioritising the administrative component of the work at the expense of the relational component, as demonstrated in a session between Donna, a Child and Adolescent Mental Health Service (CAMHS) worker, and a mother:

“As they discuss issues [Donna] spends most of the time making notes with her head down while the mother and the CAMHS worker talk about her son. The CAMHS worker and the mother laugh at points while [Donna] continues making notes. [Donna] looks up from her notes and makes a suggestion about her visiting the boy soon with another worker and then puts her head back down to continue making notes while the mother and the CAMHS worker discuss it. When the meeting is over I ask [Donna] about the notes and she says that if she doesn’t do them you get into the situation like she had the other week when [the team manager] accused her of not prioritising her minutes of meetings in front of the parents” (fieldnotes)

While Donna justifies this habitual practice as necessary acquiescence to avoid being shamed, it could also be seen to be an active engagement in the process of intentionally selecting and performing particular patterns of behaviour which enacted the meanings and expectations of the institutional representation. Donna also demonstrates, however, that the primary focus of the work was on her relationship with the organisation, where the greatest risk of being shamed lay. The experience of the parents or carers in such circumstances was considered irrelevant, as a team manager explained:

“[the team manager] said workers become less sensitive as they progress in their careers but “we get measured on timescales not on not upsetting parents” and described the process as “bruising and horrible” for parents but that they have to go and speak to a head teacher for example which may upset a parent” (fieldnotes)

The team manager’s comment shows how the sanctions, supports, and rewards within the organisation ensured that there was an explicit focus on the priorities as defined by the organisation. While acquiescing to these expectations offered some protection to the social workers from being criticised and shamed, it also ensured that they were on the lower end of the empathy continuum in relation to the parents’ experience.

CONSEQUENCES OF ENACTING THE INSTITUTIONAL REPRESENTATION

In contexts where a social worker had accepted the interpretive framework provided to them, identified a specific person to blame for the harm/potential harm to a child, and acquiesced to the policies and procedures to create a feeling of emotional safety, the foundations were set for a social worker to enact the institutional representation. The culmination of these factors affected the experience of both the social workers, who became committed to their situated conceptualisation to protect their identities, and the parents they worked with, who felt shamed and humiliated.

A) COMMITTING TO A CONCEPTUALISATION

The social workers felt very personally about how they had conceptualised a situation. They had often spent a lot of time researching the family history, talking to the family and other professionals, and had used their knowledge and experience to come to a conclusion about the causes and consequences of parental actions. In short, their identity as a social worker was tied to their conceptualisation. Any challenge to this conceptualisation could, therefore, be interpreted as a threat to the social workers' identity, framing them as incompetent. Protecting a conceptualisation could, therefore, be considered a proxy to protecting their identity as a social worker, as demonstrated by a team manager in a child protection conference:

“The father challenges parts of the report and says, “how it is written is not how it happened” ... He tells his version of events which provide more detail to what is in the report and he says there are always two sides to every story and no one has heard his side... As the father explains his side [the team manager] disagrees with him and she talks over him telling him he is wrong and what is written are facts. The father seems frustrated and takes a deep breath and says “can I speak please?”” (fieldnotes)

Protection was necessary, however, not only from the families but also from those within the Council, as demonstrated by Donna in a meeting with a group of managers and a solicitor to discuss the possibility of applying for a Court Order to remove the children from their parents. My

observations did not indicate that this was a particularly difficult meeting for Donna. Yet Donna recorded the experience in her diary entry as:

“Frustrated because I felt I couldn’t get my point across and felt that my assessment was undermined by people who haven’t worked with the family for 2 yrs [sic] like I have... Felt a bit sweaty and had clammy [sic] palms which got worse as I got more frustrated I felt tense and felt myself sit up straight and cross my legs to appear more assertive and then felt myself close my body as I felt rejected by those there who made me feel ‘I’m crap’”

Furthermore, she recorded this experience as rejection, shame, humiliation, embarrassment, anxiety, and anger and resolved to “become assertive” in the future, indicating a commitment to her conceptualisations rather than a reassessment of it. Conversely, where someone agreed with or acted in accordance with their conceptualisation, the social worker could perceive this as verifying their identity and feel proud, as Carla states, “I get kind of a boost from it, when I see that families are grateful for the work” (interview). Furthermore, the parent/carer could then be seen in a positive light, leading to absolutions, as demonstrated by a conversation between Monica and her team manager:

“[Monica] and [the team manager] discuss a case and [the team manager] says “the dad seems to have done everything in the right way, hasn’t he?” They agree to close the case” (fieldnotes)

Once a social worker had committed to a conceptualisation, it was a moral necessity to act in accordance with this perspective and to ensure others did too. To not do so was to believe they were responsible for placing the child at risk of harm and placing themselves at risk of being shamed. The social workers therefore engaged in acts to convince others, as demonstrated by Jemma:

“when you request to remove a child and it’s like, “no, no, no” and you just keep going and going and going until you get that positive outcome what you want, the child out... you’re requesting consideration be given for a child to be accommodated and they’re coming back and forth with you via email, “no this” or “no that” and if I’m passionate that that child’s at risk I will keep firing those emails until they see what I’m seeing” (interview)

The primary mechanism for convincing others came through the written assessments and reports which outlined the information the social worker had collected and what sense they had made of it. These written reports could be considered as 'boundary objects' (Star and Griesemer, 1989), being used by different social groups for different purposes. While explicitly the assessments were considered to be for the parents so that they understood the situation, statements such as "[the drugs worker] agrees that everything in the social worker's report is a true picture" were included to convince the reader of the accuracy of the conceptualisation. With agreement between all those involved in the case on the cause of the problem, the parents had to align their perception of the situation accordingly or face conflict with the child protection system and possible Court applications by the Council. As Faye explained, "99.9% of the time we need the parents to change, it's not children that have got the problem is it? It's the parents" (interview). While the social workers were the subjects of identity regulation within the institution, the parents were the subjects of identity regulation by the social workers. From the parents' perspective, such practice was often experienced as acts of episodic shaming, as demonstrated by one mother's experience when discussing an assessment, which was considered to be a good example within the team, with the team manager:

"the mother says that none of it is backed up with evidence and says that she has no mental health problem, does not drink, has not abused the child, and so there is no concern and so should be able to see her child... She says once it has been investigated why hasn't it gone back to the way it was [being able to see her child]... The mother seems angry, speaking firmly and loudly, and says that the report is lazy and offensive and that she will be spending every penny she has on legal costs then walked out" (fieldnotes)

B) ASHAMING AND HUMILIATING EXPERIENCE FOR PARENTS

As the above quote demonstrates, for social workers engaged in enacting the institutional representation the experience of the parents was often a very difficult one. The accusation of failing to live up to a particular standard threatened their identity as a good mother, a good father, a moral person etc., as demonstrated by Paula's experience of visiting a mother who had

asked for advice relating to contact between her three year old son and his father, who was now her ex-partner:

“[Paula] told me that the mother had got upset when she had asked to see the child’s bedroom and look in the cupboards and fridge. She said the mother burst into tears and said “I can’t believe you’re doing this to me”. I asked her how she felt looking in the fridge and cupboards and she said “fine”, “I’m ok doing it”, and “it’s normal” and then said they have to do it because some people lie and said some people only have bottles of vodka in their fridge. I asked if there was an issue with the home and she said it was immaculate and there were no issues with the food” (fieldnotes)

While Paula’s practice of looking in the cupboards and fridges to ensure that there was sufficient food for the children was habitual and valorised within the Council, such practice was experienced as shaming for the mother. This experience was intensified for those where child protection procedures were used, or Court action taken, as these accusations could be verified in the minds of others, casting them as someone who stands outside of moral life. With the social workers focusing on creating safety for the child and themselves, the conditions were created for an institutionally supported perception of ‘us’ versus ‘them’ (Sumner, 1906), as demonstrated by Monica:

“I think they [parents] think negatively of us anyway don’t they just because of who we are and what we stand for” (interview)

Such ‘othering’ had two consequences. The first was that the issues and needs of the parents were not always seen as a legitimate focus of their work, as Lucy showed:

“[Donna] stands near [Lucy]’s desk and they talk about a case which [Donna] describes as the professionals parenting the parents and [Lucy] says “they suck you in don’t they? And make you focus on their issues”” (fieldnotes)

And the second was that the social workers could perceive the parents as an obstacle to achieving the aims of their work, which prevented social workers from being able to verify their safeguarding identity, as Amy described:

“[Amy] goes on to say that she knows it is the right decision [to have removed the children] and doesn’t think the children should ever go back to their mother because it is easy to make changes

without the children. She said that this mother has been so frustrating and I ask why? She says because “I want to effect change” but that “mum got in the way of that”” (fieldnotes)

To Amy, the mother was a threat to her identity as a safeguarding social worker and she blamed the mother for her inability to create safety for the children while they lived with her. Blaming others has often been associated with experiences of shame (Tangney and Dearing, 2002) and Brown (2012) defines the practical effects of blame as “the discharging of pain and discomfort” (p.195). The social workers could, therefore, be considered to be discharging their pain and discomfort of failing to live up to the ideal of effecting change, absolving themselves of any responsibility for wrong-doing and further supporting the notion that ‘we’ protect children from ‘them’. Given the consequences to the child and practitioner if a child was harmed, the social workers often felt vulnerable and emotionally unsafe and would often say “I don’t trust him/her”. Such distrust could, at times, be observed to play a role in their situated conceptualisation through imagining the worst case scenario, as demonstrated in a meeting between the area manager, a solicitor, the team manager, and Carla where the issue was of violence in the father’s previous relationship:

“The area manager says that there have been no violent incidents between the father and the mother... [Carla] says that they are saying they will work with children’s services... They discuss the seriousness of the situation and at one point the area manager says they can’t stop the father throwing the baby against the wall if they are living together. They agree this would not be safe and the area manager states the father has to leave the family home once the baby is born” (fieldnotes)

Their imagined future provided justification for adhering to institutional expectations by using authoritative measures. The resulting decision could be considered to be as much an act of emotional work intended to create a feeling of emotional safety for the managers and social worker, as it could safety for the child. As the focus of the work was on creating safety, with a lack of focus on the experience of the parents or carers, many parents complained that they were being treated unfairly, not getting what they needed, or that the social workers were making things worse, as Carla’s experience demonstrated:

“he blamed me for splitting the family apart and for me aiding him to drink more because I was stressing him out because he couldn’t be with his family but, I, all my focus was for the kids and protecting them and keeping them safe, you know, but of course he didn’t see it like that so he put several complaints in about that” (interview)

Such situations reinforced the idea that some parents were a threat to the identity of the social workers, and the perception of the parents as ‘shamers’ was a very real experience for many, as Paula demonstrated on the drive to a meeting with the mother in a school:

“she told me that she had had little sleep last night and when she was eating breakfast she felt sick... She said she is scared of the mother and I asked her why and she said that she is aggressive and verbally attacks her. She said the mother is “out to wreck my career before it’s begun” and said she undermines her confidence and began to get teary as she drove. We arrived at the school and [Paula] seemed nervous as she got her bag out of the boot of the car and she said she felt like crying and she looked like she was about to cry” (fieldnotes)

As this scenario shows, seeking to protect themselves from shame and humiliation within the organisation by acquiescing to the institutional expectations at times created the conditions for feeling shamed from the reactions of the parents. The social workers could then be seen to protect themselves from this by reducing the possibility of being criticised/shamed by ‘them’, as Melanie explained:

“I’m not gonna go to a service user’s house and say “can you comment on my practice”, what do you, do you think I’m doing a good job or not? Because you’re opening yourself up then, aren’t you, for criticism” (interview)

In a parallel to the social workers’ experiences within the institution, their actions as described above could be considered to regulate the identities of the parents and carers so that they could trust that the child would be safe in their care. In further parallels to the social workers’ experience, however, some instances were consistent with Garfinkel’s (1956) notion of a degradation ceremony. For example, a mother being told to leave a meeting for arguing with a health visitor and having her disability publically questioned as she left; a mother being made to pour wine down the sink in her own home; parents being told they had to separate or they would remove the children; a heavily pregnant and upset mother being shouted at by a social worker to

tell her they would be convening a child protection conference; to a father being told in a child protection conference that “if he reverts to type” (fieldnotes) then they would seek to remove his children. Garfinkel (1956) argues that such organised action is intended to degrade the status of the individual by rejecting their claimed identity so that they are more accepting of external control. Despite the distress and negative feedback from the parents subject to these processes, such situations did not threaten the identity of the social workers. Indeed, there was a general belief that their actions did not contribute to any harm to the parents, as a team manager demonstrated:

“I mean my own personal view on both care and child protection conference is that these are tools that we shouldn’t be afraid to use if we have to... I’ve come across social workers who have said, I don’t want to put these parents through the oppressive thing of a case conference... well I don’t think it is oppressive for parents actually, certainly not oppressive for children, I view these things as positive tools” (interview)

Enacting the institutional representation was founded in a belief that their work was both meaningful and necessary, enabling the social workers to justify their actions or even absolve themselves of any responsibility for wrong-doing (Arluke and Hafferty, 1996). Indeed, enacting was not an unconscious, passive process. In echoes of Haslam et al.’s (2015) conclusion from their reanalysis of Milgram’s (1974) obedience to authority experiments, “people are able to inflict harm on others not because they are unaware that they are doing wrong, but rather because... they know full well what they are doing and believe it to be right” (p.79).

A CASE ILLUSTRATION OF ENACTMENT

Enactment of the institutional representation can be illustrated by following one particular case. Amy had been working with a mother and three children for about three years where the children were subject to child protection plans due to issues of neglect. Amy told me that she felt guilty that she had not removed the children previously and questioned whether she had done enough to create change in the family, recording “Feel bad that I may not have made decisions

quickly enough” as shame in her diary entry. Such feelings of shame and guilt contributed to the conceptualisation of the situation as too risky for the children to remain living with their mother. Prior to the Court hearing which would decide whether a Court Order for removal would be granted (s.38, Children Act 1989), Amy sought to accommodate the children to local authority foster care under a voluntary agreement with the mother (s.20, Children Act 1989), which Amy described as follows:

“the mother was holding one of the girls in her arms and was crying into the child’s ear and when the children were placed into the car the mother, while crying, went back and forth from the house to the car to hug them. [Amy] described this as the mother trying to make the children cry as they weren’t. [Amy] said that when she was ready to leave the mother rolled on the floor crying and described this as an immature act. [Amy] told this story in a jovial manner laughing at the situation and what the mother had done. She went on to say that the mother had said that she was busy while she was trying to get the older child ready to be moved but that she was just at a friend’s house. [Amy] described this as “disgusting”. She said “I can’t stand mum, I think she is a dick head” and went on to say that she doesn’t understand neglect, she could understand lashing out in anger, but not, not feeding your children” (fieldnotes)

Amy placed the children with foster carers and recorded in her diary entry, “Day after placing 3 children. Discussed in supervision how it went smoothly... Relieved that they were now safe and having needs met. Proud of the relationship I have built with them” and recorded this as relieved, happy, and proud. The conditions for pride were in place because having accepted the institutional interpretive framework and blamed the parents, the most ‘appropriate’ action within the institution, given how the situation was conceptualised, was to seek to remove the children. With the children in foster care they were now considered safe. Having felt anxious about them being harmed, guilty for not having removing them earlier, and shame for not living up to her identity standards, Amy now felt relief. While relief can be considered as the subsidence of a negatively valenced emotional experience (Ekman, 2003), in this case it could be more specifically seen as the subsidence of shame and guilt and a feeling of emotional safety. The subsequent application for a Court Order provided Amy with the opportunity to not only feel proud about what she was doing but also to feel “professional”, as she recorded in her diary entry. Amy felt

“professional” because this situation had enabled her to not only enact the institutional meanings and expectations but to also to become the embodiment of the institutional representation.

COMPLYING WITH THE INSTITUTIONAL REPRESENTATION

FEELING UNSURE

Given the complex nature of the social situations of both the family context the social workers were seeking to understand and the institutional context in which they had to operate within, it was a common experience for the social workers to feel unsure with social workers often saying, “I don’t know what to do”. Social workers often felt unsure of what to do, how to do it, what the procedure was, what to say, how to say it, and if they had the knowledge and ability to do what they were being asked to do, with Lucy saying on one occasion, “I feel out of my depth with this case” (fieldnotes). Feeling unsure meant that they were unable to conceptualise the situation and come to a conclusion about the potential harm to a child, the blameworthiness of the parent, or the utility of certain procedures. Not knowing what to do meant they were unable to verify their safeguarding identity, as Monica demonstrated on the way back from a home visit:

“She said she doesn’t know what to do and then “I feel like a bad social worker” like “a shit social worker” if she doesn’t know” (fieldnotes)

With a sense that one should live up to the ideal of competence, not living up to this expectation was grounds for feeling shame. In seeking to live up to this ideal and avoid feeling shame the social workers were more susceptible to the institutional processes of identity regulation, as Carol demonstrated:

“you retreat to your colleagues and your manager and say, “things aren't going well here. Don't know what to do, really. I don't know whether I'm doing this right. Should I be doing a bit more of this? Should I be doing more of the other?” And then it's like if you see it differently, it's like, “well, am I seeing it right? Am I actually seeing it right? Am I being too lenient or are people being risk averse? Am I not getting it right?”” (interview)

The support the team manager provided served to reinforce the 'appropriateness' of the institutional representation, providing a form of emotional regulation that supported Carol to comply:

"[the team manager] certifies that actually you're doing okay, you're going along the right lines. Sometimes when you're frustrated about moving things on and you talk it through in supervision you can see that the barriers are nothing to do with your practice and you realise that. Yeah, it's just confidence boosting, isn't it, and certifies that you're doing okay and doing what you should" (interview)

While the conflict between Carol's identity-standard and the institutional representation was resolved through identity regulation by the team manager, there were many contexts in which the situation was not as simple, as Melanie demonstrated while explaining the impact of her work on one family:

"[Melanie] said that the father had been sacked from his position in the scouts, was being investigated by his HR [human resources] department at his work and thinks his job is at risk, and the family are now arguing with each other. She said that the children are 16 and 17 and are hard to engage, and are difficult for the parents too, yet they have put in place a child protection plan, which she said, "the plan is destructive and ineffective. It's more damaging than supportive" as she said nothing is going to change and this plan has caused a lot of problems for the family. She said "it's just a tick box exercise... stat visits... we have to do it for accountability and show we have tried to engage them when it all goes tits up". She said "I don't know what to do" but she has discussed it with [the team manager] who has told her to continue with what she is doing. She described it as "uncomfortable"" (fieldnotes)

Melanie did not blame the parents and displayed empathy for their situation. Furthermore, the conflicts between her identity-standard and the institutional representation created a troubled conscience that questioned the usefulness of the child protection procedures. Yet, while she felt unsure, she also felt she has no choice but to comply and engage in emotional work to hide her "uncomfortable" feelings.

PRIORITISING SHAME AVOIDANCE

Social workers who complied felt they had no choice but to comply because they felt emotionally unsafe. The need to prioritise avoiding being shamed, therefore, became a consideration above

all others. The military was used as a metaphor in both teams to describe how their opinions were seen as irrelevant, with their role solely being to carry out the instructions of those in more superior positions, as one team manager explained to me:

“She relates the senior management to being like Nazi Germany as the senior management give orders from high and they have to carry them out” (fieldnotes)

With knowledge of the conditions for being shamed within the institution the social workers routinely adhered to the expectations placed upon them undertaking tasks that they neither understood, as Carla explained:

“She then said she has to go and see a family member in prison because it is in the child protection plan... She said she doesn’t know why she has to go or if she should go but that she will because it is in the plan” (fieldnotes)

Nor agreed with, as Lucy stated:

“She comments that sometimes they hold on to cases for too long and that sometimes they’re involved when there are no concerns against her better judgement “just because ‘they’ [managers] want to control things”” (fieldnotes)

Such action can be considered to be a form of quasi-magical thinking, whereby “people act as if they erroneously believe that their action influences the outcome, even though they do not really hold that belief” (Shafir and Tversky, 1992, p.463). While they knew their actions would not change the outcome, by adhering to procedure they created a sense of emotional safety in the knowledge that they would be beyond blame under scrutiny, as a team manager’s interaction with Melanie demonstrated:

“[the team manager] then enters a conversation with [Melanie] about a case and says that “I’ve decided” it needs to go to child protection conference but that she knows that this “won’t effect change but we have to be seen to have tried something” and states that they are children and so they need to do something” (fieldnotes)

As the team manager’s comment indicates, the threat of being shamed or humiliated for not adhering to the policies and procedures, or the institutional pressures and expectations, existed

at all levels of the hierarchy. The team manager needed to be “seen” to be adhering to them as much as the social workers. Indeed, the area managers, the strategic lead, and even the director of the service were as much subjected to the force of the systemic shame and pride as they were architects and guardians of it. As one team manager explained:

“I do what I have to do. I’m not a big fan of timescales. I’m much more bothered about quality and understanding what’s going on for that child, but we do it” (interview)

ALLEVIATING FEELINGS OF SHAME AND GUILT THROUGH COLLECTIVE EMOTIONAL WORK

Compliance necessarily involved prioritising the meanings and expectations of the institutional representation over their own identity-meanings in an attempt to avoid being shamed and rejected. Such action inevitably created feelings of shame and guilt in the social workers, as Lucy’s experience showed:

“[Lucy] comes over to me and tells me that she has to go out and speak to a mother to ask her to accommodate her child under section 20. She says the child is 2 years old. She tells me that she isn’t sure if that is what they should do and that she can flip in her mind from one day to the next depending on how the visit goes – some are good and some are not. However, the case was taken to an LGM³⁴ and it was decided at that meeting that [Lucy] had to ask the mother for section 20 and then to issue proceedings after, but not to tell the mother. [Lucy] says she feels like she is stabbing the mother in the back by not telling her they will be issuing proceedings straight away” (fieldnotes)

The relationships within the teams provided a context which made it easier to overcome any reservation about complying. The social workers felt they had to present an acceptable image to those within the institution (Goffman, 1959), as Jane explained:

“In the car on the way to visit the new referral [Jane] spoke about [Julie]’s “breakdown” and said that she was crying in [the team manager]’s office. She said that they all have a “mask” and “we say yes we can take more cases but we can’t”” (fieldnotes)

The team, however, provided a safe haven, free from the need for such impression management, as they felt understood and protected from criticism and blame, as Jemma stated, “the office is

³⁴ Legal Gateway Meetings were meetings with the social worker, team manager, area manager, and a solicitor to decide whether to enter the public law outline (PLO) process, to either initiate the formal pre-proceedings process or apply for a Court Order

our safe place” (fieldnotes). With all of the social workers occupying a similar social location, subject to the same institutional pressures and demands, and having very similar work experiences it was easier to empathise with one another creating a sense of solidarity within the teams, as Donna describes:

“And the rest of the team, really, even with the person that I don't particularly have any fondness for, we get on. We support each other. We're always there for each other. We've always got each other's backs and if somebody's down and crying then there's always someone there with an arm round the shoulder. And I think we just talk cases. We don't suffer in silence” (interview)

As Donna suggests, the sense of solidarity within the teams encouraged team members to both seek support from each other and to provide it when needed. Such reciprocity contributed to the social workers sense of acceptance within the teams, providing them with a purpose beyond protecting children, as Melanie explained:

“I feel like I've got my place within the team and I'm valued for, for who I am, yeah and accepted I think, you know, I feel like I fit in” (interview)

Such a feeling was contrasted with others who were not subject to the same forces and were therefore considered to be unable to understand, as demonstrated by a conversation in the team room:

“[Helen] comes in and sits at her desk and starts talking to [Amy] about the viability assessment she was doing yesterday and [Amy] tells her about her partner. [Helen] and [Amy] both discuss the fact that their partners don't understand and that they can't understand but [Helen] says that you have to try and explain it to them at least” (fieldnotes)

Given that they felt alone with their very specific sense of shame, there was an expectation within the teams that they would create an emotionally safe environment for each other. This meant doing one's best not to criticise or blame anyone in the team, as Monica explained:

“my intention is not to upset anybody, even on day to day running's of the team, if I thought I'd offended anybody or excluded anybody I'd be really upset if I thought that because that isn't how teams work” (interview)

Such action could be considered to be a form of collective emotional work whereby the social workers sought to hide their own feelings from each other if they believed this would cause shame or guilt in a colleague, as a conversation with Lucy and Donna demonstrated:

“[Lucy] says some people’s assessments in this team “I would be ashamed to put my name on” and says they only look at the specific issue that has been referred and so they miss things and they end up being re-referred. [Donna] joins in and says it is difficult challenging someone because of a case that was open in the team before” (fieldnotes)

As this conversation indicated, priority was given to not shaming team members rather than providing an opinion about past work. Where a person had, in the past, provided their opinion, the social workers engaged in action to avoid receiving feedback from them. I observed an example of this on one occasion when Lucy had visited a mother three days in a row and had not been able to get into the home. Christine, a very experienced social worker, then went out and got into the home on her first visit. Christine provided information about the visit to Lucy in the team room, yet there was no discussion about how she had managed to get into the home. When I asked Lucy later why she hadn’t asked, she told me, “[Christine] lets you know if she thinks you’re not good enough or made a bad decision” (fieldnotes). Not asking protected her from feeling shame. Feedback was welcome, however, when it was an attempt to alleviate their unease about what they were being asked to do. Such action by team members could be considered as a form of collective emotional work that relieved any potential for shame and guilt and supported their ability to comply, as shown by Gill:

“Me: how do you cope with that doubt and the decision to remove [a child]?”

Gill: I think it’s just about the discussions with other team members and reassurance really from them” (interview)

Further forms of collective emotional work could be observed through the use of humour, which was considered essential to being able to cope with the stresses of the job, as Donna explained:

“Me: the worst part of your job. How do you cope with it?”

Donna: Humour. Humour, food, exercise and just having bloody good teammates” (interview)

Mulkay (1988) argues that applied humour can be used for a hidden or veiled purpose so has a serious point to it. Indeed, the inconsistency between what the social workers believed they should be doing and what they were being asked to do provided many opportunities for humour about their shared predicament, as Linda's comment showed:

“[Linda] turns around from her desk and jokes to [Amy], in reference to phone calls she has been receiving today from parents, “it’s getting in the way of my paperwork!”” (fieldnotes)

While humorous, the serious point was that such action sought to alter the quality, intensity, or duration of negative self-conscious emotional experiences resulting from conflicts between their actions and the meanings they held in their identity standards. Such action could be considered as emotional work, seeking to alter the feelings of the person making the joke as well as those who heard the joke. This contributed to the social workers ability to continue practising despite their troubled conscience, reservations, and feelings of shame and guilt, as Monica explained:

“Me: what’s the best part of your work?”

Monica: the team

Me: what about the team?

Monica: I dunno? I’m getting upset again [starts to cry], the working toget, because I think social work practice is a very lonely job isn’t it really and I suppose the team just makes it more bearable [crying]” (interview)

CONSEQUENCES OF COMPLYING WITH THE INSTITUTIONAL REPRESENTATION

In some situations social workers felt unsure or concluded that the parent or carer was not to blame for the harm or potential harm to a child, or that the use of certain procedures was unnecessary or even harmful to the family. Yet the potential for being shamed by not living up to the institutional meanings and expectations remained a central feature of how the situation was conceptualised. Therefore, despite any reservation, social workers could still actively comply with the meanings and expectations of the institutional representation as a strategy of shame

avoidance. While the experience for the families remained the same as that of enacting, it had a very different experience for the social workers.

A) FEELING ASHAMED AND DISILLUSIONED

While compliance provided a feeling of emotional safety, it also laid the foundations for feeling shame by threatening one or a number of their identities. For example, complying with the institutional representation could mean compromising the meanings they associated with their social worker identity, as demonstrated by Linda's experience:

"They discussed the situation and [the team manager] began writing down the specifics of the working agreement. [Linda] asked if it could be written in less authoritarian language and [the team manager] said it could not because the mother has to agree with it otherwise they would remove the children. [Linda] said that she was not sure about all of the allegations that have been made about the family... We left [the team manager]'s office and... she said she feels she is battling against [the team manager] and the other professionals who have already made their minds up about this family... She said she feels she has to take out the working agreement which is worded in a way which is oppressive and so she is an "ally to oppression"" (fieldnotes)

For those who felt that they had to compromise their own identity standards to comply there was a feeling that they were losing a part of their identity, as Carla explained to me in the team room, which I recorded as, "[Carla] says that she thinks the job is eroding her social work values because she is doing things she did not come into the job to do". Some identity threats arising from compliance, however, were more distressing as they compromised the fundamental meanings that defined them as a person, as Amy described:

"Makes you feel sick sometimes. Very stressful. When I went off sick, I just felt shit. I felt awful. It does make, it makes you feel really guilty. You feel guilt, and then you feel tired, and then you feel low, and then you just feel, I mean, I got to a point where I was just, like, "I'm not, I'm not doing anything"... Like, I got to a point where I didn't feel like me. I felt like I was, like, you know, just a shell, and my personality was elsewhere, because it does, it drains you, it sucks it out of you, when you can't do it properly" (interview)

Feeling ashamed of what one was doing as a result of complying inevitably led to a sense of disillusionment, and all of the social workers expressed disillusionment in some form at some

point during my time with them. Without an ability to see any change in the system, that disillusionment could turn to hopelessness, as Jemma demonstrated:

“I’m quite disillusioned by it all... I think I’ve just come to accept it now there’s not a lot I can do about it, I can’t change it... I’m looking around to see what other kind of work I can do with this qualification, I don’t think it will be local authority forever... I think the ideal job is a family support worker... Because they do get more time with the children” (interview)

The comparison with a family support worker was an important one as it struck at the heart of the issue as those engaged in compliance saw it: that they were not practising social work.

B) PRACTICE AS SOCIAL ADMINISTRATION

The idea that much of what the social workers were doing was not social work was a belief held by all of the social workers in both of the teams at different points, as illustrated by a conversation I overheard in the team room:

“[Christine] turns to [Jane] and says “they’ve taken what God gave us: free will” ... [Jane] says they are just “highly paid admin workers” and [Christine] says that what they are doing is not social work and “they’ve taken what was attractive to the job”” (fieldnotes)

While Christine’s comment demonstrated the perception that they had no choice in what they did, Jane’s comment demonstrated the common held belief that complying with the institutional demands and expectations equated to little more than a complex administrative role distinct from the more traditional understandings of social work. Wenger’s (1999) notion of a community of practice that provides the social foundation for the activation of one’s identities provides a useful starting point to illustrate the distinction between the competing practices of ‘administration’ and ‘social work’. While Wenger (1999) considers all practice to be social, not all social practices have the same aims, functions, values, or rely on the same specific body of knowledge, techniques, and skills (Larson, 1979). Indeed, the aims, functions, values, and specific knowledge, techniques, and skills that have been traditionally associated with social work practice (e.g. Biestek, 1961; Larson, 1979; Munro, 2011b; British Association of Social Workers,

2012) can be contrasted with those of the closely associated, but distinct, discipline of social administration (e.g. Lohmann and Lohmann, 2001; Spicker, 2004; Page, 2010). From these traditions we can define social work broadly as the field concerned with the practicalities of improving the quality of life and subjective well-being of individuals, families, groups, and communities. While social administration can be defined as the field concerned with the practicalities of service organisation and delivery. The government, the inspectorate, and the Council were more interested in the macro-practices of social administration to provide the evidence for an acceptable and legitimate service. The expectations placed upon the social workers, meanwhile, can be understood to relate more to the micro-practices of social administration. The distinctions between these practices can be summarised as pure-types (Weber, 1978) in figure 7.2.

Figure 7.2: Distinguishing between social work and social administration



For those engaged in compliance, the focus on social administration at the expense of social work fuelled their sense of disillusionment with the profession, firstly because they felt compromised as a professional, as Melanie explained:

“I think it’s a bit hypocritical. I think you’re saying this needs to be done but I can’t do it cos I’ve got ten thousand other things to do, and I think that’s not what social work is about that, isn’t it? Social work is about social work, you know, going into people’s houses, supporting them with this, supporting them with that and you don’t do it so the role’s very different. And I think, I don’t know, I look back and I think “did I expect to be doing that when I was, before I went to Uni, or whilst I was at Uni, did I expect to be doing that?”... I kind of expected to be going into people’s houses and doing the work with them rather than expecting someone else to do it, or even for them to do it themselves, you know, and then criticising them when they haven’t done it” (interview)

And secondly, because they did not feel that the work that they did made a difference to the lives of the people they came into the profession for, as Helen explained:

“this week, for example, and it’s just a tick box exercise really, I’m getting information from the families to put on the system. I know it’s done, so that senior management know it’s done. [The team manager] knows it’s done. And I’m not actually doing any work with the family, as such. I’m just, kind of, checking everything’s going okay... we kind of make judgements of families, but we don’t actually spend enough time with them, to understand why that may be a problem. Although we ask the question and we, kind of, go away don’t we? and we leave them. Okay, so you’ve give us all this information, I’ll type it up, and then I won’t see you for four weeks... It just doesn’t quite feel right” (interview)

Perhaps inevitably, the social workers who believed that they were not making a difference began to feel ashamed, as they felt responsible for not living up to their identity-standards, as Faye demonstrated:

“I’m still sitting there crying thinking, “well actually, no, you’re crap social worker” ... I will say, “oh, oh, what change have I actually made out of hundreds of cases I’ve had?” ... and I can like think of 2 cases... so to me that’s a really small percentage of good stuff that I set out to do. So sometimes I will have that conversation and still doubt myself because the majority of your cases aren’t, that have nice outcomes, they’re not positive, so then I think, “well really no, you haven’t made change in many cases as you possibly could of”” (interview)

While the systemic shame and pride created a constraining environment for practice, rather than blame this environment or the parents and carers, as Faye’s experience showed, some social workers blamed themselves, resulting in very personal feelings of inadequacy and incompetence.

The comparison the social workers made between what types of action were possible for them and what were possible for the family support workers was significant because the family support workers were considered to have greater freedom and were considered to be doing the work that the social workers wanted to do. Indeed, there were occasions where there was tension between the social workers and the family support workers, who could be seen to be challenging social work's monopoly on working with certain client groups (Freidson, 1988). Linda demonstrated this tension on one occasion when she told me, "we've got people coming in from the [family support] team saying what they're going to do with *our* families" (interview).

Given the constraining nature of the environment and the shame, guilt, and distress the social workers felt, they could be observed to engage in a form of emotional work designed to alter these unpleasant feelings by stating that they loved their job. Typically, such a declaration was made at the end of a statement about how difficult and challenging they found the work, as demonstrated by Amy:

"it's like a pressure cooker. You've got it from your families, pressure, "Bleeding do this", because they're always in crisis and they need you. And then you've got management and your policies, and you're, like, rammed in between. And then you've got your own pressure that you put on yourself... in safeguarding, you see shit all day. Just negative, negative, negative. And even when it gets to a positive, and you close a case, you still think, "I bet that'll come back in", because you're constantly critical of yourself. And then you've got others being critical of yourself. So it's, actually, you get very little positive. But then, at the same time, you love your, like, I love my job" (interview)

With a feeling of being constrained in what they were able to do and how they were able to do it, for those engaged in compliance there was a sense that they were losing, or not even acquiring, the knowledge and skills that they believed they needed to practise social work, as Helen, a senior practitioner, stated:

"I've done the work with families, asking questions for the assessment, but I've not actually done any work with them that I would want to do. I don't really know what work I'm talking about here, but, because I've never done it. But I'd like to just do some meaningful. Get to know the family more. Get to know what the problems are, rather than, sort of, guessing, really, what the issues are" (interview)

If a profession can, in part, be defined by the use of a specific cognitive base, particular skills, and commitment to certain values (Larson, 1979), then the complaints and distress of the social workers could be seen as a response to what many have considered to be the deprofessionalisation of social work (Specht, 1972; Dominelli, 1996; Healy and Meagher, 2004). Indeed, some suggested to me that the professional basis of social work was being eroded, as Linda demonstrated:

“Linda: So why do the academics teach us to communicate with children, teach us child development, because you’re teaching us and it’s not exercised

Me: You don’t need it to do the job?

Linda: well, no, not the job that we’re being asked to do... I’m scared for the profession”
(interview)

A CASE ILLUSTRATION OF COMPLYING

Compliance to the institutional representation as a response to the institutional processes of identity regulation can be illustrated by Melanie’s experience as she began to cry, and continued to sob, as she explained the situation:

“I’ve really struggled with this case of removing a baby, I’ve just, I’ve really struggled with it [crying] and I just, I question whether it’s the right decision and then further discussions that I have with social workers about further assessments, and they, they, they just predict that, they’ve already made their mind up that this family are not going to be successful, do you, now that’s just disheartening that this child could potentially not go back to live with its biological family and I just, that just has, that just really challenges me ‘cos I just don’t think that’s right, do you know what I mean?, and I’ve been a part of that journey and that process and I’ve gone to Court and been cross-examined and, it just made me question everything about my role” (interview)

While Melanie was unsure about how unsafe the situation was for the baby and whether she/he should be removed from her/his parents, she still provided written statements as evidence to the Court and was cross-examined for over three hours arguing why the baby needed to be removed. An Interim Care Order was granted and the baby was placed in foster care. The institutional processes of identity regulation had ensured that Melanie’s sense of shame was aligned to the systemic shame in operation whereby the creation of her own emotional safety had become the

overriding feature in her situated conceptualisation. By engaging in compliance Melanie was able to avoid being shamed and gain social acceptance within the institution with Melanie being praised by the senior social worker who attended Court with her, by her team manager, and by a newly qualified social worker who told her she was jealous of her giving evidence in Court. Yet Melanie's struggle demonstrated the difference between compliance and enactment, as she explained:

"I've been supported in making the decision in conversations that I've had with the team, which has reinforced, "yeah, yeah, ok, you're making the right decision, yeah", and then when I go away and think about it personally and I just think surely there is something more that we could have done... you're either in agreement with them [managers] or you're not, and can I show that I'm not in agreement with them? I don't feel like I can. I don't know maybe I could? I don't know. I could speak to [the team manager] about this and say how I'm feeling and how it's challenged me, but she's going to reassure me that what, the decision that I've made has been right, she's not going to say it's wrong is she? Otherwise we wouldn't have, we wouldn't be here now, she has to believe that the decision we're making is the right one, so if I was to open up to [the team manager] and talk about how upset I feel I wouldn't get the response I needed, I'd turn to family for that response" (interview)

Despite avoiding being shamed and gaining praise and acceptance, Melanie was visibly distressed in her interview because she felt she had not lived up to the standards of her identity as a moral person, having been involved in something she did not think was "right". Such a situation is consistent with an experience of feeling ashamed. And while Melanie began to question her place within the safeguarding community:

"I think "do other social workers experience that or do they, are they desensitised doing that?"... is this normal? Is this what the service expects?... if I struggled here at my second removal what about my next case? Is that going to challenge me the way that this one's challenged me? Am I going to be challenged the way I feel now in 10 years' time or will I, will it become easier to do that?... I hate to think that this could become easy and you, you know, if it became easier for me then there's a problem" (interview)

She also began to question the whole safeguarding system:

"families have really got to prove themselves, what is it that they're not doing, that they need to do, and could they do it with more support and over a longer period of time, you know, with an intense package, rather than people, social workers dipping in and out doing their stat visits and not actually accomp, achieving anything. Are we setting them up to fail?" (interview)

Ultimately, such identity threats led Melanie to consider whether she had to engage in emotional work to ease any conflict with her moral identity just to be able to continue to practise safeguarding work:

“maybe I just have to push it all to one side so that I can continue to do the job rather than knowing that what I’ve done is wrong” (interview)

FORMS OF IDENTIFICATION: A SUMMARY

The systemic shame and pride provided the boundaries for shameful and praiseworthy behaviour for the Council’s child protection service. Having been episodically shamed by Ofsted, and seeing other Council’s being shamed by similar mechanisms, the leaders and senior managers of the child protection service acted in a manner that sought to avoid such institutional shaming in the future. This meant defining the meanings and expectations of the social workers within the Council and ensuring the social workers had knowledge of the conditions to be shamed, for transgressing these boundaries, or praised, for adhering to these institutional prescriptions. Consequently, the social workers developed a sense of shame and pride in line with such institutional forces. This served to regulate not only the actions, but also the judgements and attitudes of the social workers, i.e. their identities. The possibility of being shamed and praised became a prominent feature in their conceptualisation of any given situation. For some, the focus was on living up to the meanings and expectations provided for them. For others, it was a focus on avoiding being shamed. Either way, such acts of enactment and compliance successfully reproduced the institution. From the perspective of the parents and carers, however, particularly those who disagreed with the social worker’s conceptualisation, such institutionally desired actions and practices were often experienced as shaming, humiliating, and dehumanising, as one mother told me while I was asking her permission to observe a meeting:

“She told me that she thought all social workers should be sacked and that it is a horrible experience for parents as they make you feel “stupid” and that you have “no voice” and that she began to “doubt myself” as a parent” (fieldnotes)

Given the need for the social workers to focus their attention on the needs and expectations of the organisation, such experiences are perhaps inevitable as their focus is diverted from the relationship with the children and families and onto the relationship with the organisation. From the social workers' perspective, however, enacting was the most beneficial to their wellbeing. By living up to the institutional representation, the social workers could positively evaluate their practice while receiving praise and social acceptance to verify their identities. In other words, they could feel proud of what they had done even if it conflicted with wider social attitudes, as Paula's experience, contrasted with Melanie's above, demonstrates:

"I did my first child removal. And although that's not something that an everyday person would be proud of, I felt quite honoured to have experienced it, even though it's not pleasant. So it almost sounds – well, it does sound wrong. I want to almost say that I enjoyed it, but I didn't enjoy it. I just enjoyed the experience" (interview)

Compliance contrasted with such practice, as the social workers did not blame the parent or carer and felt greater levels of empathy towards them. Despite such attitudes, the social workers continued to act in accordance with the institutional expectations, as they knew that such practice offered protection from shame and provided acceptance as a valued member of the service. As Culpitt (1999) argues quite simply, self-protection overrides the ethical concern for others, because, as Satyamurti (1981) argues, such action can be necessary for organisational survival. Compliance was, therefore, a much more distressing experience. While the social workers verified their safeguarding identity from the praise and acceptance they received from others, they were unable to live up to the standards of other identities they held. This produced a complex internal experience of shame for failing to live up to these standards, guilt for being involved in harming others, and distress from the lack of integrity between their identities. Social workers reported having nightmares, not eating, and not sleeping at the imagined future of being blamed, with some of their partners threatening to end their relationship due to them working too many hours. Despite these internal and external pressures, in some situations the social

workers did not feel able to resist the institutional processes of identity regulation and engaged in identity work to comply and emotional work to hide how they felt, as Donna explained:

“I went into defence mode, put my head down, got on with it and I've not shown any emotion or stress since and probably not the person that I am, I don't think. I think I'm more guarded”
(interview)

And as Donna's comment demonstrates, such identity and emotional work could begin to change the social workers' identities. However, while identity theory predicts that it is the higher level identities, such as one's moral identity, that change the lower level identities, such as one's social identity, (Burke and Stets, 2009), for these social workers it was the lower level safeguarding identity that changed their higher level person identities. Consequently, the feeling that they were changing as a person was experienced as forced and unwanted. As Linda suggests, those who are more able to engage in enactment are perhaps the ones who are able to remain performing safeguarding work:

“we're all taught to the same standards, we then, personalities come into play, go into an organisation, and the ones that conform, do what's expected of them, do what the policies and procedures say, stay. That's been my experience” (interview)

As discussed at the beginning of this chapter, however, there were situations where the social workers rejected the meanings and expectations associated with the institutional representation and therefore resisted the institutional processes that sought to regulate their identity. It is these situations and conditions to which we can now turn.

CHAPTER 8: FORMS OF RESISTANCE

While enacting or complying with the institutional representation provided the social workers with social acceptance and emotional safety, there were many situations in which either response was considered unworkable or unpalatable. Being a part of the institution, however, subject to the same systemic forces as everyone else, and having knowledge of the conditions for being shamed and praised, the social workers could not simply ignore the institutional pressures and expectations. Instead, they were compelled to respond to them. As Jenkins (1996) argued, “identification is often a matter of imposition and resistance” (p.73). This chapter therefore continues the discussion from the previous chapter to outline the conditions that supported resistance to the institutional representation in the social workers’ situated conceptualisations and the strategies employed by them to resist the institutional pressures, expectations, and demands. The foundation of resistance was a conflict between the meanings in a social worker’s identity-standard and those held in the institutional representation. In such contexts, and despite the sense of solidarity within the teams, some social workers observed a difference between their own practice and the practice of those engaged in enactment or compliance, which served to create divisions within the teams, as Monica demonstrated:

“they’re very authoritative, authoritative [sic] and very, I’d say borderline rude and, I dunno, I’m just completely different I think and I know that we’re social workers and that we are, you know, it’s a career and we’re professionals but I don’t think you need to be in people’s houses making them feel belittled in their own home, you know, and we are there to criticise and also to say the good points about people’s parenting and I think sometimes some members of the team are very, you know, belittling of people and quite oppressive” (interview)

Given that all of the social workers shared this same social identity, evaluating another’s practice negatively provided the foundations for feeling vicarious shame (Lickel et al., 2005), as the actions of others could be perceived to reflect badly on the social work profession, and consequently them as a member of that group, as Linda explained:

“So I was embarrassed by the fact that there was families in [the area] who deserved a better service, disappointed in some degree in the way that the young social workers that I’d seen on the team had received the same training as me... but they conform, they fall in, and they don’t challenge what the organisation, they just sort of slot in... Ashamed to see, and that’s why I said I wouldn’t be a, I wouldn’t go through all that blood, sweat, and tears with a student again... But I, why are they in, the anger, the, the, why, why, why, why? What is it that people become so compliant? ... [I’m] embarrassed and ashamed. Disappointed, disappointed in what we’re churning out” (interview)

While such attitudes of resistance did not always translate into actions of resistance, there was a range of behaviours which did demonstrate increasing levels of resistance, from more minor levels, which compromised the institutional expectations; to more active forms of resistance which attempted to conceal behaviours that would be unacceptable to the institutional guardians; to a highly active form of resistance that sought to influence the institutional sources and processes to create an outcome that was more acceptable to the social worker (Oliver, 1991). This chapter outlines these three forms of resistance below.

COMPROMISING INSTITUTIONAL EXPECTATIONS

Where social workers held identity-meanings that were inconsistent with the institutional representation, yet felt vulnerable to being shamed, some were seen to engage in action that could be considered to resist the institutional pressures by only partially complying with expectations. Such action could be considered to be either an act of necessity to avoid being shamed or an act of choice to provide sufficient space to be able to focus on work that they could feel proud of. The foundation of compromising actions was adherence to the minimum standards, which did not fully satisfy the institutional requirements, but ensured they avoided criticism, as Jemma demonstrated:

“[Jemma] told me that they now get a weekly report and showed me hers, which lists all their cases which are out of timescales and by how long they are out by... She said some in the team think this report is helpful while others are not happy about it. I asked “what’s the consequence of doing this?” and [Jane] said “we don’t do visits” and [Jemma] quickly responded to her saying, “I do my stat visits, I just don’t write them up. I just put ‘child seen’” (fieldnotes)

While Jemma's actions were not considered good practice within the Council, having recorded that the visits had been done and the child had been seen, her statistics, and therefore those of the team and the Council, improved. Compromising became an act of necessity where the social workers conceptualised the situation as presenting unresolvable competing and conflicting demands. In such situations the social workers felt that they could not comply with these expectations, even if they wanted to, creating a feeling of vulnerability to being shamed. In such cases, the social worker compromised both the institutional standards and their own identity-standards, as Amy described:

"I've gone through a time when I've had 50 cases. I can't dedicate an hour to them per week, you know. You can't... because you've got 6000 things, as I keep saying. So it's, you're unable to. So it impacts on your practice as a whole. I think it depends on your character, because to me, because of the time, sometimes, you're doing a child social work assessment after doing two visits. A 40-day assessment in two visits. That's not 40 days is it? That's not knowing the family for that, to do that assessment justice, or to do the children justice, because that's what it's about" (interview)

The expectations as laid out in the Council's procedures were that a forty day assessment should be an in depth assessment of the child's needs and circumstances. Amy was aware that two visits over forty days did not meet this expectation but she felt she had no option but to reduce the quality of her work to pacify the institution and protect herself from being shamed by not adhering to the competing expectation for timeliness. Furthermore, this reduction in the quality of her work also conflicted with her own social worker identity-standard. Amy, and other social workers, could therefore be observed to engage in emotional work to excuse her actions, by denying any responsibility for failing to living up to these meanings (Scott and Lyman, 1968), thereby protecting herself from feeling shame, as she explained:

"I think although my assessments sometimes, the quality can be really good, sometimes it can be very slapdash for the sake of getting it in for the duty tracker" (interview)

In some contexts, however, the social workers felt they had more choice over their actions. In such situations compromising could be considered a strategy to create some space in which the social worker could do work that they felt proud of while avoiding the likelihood of being shamed

or humiliated. By minimally complying with the institutional expectations on some cases, sufficient time could be freed up to focus on a small number of cases in which the social workers could verify their identities. Greater levels of empathy for a child or family provided the foundation to want to focus on a particular case, for example, Paula stated to Amy on one occasion, “I really like the kids, they’d fit in with my kids” (fieldnotes). Such empathic identification created a desire to do more for them than was expected by the institution. This was illustrated by Helen, who was working with a child she had known previously:

“he woke up, took an overdose in the family home, and was left in his bedroom for 36 hours, unconscious. And when he woke up, he had these burns to his body, like, down his back and his bum, and his hair. So he had, hair loss and all sorts, blisters everywhere, and he couldn’t understand what happened... he was one of the cases where I did lots of direct work with him, and I put the time in, and I made sure I saw him every week. But that was a massive commitment in my diary, but I made sure that, to do a good job for him, you make sacrifices” (interview)

The child was placed in foster care and the expectation was to see the child for “statutory visits” every six weeks. It was unusual to visit more regularly than that. However, by making sacrifices elsewhere, Helen was able to go above and beyond the expectations with this particular child, which verified her identity as a good social worker, as she demonstrated in her retelling of the account to me:

“I think the foster carer and [the child], at the time, I took time to build a relationship with them both. To get to know if it was the right placement for him, you have to get to know them. And, again, it’s about making your stat visits, doing your visits on time, and above and beyond what the, you know, the guidance, sort of, says. I think they would see, well, I know they thought I was a good social worker because he was gutted when I left. And the foster carer said that they were disappointed that I was leaving because I had invested a lot of time into [the child]. And there are cases where you do spend more time with than others” (interview)

As this case illustrates, compromising tactics could be considered as minor levels of resistance, whereby some of the institutional pressures, expectations, and demands were adhered to while others were not. Consequently, the social workers could create a sufficient level of emotional safety and attract a sufficient level of social acceptance, while in some situations being more active in seeking to verify their own identity meanings. This provided the opportunity to feel

satisfied with what they had done, as Helen showed in her concluding comments about her work with the above child: “that’s, like, the best bit. That’s why I want to do this job” (interview).

CONCEALING ACTS OF RESISTANCE

Concealing acts of resistance were founded in the rejection of the meanings and expectations of the institutional representation. However, a practitioner could not escape the institutional pressures without leaving the organisation. In a parallel to Brandon’s (2008) analysis of the actions of parents who seek to present a façade of acquiescence to social workers’ demands, Oliver (1991) equally argues that institutions can seek to disguise their compliance to resist the pressures placed upon them. Rather than seeing the social workers’ actions as disguised compliance, however, similarly to Hébert’s (2006) analysis of some in the Nazi party in Germany before 1945, it could be more accurately described as disguised resistance. The social workers could be seen to comply with the institutional expectations and demands in situations where their actions would be detected by institutional guardians, in attempts to avoid being shamed, while resisting them in situations where they would not, in order to practise in a manner they could feel proud of. This could be seen at both the individual and the team level. While the levels of surveillance and monitoring of the social workers were considered constant within the office, there was a distinct lack of monitoring of the social workers’ direct work with the children and families. The dominant form of practice could be considered to be enacting or complying, yet the lack of oversight of their direct work provided opportunities to resist the institutional norms, values, and expectations, as Monica demonstrated to me as we sat in the car following a home visit:

“[Monica] tells me she is worried she is too soft. She tells me that the 12 year old boy disappeared yesterday with a 9 year old boy from next door and that [Julie] is working with that family. She said that [Julie] told her before she went out that she was going to call the mother of the 9 year old boy and “give her a bollocking”. [Monica] said to me “I didn’t give her [the mother] a bollocking” but then says she doesn’t think it is her job to tell people off. She says she doesn’t have children and so “how can I tell people how to parent?” I ask her why she is worried she is too soft and she says

“I don’t know”. She says you go out on your own and so you don’t get any feedback about your practice” (fieldnotes)

While Monica expressed self-doubt that her practice did not conform to the institutional expectations, it could be seen as an act of resistance by practising in a manner contrary to these expectations. Such acts of resistance were, however, sporadic and concealed by practice that conformed to the institutional norms and expectations in other contexts, as demonstrated in one of Monica’s assessments:

“There is a culture within this family dynamics of drug misuse which is minimised by [the father]. There is a further consensus with [the mother]’s family that deception towards the local authority is acceptable and is deemed as a moral method to meet their own gratification disregarding the potential negative impact this would have upon [the child]. Both parents have an extensive criminal career and morally [the father] believes that stealing from large supermarkets is acceptable, resulting in a culture of criminality in which [the child] would be surrounded around and believe such behaviours are socially acceptable” (written assessment)

Such comments could be considered to be in line with the institutional representation that sought to regulate the identities of the parents to create a more socially acceptable parental identity. While some acts of resistance outside of the institution’s sphere of observation could be concealed relatively easily, acts of resistance were also reported to be concealed within its sphere of observation through a more active form of deception, as one team manager experienced:

“Team Manager: I’d much rather them tell me they can’t do something or they need extra help than lie to me and say they’ve done it and I find out they haven’t because I can’t cope with that

Me: Does that happen?

Team Manager: Sometimes, and then that does upset me. If people say to me, “We’ve done de, de, de”, you have a degree of trust, don’t you? You have to trust people and then if I find out that actually, no, that’s not been done or, that does upset me. I mean I don’t get cross but I deal with it and say, “Right, you haven’t done it. I want it done by such and such a date and I will be monitoring more”, so I have the odd person who sometimes says they’re doing more than they are or says they’re doing things that I find they’re not and that is not okay” (interview)

Such disguised resistance could enable the social workers to avoid the demands and expectations placed upon them. As the team manager demonstrated, however, it was usually only a matter of

time before such pretence was identified and action taken to regulate their identity through episodic shaming and/or heightening the sense of shame in that individual. To be able to achieve a more enduring form of concealment, action needed to be taken on a collective level. The team could create sufficient emotional safety to take the risk of deviating from the norm by collectively disguising their resistance. The team managers, who felt proud of their teams, presented a positive image of the team and the individuals within the teams to senior management, as Amy explained:

“[the team manager] is very protective of the team, so she probably, she’ll say that, you know, we’re all wonderful to our area managers” (interview)

The team managers could then take further action to reduce the scrutiny of the team by the senior management, such as by ensuring that the data for the team was acceptable for the institutional requirements:

“[The team manager] then said she wanted to look at the “dirty data” and took some printed spreadsheets and said that the “data is doing us a disservice” and that it is “not making us look as good as we are”” (fieldnotes)

The term “dirty data” was used in one team for the information that presented the team in a bad light, such as having statutory visits out of timescales. Once identified, the team manager would ensure that this was rectified immediately, thus ensuring a positive image was presented to senior management for as much of the time as possible. Indeed, the team managers considered themselves to be social workers first and managers second, making a distinction between ‘us’ (social workers) and ‘them’ (the management), as one team manager told me, “it’s not me and them [the social workers]; I’m part of them. We’re in it together” (interview). This sense of solidarity with the social workers led the team managers to attempt to protect the social workers from being shamed by senior managers, as one team manager explained:

“I would watch their back, that’s probably the best way of putting it. If anything goes wrong in there, I’ll defend them. You can come in and bollock me, I say, “don’t pull that on my social workers”, so I will deal with it. I don’t think it would happen for me. That’s, perhaps, the best

way. They're more secure because they've got me, haven't they? They're my team, so I will take it. If they mess up, I deal with it but in a nice way and they don't do it again" (interview)

By presenting a positive image of the team and ensuring acceptable data is provided for the team, together with preventing episodic shaming of the social workers from the senior managers as best they could, the team managers created the space for resistance within the team, as Linda explained:

"she's given me what I want out of the job and I'm giving her what she want, it's a working relationship, I've got the knowledge and the experience that she can trust me and I can write credible reports and she's given me the freedom to practise social work as I was taught, as she was taught and as [Carol] was taught, so it's a, it's a good working relationship in that respect" (interview)

Having rejected the institutional representation, Linda felt that she was able to verify the meanings of her social worker identity free from the more constraining forces of the institution because the team manager was able to present a "symbolic acceptance of institutional norms, rules, or requirements" (Oliver, 1991, p.155) to senior management. Such concealment of the team's resistance, however, only lasted for as long as the disguised resistance remained disguised. Once identified, the institutional processes of identity regulation and policing were legitimate, as illustrated below.

INFLUENCING INSTITUTIONAL SOURCES AND PROCESSES

For those who rejected the institutional representation but found themselves under pressure to act in a manner contrary to their identity-standard, concealing their acts of resistance was not always sufficient to placate their conscience. In such situations, social workers could seek to influence the source of the institutional pressures, norms, and expectations either through challenging the source or controlling the processes that reinforced the cultural norms and practices (Oliver, 1991). While this risked being shamed by institutional guardians, it ensured they

did not feel ashamed of their actions. The foundation for the strategy of influencing was an attitude of resistance, as demonstrated by Linda:

“I see myself as a proper social worker, I see myself as a ‘social social worker’, I don’t see me self as an ‘agent of the state social worker’” (interview)

Such attitudes could compel some social workers in some contexts to challenge what they considered to be inappropriate or even immoral actions. Indeed, challenging the rules, norms, and practices could be distinguished from other forms of resistance by the lack of desire to conform or feign conformity. Minor acts of challenge could be seen in single interactions, such as Monica’s actions in a legal gateway meeting (LGM):

“one particular family of mine I took it to LGM and they were sitting there saying, talking about adoption for the youngest 2, I was like, “are you kidding me? Absolutely no way... that isn’t what I’m asking for, that isn’t what I think is proportionate”” (interview)

Acts of challenge were necessary, however, across multiple interactions in order to sustain resistance to the pressures to conform to institutional norms and successfully influence the outcome of a situation, as demonstrated by Donna’s resistance to the expectation to remove a child from his mother:

“I had already removed two kids off the mum and then the mum got pregnant again but with a different partner and we completely reassessed it, we didn't judge it by, I pushed for that and it was a hard fight. It was a fight with the guardian. It was a fight with management but people did listen to me and it worked. And she's at home now with that baby, well, he's two, not a baby. Number two on the way, child thriving, thriving as an adult herself... instead of removing at birth, which would have been the natural thing to do because the girl had only just gone... But it was the fact I fought for her to keep that baby because it was the right decision” (interview)

Donna challenged the “natural” thing to do because she did not think that was “right”, which compelled her to fight the multiple layers of institutional arrangements which were reinforcing the pressures and expectations. It is important to note, however, that it was not a simple process of the social workers resisting the senior managers. Systemic shame and pride operated outside of any individual and at times it was the social workers who could be considered the source of

institutional pressures while the senior managers resisted them. In one example, a social worker brought a case of a boy who had been beaten with a belt by his mother to a legal gateway meeting asking to enter the pre-proceedings process as a warning to the family expecting this to be a straight forward agreement, yet this was not the case, as I recorded:

“They discussed the son refusing to have a bath and a few days before he had posted pictures of the mother, who was pregnant, in her underwear on Facebook for the second time. The area manager stated, “he’s being fucking arsey”, and then apologised for swearing while laughing. She explained that she has had teenage boys so “I’ve lived it”... There is a discussion about the benefit of going into pre-proceedings and the senior manager refers to the Facebook photos saying that “all women could understand” how the mother felt about the pictures going on there while laughing at the thought of it” (fieldnotes)

Being a woman, a mother, and having parented teenage boys, the area manager had a high capacity for empathy with the mother in this situation and could find reason to excuse her actions. Being in a position of greater power than the social worker and team manager, she had access to greater resources to influence the outcome of the situation. Such instances were infrequent, however, as the senior managers’ social location and corresponding responsibilities made it more likely that their situated conceptualisations would be in line with the dominant institutional expectations creating actions which reinforced them. As one team manager told me, “there must be something in the further back you are the harsher you are” (fieldnotes).

There were some instances where the social workers sought to gain a greater level of influence than by simply challenging institutional sources. Indeed, in some contexts social workers felt that they had to more directly control the institutional processes to avoid an outcome they could not accept. One example of such action was demonstrated in a conversation between Amy and a social worker from the Court and Care Planning team, who stated that she felt compelled to act in a manner that provided the maximum amount of influence she could exert, which enabled her to avoid feeling ashamed:

“The social worker said that she had put her job on the line as her managers were saying they had to separate some siblings, with the younger one to be placed for adoption, but she couldn’t agree

to this and said she would resign if that happened. She said in the end senior managers had to agree to a further sibling assessment, which concluded they shouldn't be split up. She said her name was mud for 3 or 4 months" (fieldnotes)

Oliver (1991) argues that influencing tactics differ from all other forms of action as it does not treat the institutional pressures and expectations as a constraint to be obeyed or defied. Instead, influencing the institutional processes sought to alter or control these pressures to change the outcome of a situation. Influencing tactics, however, could only be effective in relation to influencing another's situated conceptualisation. It was not possible to influence the institutional expectations relating to administration. These were impermeable to influence and were indeed a constraint to be obeyed or defied. Even defiance of these requirements, however, could only exist by avoiding scrutiny through concealing such behaviour and once identified were subject of episodic shaming and used as examples to deter others from taking such action.

RESISTANCE: AN OVERVIEW

A social worker began to resist the expectations placed upon them where they felt that they conflicted with their own identity-standard. Such conflicts, however, complicated their situated conceptualisations. On the one hand they knew they could be shamed or humiliated for not complying with these expectations, while on the other they could feel ashamed for not living up to their own identity-standards and guilty for being involved in harming another. With the consequences for being shamed and rejected by the institution being considered to be too great to risk, the dominant actions of the social workers complied with the institutional expectations. In some situations, however, the consequences for feeling ashamed and guilty of one's actions outweighed the consequences for potentially being shamed by institutional guardians. Not being able to cope with what one had done led social workers to resist the pressures and expectations designed to direct their actions in a particular manner. In some situations this required action to compromise the institutional expectations to be able to undertake their work without being shamed or provide sufficient time and space to do what they felt was right. In other situations it

was an attempt to conceal actions which they felt were right but defied the institutional expectations. While in some situations it was considered necessary to challenge the pressures and expectations to influence, alter, or prevent action that they considered inappropriate or immoral and avoid feeling ashamed of their actions. Such acts of resistance provided greater opportunities for relational engagement, recognising both social workers and parents as human, with individual strengths and struggles.

RECOGNISING OTHERS AS HUMAN

Pain and distress could be regularly observed in both the social workers and the parents and carers. The social workers could often be observed to struggle with the actions they had to take, struggle to produce work to a standard that they were satisfied with, and I often observed social workers in tears. The experience of the system for the social workers was summed up by one team manager as:

“this job takes it out of you, it takes it out of everybody, it’s hard and the nature of the job, the whole thing about child abuse, child neglect, it’s unpleasant, it’s not nice... it’s emotionally draining. And then on top of it you’ve got too much of it and then on top of that you’re being told, “we know it’s unpleasant, we know you’ve got too much but where’s that assessment, why is that assessment six months overdue, if you don’t improve your performance, well”. So it’s pressure upon pressure upon pressure. In those circumstances maybe it’s a wonder that people aren’t crying more often” (interview)

Equally, I observed or heard about the parents and carers regularly complaining, becoming angry, and feeling distressed. In a parallel process, we can consider both the social workers and parents/carers to be treated as ‘less than human’ (Rorty, 1989) within this system, only being recognised within the institution as a person worthy of respect and equal rights (Honneth, 1992, 1995) if they conformed to certain expectations. For the team managers, resistance provided a mechanism by which they could recognise the social workers as more than just safeguarding social workers. So while one team manager explained the new context as, “the nurturing and the compassion is [sic] no longer there, I would say. It’s pure business and that’s a bit of a conflict for

me because I care about people” (interview). They went on to explain how they used strategies of resistance to provide a more empathic environment:

“I do what I have to do. I’m not a big fan of timescales. I’m much more bothered about quality and understanding what’s going on for that child but we do it. We’re a performing team but then I will find time for my staff to do more work with the children and I find other ways of getting it how I want it really. My nurturing is not approved of really but I’m not going to stop doing it because I’m like that out of work ... so I comply to allow me to then be flexible and creative” (interview)

This process was paralleled between the social workers and parents, as social workers sought to practise in a more compassionate manner. By resisting the institutional pressures, the social workers were able to acknowledge and respond to the pain and distress they saw in the parents and carers, affording them degrees of recognition. Such acts of resistance, however, conflicted with the institutional forces, as demonstrated in a child protection conference:

“[The team manager] says if she [the mother] doesn’t “follow the plan then we would go to Court to get an Order which would give us the authority to remove your child”. The mother says “what do you mean?”, now with red eyes. [Donna] puts her hand on her arm and says “let me explain” but [the team manager] continues to explain the seriousness of the situation and [Donna] stops talking to the mother and withdraws her hand. The mother starts crying. [Donna] then puts her hand on the mother’s arm and starts to explain the situation and asks for some tissues which [the team manager] gets up and gets from another table to the side of the room and passes them to the mother. The mother stops crying and [the team manager] says that we “need to spell this out”” (fieldnotes)

While Donna’s actions could be considered as a minor act of resistance in that it did not alter the child protection process, her actions did acknowledge the mother’s distress and provided some comfort against the message provided by the team manager. Where greater degrees of resistance were possible, greater degrees of recognition could be seen, as shown by Linda’s experience:

“he [the father] used to ring me up and I used to give him feedback on his child and I think the bodies around me [the social workers] struggled and I said listen, this little child, when he gets older will see that a social worker tried to promote a positive relationship with his father, albeit a couple of hours contact a week, but at least he’ll have that sense of belonging, he’ll know who his father was, because the previous social worker had just cut the father out the picture. Well, you know, I don’t see that as good practice, I don’t care what they’ve done, the child still has, you know, still has a right to know” (interview)

Recognising others as worthy individuals, with rights and needs common to all human beings, was difficult because these were eclipsed by institutional priorities and concerns within their situated conceptualisations. For some, however, such action provided the foundations for feeling proud of their work, being recognised by the parents and carers, and having a more satisfying experience, as Linda, reflecting on her time in the team before she left, explained:

“I took over from another social worker and I took a totally, I took the approach that I was taught to take and, yeah, I mean they’re ringing [the team manager] up, they’re sending flowers, they’re buying cakes, one of them wanted to come to my leaving do, you know, they’ve been stunned”
(interview)

A CASE ILLUSTRATION OF RESISTANCE

The interaction between acts of resistance and the institution can be illustrated by the following case. A black family, consisting of a mother, her adult son, and three children under ten years old had recently moved into the area. The adult son was wanted by the police and they believed the mother was aiding his evasion. The police also believed the mother had stolen from a number of shops and were also seeking to arrest her. The children were already subject to child protection plans for neglect when the case was allocated to Linda. Linda’s conceptualisation of the situation, however, was that there were no child protection concerns and that this was an issue of challenging behaviour of the younger children. She rejected the need for child protection plans but *complied* with the processes which sustained them. She believed the mother was not only suffering from poverty and was, therefore, stealing to put food on the table for the children, but was also suffering from racial abuse in the area and harassment from the police. Being able to undertake direct work on her own enabled her to *conceal* her resistance, as she explained:

“I worked with a woman who the local authority have been in and out of her life for years and have not seen any motivation for change, my colleague who has just taken the case over knocked at the door she run away from the front window, hid in the garden, I rang up and she answered the phone to me. That’s partnership working, that’s not [Linda], that’s the skills of partnership working and treating people with respect and not seeing them as a lower entity, there for the grace of god, go I” (interview)

Linda also challenged the police by making a complaint about their visits to the family, challenged the team manager by questioning why she was being asked to threaten the mother with removal of the children, and attempted to *influence* others' perception of the family by promoting her conceptualisation within the team. As the team manager's primary source of information about the family was Linda, her understanding of the situation was influenced by her. So while Linda did not believe the team manager was taking the situation of police harassment seriously enough, the team manager believed she was, as demonstrated in an interaction I observed in the team room:

"[The team manager], a worker from another team, and [Amy] are talking in the team area about the family suffering from discrimination from the police. The school had called raising concerns about the children and the other worker said "all the world is against them". [The team manager] said she has spoken to the police about the incident but she needs to go higher as she is not getting anywhere" (fieldnotes)

Despite the team manager's actions being consistent with Linda's view, she still questioned Linda's practice, and once Linda had left the authority, the team manager transferred the case to someone who she believed would be more *compliant*:

"I've had a close eye on [Linda] on it [the case] because I know she's been quite positive with it... [Linda]'s probably a bit optimistic on some of her cases. She sees people as better than they are. I've given it to [Carla]. I think [Carla] and I have got a shared view" (interview)

This shared conceptualisation was that greater authority was necessary to regulate the identity of the mother to create change in the situation, as demonstrated in one interaction I observed:

[Carla] is talking across the desks to [Amy] and says that the police have been to the house again and broken the door in. She tells [Amy] that she told the mother "you're at risk of losing your children if you're engaged in criminal activity" and she also said that she told the mother that she needs to tell the police where her 19 year old son is" (fieldnotes)

Carla's actions could be considered to be an act of *compromising* institutional expectations as she had done enough to evade greater scrutiny while resisting the pressures to remove the children. This resistance could be considered to have stemmed from Carla having been *influenced* by Linda,

which was demonstrated through Carla retelling stories which Linda had highlighted as significant:

“[Carla] said that uniform officers had gone to the home, confiscated the mother’s phone, arrested her, leaving 3 children aged 6 and twins of 8 with 2 police officers. The mother was taken away and [Carla] said the mother had bruises to her arms when she met up with her after this incident, and while the police officers were looking after the children one pulled the hair of one of the 8 year olds and pushed his head into the sofa... [Carla] said “it’s not right” and “it shouldn’t be like that” and that she believed that it should be “innocent until proven guilty”” (fieldnotes)

While no longer physically present, Linda’s actions had focused Carla’s, and the team manager’s, empathic attention towards the mother and the children, which supported them in resisting the systemic pressures to remove the children, as the team manager explained:

“The police have got a thing about this family. They’ve been saying to me for weeks, “Why haven’t you removed them? Why haven’t you removed them?”, and I said, “I haven’t got enough evidence to remove them because actually, they’re in school now, their health needs are met, lots of things are better on the Child Protection” ... I’ve been trying to manage it in the real world. You know, if I remove them into care, will they have a good outcome? No they won’t. They won’t have a good outcome at home but it might be slightly better. This isn’t something I’ve ignored” (interview)

While the team manager provided the possibility for Linda, and then Carla, to resist the institutional expectations in their work with the family, once the team manager became ill and was off work for two weeks, the protection she provided was no longer present. The police again arrested the mother and requested the children be accommodated. The social workers had to ask the area manager who instructed them to apply for an Emergency Protection Order (EPO)(Section 44, Children Act 1989). With any social worker knowing that they could be shamed or even humiliated for resisting such demands and expectations, they *complied* and the children were removed from their mother under an EPO and placed with foster carers. The children absconded from the foster carers, however, which then meant even higher levels of management became involved, as the team manager explained:

“It’s gone upstairs and all the councillors have got involved. They then set up a military operation in here where they all go out and find them with the police; then they find them and the mother is trying to take them on a train. She’s charged with abduction, which I accept she’s played into that

and she shouldn't have done it, so then all the children have all the police back again; all my team were out till half eleven. They've driven them to [the North] and put them there. The little one's been put on his own. The twins are together. They're all devastated. They're terrified of the police. I have caused them, not me, this Local Authority has caused them further harm" (interview)

The team manager's comment that it was not her that had caused them harm can be considered to be a form of emotional work to alter her feeling of vicarious shame through absolving herself of responsibility and wrongdoing (Arluke and Hafferty, 1996). With the actions of the team manager not being considered to be consistent with the institutional norms in the eyes of the senior management, upon the team manager's return to work they did not just question her decision making in that particular case, but in all cases, thus shaming her through threatening her identity as a team manager, as she explained:

"there's been lots of problems while I've been off and they [the senior management] were saying, "well, we used to trust your decision making but now we're not so sure because you're not taking things to Legal Gateway quick enough"... I'm not sure it's always what's best for the children; it's what's best for the Council... I've been very clearly told that I should have done it sooner; that I've perhaps made the wrong call on this but I haven't... and somebody has to be blamed, don't they? By putting the responsibility back on me, although I wasn't here, it helps everybody else" (interview)

As this case illustrated, while acts of resistance were possible, they were, on the whole, kept within certain boundaries. While this settlement provided some opportunity for the social workers to verify their identities, it also provided sufficient collective action to ensure the institution achieved its aims and objectives.

RESISTANCE: A SUMMARY

Self-conscious emotions can be considered to have played an important role in the situated conceptualisations of the social workers which led them to reject the institutional representation and resist the processes involved in regulating their identities. While perhaps not a simple process, shame and pride could clearly be seen in how the social workers related the situation to their past experiences, imagined what would happen in the future, and decided on what they

should do and how they should do it. Resistance occurred because the social workers did not want to feel ashamed or guilty of what they had done or who they were. While shame and pride may have been a driving force for action that resisted the institutional pressures and expectations, it was the meanings that the social workers had associated to their identities that conflicted with the institutional representation that drove the feelings of shame and pride. Those who felt compelled to resist invariably felt constrained by the systemic pressures and episodic actions of the institutional guardians. Such constraints served to weaken the attraction of the profession to the social workers, as Amy told me, “I love social work for what it should be” (fieldnotes), and the team managers, as one commented, “I’m just worried it’s [social work] going, or changing its guise, for the worse” (interview). Indeed, while the recent changes in the profession and the Council provided an “opportunity to move to a more human system”, as the other team manager commented, she concluded, “it hasn’t, it’s got worse” (fieldnotes).

CHAPTER 9: A RETURN TO EXPERIENCE

The aim of this study was to explore the role of self-conscious emotions in child protection social work practice. Grounded in the pragmatic tradition, which calls for research to return to experience (Emirbayer and Maynard, 2010), it has sought to consider (1) the context for these emotional experiences, (2) how these emotions were experienced, and (3) the influence they had on how social workers practised. While the analysis that has been provided here is specific, not only to the Council, but also to the time in which I collected data within the Council, as Hughes argued back in 1958, such specific accounts of processes in one context can be useful to understand the processes in others. So while this chapter seeks to answer the research questions specifically for the Council involved in this study, it provides the first account of the role these emotional experiences have in social work practice providing a source for others to understand practice from this perspective in different organisations and contexts. This chapter takes each research question in turn, returning to the emotional experiences of the social workers by integrating these into the analysis provided in the previous chapters.

WHAT IS THE CONTEXT FOR SELF-CONSCIOUS EMOTIONAL EXPERIENCES IN CHILD PROTECTION SOCIAL WORK PRACTICE WITHIN THE COUNCIL AS REPRESENTED BY THE TWO TEAMS INVOLVED?

Pride, shame, guilt, humiliation, and embarrassment can be considered simply as terms to categorise a unified conscious experience resulting from one's thoughts and feelings in a given interaction between the person and their social world (Barrett, 2006a; Barsalou, 2009; Burkitt, 2014). In understanding these emotional experiences, three different levels of analysis have been significant. The institution provided the social context in which the social workers sought to verify their identities and can, therefore, be considered to provide what Pearce and Cronen (1980) term a contextual force on the social workers' identities. Self-conscious emotional experiences were constructed, principally, from the social workers' identities, which provided a contextual force on

their emotional experiences. While the labels for different emotional experiences provided the ability for the social workers to understand and communicate their experience, these experiences can be considered to provide what Pearce and Cronen (1980) term an implicative force on the social workers' identities, which in turn provided an implicative force on the institution.

To understand the institution, however, and therefore the contextual force that it exerted, we have to understand (1) the actions of those within the institution, which Lawrence and Suddaby (2006) define as 'institutional work', i.e. "purposive action aimed at creating, maintaining and disrupting institutions" (p.216); and (2) the actions of those outside the institution, which we can consider as 'institutional regulation', i.e. the purposive action aimed at shaping, enabling, and constraining institutions. To understand identity, meanwhile, we have to understand (1) the actions of the person to create, maintain, or change an identity, which Alvesson and Willmott (2002) term 'identity work'; and (2) the actions of a person intended to construct, shape, and change another's identity, which Alvesson and Willmott (2002) refer to as 'identity regulation'. Finally, to understand the emotional experience, we have to understand the actions of the person intended "to change in degree or quality an emotion or feeling" (Hochschild, 1979, p.561), which Hochschild³⁵ terms 'emotion work'. The idea of emotion work, however, is limiting as it deals only with the person 'managing' the internal feeling/emotion through the conscious effort to change one's thoughts or bodily sensations. Burkitt (2014) argues that we not only seek to alter our internal state but also seek to alter our external environment in attempts to change what and how we feel. Indeed, while the diary entries suggested that the social workers did engage in emotion work, e.g. justifying actions to themselves, my observations suggested that they routinely sought to change their external environment, such as by saying or doing something which changed the social situation and therefore how they felt, e.g. challenging criticism. We can, therefore, consider 'emotional work' to incorporate, but be distinct from, Hochschild's notion of

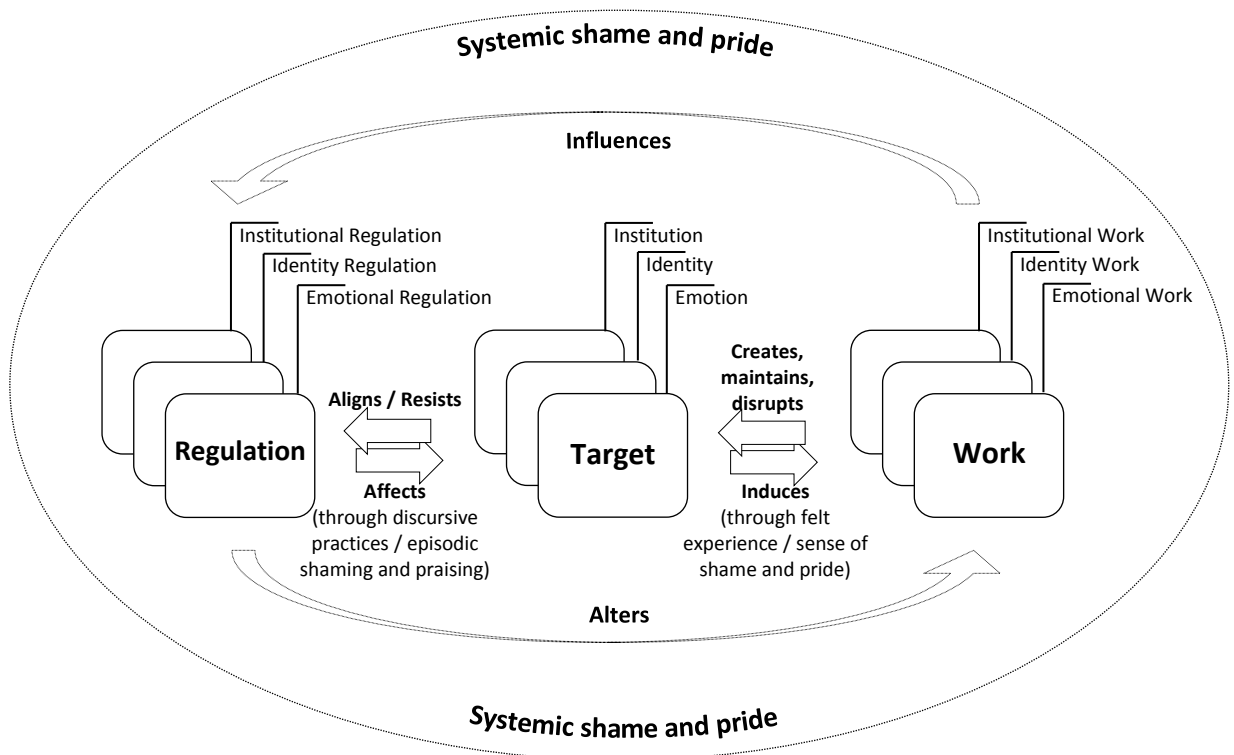
³⁵ Hochschild's work is founded on the notion of emotions as natural-kinds, which Burkitt (2014) argues contributed to the reason she focused on the internal work of individuals to alter how they feel and ignore the external work they engaged in

emotion work, as it includes the conscious effort to change in degree or quality an emotion or feeling through altering what one is thinking and feeling by altering one's internal state and/or one's external environment. In addition to the intentional actions of the individual themselves to alter how they feel, we also have to understand the actions of a second person intended to induce, influence, or alter the emotional experience of the first, which we can consider as 'emotional regulation'³⁶. Indeed, a team manager could, for instance, want a social worker to feel ashamed or guilty in order to shape or change their behaviour. The resulting self-conscious emotional experience stems from the interaction between the attempts by others to regulate how a person feels and the work of that person to alter how they feel. This interaction, between the regulation of others and the work of the individual, can be considered at any of the analytical levels, i.e. the institution, an identity, or an emotional experience.

These components can be brought together with Creed et al.'s (2014) analysis of shame in institutional work to provide a more holistic framework to understand the context for self-conscious emotions. Systemic shame and pride can be considered to provide the wider context in which all action and experience takes place. Institutionally inspired discourses were constructed within this context, which, together with episodic shaming and praising, can be considered to act as a regulatory mechanism, intended to align the institution, and therefore the identities and emotional experiences of institutional actors, to the boundaries of the wider systemic shame and pride. A person's felt experience and/or their sense of shame and pride, meanwhile, may induce institutional, identity, and/or emotional work of the person to create, maintain, or disrupt their institution, identity, or emotion. This creates a tension between the intentions of the regulators and those of the regulated, which can result in resistance. This process is diagrammatically represented in figure 9.1, which shows how a social worker's emotional experience, situated within a particular interaction, was embedded within wider social processes.

³⁶ The psychological literature refers to intrinsic and extrinsic emotional regulation, where intrinsic refers to what I am calling emotional work, and extrinsic refers to what I am calling emotional regulation (see Gross, 2008)

Figure 9.1: Contextualising self-conscious emotional experiences



This perspective enables us to contextualise Brown’s (2007) assertion that “shame comes from outside of us—from the messages and expectations of our culture. What comes from the inside of us is a very human need to belong, to relate” (p.xxiv). While the messages and expectations emanating from the wider culture are perhaps complex, providing many possibilities for belonging, those within the Council were narrower and more consistent as a consequence of the narrow and consistent messages provided by the media, politicians, and Ofsted intended to regulate the institution. These collective messages provided a systemic force which defined shameful and praiseworthy behaviour for a child protection organisation. This systemic force can be considered to have been operationalised within the Council through the creation of policies, procedures, and shared rules. This provided highly defined boundaries of what was acceptable and what was not, i.e. systemic shame and pride, which the social workers had to be socialised into. To paraphrase Brown (2007), the social workers did not start out with a desire to go to Court wanting to remove a child. They did not start out with a deep anxiety about not being perceived

to be competent. They did not start as a social worker with a belief that their worthiness was linked to their ability to meet timescales on the one hand and manage an excessive workload on the other, all while never being seen to get upset. This situation came about because a set of meanings and expectations were created, i.e. the institutional representation of a safeguarding social worker, to evaluate the social workers against. These boundaries were supported and policed by those with cognitive, emotional, and/or moral commitments to the Council, i.e. institutional guardians, who would praise those who lived up to the institutional representation and shame those who transgressed its boundaries, i.e. episodic shaming and praising. By seeking to belong to the team and the safeguarding service, the social workers learnt from their interactions with others how *to practise* child protection social work and how *to be* a child protection social worker, i.e. they developed a contextually relevant sense of shame and pride. It is through these processes that we can understand how the social workers experienced pride, shame, guilt, humiliation, and embarrassment.

HOW ARE SELF-CONSCIOUS EMOTIONS EXPERIENCED IN THE CONTEXT OF CHILD PROTECTION SOCIAL WORK PRACTICE WITHIN THE COUNCIL AS REPRESENTED BY THE TWO TEAMS INVOLVED?

On the one hand the social workers were being evaluated by others within the institution against one set of standards, i.e. the institutional representation, while on the other they were evaluating themselves against another set, i.e. their own identity-standards. In any given situation the social workers had to consider how they were/would be perceived by others, how they were/would be perceived by themselves, the likely consequences for the possibilities for action or inaction, and how they felt/would feel given these actions, i.e. their situated conceptualisation. It is through these complex conceptualisations of the perceived meanings in a given situation that a social worker could categorise their experience as pride or shame etc. or anticipate such a potential emotional experience.

PRIDE AND ACCEPTANCE

Experiences categorised as pride stemmed from positive self-evaluations, where the social workers felt personally responsible for verifying their identity, as demonstrated by Jemma's diary entry:

| | |
|----------------------|--|
| “[Situation:] | Achieving a visit to see a disengaged teenager who has moved out of area. I had to persuade TM [team manager] to keep case open to me, as it is in child's [sic] best interests. |
| [Thinking:] | Happy, pleased that I had been persistent and patient. Visit went well, despite young person being very late. |
| [Bodily sensations:] | Relaxed, lots of smiles. Informal chat, information gathering – (young person is usually closed to conversation). |
| [Description:] | Felt like I had achieved what others had been unable to – Proud, patient. |
| [Categorised as:] | Pride |
| [Influence] | I have learnt that with some service users it is important to adopt different approaches also, to challenge decisions I don't think are in child's best interests” |

As the above diary entry shows, however, the focus in experiences categorised as pride was the 'self' and contrary to Scheff (2014), feeling proud did not equate to feeling accepted. The focus in experiences categorised as acceptance, in contrast to pride, was the actions of others, which provided a sense of acceptance in someone else's social world, as Monica's diary entry showed:

| | |
|----------------------|---|
| “[Situation:] | I visited a family who were previously very hostile however are now very cooperative and pleasant. The case will end soon |
| [Thinking:] | How well the family had progressed |
| [Bodily Sensations:] | I felt relaxed |
| [Description:] | I felt accepted |
| [Categorised as:] | Acceptance” |

Some social workers did categorise their experience as pride and acceptance, however. While the actions of another provided a feeling of acceptance, a social worker could consider the reason for receiving this acceptance and, if they felt this was because they had some responsibility in verifying their identity, feel pride, as Melanie's diary entry demonstrated:

| | |
|---------------|--|
| “[Situation:] | I felt good when I was praised and valued for my practice. |
| [Thinking:] | Felt accepted like I can do the job. |

| | |
|----------------------|----------------------------------|
| [Bodily Sensations:] | Smiled. Warm feelings inside. |
| [Categorised as:] | Acceptance. Pride. Embarrassment |
| [Influence:] | Felt confident, self-belief" |

While episodic praising and a sense of pride were reported by the social workers to provide a motivational effect, encouraging them to act in a manner that attracted praise and acceptance, it was not a strong deterrent to act against with their own identity-standards if encouraged to do so by institutional guardians. Episodic shaming and a sense of shame provided a more effective deterrent and could, therefore, be considered to work alongside episodic praising and a sense of pride to provide the means to regulate and control the identities of the social workers.

SHAME

Experiences categorised as shame related to a negative self-evaluation. The focus in such experiences was the feeling of being responsible for failing to live up to their own identity-standards, as shown in Mandy's diary entry:

| | |
|----------------------|--|
| "[Situation:] | Not addressing an assessment I need to undertake. It is in relation to DV [domestic violence]. Father controlling and monitoring mother's phone. I had rang the school to make/or try and make arrangements to see her there. School said they can never get hold of mum – Dad always answers the phone and neighbour always takes and collects child. |
| [Thinking:] | Oh shit – I have got to deal with this and not leave it any longer. How can this be planned safely. I need to talk to manager. I need guidance so I don't make a situation worse. |
| [Bodily Sensations:] | None |
| [Description:] | I felt shame as I was bloody annoyed with myself |
| [Categorised as:] | Shame |
| [Influence:] | I had/requested a mini supervision with the manager. I beat myself up over things anyway and I'm my own worst critic – I don't think that will change. I will always have my stick!" |

As this diary entry shows, however, experiences of shame, or indeed any other 'emotion', did not always correspond with changes in bodily sensations. One could 'feel' shame, or pride, etc. because their unified experience sufficiently corresponded to their understanding of the term, which, at times, could relate more to thoughts than feelings. While in some situations the social

workers saw no conflict in verifying their identities through adhering to the institutional representation, in others, the social workers could feel their identities were threatened by doing this and felt ashamed of doing what they thought was wrong and immoral. Consequently, the social workers sought to avoid such identity-threats.

The social workers could also experience shame, however, if they evaluated themselves negatively as a result of a perceived negative evaluation by others. This form of shame did not require another person to criticise or blame them and, contrary to Scheff's (2000) analysis, the focus in such experiences was a negative self-evaluation rather than a feeling of being rejected. Such experiences stemmed from an imagined judgement, i.e. interpreting a negative judgement from another without the presence of someone else, or an implied judgement, i.e. interpreting a negative judgement from another without such judgement being directly expressed, as demonstrated by Monica's experience:

“She said that they [other professionals] often want her to remove children when she didn't think that was the best option and she said “I think there's something wrong with me, like I'm incompetent, if they all think this why am I the only one not to?”” (fieldnotes)

The result of such imagined or implied negative judgments was to consider themselves from the perspective of another and, therefore, feel that their identity was threatened from this perspective. The identity and emotional regulation of the social workers by the institutional guardians ensured that the social workers' knowledge of how they were being judged by others remained in the foreground of their situated conceptualisations. The social workers, therefore, undertook emotional and identity work to verify their own identities while adhering to these external expectations. There were only three diary entries categorised solely as shame, however. It was more often a label used in conjunction with other terms, reflecting the complexity of the social situations the social workers found themselves in and their resulting self-conscious emotional experiences.

REJECTION, HUMILIATION, AND SHAME

Distinct from imagined and implied judgements, the social workers often experienced instances of being directly criticised and blamed, which we can term an actual judgement. Such experiences were categorised as rejection, along with other terms such as shame, humiliation, and/or embarrassment, as shown in Donna's diary entry:

| | |
|-------------------|---|
| “[Situation:] | In supervision with team manager I wanted to discuss feeling undermined but felt like I wasn't understood and it took ages to get across my point, I still felt at the end of it that my point wasn't understood properly |
| [Thinking:] | Annoyed – felt a bit worthless and misunderstood. Felt disappointed in my T.M. who I always thought I got on with and understood me |
| [Description:] | I was going hot, then cold – I was tense. I tried to get my point across in gestures by using hand gestures |
| [Categorised as:] | Rejection. Humiliation. Embarrassment. Anger |
| [Influence:] | I tried to defend myself – in future I'm worried I might not address issues which upset me as I felt it backfired and made me look 'silly'” |

While rejection was the experience of a perceived actual judgement by others, humiliation was used to indicate this was experienced as intentionally hostile, which, when experienced in public, was an even more distressing experience. Shame, on the other hand, as described above, could be considered to be the reflection of rejection, as a social worker perceives the negative evaluation by someone else to have some validity, as the following diary entry by Melanie, who had been criticised by her manager the previous day for a mistake she had made, exemplified:

| | |
|-------------------|--|
| “[Situation:] | I came to work this morning feeling anxious about an error from the previous day that I had attempted to rectify which I feel/felt was/is out of my control and had potential disciplinary consequences. I was anxious about the managers uneasy feeling towards a professionals meeting I was having today. |
| [Thinking:] | I felt responsible for my error, responsible for any potential consequences for me and my team manager as a result of my actions. I felt conscious of what others would think of me and my practice. |
| [Description:] | I felt tense, emotionally sensitive. |
| [Categorised as:] | Rejection, Shame, Anxiety |
| [Influence:] | I was (felt) less confident – open up for criticism” |

Melanie felt shame because she believed she was responsible for not living up to her identity-standard of being a competent worker and a reliable team member, she felt rejection because her manager had criticised and blamed her, and she felt anxiety because she worried what her colleagues thought of her. While experiences of shame and rejection were closely related, they were not considered the same experience. It was the emotional experience of shame and rejection, with the threat of this being humiliating, which was most intense and difficult to deal with and, as such experiences were feared, the social workers attempted to avoid situations where this was a possibility. Within such contexts, the social workers prioritised the need to live up to the institutional expectations over their need to verify their own identities. Episodic shaming was, therefore, a very successful mechanism of social control and institutional reproduction. Indeed, it turned the implied judgements of institutional guardians into actual judgements by proxy. While I was able to identify an actual judgement fairly easily through my observations, I was surprised at the reported intensity of feeling resulting from some implied judgements from institutional guardians, as some seemed indistinguishable from the experiences resulting from actual judgements.

GUILT

Some experiences of guilt related to a transgression of a moral boundary. For example, a social worker could feel guilty for not being busy and feeling relaxed, as this contravened the accepted cultural standard for a social worker that provided the message that they should be busy, as demonstrated by Mandy's diary entry:

| | |
|----------------------|--|
| “[Situation:] | That I wasn't so busy today in the office. I felt guilty. |
| [Thinking:] | I can think! I'm not rushed off my feet. I can get my paperwork done. Felt guilty for taking advantage of the lull. |
| [Bodily sensations:] | Relaxed. |
| [Feeling:] | Guilt” |

Such moral transgressions, however, had no observable consequence on others and there were instances of others who found themselves in similar situations but did not feel guilty. More typically, experiences of guilt involved a focus on the consequences of their actions, which, believing they had disadvantaged or harmed another person, perceived such action to have transgressed a moral boundary, as Jemma’s diary entry showed:

| | |
|----------------------|--|
| “[Situation:] | Making mother cry in a meeting whilst discussing her father who has recently passed away – I was focused on him being a PPRC [person who poses a risk to children] and safeguarding children. |
| [Thinking:] | Insensitive to mother’s situation and grief. Others probably thought I was insensitive too. Other professionals remained quiet. |
| [Bodily Sensations:] | I felt hot and tense, sweating fidgety |
| [Description:] | Felt guilty – not for what I said but how I said it. Lacked empathy |
| [Influence:] | I rushed into meeting, little preparation, due to other commitments. Came across to mother as very ‘matter of fact’ with little regard to her feelings. I must show more consideration for families lived experiences in future – oh and slow down and be prepared!” |

As this diary entry shows, feeling guilty motivated the social workers to make amends or avoid certain actions. However, as the interpretive framework promoted by the institutional guardians elevated the moral status of the children and devalued the status of the parents and carers, the focus of such experiences was typically the children themselves, as Helen’s diary entry demonstrated:

| | |
|----------------------|--|
| “[Situation:] | Having to cancel and rearrange an appointment with a YP [young person]. |
| [Thinking:] | Felt guilty to cancel an arranged appointment and didn’t want to let down the YP. The YP sounded disappointed initially although was happy with the arranged date |
| [Bodily Sensations:] | I didn’t feel sensation, if the YP wanted to see me today I would have visited therefore I didn’t feel nervous, tense or anxious about making a call to her |
| [Description:] | Letting this YP down. I didn’t/don’t want the YP to feel as though they aren’t important to me. |
| [Categorised as:] | Guilt |
| [Influence:] | I feel I was able to ask the YP if she was OK with changing the date. I should have made it clear that if she wanted to see me today, I would get to her before the end of the day – I will try to do this in the future |

Indeed, I observed a number of instances of social workers challenging what they were being asked to do by their team manager because they said they would feel guilty about the consequences for the child. There were much fewer instances of this in relation to the parents and carers. In fact, some saw feeling guilty for the consequences of their actions on the parents as an unavoidable and necessary part of doing a good job, as Lucy's diary entry shows:

| | |
|----------------------|---|
| “[Situation:] | This afternoon I had to inform a young mum that her partner was a DV [domestic violence] perpetrator who has other children subject to CP [child protection] plans |
| [Thinking:] | How the mum would take this information and the impact that this will have upon the relationship and child. The mother was initially very angry with me but then explained that this was because she was upset. I felt sad for the mother |
| [Bodily Sensations:] | I felt tense at the beginning of the conversation but relaxed and was able to offer mum some reassurance. The situation was displeasurable |
| [Categorised as:] | Guilt. Important |
| [Influence:] | Because I felt that my role was important in safeguarding both mother and baby I was able to explain the next step to mum calmly. I felt guilty for upsetting her with the information” |

While some social workers felt guilty about what they had done, by accepting the institutional interpretive framework that protecting children often involved having to upset parents, this displeasurable experience could be refashioned as a positive one. This ensured that the social workers were protected from the debilitating effects of self-doubt and shame in potentially distressing situations. From an institutional perspective, this ensured that they were able to continue to perform child protection social work and maintain the institutional arrangements.

EMBARRASSMENT

Contrary to Goffman's (1956) analysis, while embarrassment was experienced by the social workers, it did not seem to play a significant role in their daily lives. Within the diary entries, it was a term used to categorise both positive experiences, being used alongside pride and acceptance, and negative experiences, being used alongside shame, guilt, humiliation, and rejection. My observations and discussions with the social workers indicated that a typical

experience of embarrassment related to a perception that the self was being falsely presented, rather than one's identity being threatened. False-positive presentations of self stemmed from positive praise that the social workers did not believe they deserved, as shown in a conversation I observed:

"While sitting at the desks working [Lucy] spoke to [Jemma] to say that in her previous workplace one of her assessments was used as a good example and sent around the teams, describing this as embarrassing" (fieldnotes)

While false-negative presentations of self stemmed from imagined or implied negative judgements that the social worker did not accept, as demonstrated by Helen's experience:

"She said that some cases get closed and come back in and when it is your old case it is embarrassing and told me of a case she had closed and then it came back in and the children were removed and this was especially embarrassing" (fieldnotes)

There seemed to be little anxiety about sharing embarrassing experiences, with the social workers retelling such stories in the team room. In the diary entries, however, embarrassment was never used on its own, potentially because these experiences were not at the forefront of their minds, or considered significant enough to report on, at the end of the day when they were completing the diary entries.

RELIEF

What I had not anticipated as part of this study were experiences of relief. Relief is not commonly discussed in the literature and research on self-conscious emotions, yet it was regularly reported by the social workers. Relief could be seen in contrast to anxiety, as self-conscious emotions were implied in both experiences. For example, Donna's experience of anxiety implied a threat to her identity through an imagined judgement by others:

| | |
|---------------|---|
| "[Situation:] | Going on holiday for 2 weeks after today. |
| [Thinking:] | Stressed. Anxious. Worried about how much work I haven't completed prior to going on leave. |

| | |
|----------------------|--|
| [Bodily Sensations:] | Heart racing – body feels tense. I have strange feelings in my stomach ie as though my stomach is flipping over. |
| [Description:] | I feel anxious. |
| [Categorised as:] | Anxiety” |

While Amy’s experience of relief demonstrated the alleviation of such anxiety:

| | |
|----------------------|--|
| “[Situation:] | Granted ICO [Interim Care Order] |
| [Thinking:] | Relief, comfort that they’re safe. THANK GOD FOR THAT! |
| [Bodily Sensations:] | Relaxed. Tearful |
| [Description:] | Happy. Relieved” |

The feeling of getting a Court Order to place the children in care meant the tension from the possibility they would be harmed, the shame and guilt she may have felt as a consequence, or the shaming she may have had to endure, was now gone and she could finally release the tension through her tears and feel relaxed. Where relief was recorded in the diary entries, it was either the only label used to categorise such experiences or it was used together with pride. By acting in accordance with the meanings and expectations of the institutional representation, the social workers could temporarily alleviate any threat to their identities and feel pride and acceptance within the institution. While the social workers enjoyed and sought out opportunities to be praised, however, alleviation from shame seemed to be a more important goal, motivating them to do undesirable tasks, as Melanie’s diary entry shows:

| | |
|----------------------|---|
| “[Situation:] | Completing (typing up and sending to TM) an assessment – sat in office. |
| [Thinking:] | I was determined to type and send my assessment to TM. It was overdue in terms of timescale data however I had done it some weeks before and not got around to typing it. |
| [Bodily Sensations:] | Relief |
| [Description:] | Accomplished |
| [Influence:] | After typing this I moved on to another outstanding assessment” |

SUMMARY

These data demonstrate that self-conscious emotions were an inherent part of child protection social work practice. Firstly, the social workers felt anxious about not doing the ‘right’ thing in the ‘right’ way. They were anticipating the possibility of being shamed, explicitly or implicitly, in every

situation. Secondly, they were asked to do things which they felt ashamed or guilty of. They felt they had to do them because otherwise they would be shamed and/or humiliated if they did not. Shame was, therefore, inevitable unless they changed the meanings and expectations they held in their social worker identity so that what they were being asked to do was no longer conceived as personally shameful. Indeed, some social workers reported that doing child protection social work was changing them as a person, making them harder and less sensitive, making them more susceptible to identifying with the institutional representation. Thirdly, they were shamed and/or humiliated for not meeting expectations, even when it was not possible to meet the expectations. They, therefore, felt that they were not good enough, never being able to prove themselves as worthy of acceptance and belonging within the institution. Consequently, some social workers tried harder to gain acceptance by practising in a manner that attracted praise, increasing their susceptibility to identifying with the institutional representation. When a social worker felt able to verify their own identities and act in accordance with the institutional representation at the same time, not only did some social workers report feeling relief and pride but they also reported feeling 'professional', an embodiment of the institutional representation, as Amy recorded in her diary entry:

| | |
|----------------------|--|
| “[Situation:] | I have completed all paperwork in relation to a particular case ready for court. This has been a case I have worked on for 8 years and solidly for the last 2 weeks completing this. |
| [Thinking:] | Relief. Thank god I've finished! Proud of the quality of work that I have produced. Relieved that we will be able to get the children to a place of safety. |
| [Bodily sensations:] | Relaxed, smiled, did a little dance. Less pressure on brain. |
| [Description:] | Relief. Pride. Professional. Happy. |
| [Categorised as:] | Pride” |

Despite the rich picture of emotional experiences presented by these data, much of these embedded, embodied experiences remained hidden from the senior management, the team managers, and even each other, as they did not often discuss their emotional experiences openly.

Yet, what is clear is that practice involved a range of self-conscious emotions, sometimes overwhelmingly so, which did indeed influence the way the social workers practised.

HOW DO SELF-CONSCIOUS EMOTIONS INFLUENCE THE WAY SOCIAL WORKERS PRACTICE WITHIN THE COUNCIL AS REPRESENTED BY THE TWO TEAMS INVOLVED?

Power (1997) argues that the mechanisms of auditing control organisations by pushing the priorities of the auditors into the organisation. This study has argued that self-conscious emotional experiences were central to this process within the Council. By knowing the conditions of being shamed and praised, the priorities of the auditors were pushed into the identity of the organisation, which were pushed into the identities of the social workers. The practical effect of inducing certain self-conscious emotions in the social workers was to foreground the needs of the auditors/organisation, irrespective of the needs of the family. Therefore, some social workers reported feeling proud of removing children, giving evidence in Court, writing reports, meeting timescales, and closing cases, not only because they knew that they would be praised for such action but also because they had come to believe that this is what it means to be a good safeguarding social worker. Some reported feeling ashamed for making administrative errors, of not completing reports on time, or not having the same opinion as their team manager, not only because they knew they would be shamed for such action but also because they had come to believe that this was legitimately shameful behaviour for a safeguarding social worker. Even for those who did not identify with the institutional representation so easily, the institutional processes of identity regulation were still effective. While some social workers felt ashamed of removing children, upsetting parents, or not living up to their own identity-standards, they still went against their own reservations because they believed they would be shamed or humiliated for not doing so. Despite feeling guilty about upsetting the children they worked with, some social workers still cancelled appointments to be able to complete paperwork on time because it

was believed that the organisation valued administrative work more than any direct work they could do with the child and family.

Such practice could be considered to contradict the stated aims for social work practice within the Council, which had sought to embed a whole family approach, using family group conferencing and the Signs of Safety as practice methodologies, all supported by ongoing reflective supervision. Given the context, pressures, and expectations, however, it had become difficult for managers and social workers to be able to enact these ideals. Even though the social workers wanted to provide therapeutic support and practical help to families, they not only found it difficult to find the time to do this, they were also often unsure how to. Such work was considered the domain of other agencies or professionals. Rather than the practice of the social workers resembling professionalised social work practice, it seemed more akin to the pre-professionalised practice of early social workers in the 1800s (Woodroffe, 1962; Young and Ashton, 1967; Roof, 1972). They gathered information about the family by asking very personal questions, produced a report to present to those who controlled the resources, and made referrals to the organisations who they considered could best address the issues they had identified. Their role was predominantly one of knowledge of available services, navigating the formal and informal structures of a multiplicity of state and non-state organisations, and coordinating the work of others. Indeed, considering the changes within the profession from the 1970s to the 1990s, Parton (1996) argued that social work was being refashioned into a different profession, undertaking different work, in different ways to how it had traditionally been understood and practised. Twenty years on from his arguments, along with continued significant changes to how the profession is organised and evaluated, the social workers within the teams themselves were stating that what they were doing could not be considered social work. Arguably, their work could be more accurately described as social administration (Lohmann and Lohmann, 2001).

The consequence of this was, firstly, that the focus on administrative tasks ensured that there was a perception of effective management of the risks posed to the children. By organising the service in such a manner, the social workers produced the evidence the senior managers needed to present to Ofsted during an inspection, which provided organisational legitimacy. Such practice could, therefore, be considered a form of collective emotional work to create emotional safety by avoiding being shamed. Secondly, the focus on administrative tasks reduced the amount of time the social workers had to work with the children and families. Without this time and input, it was difficult to effect any change within the family. Occasionally the social workers would blame themselves, but as Satyamurti (1981) also found in her ethnographic study of social workers, more usually they would blame the family for their own painful feelings of inadequacy. Rather than simply a psychodynamic process of defending the self against feelings of inadequacy, however, this situation can be considered to have psychological, social, and structural components. Thirdly, therefore, by refocusing the social work role on to administrative tasks, the social workers capacity for empathy for the parents can be considered to have been reduced. Indeed, Larson argued in 1979 that where there is external pressure to perform non-client focused tasks professionals can develop an attitude of indifference towards their clients and even that “external imposition... may change indifference into unqualified hostility to the client” (p. 188). Furthermore, by refocusing the social work role into one specifically for children, independent of their parents or wider family, it could be considered shameful to be seen to be focusing on the parents’ needs, arguably recasting them as undeserving of help and support, and legitimising attempts to control those who were seen as a threat to a child. With the social workers effectively being given personal responsibility for the safety and wellbeing of the children on their caseload, knowing they could be blamed, criticised, shamed, and humiliated for any mishaps or tragedies, it was common for a parent or carer to be perceived as a threat to their child. Parents could, therefore, be treated as untrustworthy unless they proved themselves to be worthy of trust by agreeing with the social worker’s conceptualisation of the situation and

complying with the social worker's requests. Where a parent was seen as responsible for any harm to a child, however, there were many occasions where they were not only blamed but judged as an immoral person. The experience of the social workers by the parents could, therefore, be one of shame and humiliation, which echoes Garfinkel's (1956) notion of a degradation ceremony, intended to make the parents more accepting of external control through the creation of a new acceptable parental identity.

In the context of social administration being the dominant form of practice, what we might traditionally understand to be social work practice can be considered not only a minor activity of the social workers, but also an activity of resistance. To retain a level of personal integrity, resistance was a necessity. For the senior management, the attempts to design the system around traditional social work values and practice were in response to the threats to the identity of the organisation following the fallout from the death of Peter Connolly. The social workers were considered an "at risk" staff group and this new systems design was intended to resist the negative national reputation the social workers had attained. This, however, had to be implemented alongside a raft of administrative measures which would satisfy the inspectors. For the social workers, they attempted to practise what they understood to be social work, and thereby verify their identities, while seeking to avoid being shamed. This was a very unsatisfactory situation for the social workers and all of them, at some point during my time with them, expressed disillusionment and hopelessness that things could change. As Creed et al. (2014) theorised, some social workers had begun to reassess the value of the work they were doing and even the value of social work as a profession. In rare situations, therefore, a social worker would risk being shamed by defying the institution simply to avoid feeling ashamed of what they were being asked to do.

WHAT ROLE DO SELF-CONSCIOUS EMOTIONS PLAY IN CHILD PROTECTION SOCIAL WORK PRACTICE: A SUMMARY

So what role do self-conscious emotional experiences play in child protection social work practice? Put simply, they can be considered to exert a controlling influence on what the social workers do and how they do it, which is why they can be used by some in their attempts to control the actions of others. There are, of course, many other factors which influence how social workers practice, but if self-conscious emotional experiences are at the heart of all of our interactions (e.g. Cooley, 1902; Goffman, 1959) then they are at the heart of any form of practice. Indeed, as these experiences were inherently linked to identities they not only provided the ability to shape and constrain the identities of the social workers but also to construct new identities and impose them on the social workers. It is possible that such emotional experiences do not have to be as prominent as they seemed to be within this Council. It may be that other Councils are organised differently resulting in a different experience for the social workers. However, national issues played a large part in setting the context for the emotional experiences of everyone within the Council. So while the leaders and senior managers provided a vital contextual force for the social workers, they could not be considered to act as heroic leaders, able to set the institutional prescriptions, meanings, and expectations as they saw fit. They occupied a particular position within, but were part of, a wider system that is continually changing. The snapshot provided in this thesis provides a window into the lives of those who were expected to implement the contextually embedded intentions of these leaders and senior managers. The resulting conceptual framework to explain the actions of the social workers was intended to convey the complexity of how they came to practise within this context, while ultimately providing the institution with the evidence it needed for external legitimacy. Further studies in this area would be able to provide a window into the worlds of others from this perspective and build and develop our theoretical understanding of the role of self-conscious emotions in social work practice.

CHAPTER 10: CONCLUSION

The main argument of this thesis has been that self-conscious emotions were an inherent part of practice within the teams under study, on both a micro and macro level, and significantly influenced the actions of all those within the organisation. They could be considered to be at the heart of the processes that (1) installed the logic of administration and auditing as a dominant feature of the service; (2) created and embedded the meanings and characteristics of an ideal typical professional identity; and (3) guided and shaped the acquiescence or resistance of the social workers to the institutional expectations. These processes, and the resulting emotional experiences, were complex, involving a range of bodily sensations, cognitions, social interactions, and cultural constructions, which everyone 'felt' but struggled to communicate. Their influence, therefore, remained unacknowledged. It was not that the social workers wanted to focus on administration or, at times, practise in a derogatory fashion, or that the leaders and managers wanted to design a system where such practice was encouraged. These were just the effects of unconsciously constructing the boundaries for shame and pride in this manner. Given this analysis, we might want to ask what this study contributes to research and practice. This concluding chapter, therefore, answers these questions by, firstly, locating this study within a wider body of literature and considering how it compliments and extends this work, and, secondly, considering the implications of this analysis in attempts to create a better system.

SO WHAT DOES THIS STUDY CONTRIBUTE TO RESEARCH?

This study contributes to the debates within emotion theory generally and self-conscious emotions more specifically. A constructionist account of emotions provided the most useful theoretical perspective to interpret these data. These emotions were an inherent part of the ongoing interactional sequences of the social workers, being constructed from a 'complex' of components (Burkitt, 2015), which they were able to label with one or more terms. Furthermore,

a prototype approach enabled the terms the social workers used to communicate their experience to be considered as meaningful, rather than reducing their experience to a single a priori concept, triggered under certain conditions, or constructing multiple concepts to explain the variety of experiences categorised with the same term. These data support the notion that shame, guilt, humiliation, and embarrassment are terms to indicate qualitatively different experiences, which can be combined to provide more detailed descriptions of the lived emotional experience. They also support the notion, however, that acceptance and rejection should be considered as emotional experiences in their own right, which can be used in conjunction with other terms to provide more specificity to a person's comprehension and communication of their emotional experience. This supports Tangney et al.'s (2007) argument that shame specifically relates to a sense that there is something wrong with the 'self', rather than because someone else has evaluated them negatively, and Gausel and Leach's (2011) argument that shame and rejection are distinguishable emotional experiences. The implication of this perspective, however, is that Scheff's conception of shame and pride is more usefully conceived as rejection and acceptance, rather than as shame and pride.

While this has been a study of self-conscious emotions, the primary concern has been their role in child protection social work practice and this study contributes to the field of social work in four main ways. Firstly, it demonstrates that the experiences of pride, shame, guilt, and humiliation were prevalent and significant for both the social workers' and team managers' practice. This finding complements the work of others within the field concerned with improving the systems and practices within the institution of social work (e.g. Ruch et al., 2010; Featherstone et al., 2014b). Indeed, it provides a hitherto underexplored dimension to practice and a language to describe these experiences. Furthermore, the theoretical perspective that I have built complements and expands the existing literature and current perspectives on the forces that are created by wider social mechanisms in response to social, political, and functional pressures and their effect on organisations and their actors (Parton, 2014; Warner, 2015). It suggests that, as an

embodied experience, self-conscious emotions are an inherent part of social workers' experience and, therefore, guides and constrains the actions and interactions that underpin what they do and how to do it, extending the debates on naturalistic decision making in social work practice (Platt and Turney, 2014). It also highlights, as an embedded experience, the significant role of those who set the context for their practice and how this context specifically influences what the social workers do and how they do it (Featherstone et al., 2014; Ferguson, 2014). This study has provided a language to highlight their use as political tools and cultural-cognitive resources, which can be used to understand and influence these emotional, psychological, and social processes.

Secondly, this study contributes to the field of social work by incorporating and extending the literature on institutional work. While there is a long history in studies on institutions and organisations, institutional work as a field and research agenda is comparatively recent (Lawrence and Suddaby, 2006) and the role of emotions in institutionalisation has only recently begun to be considered (Voronov and Vince, 2012; Creed et al., 2014; Moisander et al., 2016). This study integrates a range of these ideas to provide a conceptual framework to understand how the boundaries for shameful and praiseworthy behaviour were not only constructed within the institution of child protection social work but also through formal and informal regulatory mechanisms, which were then translated and enacted within the organisation. It is only within such a perspective that the actions of the social workers could be comprehended. These frameworks extend the existing literature on emotions in institutional work by demonstrating how emotions can be used as a resource for the exercise of episodic power (Moisander et al., 2016). Indeed, it extends this literature beyond that of shame, or even pride, to include guilt and humiliation as important resources to be mobilised in the process of disrupting, creating, and maintaining institutional arrangements. This identifies a new area of research in the field of social work, which has yet to consider these processes and experiences in any depth (Gibson, 2016), and demonstrates their significance, at least within the organisation under investigation, in the processes of institutional reproduction and change.

Thirdly, this study contributes to the debates on what power is and how it is exercised in institutional processes (Lukes, 2005; Lawrence, 2008) and social work practice (Hasenfeld, 1987; Tew, 2006). Considering self-conscious emotions as a component of the micro-foundations of interpersonal dynamics, communication, and social and symbolic interaction provides new avenues for theorising and researching how certain actions can be deterred, constrained, and shaped, while others encouraged, maintained, and supported (Voronov and Vince, 2012). Indeed, by considering self-conscious emotions as both an effect and source of power, this study compliments the literature on how power opens up or closes off certain opportunities not only for the social workers but also the managers and the organisation as a whole (Tew, 2006). By constructing notions of legitimacy and standards to achieve legitimacy, both for organisations and professionals, self-conscious emotions can be considered the systemic force that achieves motivation and commitment to certain ways of acting and being within a given institution. Shame and pride can, therefore, be considered inherent components of the legitimising process, while humiliation may be a standard organisational product (Czarniawska, 2008) in the rituals of verification (Power, 1997). The findings of this study also contribute to the debates on power and resistance, however, as Hudson et al. (2015) argue, notions of legitimacy are always contested and, as this study has demonstrated, self-conscious emotions can be considered an essential component in attitudes and actions of resistance.

Fourthly, the findings from this study can situate these processes of institutionalisation within the wider debates on social work, the professions, and the welfare state. A broad pattern of neo-bureaucratic reorganisation of public services has been observed in recent decades. This has been argued to shift the mechanisms of control of organisations, and those within them, from a Weberian-type bureaucratic one, i.e. the 'iron-cage', to more of a Foucauldian one, i.e. the 'panoptic gaze' (Power 1997; Reed, 1999). Some, however, have argued that such analyses provide a too broad a perspective, which limits the effectiveness of such analytical devices in empirical work (e.g. Hoggett, 1996; Farrell and Morris 2003; Exworthy, 2015). This study suggests

that instead of a move from one to the other, it could be seen more as a merger, creating new forms of “compliance structures, knowledge systems and surveillance technologies” (Reed, 1999, p. 17), which produces a more effective system of control by constructing and imposing new identities on institutional actors (Alvesson and Willmott, 2002). The move towards social workers being used as administrators of public policy, and at times as a form of moral and social policing, contributes to Wacquant's (2010) notion of the centaur state as a functional corollary of neo-liberal capitalist policies, which creates liberal policies for those at the top and authoritarian policies for those at the bottom. While he argues such a phenomenon “arises from struggles over and within the bureaucratic field, aiming to redefine the perimeter, missions, priorities, and modalities of action of public authorities” (Wacquant, 2010, p.217), the findings from this study provide a detailed account of one area of struggle. Furthermore, it contributes to these debates by demonstrating how these authoritarian intentions towards those at the bottom were enacted by imposing authoritarian policies on those who delivered the services on behalf of the state through constructing and mobilising self-conscious emotions. This study, therefore, brings self-conscious emotions into the heart of analysing social work and public administration, complementing the wider analyses of recent reforms (McDonald, 2006; Garrett, 2009; Parton, 2014).

SO WHAT DOES THIS STUDY CONTRIBUTE TO PRACTICE?

In addition to these contributions to the existing literature, it is also important to consider what the implications of the analysis provided here are for the field of child protection social work generally and the Council involved in the study more specifically. The colonisation of the social work service within the Council by auditing priorities had created a system intended to provide organisational legitimacy which, as Power (2008) argues, results in an organisation's aims and purpose being undermined. The general consensus within the teams was that social work practice was being done elsewhere, usually by non-social workers. The social workers and the managers

within the Council expressed a strong desire for this national situation to be changed and their daily lives improved. Given the interpretation provided here, there are perhaps two general target areas to help and support the changes that the children, parents, social workers, managers, and even politicians need. As Rorty (1998) states, with a pragmatic mind, “sociologists and psychologists might stop asking themselves whether they are following rigorous scientific procedures and start asking themselves whether they have any suggestions to make to their fellow citizens about how our lives, our institutions, should be changed” (p.70).

The first is a focus on changing the systemic shame and pride that supported and sustained the institutional arrangements. While the dominant discourse on shame and pride characterises shame as ‘bad’ and pride as ‘good’, this thesis has indicated how pride can have a dark side, potentially being used to promote practice that causes distress and pain in others, while shame could be used for good, deterring oppressive practice and nurturing ethical professional identities. It is the social context that provides the meaning and therefore the direction of the constraints. The reproduction and continuation of the systemic pressures should not be taken for granted, as the dominant discourses, beliefs, and shared rules require active maintenance over time and are, therefore, always open to reinterpretation.

As the findings in this study demonstrate, there exists a range of views about the purpose and practices of social work that supports attitudes and actions of resistance. Such views resonate with the emerging dominant perspective within the English judiciary that has been challenging the taken-for-granted practices within child protection social work in relation to placing children in care and the use of Section 20 (Children Act 1989) powers (e.g. *Re B-S (Children)* [2013] EWCA Civ 1146; *Re N (Children) (Adoption: Jurisdiction)* [2015] EWCA Civ 1112). Furthermore, there exists a body of literature and ideas, both within the practice and academic spheres, which support and maintain attitudes, perspectives, and practices that resist the dominant systemic pressures (e.g. Power, 2008; Featherstone et al., 2014b; Warner, 2015). These can be brought

together, through coordinated effort across multiple individuals, organisations, and institutions, to disrupt the established boundaries for praiseworthy and shameful practices by disassociating the moral foundations and undermining the core assumptions and beliefs that hold them in place (Lawrence and Suddaby, 2006). Indeed, the senior managers in the Council wanted to create a whole family, patch based, solution focused service, only they felt constrained in doing so. Coordinated efforts to undermine the logic of administration and auditing, while simultaneously making available alternative techniques and methods of monitoring and evaluation, may create sufficient space for institutional guardians to fulfil their vision and align their service as they intended. This offers the space for alternative expectations for shameful and praiseworthy behaviour, moving towards a service founded on professional values, empathy, and a pragmatic view on what is, and is not, achievable. There are indications that some authorities are moving in such a direction (e.g. Leeds City Council, 2014).

The second is a focus on the boundaries for episodic shaming and praising within a Council, which are, of course, embedded within the systemic shame and pride for the field. By decoupling what is shameful and praiseworthy for social work from that of social administration, it is possible to create sufficient space for some institutional entrepreneurs to influence or force changes in the systemic shame and pride for their organisation. As Rorty (1989) argues, however, such action can only be achieved through language, and this decoupling requires our language to differentiate between administration and social work, which necessarily requires a definition of both. Conversations within the team rooms in the Council could have been very different if certain tasks were institutionally classified as administration rather than social work. Priorities may have been reformulated and support provided that helped improve practice. The leaders and senior managers certainly wanted practice to improve, yet with practice being conflated with administration following the colonisation of the service by auditing priorities, the leaders and senior managers were faced with mounting pressures and limited resources with no way of distinguishing one form of practice from another save for the threat of being shamed or praised.

As Wittgenstein (1922) argued, our language provides the limits of our world. New language, therefore, provides new opportunities. By better defining what professional practice is, together with the normative foundations for professional practice within the Council, the leaders and managers would be able to implement a system of policing, evaluation, and monitoring more consistent with their original intentions. Indeed, the organisation may seek to reduce the amount of administrative tasks, the team managers may see less value in desk work and greater value in observing practice, and social workers may be encouraged to talk about practice skills, theories, and methods, all because this makes children safer and families better supported.

Furthermore, the language of emotions can be important tools in the construction of a new interpretive framework, as they can powerfully describe both the actions of the regulators and the experience of those being regulated. Through such powerful descriptions, cultural legitimacy for certain practices can be disrupted and new ones created. Indeed, the senior managers, team managers, and social workers did not want to see their actions as shaming or humiliating. The fact that they did not communicate to each other that this was indeed how they felt only enabled such action to continue, embedded in the belief that they were doing the 'right' thing. To perceive oneself as shaming and humiliating another, while painful and uncomfortable, can induce sufficient empathy and reflection to motivate change (Gausel and Leach, 2011). Talking about how we feel, and talking about how we imagine others may be feeling are, therefore, important components of being able to disrupt and create new institutional norms, rules, and practices. Speaking up about feeling shame and humiliation is, however, painful and difficult (Brown, 2007) requiring courage and self-compassion, yet this may be necessary to exert an episodic force that influences, challenges, and manipulates (Oliver, 1991) the actions of those involved in the regulation of the profession and the professionals.

Changing the boundaries for shameful and praiseworthy behaviour for the social workers in any Council would, inevitably, heighten a sense of shame in the leaders and managers. Arguably, all

established arrangements can be considered a product of navigating and settling on a set of rules and practices intended to avoid being shamed and attract being praised. Leaders and managers would, therefore, require the courage to make changes to these in the knowledge that something could, at some point, attract unwanted attention on their service leaving them feeling vulnerable. Honesty about such feelings, with greater communication between individuals and organisations about such vulnerabilities, along with better coordination of practical and political support for leaders and managers that are shamed and humiliated may provide greater strength to stay true to their original vision (Shoesmith, 2016). Honesty about how we feel and courage to speak up about this can be considered to be a deliberate and crucial form of institutional work. It is through such action that political, and ultimately regulatory, support can be mobilised (Lawrence and Suddaby, 2006) in efforts to create a more humane system. As M.C.Richards (cited in Turnell and Essex, 2006, p.1) states “the world will change when you can imagine it differently”; to which we can add, when this is combined with sustained efforts at institutional change.

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APPENDIX 1: DIARY SHEETS

Diary Sheet

Name:

Date:

Please describe any situation which made you feel **good** about yourself today:
(include when it was, where you were, who was there, and what happened)

Describe what you were thinking at the time:

*For example:
What did you think of yourself?
What do you think others thought of you? or would have had they been there?
What did you think of the other person(s)?
How did the other person(s) treat you?*

Describe the bodily sensations:

*For example:
Did you feel cold, warm or hot?
Did you feel tense or relaxed?
What happened in your body: Did your breathing change? Did you start to sweat? Was your heart racing?
Did you smile or laugh?
Did you feel it in a place in your body (e.g. stomach, throat, skin, head, all over)?
Did it feel pleasurable or displeasurable?*

What word or words would you use to describe how you felt in this situation?

| Then tick which term(s) corresponds best to your experience (tick as many as you like or none): | | |
|---|--------------------------|----------------------|
| <i>Acceptance</i> | <input type="checkbox"/> | <i>Rejection</i> |
| <i>Pride</i> | <input type="checkbox"/> | <i>Shame</i> |
| <i>Valued</i> | <input type="checkbox"/> | <i>Guilt</i> |
| <i>Important</i> | <input type="checkbox"/> | <i>Humiliation</i> |
| <i>Anxiety</i> | <input type="checkbox"/> | <i>Embarrassment</i> |
| <i>Anger</i> | <input type="checkbox"/> | <i>Mortified</i> |

How did these thoughts and feelings influence what you said or did at the time? How may this change things for you in the future?

Please describe any situation which made you feel **bad** about yourself today:
(include when it was, where you were, who was there, and what happened)

Describe what you were thinking at the time:

*For example:
 What did you think of yourself?
 What do you think others thought of you? or would have had they been there?
 What did you think of the other person(s)?
 How did the other person(s) treat you?*

Describe the bodily sensations:

*For example:
 Did you feel cold, warm or hot?
 Did you feel tense or relaxed?
 What happened in your body: Did your breathing change? Did you start to sweat? Was your heart racing?
 Did you smile or laugh?
 Did you feel it in a place in your body (e.g. stomach, throat, skin, head, all over)?
 Did it feel pleasurable or displeasurable?*

What word or words would you use to describe how you felt in this situation?

| | | |
|---|----------------------|--|
| Then tick which term(s) corresponds best to your experience (tick as many as you like or none): | | |
| <i>Acceptance</i> | <i>Rejection</i> | |
| <i>Pride</i> | <i>Shame</i> | |
| <i>Valued</i> | <i>Guilt</i> | |
| <i>Important</i> | <i>Humiliation</i> | |
| <i>Anxiety</i> | <i>Embarrassment</i> | |
| <i>Anger</i> | <i>Mortified</i> | |

How did these thoughts and feelings influence what you said or did at the time? How may this change things for you in the future?

APPENDIX 2: INTERVIEW GUIDE

| | |
|---|--|
| Introduction: | |
| <p>Thank you for agreeing to participate in this interview. As you know, I am undertaking a study into emotions in social work and I would like to ask you some questions about your experiences of social work to contribute to this study. I will ask the questions below along with further prompts or follow up questions which seem relevant throughout the interview. The interview should last about an hour. I will record this interview so that I am able to study what has been said. The recording will be securely stored at the University of Birmingham and only I will have access to it. Any reference to what has been said in my report, thesis, or academic papers will always be anonymous. You do not have to provide any information that you do not wish to and if you wish to end the interview at any point then just let me know and we will end it. Are you ok to continue?</p> | |

| | |
|--------------------|---|
| 1. Practice | |
| 1.1 | Generally, what do you think of your social work practice? |
| 1.2 | What do you think your team members team manager county manager service users think of your practice? |
| 1.2.1 | What influence do these opinions have on how you do your job? |
| 1.2.2 | What influence do these opinions have on how you see yourself as a social worker? |
| 1.3 | Do you feel able to practise in the way you want to in this team organisation? |
| 1.3.1 | If not, why not? |
| 1.3.2 | If yes, what it is about this team that enables you to practise in this manner? |

| | |
|-------------------------------|--|
| 2. Team Organisation | |
| 2.1 | How do you know when you are doing a good job in this team organisation? |
| 2.2 | How do you know when you are not doing a good job in this team organisation? |
| 2.3 | What's the best part of your work? |
| 2.4 | What's the worst part of your work? |
| 2.4.1 | How do you cope with this? |
| 2.5 | What's your biggest fear in doing this work? |

| | |
|--|---|
| 3. Self-Conscious Emotional Experiences | |
| 3.1 | Can you think of a time when you thought a colleague, manager or other professional looked down on you or saw you as inadequate or incompetent in some way? |
| 3.1.1 | Can you tell me about it? |
| 3.1.2 | Can you describe how you felt? |
| 3.1.3 | Can you explain the consequence of this feeling on your work? |
| 3.2 | Can you think of a time when you thought a service user thought of you negatively or saw you as inadequate or incompetent in some way? |
| 3.2.1 | Can you tell me about it? |
| 3.2.2 | Can you describe how you felt? |
| 3.2.3 | Can you explain the consequence of this feeling on your work? |
| 3.3 | Can you think of a time when you have felt disappointed or frustrated with yourself in your work? |
| 3.3.1 | Can you tell me about it? |

| | |
|-------|---|
| 3.3.2 | Can you describe how you felt? |
| 3.3.3 | Can you explain the consequence of this feeling on your work? |
| 3.4 | Can you think of a time when you thought you were seen as a good social worker by a colleague, manager or other professional? |
| 3.4.1 | Can you tell me about it? |
| 3.4.2 | Can you describe how you felt? |
| 3.4.3 | Can you explain the consequence of this feeling on your work? |
| 3.5 | Can you think of a time when you thought you were seen as a good social worker by a service user? |
| 3.5.1 | Can you tell me about it? |
| 3.5.2 | Can you describe how you felt? |
| 3.5.3 | Can you explain the consequence of this feeling on your work? |
| 3.6 | Can you think of a time when you felt like a really good social worker? |
| 3.6.1 | Can you tell me about it? |
| 3.6.2 | Can you describe how you felt? |
| 3.6.3 | Can you explain the consequence of this feeling on your work? |

| 4. General | |
|------------|---|
| 4.1 | What is your name? |
| 4.2 | How old are you? |
| 4.3 | How would you describe your ethnicity? |
| 4.4 | When did you qualify as a social worker? |
| 4.5 | How long have you worked at this local authority? |
| 4.6 | How long have you worked in this team? |

| End: | |
|---|--|
| <p>The interview has now finished. Thank you for taking the time to talk to me and being part of this study. Is there anything you would like to ask me or add to what you have said? There is a range of support available if you are feeling unsettled by anything we have discussed and I can help arrange this with you if you would like me to. Thank you again.</p> | |

APPENDIX 3: THE DATA COLLECTION PROCESS

| Date | Hours in the field | No. of Diary Entries | No. of Interviews |
|--------------|--------------------|----------------------|-------------------|
| 13.6.14 | 3.5 hours | - | - |
| 17.6.14 | 1 hour | - | - |
| 18.6.14 | 9 hours | 6 | - |
| 21.6.14 | 9 hours | - | - |
| 25.6.14 | 9.5 hours | - | - |
| 1.7.14 | 9 hours | 9 | - |
| 4.7.14 | 8.5 hours | 4 | - |
| 7.7.14 | 9.5 hours | 5 | - |
| 8.7.14 | 9.5 hours | 10 | - |
| 18.7.14 | 8.5 hours | 3 | - |
| 21.7.14 | 9.5 hours | 6 | - |
| 7.8.14 | 9.5 hours | 9 | - |
| 8.8.14 | 8.5 hours | 2 | - |
| 11.8.14 | 9 hours | - | - |
| 15.8.14 | 8.5 hours | 7 | - |
| 19.8.14 | 8.5 hours | 4 | - |
| 20.8.14 | 8.5 hours | 11 | - |
| 12.9.14 | 9 hours | 5 | 1 |
| 18.9.14 | 9.5 hours | 6 | - |
| 1.10.14 | 9.5 hours | - | - |
| 2.10.14 | 9 hours | 5 | - |
| 9.10.14 | 9.5 hours | 7 | 1 |
| 17.10.14 | 9 hours | - | 1 |
| 24.10.14 | 9.5 hours | - | 3 |
| 30.10.14 | 9 hours | - | 4 |
| 7.11.14 | 3.5 hours | - | 1 |
| 11.11.14 | 8.5 hours | - | 2 |
| 17.11.14 | 8.5 hours | - | 3 |
| 27.11.14 | 7 hours | - | 2 |
| 4.12.14 | 3 hours | - | 1 |
| 9.12.14 | 3 hours | - | - |
| Total | 246.5 hours | 99 | 19 |

APPENDIX 4: INFORMATION SHEET FOR PARTICIPANTS

Social Work Research Project

Researcher: Matthew Gibson; Supervisors: Prof. Sue White & Dr Jerry Tew, University of Birmingham

Research focus:

The proposed study seeks to investigate the emotional experience of social work practice. Emotions can be considered responsible for the highs and lows within social work, which may affect not only an individual's job satisfaction and personal well-being, but also their ability to make wise decisions in critical moments. While much has been written about the importance of emotions within social work practice, very little research has investigated the specific role emotions may play in social work practice. This study is looking at social workers identities and relationships to see how they are developed and what social workers' feel when these are threatened. This may involve 'self-conscious' emotions such as pride, shame, guilt, embarrassment and humiliation and their role in social work practice.

What I would like to do:

- Observe you undertaking computer/desk work and interacting with other colleagues/ managers. Sometimes I would like to ask you a few questions about what I see but I do not intend for this to be intrusive to your work
- Observe your team meetings
- Observe your direct work with families including home visits and meetings. I will talk to you to make sure it is appropriate for me to be there and I will have information for other professionals and service users so they can make a choice about me being there
- Observe your supervision sessions with your, and your manager's, consent
- Ask you to complete a 1 page diary sheet about your experience of the day I have observed
- Interview you about your experiences. Each interview would be about an hour and only if you agree to take part

Questions:

What do I get from it?

You will be the essential part of a research study. I will consult you on any findings to get your opinion. I will provide you with a report of my findings. I can provide training to your team on what I find which may help your team.

How will you use the information you get about me?

The information I get will be used for my PhD thesis and potentially for publications in academic journals. You will not be identified. Nor will the local authority. Everything will be anonymised so no one will know where, or from whom, it has come from.

Are you judging my practice?

No. This is not a study to make judgements about your practice. This is a study to get your experience of your work. Your views and opinions as well as how you feel is what this study wants to find out.

For further information:

Matthew Gibson, Institute of Applied Social Studies, University of Birmingham, B15 2TT, Tel: 0121 4158028, Email: m.j.gibson.1@bham.ac.uk

APPENDIX 5: RESEARCH STATEMENT FOR PARTICIPANTS

Date:

Full Project Title: The role of self-conscious emotions in child protection social work practice

Student Researcher: Matthew Gibson, University of Birmingham

Supervisors: Professor Sue White & Dr Jerry Tew, University of Birmingham

This Research Statement and Consent Form is 5 pages long. Please make sure you have all the pages.

1. Your Consent

You are invited to take part in this research project. This Research Statement contains detailed information about the research project. Its purpose is to explain to you as openly and clearly as possible all the procedures involved in this project so that you can make a fully informed decision whether you are going to participate.

Please read this Statement carefully. Feel free to ask questions about any information in the document.

Once you understand what the project is about and if you agree to take part in it, you will be asked to sign the Consent Form. By signing the Consent Form, you indicate that you understand the information and that you give your consent to participate in the research project.

You will be given a copy of the Research Statement and Consent Form to keep as a record.

2. Purpose and Background

Emotions can be considered responsible for the highs and lows within social work, which may affect not only an individual's job satisfaction and personal well-being, but also their ability to make wise decisions in critical moments. While much has been written about the importance of emotions within social work practice, very little research has investigated the specific role emotions may play in the development of an individual's social work identity. The purpose of this project is to investigate the emotional experience of social workers of social work practice. It will be looking at what supports, and what threatens, social workers identities and what strengthens, and what weakens, the social bonds of social workers in social work practice.

You are invited to participate in this research project because you are considered a good social work team and your experience and practice will offer insights into the experience of social work and the influence of self-conscious emotions.

3. Funding

This research is partially funded by the University of Birmingham

4. Procedures

This project will involve a researcher being with the team for one day a week for six months. This will involve them observing you doing your work and taking notes. You are not expected to do anything different to what you would ordinarily do on these days. Participation in this project will involve being observed, being asked questions every now and again about what the researcher has observed, and having the researcher come out on visits or to meetings with you every now and again. It will also involve the researcher asking you to complete a 1 page diary sheet at the end of the day that has been observed to get your experience of the day.

You and your practice are not being judged. The study is interested in your experience of social work practice and so what happens, and what you think and feel about it, is the focus of the project.

Participation in this project will also involve attending a semi-structured interview that will discuss issues related to your experience of your work. The interview will be conducted in English, take approximately an hour and will be held at a mutually convenient venue. You will be interviewed by Matthew Gibson. You will be provided with the questions prior to the interview so you can study them if you wish. With your permission, your interview will be audio-recorded and the content coded for analysis. To assist our understanding of the experience of social work your interview will be fully transcribed. At your request, a copy of your transcribed interview will be supplied to you. Any parts of your interview that you want removed will be deleted. You do not have to provide information that you do not wish to and you can stop the interview at any point without a reason and without any prejudice to you.

5. Possible Benefits

By looking at social workers' experience, the findings of this research will offer new insights into emotions in social work practice. The outcomes of this research may assist in providing social workers a voice to their experience of the work they do. You will be consulted in the drafting of the findings and you will be provided with a report of the findings at the end of the project. The researcher will also offer a training session to your team on the findings. We cannot guarantee or promise that you will receive any personal benefits from this project.

6. Possible Risks

There are no predicted risks to you through participating in this project. It may feel uncomfortable to be observed at times and some of the conversations may be uncomfortable. However, you will decide what you want to disclose and what you do not and you will know what you will be asked in the interviews prior to the interview to consider the questions beforehand.

7. Privacy, Confidentiality and Disclosure of Information

The information gathered in this study will be secured so that it is accessible only to Matthew Gibson. The analysis will be done in a way that prevents the identification of individuals in the publication of findings. Coded data will be securely stored for ten years after final publication of the collected data, as prescribed by University regulations. Any information obtained in connection with this project and that can identify you will remain confidential. It will only be disclosed with your permission, subject to legal requirements. If you give us your permission by signing the Consent Form, we plan to publish the results in academic journals.

8. Results of Project

You will be asked to give your opinion on the draft findings. A report will be provided to you once the project has been completed.

9. Participation is Voluntary

Participation is voluntary and confidential. **If you do not wish to take part you are not obliged to.** If you decide to take part you will be able to request that specific situations are not observed at any time during the research and will be able to stop taking part in the study at any time during the course of the research period. You will be able to veto the use of material from observations or interviews with them, in any reports, other writing or presentations that result from the research. If you decide to take part and later change your mind, you are free to withdraw from the project at any stage and request that your data not be used in the project. However, after the information has been collected it will be used for analysis and it will

not be possible to withdraw the information at this point. Therefore, if you wish to withdraw your consent this must be done by the latest by 2 months after the end of the 6 month period of the information collection.

Your decision whether to take part or not to take part, or to take part and then withdraw, will not affect any relationship you might have with the investigators or your relationship with The University of Birmingham.

Before you make your decision, Matthew Gibson will be available to answer any questions you have about the research project. You can ask for any information you want. Sign the Consent Form only after you have had a chance to ask your questions and have received satisfactory answers.

If you decide to withdraw from this project, please notify the researcher, Matthew Gibson.

10. Ethical Guidelines

The ethics aspects of this research project have been approved by the Research Ethics Committee of the University of Birmingham.

11. Complaints

If you have any complaints about any aspect of the project, the way it is being conducted or any questions about your rights as a research participant, then you may contact:

Professor Sue White, Institute of Applied Social Studies, University of Birmingham, B15 2TT

Tel: 0121 414 5714, Email: s.white.3@bham.ac.uk

12. Reimbursement for your costs

You will not be paid for your participation in this project.

13. Further Information, Queries or Any Problems

If you require further information, wish to withdraw your participation or if you have any problems concerning this project, you can contact the researcher:

Matthew Gibson, IASS, University of Birmingham, Edgbaston, B15 2TT, Tel: 0121 4158028, Email: m.j.gibson.1@bham.ac.uk

APPENDIX 6: CONSENT FORM FOR PARTICIPANTS

Full Project Title: The role of self-conscious emotions in child protection social work practice

- I confirm that I have read the Research Statement, have had the opportunity to ask questions about the research and have had any questions answered satisfactorily
- I understand that my participation is voluntary and that I am free to withdraw at any time from participating in the research
- I understand that the research involves observation of social work practice as it occurs both within and outside of the office including with services users and other professionals. In agreeing to take part, I understand that the researcher may make notes concerning observations of my social work practice
- I understand that I can ask that observation does not take place in any of these situations, if I feel that this is appropriate
- I understand that the research may also involve informal discussions between the researcher and participants. The researcher may make written notes or use an audio recording device (in which case my permission will be sought). The researcher will never make audio recordings except where everyone present has given their consent
- I understand that I may see any notes written about my practice or any transcripts of recorded conversations that I have had with the researcher
- I understand that the research findings may be made available in the following ways:
- A report for the local authority and its staff
 - A PhD thesis which will be kept at Birmingham University library
 - Articles in relevant academic journals
 - Presentations at academic conferences
- I understand that these reports will anonymise any data so that research participants (or anyone whom they refer to) cannot be identified. Material in the PhD thesis, journal articles and in conference presentations will not reveal any details about the local authority in which the research is taking place.
- I will be asked for additional consent to participate in an interview.

Participant's Name (printed)

Signature Date

APPENDIX 7: CONSENT FORM FOR PARTICIPANT INTERVIEWS

Date:

Full Project Title: The role of self-conscious emotions in child protection social work practice

- I have read and I understand the Research Statement.
- I freely agree to participate in this semi-structured interview which will last about an hour
- The interview I give and the information it contains will be used solely for the purposes defined by the project.
- At any time, I can refuse to answer certain questions, discuss certain topics or even put an end to the interview without prejudice to myself.
- To facilitate the interviewer's job, you will be asked for the interview to be recorded. If you give permission, any recording will be securely stored on the University of Birmingham's computer system and subsequently destroyed after it has been transcribed.
- All interview data will be handled so as to protect confidentiality. Therefore, no names will be mentioned in the transcripts and the information will be coded.
- The researcher has agreed not to reveal my identity and personal details, including where information about this project is published, or presented in any public form.

Participant's Name (printed)

Signature

Date

APPENDIX 8: RESEARCH INFORMATION SHEET FOR INDIRECT PARTICIPANTS

Social Work Research Project

What is this research about?

This research project is looking at social workers' experience. It is interested in finding out how to improve social work practice.

What are you doing here?

I am observing the social worker. I will be looking at what the social worker does and what they say. I will be taking notes about what I see and hear.

Do I have to do anything?

No. You do not have to do anything that you wouldn't normally do when you see a social worker.

Are you judging me?

No. I am looking at what the social worker does and says and I will talk to them about this later. I am not making judgements about you.

Are you writing things down about me?

I will be making notes about what I see and hear so I can remember what was said and what I saw at the time. I might make notes about what you say so I can talk to the social worker about their experience later. I am not making notes for the social worker or for the local authority. The notes are for me to be able to do the research.

What will you do with the notes?

All my notes will be kept confidential and stored in a locked cabinet at the University of Birmingham. I will look at them to make conclusions and write a report for the University. I might also use them to write papers for academic journals.

All information about you will be anonymised so no one will know you have been involved in this research.

You do not have to agree to me being here.

If you do agree, you can change your mind later and any notes will be destroyed.

For further information:

Matthew Gibson, Institute of Applied Social Studies, University of Birmingham, B15 2TT, Tel: 0121 4158028, Email: m.j.gibson.1@bham.ac.uk

APPENDIX 9: CONSENT FORM FOR PARENTS/CARERS

SOCIAL WORK RESEARCH PROJECT

CONSENT FORM

I have been given and I understand the information sheet about this research project

I agree to the researcher observing this visit/meeting and making notes

I understand that any information about me or my family will not identify me

I understand that I can ask for any information about me or my family not to be used in the study even if this is after the visit/meeting

Name (printed)

Signature

Date