

BOOK REVIEW

Mo McPhail, ed.
Service User and Carer Involvement
Edinburgh: Dunedin Academic Press, 2008

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Bureaucracy has come some distance since Max Weber praised it as the ideal type for a rational-legal system of human organization. Meant to betoken the replacement of a traditional state apparatus with an efficient civil service, it has been transformed into a term of abuse. Bureaucratic order once suggested that rules would be clear and meticulously followed, competitions and disputes would be resolved on the basis of merit, and nepotism, favouritism and patronage would be purged as pertinent influences on public policy and service. Plainly, something went wrong.

For decades, three major failings were identified. First, bureaucracy became linked to inefficiency rather than to the smooth and seamless delivery of services for which it was intended. Clients and customers seemed regularly to “fall through the cracks,” when they were not bound, gagged and garroted by “red tape.” Written rules came to fill small libraries and were anything but transparent. Second, bureaucrats no longer seemed to emulate “blind” justice in the sense of treating all without fear or favour and with an overriding commitment to equity; instead, they appeared to be deaf, mute and numb to the plight of those they were intended to serve. Finally, whenever the insensitivity and rigid hierarchy that often described bureaucratic organization led to public outrage and demands for reform by those who felt ignored, marginalized or oppressed by “the system,” a reactive response of denial and a retreat into repression was too often seen. Care giving could easily transform into an almost custodial function as the allegedly ungrateful were punished for their apparent ingratitude.

This representation, of course, is unfair, one-sided and intended to discount the commitment, concern and competence of people working diligently and compassionately in the public sector, and especially in the “helping professions” that include but are not limited to the broad fields of health and social welfare. It does, however, serve to provide background for the issues and controversies that have arisen as citizens demand greater involvement and genuine respect when dealing with service providers. It also finds expression in, for example, disparate movements for patients’ rights and organizations such as anti-poverty groups that try to raise awareness and sometimes openly confront the institutions mandated to ameliorate their conditions.

In this well-organized, well-written and disarmingly candid book, Mo McPhail has brought together the experience and expressed opinions of people throughout the health and social care systems, and has directed their collected and contested ideas toward more than a stereotypical “frank and open” forum; instead, this slim anthology actually seeks to make a difference and to stimulate change. It is the fourth in a series of nine (to date) books that address various aspects of policy making and practice in a specifically Scottish context and from a specifically Scottish perspective. It should not, however, be in any way discounted for that reason. On the contrary, its rootedness in specific circumstances adds to the concreteness of the observations and recommendations, while providing easily transferable insights to others who will learn more from books such as this, than from ethereal and abstract treatises that strive to be applicable everywhere, but fail to be of much use anywhere.

The underlying theme of the book is suitably expressed in its subtitle, “beyond good intentions.” While acknowledging that most public bureaucracies are models of “top-down” management, it would be difficult to find people from senior supervisory personnel to front line staff who would openly defend authoritarianism in any of its forms. There is much talk of participation, collaboration and the ubiquitous notion of empowerment, and there is sometimes even a measure of sincere commitment to bringing these concepts and the power shifts they imply into organizational cultures. Still, the amount of authentic organizational change is annoyingly small.

McPhail and the five other contributors to this anthology appreciate the frustrations of those eager to make a difference, and they meet the pragmatics of participation directly. They understand the practical difficulties of introducing and sustaining relationships that would manifest communitarian ideals within a system of public accountability and with direct mechanisms of governmental oversight. They know that such vaguely anarchistic ambitions as those expressed by the intellectual progeny of Ivan Illich are occasionally attractive and sometimes utterly seductive, but they also recognize that they are dreadfully difficult to put into place without ultimately destroying the structures that are at least provisionally necessary if anything whatever is to be done. Impressively, McPhail also understands the indefensible social costs that must be borne if these ideals were to be utterly rejected.

Of the seven chapters, including absorbing testaments from Norma McSloy and John Dow, I found the second to be most immediately engaging. Co-authored by Wendy Ager and Mo McPhail, it is a treatment of “Issues of Power in Service User and Carer Involvement.” Discussing their experience in “partnerships” dedicated to improving “service and user and carer involvement in social work education,” Ager and McPhail announce that their work has been “deeply politicizing.” Although it may seem astonishing that any activity that is profoundly connected to government, legislation, administrative benchmarks, quality assurance evaluations and the like could be anything other than political, Ager and McPhail enrich their observations with a simple but useful distinction between “managerial/consumer” models and “democratic” models of health and welfare service. They astutely point out that the language of participation and involvement is open to vastly different interpretations with potentially opposite implications. Indeed, they refer to “contradictions” in theory and ideology which make a resolution of hierarchical assumptions and grassroots aspirations impossible in the absence of an ideological shift of almost metaphysical proportions among those currently given authority over (and responsibility for) the entire organization.

Resisting the temptation to indulge in a radical screed which might well have signaled an end to their project, Ager and McPhail set their sites a little lower. They present a reasoned, pragmatic approach to social work reform. Incremental rather than immediately transformative, it recognizes that there are areas of overlap where constructive change can be imagined and sometimes implemented without causing unnecessary distress among those entrusted with final power. Locating and invigorating such oases within the desert of official authority may not be all that is needed or immediately wanted, but it does give reformers the opportunity to display the virtues of democracy, to show what more can be done and how much they can get away with. Once demonstrating the tonic effects of democratic norms in operation, it may become more difficult for defenders of the status quo to label democratic innovation as toxic.

The book also contains an exploration of social work education reform that merits mention. In their discussion of a project at the University of Dundee, Maggie Gee and Mo McPhail describe the development of a CU (“Carers and Users”) group which seeks to exert “influence” and not merely to provide “advice” within the institution and beyond. Emphasizing the necessity rather than the mere desirability of deliberative bodies that meet the expectations of what Jürgen Habermas has famously described as an “ideal speech situation,” a discussion based on the premise that effective collaboration must entail fundamental fairness among all participants. As Gee and McPhail put it:

- there must be purposeful and shared power, without tokenism;
- there must be fair funding so that all individuals and participating groups are absolved from financial burden;
- representation must directly connect with people at the grassroots level and be based on “bottom-up” networks including marginalized groups;
- ordinary language must replace privileged speech and professional jargon wherever possible to minimize the creation of artificial elites; and,
- there must be demonstrable results arising directly from deliberations that move such bodies from the ancillary role of consultation to the active role of policy and decision making.

These are highly contentious criteria and not ones that will be easily won from those at the apex of power. Still, they are important standards against which to measure the degree to which institutions take seriously their commitment to openness and involvement. Failing an approximation of these elements, all talk about cooperation, collegiality and collaboration becomes no more than a stale restatement of the efficacy of an office “suggestion box” or a hypocritical reminder that the boss’s door is always open.

Not everything, however, is about power in such stark terms. Sometimes the workings of power assume nuanced forms. Iain Ferguson and Wendy Ager, for instance, present a compelling discussion of “ways of knowing,” which focuses on the question of diagnosis of “personality disorder.” They show how a lengthy history of orthodox knowledge subtly influences day-to-day social and health care work, and can thereby impose categories and boundaries that limit rather than expand the quality of assistance that can be rendered. Their work does not rise to a detailed scholarly disquisition on epistemology, nor does it take the form of an attack on common clinical understanding in the manner of R. D. Laing or Thomas Szasz.

Ferguson and Ager do, however, provide – in ordinary language – a cautionary tale in the narrative of diagnostics. They confront the strategy of “evidence-based” practice that turns out to be a good deal less scientific than it sounds. They do not, I reiterate, set out to undermine, much less to destroy, conventions in clinical analysis of, for example, depression by substituting an alternative “social construction” theory of mental illness. They do, however, provide the basis for a critical understanding of what happens when we see others through the lens of concepts and theories that intrude from above. “Evidence-based practice is,” they insist, “intensely political.”

In his concluding chapter Iain Ferguson highlights two concepts upon which efforts to reform the teaching and practice of social work will succeed or fail.

The first concept is awareness of power differentials. Official organizational theory subscribes to the myths that, in the absence of leadership, there would be organizational chaos, and that competent (to say nothing of visionary and inspiring) leadership is essential to ensure that organizations succeed in achieving their goals, fulfilling their mandates or realizing their visions. The exercise of power may, however, be less high-minded. Leadership can go ruefully awry, or it can simply behave selfishly – never completely failing, but never achieving possible objectives. Implicit in the reformist call for involvement is the assumption that organizational democracy is a means to control the controllers and, in the worse case, to prevent self-imposed disasters. Also present is the assumption that a genuinely healthy organization exploits its own metabolism and thrives on the enthusiasm and expertise of everyone within it – managers, carers and service users alike. To maximize satisfaction, asymmetrical power relationships must be identified, exposed and – where needed – replaced with something approaching equity.

The second concept is demonstrable trust. A transition from hierarchy and authoritarian control to equity and democratic control requires evident. It takes no more and no less than the joint commitment of managers, workers and clients to a model of governance that embraces rational decision making and problem solving in the fundamental interests of all parties. This requires several steps “beyond good intentions,” and may include a frustrating period of organizational learning in which the now powerless will gain knowledge and confidence, and the now powerful will understand the value of sharing and sometimes surrendering what had been their inventory of exclusive rights.

With persistence, restraint and acute awareness, it is possible that profound changes can occur, especially if guided with patience and forbearance of the sort that has been exhibited by the editor and the contributing authors of this well-intentioned, well-executed and useful book.