

The Conceptual Practices of Children and Family Social Work:  
Protection, Risk and Partnership.

A Thesis Submitted for the Degree of Doctor of Philosophy, in the  
Department of Sociology, Goldsmiths College, University of London.

Polly Radcliffe

## Abstract

In this thesis I examine the contemporary social work gaze and social work knowledge as a practice of government. The data for this thesis is derived from qualitative analysis of interviews with children and family social workers from two local authority social services departments in which they described their practices. In addition I have carried out analyses of social work guidance and regulation.

The professionalisation of social work, and legislation to mandate its activities coincided with, and was intimately linked with a post-war politics of consensus. It was part of a more general governmental strategy of alleviating problems, which were understood as social in character by supporting the family through a blend of welfarist measures and a therapeutics of the family. Analysis of policy and legislation over the last five decades reveals that the conceptual currency of social work, the focus and subject of its gaze have been transformed. It is the priority of protection, which dominates contemporary social work practices.

Contemporary social work and its problematisation of intervention into the private space of the family has become characterised by, on one hand, a concern to render visible the 'at risk' population through multi-disciplinary strategies of risk management and surveillance, and on the other hand, by discourses of 'partnership', in which parents are enjoined to work with social workers in the interests of the welfare of their children. I argue that partnership represents a new imagining of the social worker in terms of a reflexivity vis a vis his/her power and a tentativeness vis a vis the legitimacy of her intervention in the family. Attempts to scientise and systematise the social work gaze do not recognise the extent to which social workers' techniques of knowing both make possible at the same time as they limit the subject of social work practices.

## Acknowledgements

This thesis was carried out with funding from the Economic and Social Research Council, October 1996 - January 2000.

Many thanks go to the social workers and managers who talked to me so openly about their work.

Many thanks for the guidance, patience and careful reading of my supervisors Vikki Bell and Nikolas Rose.

This thesis has spanned two babies (one not yet born), a major bereavement and a house move. I could not have reached this stage without the enormous support I have received from friends and family who have variously provided encouragement, support, and child care along the way. Thanks to friends at Goldsmiths including Steve Cross and Nick Thoburn. Thanks to others far and near including Alison Preston, Roshan Dadoo, Helen McDowell, Matt Ffytch, Lydia Syson, Dave Hesmondhalgh, Virginia Radcliffe, Jonathan Radcliffe, Kate Radcliffe, Sarah Phelps, John Radcliffe, Ken Adams, Helen Mann and Gerry Travers.

A special thanks to Jack Levinson who has been an unstinting and endlessly supportive friend in his reading and intelligent comments on draft chapters, a tremendous and hilarious email correspondent and a skilled and dedicated packer of boxes.

I am indebted to Simon Adams whose wit, love and manifold support has carried me along, and to Frank Radcliffe-Adams who arrived half way through and has been and continues to be an endless source of joy to us both

This thesis is dedicated to the memory of my mother, Bridget Radcliffe 1936-1999.

## Table of Contents

<b>Chapter</b>	<b>Page</b>
I. Introduction	5
II. Literature Review	14
III. Methodology	54
IV. Transformations in the Gaze and Conceptual Currency of Social Work	72
V. Risk in Child Protection	113
VI. Governing Through Partnership	158
VII. Conclusions	193
Appendix I Interview Schedule	199
Appendix II The Children Act 1989	203
Bibliography	206

### **List of Tables**

Table 1. Social Workers Interviewed	55
Table 2. Documents Referred To	57
Table 3. Warranting Devices in Interview Accounts	65
Table 4. Local Authority Risk Assessment Guide for Sexual Abuse	98



## Chapter I

### Introduction

Consider the following article, which appeared in *The Guardian* newspaper on 17 June 2000 under the title:

#### Murdered girl was on council's at-risk register

Laura Kane was on her local authority's child protection register when she was raped and murdered by a trusted family friend, Sunderland city council admitted yesterday. The nine year olds six siblings – several of whom are also to have been on the register – are now all in care. Last night the authority admitted that a multi-agency review of her death – standard practice after a child on the register dies – had identified failings in the system and 'lessons to be learned'. But it could not pledge these lessons would be made public and stressed: 'No procedure could have anticipated the brutal murder of a child by a family friend'..... a council spokesman said: 'We can confirm that Laura Kane was on the child protection register and that the surviving siblings are in care. But we are not prepared to discuss confidential information about Laura or her siblings'. An injunction, forbidding information about her siblings being published, was still in force, he added. Following the youngster's murder, a 'rigorous and comprehensive' review into whether she could have been better protected had been carried out by an independent expert from the Sunderland area child protection committee, a multi-agency body, the council spokesman said. And he admitted: 'The review does identify lessons to be learned and ways in which work to safeguard children can be improved. At the next meeting in July, the ACPC will give serious consideration to the next steps and to making public details of the review process and its recommendations – something which could not be done while criminal proceedings were in progress'. But he stressed that the decision to release such recommendations was purely at the body's discretion, and that it was unlikely to divulge specific details of Laura's case.

As Sunderland social services department pledged to 'look very carefully at its own child protection practices', pressure mounted for the review findings to be made public. 'It is really quite difficult to know whether our social services department is fulfilling its obligations,' said Margaret Forbes, leader of the Tories on Sunderland city council. She added: 'I would like to have an inquiry on what went on ... That is some way of establishing accountability.' And health campaigners questioned whether the local authority could have done more to safeguard the girl. 'Surely they should have been alerted to the fact that Laura apparently liked playing games where she was tied up?' asked Chris Close, of the charity Action in Mental Health. 'That is abnormal behaviour which should have surely sent alarm bells ringing.'

(Guardian Newspaper June 17<sup>th</sup> 2000)



In this thesis I ask how contemporary social work with children and families operates as a practice of government and what rationalities are involved in the government of social work itself? I investigate the relationship between the privacy of the family, risk, accountability and discourses of partnership in social work practices. In an anatomisation of social work discourse in social workers' account of their work and analysis of social work guidance documents I focus on the categories generated by recent child care legislation and policy concerned with the family. I argue that such categories and concepts provide social workers with a currency and vocabulary for seeing and thinking about, as well as the means for acting upon the family. This is then an interest in the character of social work knowledge and what social workers should know. I ask what characterises the contemporary social work gaze, and how does it constitute or 'make up' its subjects? As I will now describe, these features are displayed in the newspaper coverage of the sexual assault and murder of Laura Kane in August 1999.

The article about the local authority's 'admission' is organised around the relationship between two facts: firstly that Laura Kane was on the local authority child protection register, and yet secondly, she was the victim of sexual assault and murder. She was *known* to the local authority and a level of risk had been officially acknowledged, putting in place certain sets of social work procedures. Such social work practice was however unable to prevent Laura Kane's sexual assault and murder. The concept of 'the known child' is one that I will take up in discussion of social workers' accounts and authorisation of their child protection practice<sup>1</sup>. Newspaper headlines trace the processes of police investigation up to the discovery of the child's body and the arrest of the alleged murderer throughout August and the early part of September 1999. There is

---

<sup>1</sup> Although I am not claiming that media representation of the disappearance/murder of a child and social services responsibilities for that death is isomorphic with social workers accounting practices (and more generally this thesis does not attempt analysis of media coverage of child deaths), there are interesting links with the signification of the 'known child' in the above article and in interviews with social workers in which the 'known child' provides a warrant for practice.

then a break of nine months when the alleged perpetrator was held in prison on remand in Durham prison until the trial in June 2000.

A selective analysis of newspaper coverage over these nine months reveals how the emphasis of the articles shifts as the nature of the child's disappearance and the kind of family she is from emerges. In an early article the extent of the search for the 'missing school girl' is described on scrubland and fells (Guardian, 28 August 1999). The child's mother is described: 'her tearful mother, Carol, 36, appealed at a news conference for any information about her 'happy, bubbly, friendly child'. In the news conference it had been explained that 'Laura left home at teatime saying she was going to play with friends'. Another article states that 'Her mother, Carol, waved her goodbye, and she was seen 45 minutes later by a woman driving a car in the next street' (Guardian, 30 August, 1999). The shock and distress of local people is emphasised. The headquarters of the police investigation is sited outside the village pub. Prayers are offered up in the parish church for Laura's safe return. 'I'm devastated' a villager is quoted as saying as he watched the search: 'My fiancée knows the family; she and I have been out searching down by the Vicky Bridge. I don't know what to think. I just hope they find her' (Guardian, 30 August 1999). Thus Laura is presented as a normal, outgoing child who is part of a loving family and close community. But when extensive searches for her body draw a blank the theory that she has been lost on moor land or suffered a serious accident fades and attention is turned away from the country-side to the community itself as registered sex offenders in the Sunderland area are interviewed by police, and 'the focus of the hunt returned to the girl's home village of Penshaw' where 'police with dogs checked outhouses while other officers visited every home in Penshaw' (Guardian 31 August, 1999). Although the same article states that Laura's parents are separated and that 'The children in the family, seven in all, are well known in Penshaw, a former colliery village' the family itself is not the site of suspicion. The information that the family are 'well known' in the village, or 'known' to one of the searchers belongs to a different interpretive scheme than 'known to the authorities'.



Once Laura's body is found it is reported that she has not been abducted by a stranger or 'known' sex offender but raped and murdered by a family friend who buried her under the floor boards of his house, ten miles from Laura's home (Observer, 5 September, 1999). It is subsequently revealed that Laura's mother was out shopping when she disappeared and the innocence of the earlier scene of the mother waving her daughter goodbye is contradicted. One article reveals that

The defendant had been friendly with Laura's mother for a few years, the court heard. He played games with Laura and her siblings which sometimes involved tying them up, but he was not seen as a threat (Guardian, 8, September 1999)

Laura Kane's murderer was jailed for a minimum of twenty-two years on 20<sup>th</sup> June 2000. As I have said the final article states that the local authority had 'admitted' that Laura had been on the child protection register and had already been considered to be a child at risk. Rather than place Laura's murder in the context of the local landscape or the village in which she grew up, the final article places the event in the context of the procedures of the social services department who we are told have reviewed her case in light of her death and found that there have been 'failings in the system' and 'lessons to be learned'. In addition we are told that Laura's six other siblings are all now 'in care'. Although the spokesperson for the local authority states that 'No procedure could have anticipated the brutal murder of a child by a family friend', the 'admission' that she was on the child protection register nevertheless implies that social workers may have been able to prevent Laura Kane's murder; indeed the recommendations from the review indicate a need to find 'ways in which work to safeguard children can be improved'.

The placing of a child on a child protection register, one stage in the enactment of a complex of practices that are child protection procedures, marks an official kind of knowledge about a child and her family, an inscription of risk and crucially, of accountability on the part of the social services department, so that as in this case, the death of a child on the register calls for an internal review of social work practices. As I will describe, placing a child's name on a child protection register corresponds to a collective decision-making process involving a group of professionals with the



participation of the parents of the child – the official rhetoric is of ‘partnership’ with parents. Moreover, protecting children who are deemed to be at risk must involve a complex assessment of parents and as long as they are co-operative, inclusion of their wishes in subsequent plans. The normal, loving mother of the earlier Guardian coverage appealing for news of her daughter, in the judgement of social workers must have represented a risk herself, at least in her ability to prevent her daughter from harm. Policies emphasise that children remain in the care of their families and where there are is evidence of ‘significant harm’ or its likelihood, that social workers ‘work in partnership’ with parents to make changes in the interests of the child’s welfare. Laura Kane’s mother must have agreed that she would co-operate with social services demands. She must have reassured social workers sufficiently that she understood the risks identified and accepted social worker involvement. Registration and attendant social work involvement may have represented a compromise, an alternative to foster care for example that Laura Kane’s mother may have accepted in order to keep her child with her.

The apparent paradox of the known child from a known family, even registered on the local authority child protection register who is nevertheless harmed is one that touches on many of the themes explored in this thesis. I investigate the status of the *knowledge* of a child as the subject of child protection practices. I will explore the technologies of risk management that set in place a system of monitoring, assessment and supervision.

Furthermore, as one can see from the coverage of this case, registers become crucial in situations such as this. Child protection registers of children suffering from or likely to suffer from significant harm and registers of individuals who have perpetrated sex offences against children both attempt to make visible and traceable populations who are respectively at risk and are a risk to children. Clearly the placing of Laura Kane’s name on the child protection register and her killer’s non-appearance on the register of sex offenders did not prevent her from being sexually assaulted and murdered. The above extract from the Guardian article stresses the *unpredictability* of this incident and the

report produced by the City of Sunderland Area Child Protection Committee that also states:

He was a man who was not a member of the family, was not known to the agencies involved and had no record that would have given them cause for concern... Whatever help the family were receiving, none of the agencies involved could have predicted this act of murder (City of Sunderland, 2000)

Nevertheless there is an expectation placed upon the operation of such registers and upon social workers implementing child protection procedures that such practices will safeguard children.<sup>2</sup>

Social work knowledge is productive of the kinds of subjects it constitutes through its practices. The contemporary social work gaze works on and constitutes its subjects in relation to co-ordinates of risk, partnership and capacity to change. At the same time, I will describe the way in which the contemporary social work gaze is *tentative* in its respect for privacy of the family and the need for social work practices to be warranted. The gaze must be future-orientated and vigilant about signs and indicators that may indicate a risk of harm but it must tread carefully and account for its concerns at all stages<sup>3</sup>. I will now describe how these themes are to be explored in each chapter.

---

<sup>2</sup> The media coverage of the sexual assault and murder of Sarah Payne that took place in July 2000 provides an interesting comparison to that of Laura Kane. In the case of Sarah Payne who was not apparently known to any social services department there was never a suggestion that she was a child neglected by her family, the integrity and innocent grief of whom was at least publicly not called into question. The focus of the tabloid and public response was the putative stranger/abductor of Sarah Payne who *should* have been known (and to my knowledge has at the time of writing not been identified), and the policies of allowing people who have been convicted and imprisoned for sexual crimes against children to live in the community.

<sup>3</sup> Clearly it is impossible to tell from the available information whether social work action really could have prevented Laura Kane's death, whether for example her tying-up games could have been interpreted as worryingly sexualised as is suggested by Action in Mental Health, or whether this deviation from 'normal' play is only knowable retrospectively. Although the opposition leader was doubtless generating political capital in calling for a public inquiry (which could only be commissioned by the Secretary of State for Health), the conditions of possibility exist that good government is understandable in terms of transparency, openness, and value for money. Indeed, as I will describe social work is increasingly governed through the rationalities of accountability that emphasise record-keeping and documentation of observations and decision-making in files and reports.



In Chapter II I introduce the literature that addresses some of the central problematics of my thesis. I discuss three strands of literature that enable me to examine the social work gaze. In the first section I discuss two works that are concerned with the historical emergence of forms of knowledge as part of regimes of government. Firstly, Michel Foucault's The Birth of the Clinic which provides a theoretical context for the examination of the social work gaze, and secondly Jacques Donzelot's The Policing of Families which provides a historical context for the problematisation of the family from the French perspective. In the second section I discuss the work of authors who have undertaken a more micro-level approach to the analysis of textual knowledge. I discuss Dorothy Smith, Steve Woolgar and Bruno Latour's work on texts and practices of inscription as a contribution to our understanding of the production of facts. In the third and final section I look at how various British authors have characterised transformations in policies surrounding the family.

In Chapter III I describe the methodology I have adopted in carrying out this research. In the first section I describe the analysis of data that are social work interview accounts and social work policy documents. I describe the numbers of social workers I interviewed in two authorities, the sorts of questions I asked them and why. I list the key Department of Health documents on which I am focusing and describe how I am analysing their contents as providing a conceptual currency for social workers to make sense of and act on families. I describe how I have analysed the interviews in terms of their strategic character and provide an example of the analysis of one social work 'case'. In the second section I take up the theoretical question of social work as a practice of government and explain how I understand the operation of power after Michel Foucault as *productive*. I discuss Ian Hacking's notion of making-up people and how I am applying this to my understanding of the constitutive power of the social work gaze. I then turn to the social work practices of inscription on which I am focusing. I highlight how social workers' accounts of knowing families are imbricated in practices of documentation and inscription.

In Chapter IV, I look at transformations in the social work gaze as revealed by comparison of two accounts of cases, the first reported in a post-war social work text book and the second taken from one of my interview accounts. I describe the character of the historically contingent sets of social relations in the organisation of medicine, psy knowledge and law that Smith argues: ‘provide the conditions of the sense of concepts that express them’ (Smith, 1990b: 41). I trace the changing rationalities, priorities and problematisation of social work since the Second World War and in particular how the priority of the goal of ‘protection’ emerged in the nineteen seventies and eighties.

In Chapter V, I examine risk in child protection. Firstly, I argue that the attempt to calculate risk is one way in which the paradox of the public/private family has been addressed. I discuss the concept of risk and probability and the language of balancing risks in child protection. Secondly, I explore how the notion of managing risks is operationalised in official guidance and procedures for dealing with child protection. Intervention into the family by social workers is contingent upon a formal set of assessment procedures in which the family become the focus of a set of procedures, or what I am regarding as a technology of risk management. I argue that this technology renders the family knowable in terms of a perceptual grid of risk management. I examine firstly, guidance developed by the Department of Health in 1988 in order to assist social workers in their assessment of risk. Secondly I anatomise social workers’ accounts of risk in the interviews I conducted with them. In concluding I ask how it is that this technology of risk management imagines its subjects, the risky client as well as the risk-taking social worker.

In Chapter VI, I am interested to examine how Partnership operates as both a set of practices and a strategy of rule in this area of social work. I argue that in addressing the relationship between social workers and the families with whom they work the notion of ‘working in partnership’ seeks to re-shape social work practice in terms of an ethics of practice. I describe how partnership both invests parents with rights and responsibilities at the same time as it places the social worker in a reflexive



relationship with her power which translates into strategies of practice rather than an equalising of power between professional and parent.

In the final chapter, I will present my conclusions. It is my thesis that social work practices have altered in ways that affect the way the client is imagined by social workers, the way the social worker understands his/her role, how the procedures of social work take place and the way social work is judged. The priority of protecting children has meant that the focus of social work practices has moved from the therapeutic support of the 'problem' family to the highly proceduralised assessment of the parent. The social worker has increasingly become subject to procedures and regulation in an attempt to regulate and audit social work practices of power and make scientific the social work gaze. The attempt to render the social work gaze systematic reshapes the social work role in relation to a new set of standardised procedures and criteria for warrantable practice while it reimagines the population of risk/need on which it works.

## Chapter II

### Literature Review

In this chapter I discuss three strands of literature that have enabled me to approach the study of the social work gaze. In the first section I discuss two works that are concerned with the historical emergence of forms of knowledge as part of regimes of government. I look first at Michel Foucault's The Birth of the Clinic that provides a theoretical context for the examination of the social work gaze, and secondly at Jacques Donzelot's The Policing of Families which, although focused on France, provides a historical context for the problematisation of the family. In the second section I discuss the work of authors who have undertaken a more micro-level approach to the analysis of textual knowledge and who are useful for thinking about practices by which social work knowledge is recorded and produced. I discuss Dorothy Smith, Steve Woolgar and Bruno Latour's work on texts and practices of inscription as a contribution to our understanding of the production of facts. In the third and final section I look at how various British authors have characterised transformations in policies surrounding the family. In particular I am interested in how they describe the proceduralisation of social work practices.

### The emergence of new conceptual forms: The work of Foucault and Donzelot

The relation between practices, knowledge and the subjects and objects of knowledge are explored theoretically and historically in the work of Michel Foucault and Jacques Donzelot. In his essay 'What is Enlightenment?' (1994), Foucault argues that the role of criticism becomes the:

historical investigation into the events that have led us to constitute ourselves and to recognise ourselves as subjects of what we are doing, thinking, saying (Foucault 1984:46)

Foucault's The Birth of the Clinic (1993) examines the historical emergence of clinical medicine that constituted its subject, the human body, in a new way, and according to this analysis, formed the basis for the possibility of human science. It was the birth of what



has come to be taken for granted as rational thought and birth of the positive knowledge of human individuality. The apparently a priori category of the human subject is anatomised as recent and historically constituted.

The work investigates the emergence of a medical knowledge practised upon and activated through the individual, in a restructuring of space, language and death (Foucault 1993: 196). Foucault is not interested in offering a commentary or an interpretation of medicine, but asks:

Is it not possible to make a structural analysis of discourse that would evade the fate of commentary by supposing no remainder, nothing in excess of what has been said, but only the facts of its historical appearance? (Foucault, 1993: xvii)

His concern then is not with interpretation but to present the interrelated 'facts of discourse', in order to trace 'the conditions of possibility of medical experience in modern times' (Foucault, 1993: xix). Foucault's interest in the conditions of possibility of medical experience entails an interrogation of what combination of circumstances gave rise to such an outcome as clinical medicine. These circumstances are discontinuous and dispersed in seemingly unconnected fields of social activity. Foucault described the nature of the question he was addressing in an interview with Alessandro Fontana and Pasquale Pasquino:

My problem was not at all to say "Voilà, long live discontinuity, we are in the discontinuous and a good thing too," but to pose the question: "How is it that at certain moments and in certain orders of knowledge, there are these sudden take-offs, these hastenings of evolution, these transformations which fail to correspond to the calm, continuist image that is normally accredited?" ...It is a question of what governs statements, and the way in which they govern each other so as to constitute a set of propositions which are scientifically acceptable, and hence, capable of being verified or falsified by scientific procedures. In short there is a problem of the regime, the politics of the scientific statement (Foucault, 1984:54)

The Birth of the Clinic begins therefore by noting the enormous transformation in medical discourse that occurred in the space of only twenty-five or thirty years between fantastical eighteenth century descriptions of medical practice and the 'recognisably rational' accounts of the nineteenth century (Foucault, 1993: x). Foucault shows that at the end of the eighteenth and the beginning of the nineteenth centuries a structural change

was taking place in medicine whereby the individual body became the subject of visual scrutiny for the first time, when: ‘the eye becomes the depository and source of clarity’ (Foucault, 1993: xiii). This was thus not just the seeing eye but also a new theoretical way of seeing.

Prior to the visualisation of medicine, the task of the doctor was to analyse the species of disease before deciding on treatment so that, rather than attempting to determine the origin of disease, doctors attempted to reveal its *type* in relation to other diseases. An actual instance of disease might only approximate to an ideal or an essential disease. Quoting from eighteenth century texts, Foucault states that the focus for the doctor was not the patient as a concrete individual but:

the signs that differentiate one disease from another, the true and the false, the legitimate from the bastard, the malign from the benign (Foucault, 1993: 8)

The location of disease in a particular body was less significant than the ascribing of truth through the identification of the disease. Indeed according to the eighteenth century medical texts cited, the presence of the individual body was a ‘disturbance’ from the natural state of the disease, which needed to be abstracted for the purpose of analysis. Foucault proceeds to trace the transition to the emergence of clinical medicine.

Foucault shows that a new ‘collective consciousness’ of medicine emerged, which was manifested in the institution of health inspectors, national standards for hygiene and sanitation and the collection of statistics for birth and causes of death. At the end of the century the call to regulate the medical profession and for an adequate distribution of trained doctors led to the development of a network of teaching hospitals and a standardised training for doctors. The development of public medicine and initiatives to collect statistics on the population medicalised the social body in a new way.

Foucault shows that the integration of anatomical pathology into medicine was crucial in the re-conceptualising of the body, disease and death. For the first time corpses were opened up immediately after death, allowing the positive identification of the



location and effect of disease. The isolation of tissue as a site of disease made possible the drawing of pathological classes from which *normal* tissue could be said to deviate. The identification of lesions in individual organs generated a way of understanding disease in terms of a chain of temporally organised and related symptoms in an individual 'case'.

Foucault argues that the opening up of the entire body to physical examination was fundamental to the reconceptualising of disease in that it brought about a *cosmological change* in ideas about death and human life. It was possible for the first time to see the chronological stages of death in the human corpse. Foucault writes:

Death is therefore multiple, and dispersed in time: it is not that absolute, privileged point at which time stops and moves back; like disease itself, it has a teeming presence that analysis may divide into time and space; gradually, here and there, each of the knots break, until organic life ceases, at least in its major forms, since long after the death of the individual, minuscule, partial deaths continue to dissociate the islets of life that still subsist (Foucault, 1993:142)

Medicine was no longer concerned therefore with the body as something that was constantly struggling against death, but with life as a specifically human state. Death became a 'technical instrument' for deciphering the positive truth of life and disease. Foucault shows that death came to be seen, through the work of early pathologists, as a process, infused with life, and as something which life resists. The transformations in the conceptualising of life and death, in the space and conceptual base of medicine however were just part of the new attention to the maintenance of the population as a body:

the body imbued with the mechanics of life and serving as the basis of the biological processes: propagation, births and mortality, the level of health, life expectancy and longevity, with all the conditions that can cause these to vary (Foucault, 1990: 139).

This *biopolitical* consciousness of the *species body* and transformations in the conditions of human existence corresponded in medical science with the discovery of the distinctive vitality of the human body. Crucially, this was the point at which human beings were subjected for the first time to the scrutinising gaze of positive science:

That opening up of the concrete individual, for the first time in Western History, to the language of rationality, that major event in the relationship of man to himself and of language to things (Foucault, 1993: xiv)

The emergence of clinical medicine thus required a language which was capable of describing that which was made known through the power of the gaze, since 'it is only possible to see if you know how to describe' (Foucault, 1993:196).

In Discipline and Punish. The Birth of the Prison (Foucault, 1977,1991), published two years after The Birth of the Clinic, Foucault describes the technique of *examination* that emerged in clinical medicine in the eighteenth century. The examination of the individual patient by the doctor was a key mechanism through which the gaze was made practical and the subject of medicine individualised:

The examination combines the techniques of an observing hierarchy and those of a normalising judgement. It is a normalising gaze, a surveillance that makes it possible to qualify, to classify and to punish (Foucault, 1991: 184)

The *gaze* emerging with the doctor's examination is thus normalising and surveying. In other words the gaze constitutes the exercise of a type of power. Indeed, in Discipline and Punish in which Foucault traces the emergence of disciplinary power more generally, he argues that the power of discipline is 'manifested only by its gaze' (ibid: 188).

This work is important for my purposes in that it traces the historical emergence of an expert gaze as linked to the institutional emergence of disciplinary knowledge. The clinical gaze is understood as an institutional epistemology linked to the spatial organisation of medicine within the clinic, with its specific organisation and techniques of practising upon the body, which have given rise to techniques such as the examination of knowing and seeing its individual subjects. The examination is in Discipline and Punish linked to sets of inscriptive and documentary practices:



Thanks to the whole apparatus of writing that accompanied it, the examination opened up two correlative possibilities: firstly, the constitution of the individual as describable, analysable object... and, secondly, the constitution of a comparative system that made possible the measurement of overall phenomena, the description of groups, the characterization of collective facts, the calculation of the gaps between individuals, their distribution in a given 'population' (Foucault, 1991:190)

I will return to the 'apparatus of writing' that is intrinsic to the examination and its corollary the clinical 'case'. What is central here for my purposes is how the emergence of these techniques created the possibility for the development of the normalising, individualising gaze, and the resonance that such techniques have as mechanisms of rule in the social and psychological sciences today. It is the individualised, normalising gaze deployed *as part of a technique of government* that is at the heart of the early social work practice described by Donzelot.

In The Policing of Families (1979, 1997) Donzelot takes a historical, and genealogical approach to policies surrounding the family. Rather than assuming the category of the family as a patriarchal and/or bourgeois institution, Donzelot takes as his starting point the singular endurance of the family over time and asks what problem the family has continued to solve for the French liberal state. He thereby problematises the division between the public and the private realm and examines how the notion of the private, autonomous family has been *deployed* as a strategy of liberal rule. The family is in his analysis a *mechanism* for government, a site of differentiated individuals who are the target of specific sets of intervention. It is these very interventions, that constitute the family as separate and private from the civil, or public, sphere. Power is theorised as not isomorphic with state practices but is dispersed through the normative sciences of social work and education through which social workers, health visitors and teachers attempt to instil appropriate standards for the self-government of their subjects. Constituted through bio-political concerns for the health and welfare of the population (Donzelot, 1979), the family is understood, after Michel Foucault, as a mechanism in a great web of power, an 'indispensable element in the development of capitalism' but not reducible to a relation of capital.

The Policing of Families provides an account of the bio-political changes as they centred on children and the family in eighteenth century France. Central to Donzelot's analysis is the axis of change between the family of the Ancien Regime and the self-governing modern family (Hirst, 1981)<sup>1</sup> that entailed a shift from the absolute rule of the father to a rule based on the concern for the well being of the population through the eighteenth century notion of policing. Citing Foucault, Donzelot describes policing as referring to:

all the methods for developing the quality of the population and the strength of the nation... 'The aim of policing is to make everything that composes the state serve to strengthen and increase the power, and likewise serve the public welfare''  
(Donzelot, 1997: 6-7)

Donzelot argues that the 18<sup>th</sup> century contractual relationship of mutual claims between father and state was replaced in a liberal state by equality between the father, mother and child in the eyes of the law.<sup>2</sup> He is interested to examine the *actual social practices* involved in intervening in the family.

Donzelot points to the importance of nineteenth century philanthropy in France as a mechanism by which the population could be 'preserved' from the deleterious effects of industrialisation, at the same time as remaining removed from a directly political role.

Philanthropy, Donzelot argues:

must be considered as a deliberately de-politicising strategy for establishing public services and facilities at a sensitive point midway between private initiative and the state (Donzelot, 1997: 55)

---

<sup>1</sup> As Paul Hirst notes, there was no equivalent point of transformation between traditional and modern family forms in the English context (Hirst, 1981: 81)

<sup>2</sup> In my view feminists have been right to argue that while the power of the father is no longer maintained through a contractual relationship, it nevertheless obtains in the organisation of family relations (Bennett et al, 1981). Juridical equality does not after all prevent male violence against women and children, sexual abuse or any manifestation of male domination. This is not contradicted in my view however by Donzelot's argument that the need to protect women and children against the arbitrary rule of patriarchy both justified nineteenth century philanthropic intervention in the family, at the same time as making the family available for the promotion of norms and regulation, *via the mother*.



Through the dual strategy of assistance and a normalising medical-hygienist knowledge, philanthropy promoted the ideal of the prudent, self-sufficient citizen. Children were targeted through the advice given to their mothers who, in order to qualify for assistance, had to succumb to what Donzelot describes as ‘painstaking investigation’ into their lives, in the process of which attempts were made to uncover the ‘artifices of poverty’. Donzelot argues the granting of relief was conditional on the rehabilitation of the family (Donzelot, 1997: 68).

The point that I want to draw out from Donzelot here is the means by which expertise was deployed through philanthropy so as to invest the family with particular sets of educative and moral values. It is possible to see that ‘opening up’ and breaching the privacy of the family became through philanthropy a way of reinforcing and regulating family relationships. The conceptual division between the public/private today can be understood as part of a dual strategy of government. Nikolas Rose has argued that the opposition of the public and private is one of several oppositions on which advanced liberalism (and its political commentators) depends:

In the name of public citizenship and private welfare, the family has been configured as a matrix organising domestic, conjugal and child-rearing arrangements and instrumentalising wage-labour and consumption (Rose, 1996:37).

Thus intervention in the name of both public citizenship and private welfare can be said to have constituted or ‘made-up’ the modern family.

The strategy for intervening in the family deployed by nineteenth century philanthropists is clearly different from the expertise that is the basis for social work intervention into the family today. As I will show in Chapter VI technologies of risk-management and assessment deployed by social workers today produce a more tacit model of what the normal family is not, rather than a model of the normal family. As I will describe however there are parallels with Donzelot’s description of the role of nineteenth century philanthropism and the objective of the contemporary social work

gaze to penetrate beyond appearances to underlying circumstances. Furthermore, in the same way that Donzelot described nineteenth century families had to demonstrate their worth as subjects of philanthropy, in order to qualify as 'partners' and avoid the implementation of statutory measures, risky families today must demonstrate their co-operation with the scrutinising gaze of the social work assessment and ongoing social work intervention.

Donzelot therefore poses central questions for examining the way in which the family is deployed in contemporary social arrangements. In Donzelot's analyses the concept of 'family' refers in practice to intervention aimed at specific family members. The family is a 'machine' composed of forces and relations amongst its constituent elements. Further, the work collapses the distinction of the public and the private, forcing us to think outside the categories of government themselves. Donzelot shows how the 'family' and the public/private are constructed categories in the sense that they are not immutable but given by particular historical conditions and are at the same time instrumental to regimes of governments. Such concepts are not legally imposed from above but, through the normalising, educative, calculating and disciplinary strategies of liberal government come to be part of how the family understands itself.

The privacy and autonomy of the family therefore operates as an ideal, even a technique of rule in that it is something that must be achieved, and aspired towards. The problematic of ruling the family lies in how it can be rendered governable while the promise of its autonomy is maintained (Bell, 1993b). This is the public/private paradox of the family.

While Foucault's work examines the emergence of the objects and subjects of medical epistemology as categories contingent upon a particular configuration of space, language and death, Donzelot's work examines the subjects of disciplinary knowledge as subjects of government. The Birth of the Clinic demonstrates how the very foundation of scientific ways of knowing - the vocabulary of perception - emerged in discourse in the



practices of early pathologists. It is perception and the technologies of fixing meaning for organisational as well as agonistic purposes, which Foucault showed emerging in clinical medicine. The gaze was central to modern ways of conceptualising and working on the individual human subject as the individual medical 'case'. The emergence through the clinical gaze of the knowable human - 'the constitution of the individual as describable, analysable object' (Foucault, 1991:190) can be seen to have provided conceptually for the emergence of the normalising gaze of philanthropy and social case-work which was the forerunner of modern social work practice. It is character of the modern social work gaze that is the focus of my study.

The main concepts from Foucault and Donzelot's work that I will deploy in my study are therefore the following:

- i. Conditions of possibility. I am interested in exploring how the categories and concepts generated by the interlacing of child care legislation, policy and psycho-social expertise provide social workers with the discursive co-ordinates for thinking about and repertoire for acting upon the family.
- ii. The gaze. This is the constellation of discursive co-ordinates and institutional arrangements, legal, psycho-social, procedural and ethical which provide for the theoretical way of seeing, through which social workers constitute the subjects of their government.
- iii. The case. This is one of the means by which social workers are able to make their subjects knowable. John Forrester has argued that the emergence of cases represented a 'style of reasoning' of telling a life:

The apparently neutral device of the case provides the legitimate focus of social work scrutiny, the lines of demarcation and site of individuation. As Forrester has described the device of the case makes a life peculiarly accountable *as well as* scientific. It is:

a new form for the specific and unique facts that make that person's life their life, and at the same time, it attempts to render that way of telling a life public, of making it scientific (Forrester, 1996: 10)

As well as a meeting point for the operationalising of psy, legal and medical knowledge, the case is therefore also a means of publicly and authoritatively reporting a life to a lay audience - that can be deployed in interviews with social workers as well as newspaper accounts of child deaths and maltreatment. Further, the case operates as a technical device for the ordering and storing of professional, authorised knowledge in files, which stabilise knowledge as fact, and is as described by Forrester - '[an] administrative invention of genius' (Forrester, 1996: 11).

### **Texts, Meanings and Knowledge: The Work of Smith and Latour and Woolgar**

In Forrester's article *Thinking in Cases* (1996) referred to above, he focuses upon a passage from Discipline and Punish (Foucault, 1977) in which the technology of the examination is described:

The examination that places individuals in a field of surveillance also situates them in a network of writing; it engages them in a whole mass of documents that capture and fix them (Foucault, 1991: 185)

It is the practices of creating such 'a network of writing', central to the creation of professional knowledge and that I will now explore in the work of Dorothy Smith, Steve Woolgar and Bruno Latour.

A large part of what social workers do is textual, and involves filling in referral forms, updating computer systems, keeping case-file notes, as well as referring to guidance and legislation. I will now explore how Dorothy Smith's work on the textually-mediated relations of ruling can be applied to thinking about social work practice. Smith argues:



The ruling apparatuses are those institutions of administration, management, and professional authority, and of intellectual and cultural discourses, which organise, regulate, lead and direct, contemporary capitalist societies. The power relations which come into view from the standpoint of an experience situated in the everyday world are abstracted from local and particular settings and relationships. These forms of communications and action are distinctively mediated by texts. The textual mediation of its forms of organisation are fundamental to its characteristic abstracted, extra-local forms, and its curious capacity to reproduce its order in the same way in an indefinite variety of actual local contexts (Smith, 1990b: 2)

This summarises Smith's approach to an investigation into how texts govern. Smith's concern as can be seen from this quotation is with the textually-mediated character of ruling (Smith, 1990a). As I will show this approach derives from the two sources of ethnomethodology and Marxian thought in its attention to the accomplished, constitutive and materially traceable character of social action. This, Smith insists is a method of inquiry rather than a theoretical stand point. Her position derived initially from a dissatisfaction with main and 'male-stream' sociology in which official statistics were often used unproblematically by sociologists as if they were independent of the organisational context of their production. Smith argues that officially produced forms of knowledge create categories from observations or quantitative calculations that then come to stand in for, represent and organise the local experiences from which they are derived. As is clear from the quotation above, there is a distinction for Smith between two worlds or realities; the everyday world of lived, situated experience, and the world of textually worked-up categories and concepts. Smith argues that it is characteristic of the relationship between all forms of professional and organisationally derived discourse in contemporary industrial society and the local experiences to which they refer, that they are mediated by texts. In Smith's view it ought to be possible to carry out sociological inquiry that instead of abstracting experience, works to describe the organisation of such textual modes of ruling.

As I have said one of the major influences in Smith's method of analysis are ethnomethodological accounts of the situated and achieved character of sense-making

that relies upon what Harold Garfinkel called (after Alfred Schutz) the ‘commonsense knowledge of social structure’ (Garfinkel, 1967:76). This is knowledge that is unexplicated but enables participants to manage and accomplish every setting, and every interaction. The ethnomethodological attention to the *accomplished* character of settings refers to members’ methods for carrying out social life, based on a background of commonsense knowledge. This means that members *work* to achieve the setting using the common cultural resources available. One of the key activities of sense-making distinguished by Garfinkel is that which he terms the Documentary Method of Investigation:

The method consists of treating an actual appearance as ‘the document of’, as ‘pointing to’, as ‘standing on behalf of’ a presupposed underlying pattern. Not only is the underlying pattern derived from its individual documentary evidences, but also the individual documentary evidences, in their turn, are interpreted on the basis of ‘what is known’ about the underlying pattern. Each is used to elaborate the other (Garfinkel 1967:78)

This perspective views sense-making as retrospective and prospective, as ‘a presupposed underlying pattern’ is constantly drawn upon as a basis for interpretation and inference. In such a way sense is made of objects and events as they arise and are encountered. Garfinkel developed this understanding of sense-making in a research project based in a psychiatric clinic. The research was designed to use case files to determine the criteria by which applicants for the psychiatric clinic were referred for treatment. In attempting to complete a pro forma of information for each file in a cohort of patients, researchers found that their task was hampered because of the large amount of missing information in the files. Garfinkel argues that rather than seeing the files as badly kept however one needs to understand that they were useful for the purpose for which they were used in the context of the clinic. There were, indeed, ‘good organisational reasons for bad clinical records’. The records as procedures for reporting were a feature of the organisational setting of which they were a part. For example, the in/completeness of the records reflected the time constraints and financial limitations within the clinic. They were kept in order to demonstrate that statutory procedure had been followed, in accordance with ‘expectations of sanctionable performances by clinicians and patients’ (Garfinkel



1967:199). Garfinkel argues that the files are not readable as 'actuarial' records of what took place but are more like:

utterances in conversation with an unknown audience which, because it already knows what might be talked about, is capable of reading hints. As expressions the remarks that make up these documents have overwhelmingly the characteristic that their sense cannot be decided by a reader without his necessarily knowing or assuming something about a typical biography and typical purposes of the user of the expressions, about typical circumstances under which such remarks are written, about a typical previous course of transactions between the writers and the patient, or about a typical relationship of actual or potential interaction between the writers and the reader (Garfinkel, 1967:200)

Garfinkel emphasises that the files do not simply *describe* or *reveal* an order of interaction of the setting in which they are situated, but rely upon an understanding of that order for a correct reading.

Ethnomethodologists are not particularly or only interested in texts; the insight from this study is that case files are not separable from the organisational setting in which they make sense, as such they are a resource for sense making. Smith is concerned to do more than observe the extent to which texts are embedded in the organisational setting in which they are used however. It is here that she departs from the ethnomethodological focus on situated accomplishment, and is concerned to examine the *constitutive* features of texts. Smith argues that it must be possible to uncover the sets of social relations which shape the kind of sense that can be made and acted upon through texts. She asserts that the process of ruling by texts is largely concealed and taken for granted. At the same time it is a pervasive form of rule relying on the transcendent character of texts:

The simple properties of the documentary or textually mediated forms of social organisation involve their dependence upon, and exploitation of, the textual capacity to crystallise and preserve a definite form of words detached from their local historicity (Smith, 1990a: 210)

The notion that there is a crystallising, replicable character of text is not exclusive to Smith and will be discussed later in relation to Latour's work on the properties of inscription. What I mean to emphasise here, however, is Smith's contention that what provides for a distinctive type of rule in advanced contemporary society is the way in



which texts are constituents of social relations, in that *they actually bring about definite sets of action, co-ordering sets of events or objects*. Smith argues that the process by which texts operate is *ideological*. Coming back to Garfinkel's formulation of the Documentary Method of Interpretation where the 'method consists of treating an actual appearance as "the document of" ... a presupposed underlying pattern' (Garfinkel 1967a: 78), Smith argues that:

a sub-type referred to by Garfinkel suggests an interpretive procedure conforming to this generally circular form arising as events are treated as documents of an 'underlying' schema originating in a textual discourse

Extrapolating from Marx, Smith calls such a process of interpretation an 'ideological circle' where

an interpretive schema is used to assemble and provide coherence for an array of particulars as an account of what actually happened; the particulars, thus selected and assembled, will intend, and will be interpretable by, the schema used to assemble them. ... This ideological procedure provides for the 'insertion' of connections - causal, motivational, etc. - which are derived from the textual discourse or the textually embodied order of an organisational process into the account of actual happenings. In this way happenings-as-described are represented as expressions of conceptual relations evolved in textual discourse. Actual local connections are suppressed and happenings-as-described take on the character of instances of formulations embedded in textual discourse (Smith, 1990a: 139)

Ideology is of course a term to which many meanings and associations are attached, and it is necessary to specify Smith's particular use of the term here. She refers not to false or biased knowledge but 'a method of reasoning about and interpreting society [which] obstructs inquiry by giving primacy to concepts and their speculative manipulation' (Smith 1990b: 35) What is ideological about the textually mediated process of sense-making in Smith's view is both its circularity and concealed character. Closed systems of meaning are determinate for their understanding on particular sets of social relations but emerge in texts apparently independently of the context and relations of their production. The textually worked-up categories and concepts thus emerge as neutral, objective terms. In The German Ideology (1981), Marx criticised the bourgeois economists for presenting the concepts of division of labour, competition and exchange as a priori and explanatory



categories. Marx argued that the meaning of these concepts was given by and at the same time expressive of the social relations of capitalist production; i.e. the local activities of actual subjects in the production of objects intended as commodities. Applying this method to textual production, Smith argues that concepts and categories within texts express sets of social relations,

Concepts such as ‘individualism’, ‘equality of power’, ‘competition’, ‘commodities’, and so forth, are available to be thought about because their character and the distinctions they make apparent are *already structured* in actual social relations (Smith, 1990b: 40 my emphasis)

The very possibility of concepts and categories emerging in texts is a function of their embeddedness in social relations - in the practical activities of people. Once inserted within texts however, within what Smith calls ‘textual time’, the social organisation of concepts is concealed and not immediately knowable. Thus categories and concepts take on a transcendent and immutable character. It is important to note that while Smith contends there is a relationship between the underlying social relations and the interpretive scheme, which in her terms *intend* a particular understanding of a text, she argues that social relations do not determine how texts can be understood but rather ‘provide the conditions of the sense of concepts that express them’ (ibid: 41).

To summarise Smith’s analysis concerning the textually mediated character of contemporary rule, textual forms are more than merely unexplicated grounds for social scientific analysis or procedural activity as ethnomethodologists have argued, but they work authoritatively to organise action. The transcendent, extra-local character of texts provides for their apparent neutrality and independence from the everyday world they order. Smith argues that the conceptual order is already accomplished in the setting, given by sets of social relations extending both discursively and temporally beyond the text. Though the ‘relations of ruling’ that are determinate in textual production are concealed and not immediately perceptible, they can be uncovered as material practices. This is where Smith characterises the process of textual production, of circularity and concealing of material practices as *ideological*.

Smith's work provides a valuable starting point for an examination of textual practices. However, there are two aspects of her work, which I would like to examine critically. The first concerns Smith's general focus on organisational or procedural knowledge in texts, the second with questions of power, ideology and social relations in Smith's work. Firstly, I examine Smith's claims in relation to Latour and Woolgar's empirical analysis of the construction of knowledge in laboratory science, and Latour's discussion of the particular conditions that enable the generation of textual knowledge. It is the initial generation of knowledge on which the procedural knowledge of which Smith speaks depends for its categories and concepts. Secondly I discuss the way in which power and ruling are conceived in Smith's work through an examination of Foucault's more diffuse and relational understanding of power.

As should be clear from my discussion of Smith's work, she is referring to the production of knowledge as a technique of rule in organisational texts. Smith argues that in the context in which organisational texts are used and read, such concepts cannot routinely be challenged. However, such organisational texts do rely upon an a priori discursive organisation within disciplinary knowledge where concepts can be contested, adapted and superseded. As I will discuss, in the field of child maltreatment for example, the medical 'discovery' of a particular form of spiral fracture enabled the stabilisation in social work procedure of the categories of 'battered baby' and 'non-accidental injury'. The work of Latour and Steve Woolgar provide an example of the interrelation of technology, political context and material practice in the construction of one fact in laboratory science.

In Laboratory life: Social construction of scientific facts (1979) the authors examine how it is that the practices of laboratory staff become transformed into "cleaned-up" statements about how science has been done. The work is based on Bruno Latour's fieldwork as a participant-observer from 1975-1979 in Roger Guillemin's laboratory in the Salk institute in Paris. Latour and Woolgar examine the scientific constitution of the TRF, or Thyrotropin Releasing Factor, an object with a well-defined molecular structure,



which can now be purchased for use as a research tool. Ethnographic examination of the spatial structure and division of labour in the laboratory shows that facts are established in the laboratory through practices which establish a stable relationship between a given event or state of affairs and statements that can be made about it. The authors argue that laboratory machines reify previous statements already systematised as theory. Once an inscription is obtained, and statements are subjected to constructions and deconstructions which differentiate between facts and artifacts, the material processes by which such textual facts are produced are no longer regarded as relevant, so that:

The result of the construction of a fact is that it appears unconstructed by anyone; the result of rhetorical persuasion in the agonistic field is that participants are convinced that they have not been convinced, the result of materialisation is that people can swear that material considerations are only minor components of the 'thought process' (Latour and Woolgar, 1979: 240).

Woolgar and Latour's study provides an account of the way in which scientific facts are accomplished in practice, and come to stand independently of their processes of production. Texts and inscription clearly play a crucial role in constituting scientific 'observables' in this process. This approach to the construction of facts is particularly relevant to the field of child maltreatment where the prevailing focus and conceptual coinage has changed over time, the effects of which have been passed into social work discourse where they operate as organising categories for factual description, or are in other words, 'black-boxed' (Latour, 1987)

In a later paper Latour developed the theme of what is distinctive about scientific forms of knowledge by examining the relationship between technologies of inscription and the political context in which they are produced. In 'Vizualisation and Cognition. Thinking with Eyes and Hands' (1986) Latour argues that we need explanations of historical and cultural change that focus on differences *in effects* rather than causal models such as those found in either materialist or mentalist explanations. Latour is interested in producing detailed, empirically based analyses of the actual practices which are involved in the production of knowledge, 'simple empirically verifiable causes that can account for the enormous differences in effects that everybody knows are real'

(Latour, 1986: 2) rather than explanations of the great divide in human consciousness, or based on economic relations. He calls for analyses of ‘the precise practice and craftsmanship of knowing’ (Latour, 1986: 3).

A distinctive feature of scientific practice upon which Latour alights is that of inscription. Latour argues that the development of the printing press and subsequent technological innovations that transformed inscription are not adequate explanations for the emergence of modern, scientific culture. He argues that the *force* of inscriptive devices derives from the political process in which they play a part. It is the ‘agonistic’ field, or political intention in which inscription takes place, which alongside the technological innovations of textual and image reproduction, distinguish the character of modern knowledge production. The agonistic field is the context in which resources are mustered in order to counter and seek authority for knowledge claims, which in concert with technologies of inscription characterises an effect of scientific culture. To demonstrate the relationship between the political context and technological production of knowledge, Latour takes the case of an envoy of Louis XVI, sent to the Pacific to bring back an improved map of the region. What is the difference, Latour asks between the map Perouse brings back and the map drawn in the sand by the islanders of Sakhalin themselves? The mobility and visual re-productibility of Perouse’s map clearly distinguishes it from the map drawn in the sand, which, however accurate, will be washed away by the sea. But crucial to the difference between the two impressions, is the envoy’s mission as part of the project of Imperialism. Merely to talk of ‘Imperialism’ Latour argues, is meaningless without taking into account the technologies of cartography, navigation as well as printing that have made it possible. He writes,

Commercial interests, capitalist spirit, imperialism, thirst for knowledge, are empty terms as long as one does not take into account Mercator’s projection, marine clocks and their markers, copper engravings of maps, rutters, the keeping of the ‘log books’ and the many printed editions of Cook’s voyages that Perouse carries with him (Latour, 1986:6).

To talk of the project of Imperialism is therefore to gloss practices in the global mustering of resources. It becomes possible to see that such practices were harnessed



through and enabled by technological change. Latour emphasises that it is the visually perceived character of inscriptive 'mobiles', delivering 'optical consistency' that has transformed and systematised reproducible, replicable knowledge. The technology of visual perception, he asserts, has been a crucial component of the scientific revolution, ensuring that an object can be reproduced without its properties being changed - 'the immutability of the displaced object'; the languages of longitude, latitude and geometry establish a two way relationship, 'a regular avenue through space' of an object and its recreated figure. No science exists, Latour argues, without a visual language. The power of the inscriptive device as a polemical tool derives from such a language so that seeing is believing. It is possible to say, 'You doubt what I say, I'll show you' (Latour, 1986: 14). One is reminded of Foucault's statement cited above regarding the emergence of the clinical gaze: 'it is only possible to see if you know how to describe' (Foucault, 1993:196). Latour's work takes this assertion further by examining how particular technological and perceptual innovations in science created not only a means of seeing but the conditions of possibility for the practices of international trade, territorial appropriation and governance which characterised Imperialism. Smith's claim that textual authority is derived from the apparent dropping away of its organisational process of production supports Latour's assertion that in the currency of scientific knowledge it is the diagrammatic traces and figures which count, while the practices of their production drop away so that the facts in the form of diagrammes and figures appear to speak for themselves.

Coming back to the work of Dorothy Smith, it is the conceptual order of organisational, or procedural texts, which are so crucial in the co-ordination of everyday life. Meaning in organisational texts is reliant upon the production and stabilisation of disciplinary knowledge in the complex negotiation between technology and the political currency of claim and counter-claim described by Latour. Attention to the specific discursive and technological processes upon which procedural texts such as those found in social work departments are based leads to greater empirical clarity than does a focus on the general properties of textual rule. Our attention is thereby drawn to the particular processes at work. Returning to Latour's commitment to 'the precise practice and

craftsmanship of knowing', reinforces for me the value of explicating the specific practices which are entailed in an instance of knowledge production, or of a particular sphere of knowledge. The question becomes, how exactly specific texts operate or are intended to operate in child care social work.

As I have indicated, Latour's paper encourages an examination of the specific political context that enable the emergence of a cultural form at any time, rather than the general properties of power. I will now discuss the formulation of power and social relations in Smith's work in relation to the work of Foucault. Smith's reference to two *worlds*, one that is located in lived reality, the other that is textual and transcendent, is intended to indicate the extent to which the textual suppresses, conceals and organises lived experience. Social work with children and families involves practitioners invoking at different times and sometimes simultaneously, a whole range of categories, and as I have indicated, a wide range of texts are integral to social work practice<sup>3</sup>. It therefore seems unproblematic to say that social work practices are mediated by texts. Further, I am persuaded, following Smith, that in order to grasp the organising properties of a text requires that we direct our analysis outside the immediacy of the text itself. However I believe that Smith's account of the workings of power and ideological practice runs a risk of our disregarding the particular character of practices at work.

In Smith's analysis power is differentially distributed and is something that is lost in the suppression and abstraction of experience. Liberation for Smith comes from an articulation of the world from where it is lived and from where we are located. For Smith, relations of power are concealed through textual practices; they are top-down and prohibitive. This 'juridical' formulation of power is challenged by Michel Foucault in The History of Sexuality: Vol 1. (Foucault, 1976,1990) where he contends that while law and state apparatuses are instruments of power, they are only the 'terminal forms' in

---

<sup>3</sup> For example, categories derived from particular legislation (e.g. the Children Act categories of Significant Harm, Children in Need) and in formal procedures such as those relating to the child protection register; more broad psycho-therapeutic categories (alcoholic, drug using, learning difficulties, paedophile), and categories derived from social work discourse, relating for example to how easy a family will be to work with, and whether or not parents are likely to co-operate with social workers.



which power takes effect (Foucault, 1990:92). In the *first instance*, he argues, power should be considered as omnipresent, ‘in every relation from one point to another’ (Foucault, 1990:93), integral and not separate from other relations such as relations of knowledge. Such an understanding enables an investigation of the positive, and productive workings of power. The same question can be asked regarding the problematisation of the family through social work practice that Foucault asked of sexuality:

In a specific type of discourse .. appearing historically and in specific places .. what were the most immediate, the most local power relations at work? (Foucault, 1990:96)

Attention to the productive and positive effects of power does not deny the existence of legislative mechanisms of force but focuses instead upon the minutiae of the technologies through which categories of personhood are generated in the disciplinary “ ‘power of writing’ ” (Foucault, 1991:189). Attention to the workings of contemporary social work power reveals that such practices are not only exercised upon the client subject but work reflexively upon social workers themselves. As I will discuss in Chapters V and VI, while social workers and the children and their parents with whom they work, are by no means *equal*, child protection social work is institutionally reticent and reflexive in its uses of power. Moreover, social workers themselves are the subjects of a complex network of procedure and regulation, which include the strictures of ‘good practice’ to enlist clients’ co-operation and to be seen to intervene warrantably as well as elaborate systems of audit for documenting practices and rendering actions accountable. I am therefore interested to explore the positive and productive forms of power as it works on and constitutes both clients and social workers. This is how I understand Foucault’s invitation to examine the local power relations at work.

In examining Smith’s work I have found the idea of textually mediated relations compelling in order to understand the way professional practice is carried out. While the use of categories and concepts is clearly intrinsic to administrative practices in bureaucracies, enabling large amounts of information to be sorted, what is important

about Smith's analysis is that it enables an understanding that the factual status of categories and concepts is accomplished. Categories are not merely given, but a process of construction. In my view this approach has the effect of demystifying even 'scientific practice' as was seen in Latour and Woolgar's study of the construction of a fact in laboratory science.

However, the model of textual construction that Smith offers does not adequately take contingency into account; in other words that the generation of knowledge practices relies upon the coincidence of particular historical conditions, of conceptual innovations and institutional forms. Further more, in my opinion, Smith's understanding of textual practices of ruling posits power as a 'deductive' force (Foucault, 1990). As I have said, Foucault provides an understanding of the inscriptive practices in which concepts and categories are mobilised, as part of a *positive strategy* of government. As I have described a focus on the local relations of power enables an examination of the emergence of new forms of knowledge, and ways of constituting the human subject.

### **Child Maltreatment, Social Work and the Family**

In this section I will examine some of the British literature that has focused on both child maltreatment and the governmental response to child maltreatment over the last thirty years. The academic base for much of this work is that of social work and social policy, reflecting the authors' proximity to and interest in social work as a practice, and the political context in which such work is located. The literature I will review is therefore not only concerned to interrogate the emergence of child abuse as a social problem but also effectively to make it a problem or problematise it in terms of social policy. My review is necessarily selective and I am referring only to those articles, chapters and books, which in my view stand out as making key contributions to debates surrounding child maltreatment.

As will be discussed, one of the early pre-occupations of the literature was the need to account for the emergence and diagnosis of child maltreatment. As I will describe in Chapter IV the prevailing terms in which such concern has been couched and



thus the main focus of concern has shifted over time (Parton and Parton, 1989a). Policies and social work intervention has been directed at different times at the battered baby, non-accidental injury, child abuse, sexual abuse and child protection. In the history of the discourse of child maltreatment, deaths in particular and the publicity surrounding them have led to shifts in policy (Parton, 1985, Frost and Stein, 1989).

An important concern of this literature is to interrogate the object 'child maltreatment'. This work challenges the notion of child maltreatment as something that can be characterised by objective criteria. Instead it is understood as a politically and historically specific category that it became possible **to see** once it had become established as a legitimate medical diagnosis. As I will describe, however, with some important exceptions there is a tendency for the level of analysis to remain within the terms of government itself. In the process, the dualities of the state/family, public/private, policy/practice are not fully explored.

In The Politics of Child Welfare, (1989) Frost and Stein ask what political conditions existed in the 1970s and 1980s in Britain such that child abuse re-emerged as a focus of media and state interest. They argue that the harm and deaths of children attributable to child maltreatment is insignificant compared to the number of children who die world-wide from disease and poverty. Referring to the death of Jasmine Beckford in 1985 they ask: 'How is it that these deaths resulted in minimal media coverage compared to the tragic death of one child in Great Britain?' (Frost and Stein, 1989:47). Although I am not focusing in this thesis on the media response to child abuse, the question of why, in this country in a space of thirty or so years, child maltreatment and its prevention, rather than delinquency or the prevention of disadvantage became the priority for social work with children and families is an interesting one. It is the character and kind of response that is of interest as well as its focus. To some extent Frost and Stein and Parton's work responds to this question which can be understood in Foucauldian terms as about the *conditions of possibility* that enabled the emergence and visibility of the phenomenon of child maltreatment.

Following the work of Pfohl (1977) Parton examined the process whereby child abuse first becomes an issue. In 'The Natural History of Child Abuse: A Study in Social Problem Definition' (1979) Parton traces the emergence of child abuse - something that was not in itself a new thing - as a social problem in Britain. Child abuse, it is argued, is not reducible to a set of objective clinical characteristics. Its ethical and political *constitution* as an object of public concern in the 1970s is therefore particularly interesting. Using a natural history approach and marking out key events as significant moments in the trajectory of child abuse, Parton looks at the stages of discovery, diffusion, consolidation and reification of child abuse; in other words, the process by which child abuse came to be both a legitimate medical diagnosis in Britain, and an issue for policy makers and practitioners. Central to Parton's argument in this article and in later writing is that the (re)discovery of child abuse brought with it a sea change in social work practices relating to the family and the way in which the 'problem' family came to be conceptualised.

Parton argues that while in the US it was radiologists who initially discerned a pattern of fractures later to be diffused in the research findings of Kempe et al as characteristic of the 'battered baby syndrome' (1962), in Britain, it was orthopaedic surgeons who were at the forefront of 'discovering' child abuse. The diagnosis was then championed by paediatricians and forensic pathologists. Parton states that the National Society for the Protection of Children (NSPCC) played an important role in taking up the issue of child abuse for social work at a time when social work was keen to carve out a niche for itself in the children's departments of the 1960s. Parton contends that the way in which the NSPCC conceptualised child abuse as characteristic of family malfunctioning in the 1970s was in turn, significant for how their research was received by Sir Keith Joseph the then Secretary of State for Health and Social Security. The NSPCC's 'disease model' for understanding child abuse as a problem, in Parton's view, appealed to the emerging New Right's concern with the need to defend traditional family values. An understanding of child abuse which located blame for abuse with failing parents, and problem families, rather than with wider deprivation, was, according to Parton, consonant with an ideological response to the challenge represented by the movements of feminism



and gay liberation of the 1960s. It was such permissiveness that, Parton argues, the New Right was to confront ideologically, and their response to child abuse was one strategy in this concerted defence of the family. Making a similar argument, Frost and Stein contend that the radicalisation of social work which took place in the 1960s and which included a focus on prevention, welfare rights, advocacy work and increasingly explicit anti-poverty strategies, was also the target for the New Right defence of the family (Frost and Stein, 1989: 48)

In 'Child Abuse, Social Anxiety and Welfare' (1981) Parton develops his earlier arguments that the theory of a 'cycle of deprivation'<sup>4</sup> was favoured by the NSPCC and other central players in child abuse definition because it fitted the conservative values of family preservation they were keen to promote. He claims that while the theory itself was not novel, it legitimised strategies that involved focusing for the first time on the poor as a class:

it was implied that the deprived required special attention because of their potential deviance rather than simply because they were in need (Parton, 1981: 407)

Parton argues that the concern with child abuse was produced, as part of an ideologically orchestrated 'panic' about a perceived attack on traditional values, at the heart of which was anxiety that the family as an institution was under attack. The implications for the way in which child abuse was responded to at a governmental level, is highlighted by Parton's account of Keith Joseph's management of the news of Maria Colwell murder by her step father. The Secretary of State's announcement of a public enquiry into the child's death - resulting in newspaper headlines on the 'hidden evil' of child abuse, and heralding the beginnings of a public scare about abuse within families - came *five months* after Maria Colwell's death. Parton argues that the publicity surrounding the public inquiry into the death of Maria Colwell not only had the effect of raising public awareness of child abuse but also had a direct impact on social work practice. This is demonstrated, according to Parton, by figures that show a rise in the number of

---

<sup>4</sup> The central proposition of the 'cycle of deprivation' is that disadvantage is passed on from parents to children creating inter-generational 'problem families'.

applications for Place of Safety Orders that followed the announcement of the public inquiry. Frost and Stein (1989) argue similarly that the new focus on the permanent removal of children from their birth families into adoptive families, a strong theme of the 1975 Children Act, was a reflection of the political climate created by the new Conservative government.

Such arguments link the particular configuration of child abuse as a social problem with the 'influential economic interests and the changing ideological and material base of British society' (Parton, 1981:394). It was for reasons of political expediency Parton argues, that 'child abuse' became associated with the poor. Parton's assertions as to the changing role of statutory social work, in relation to poor families in particular, provide a model of social work in the early 1980s as an increasingly coercive agent of the state. In The Politics of Child Abuse(1985), Parton argues that in order for welfare activities to be truly preventive they should be universally available rather than targeted at individual families. He calls for a reorganisation of social work resources, away from the targeting and penalising of individual families and towards the general availability of a range of user-led voluntary and community resources. Such a call for the provision of less targeted services is echoed by Frost and Stein (1989) who describe government policy as promoting the private and autonomous family. New Right strategy surrounding child abuse, they argue, emphasised the pathology of individual families, so ensuring that the individual family members and not the family as an institution, deprivation, or for example poor housing could be considered as contributory factors. Indeed: 'No amount of violence and exploitation within families is able to challenge the idealised vision of the family' (Frost and Stein, 1989: 5)

Such arguments rely upon the oppositions of public and private, coercion and freedom where social workers and professionals are, in spite of their own misgivings, put into the role of regulatory agents of the state. As I have described, the opposition of ruled and ruler on which Parton and to a lesser extent Frost and Stein rely, is challenged by a consideration of the local relations of power (Foucault, 1979). In the social policy literature too these arguments are challenged by the work of Robert Dingwall, Eekelaar



and Murray in The Protection of Children (1983) that followed Parton's two influential articles on the emergence of child abuse. Dingwall et al focus upon the professional intervention in the family in their ethnographic study of the processes of decision-making and practical reasoning that enable doctors, health visitors and social workers both to see as well as to **not** see evidence of child abuse in the cases with which they are involved.

After Donzelot, the authors discuss how the practices and judgements of professionals are shaped by the perception that on the one hand, state agencies have a right to protect children from being harmed by adults, and on the other, that in a liberal-democratic society, families are deemed private. It is argued that the tension between the notion of the autonomous family, and the need to protect the vulnerable becomes one of the dilemmas faced by child welfare professionals. In this analysis it is the organisational frame that provides the context for doctors, health visitors and social workers decision-making. Child care professionals are not simply reacting to moral panics about child abuse as Parton suggests but are resisting making judgements that will involve children being separated from their families. Indeed Dingwall et al criticise analyses that fail to recognise the extent to which practitioners are able to both negotiate their role, and resist the task of surveillance.

The study is based on participant observation and interviews carried out in the various sites at which professionals come into contact with young children. In common with Parton, Dingwall et al are not interested in what child abuse *really is* but with the practices of definition and reasoning which enable professionals *to see* an injury as non-accidental, or a parent as abusing. Only in a small number of cases in interviews with paediatricians did the authors find professionals espousing the 'strict liability' case that any injury in a young child is always a matter for concern. In other cases, doctors were observed to look not only at clinical but what the authors call social evidence. They report that there were strong structural preferences for doctors *not* to find evidence of non-accidental injury or abuse. The authors use Erving Goffman's concept of an organisational 'frame' that structures the possibilities for professionals' interpretations of presenting information. Participants, it is argued, make sense of any situations in

accordance with the presumed underlying principles of its organisation; in this case the organisation of the medical profession and the nature of the relationship between doctor and patient which is one of trust on both sides, and of partnership. It is argued that in the doctor/patient organisational frame, the patient is assumed to be respectable until proven otherwise (Dingwall et al, 1983:40). Such 'framing' provides for a particular interpretation of the nature of and purpose of the encounter between doctor and patient and militates against the doctor seeing a child's injuries in terms of maltreatment.

Similarly, amongst health visitors and social workers, the authors observed a preference for these professionals *not* to see either physical or social circumstances as signs indicating neglect or abuse. The authors argue that the health visitors and social workers preferred to normalise what appeared at times to the accompanying researcher as clear cause for concern, for example, extraordinary dirt in a home, or an obvious bruise on a child. The devices enabling such normalising were firstly, the assumption of natural love between parents and children, so that any evidence of 'natural' affection between parents and children indicated the underlying healthy character of the relationship between carer and child; and secondly the device of cultural relativism, (which the authors claim was promoted in social work training in the 1960s and 1970s), where social workers refused to judge standards of child care in terms of their own class and ethnic specific standards. In other words, social workers interpreted features of child care or house keeping which differed from their own as according to a set of different standards. Thus a social worker commented to the researcher that the observed conditions of physical squalor were *normal* for a particular estate or area of town (1983: 65). Together these devices constitute what the authors refer to as a *rule of optimism* and account for the low number of families who are subjected to investigations, and the strong preference amongst professionals to give families the benefit of the doubt when care of children becomes in any way the subject of concern. The authors observed that only in certain circumstances was it possible for the rule of optimism to be breached, for example where a family refused to comply with the wishes of the agency in allowing access to a child, or when the case could no longer be contained within one agency, becoming the object of



concern for multiple agencies. The authors are thus seeking to account for the low level of professional intervention into the family

Dingwall et al's study provides an analysis of the decision-making practices of child welfare practitioners which contests the notion that doctors, health visitors and social workers are increasingly coercive in their practices. The authors refer to Donzelot's work in their formulation of the dilemma of the liberal state to promote the autonomous family, and at the same time protect its most vulnerable members. As I have indicated, Dingwall et al's work is important in that it demonstrates the extent to which such dilemmas derive from the institutional setting. It is this setting or frame that provide practitioners with the interpretative resources for making sense of the verbal and visual signs that are the stuff of their day-to-day work. While Dingwall et al's study marks an important methodological move in the literature on child maltreatment, towards the empirical and ethnographic examination of the bases for professional decision making and away from analyses which infer social work practice from a critique of official statements and policy documents, the practical, technical means by which the public/private paradox become converted into the 'institutional frame' are not fully explored. Although the approach of these authors avoids a causal account that equates practice with policy, without exploring the specificity of techniques available to professionals to assess families and the means by which parents and social workers are constituted through a network of procedure and regulation, the analysis remains at the general level of the institution and interactionally negotiated interaction within it.

Two strands of literature that I will now examine look at the prevailing concern addressed in Dingwall et al's study, that of the problematisation of *unnecessary* intervention into family life and the implications of such concerns for social work practice with children and families; and relatedly, analyses of decision-making or practical reasoning in child protection work, which appear not to be based upon whether or not a child has been abused but whether or not her mother is deemed capable of protecting her from future harm.

The significance of the events of Cleveland in 1987 in the re-shaping of child care policies towards non-intervention into the family has been well documented in the literature. In a three month period in 1987 in Cleveland, 113 children were taken into local authority care, eighty-three on the grounds of risk of sexual abuse, compared with forty-nine Orders because of suspected sexual abuse in the whole of the previous year (Parton, 1991:82). In 'Child Protection: the Law and Dangerousness', (1989a) Christine and Nigel Parton describe a shift in policy in terms of a move away from a concern with child abuse and towards that of Child Protection, 'in which comprehensive legal knowledge which invests social workers with a particular form of authority is crucial' (1989a: 72). This was a move that involved a concern not so much with the preventable incidents and causes of harm to children, but to statutory powers and professional procedures in response to such injury. Frost and Stein have commented with reference to the guidance that appeared in the late 1980s for the keeping of child abuse registers

It became almost as if child abuse is caused by lack of communication, missing memos or whatever other problems an inquiry uncovered (Frost and Stein, 1989: 49)

This is interesting in that it suggests a changing morphology in public concern associated with children and the family, so that the focus of intervention is no longer the actual phenomenon of harm to children but how investigations and identification of that abuse - social work itself - can be made accountable. A recent example of this type of reasoning took place after the death of Rikki Neave in Cambridgeshire in 1998. Loss of files between social services offices featured in the inquiry report that focused on social worker accountability rather than the cause of the child's death (Bridge Child care Development Service, 1997). Such accountability refers to the accountability of the individual social worker for her actions, i.e. her responsibility, as well as to the cost of intervention in the family. At the same time that commentators have observed the expansion and 'diagnostic inflation' in the identification of child maltreatment (Hacking, 1995, Dingwall, 1989), it would appear that the actual focus of statutory concern has moved away from the phenomenon itself and towards a concern with accurate documentation, and proper procedure. This emphasis on accountability of social work action is in my view central to the changing character of social work. As Michael Power



has argued, the role of audit in the public sector has expanded enormously in recent years. (Power, 1994, 1997). Power argues that audit works as a rationality of government, ‘a particular manner of *(re) presenting* administrative problems and their solutions, one that is becoming universal’ (Power, 1994:299, his emphasis). As I will argue, the rationality of audit has turned a regulatory gaze upon social work in two distinctive ways. Firstly, the *efficiency* of social work is made measurable in terms of its outputs and the warrantability of its interventions into the private family, translating into an increasingly scientised technology of risk management. Secondly, social workers are made responsible for auditing their own power vis a vis the families with whom they must be seen to have attempted to work in partnership.

Parton and Parton (1989a) argue that prior to the events of Cleveland the death of Jasmine Beckford in 1985 produced an inquiry report which emphasised that social workers had not adequately carried out their statutory role of protection and recommending that they should be applying ‘predictive techniques of dangerousness’ to assess the level of concern. Parton and Parton describe the shortcomings of this emphasis on targeting resources at families who are identified as dangerous through a calculation of risk factors. They argue that this attempt at prediction is misplaced since the measurement of risk factors is based on identifying circumstances where children have been known to be put at risk, and is thus retrospective. It might mean for example, specifying the indicators of risk in a case such as the Beckford one where a child died. Such a practice can mean an interpretative ‘looping effect’ occurs (Freeman, 1983) where families with particular characteristics become the subject of increased surveillance and investigation. Parton and Parton argue further that the calculation of risk in individual families represents a narrow concept of prevention, which is far from that of the universal provision of services. The question of risk and possible harm is thus isolated in terms of the particular family who needs treatment rather than in terms of deprivation, unemployment or the ideal of the family more generally. We are brought back to the earlier arguments made by Parton and Frost and Stein in relation to the New Right defence of the family.

As well as criticising the implications for practice of the policies of targeting ‘dangerous’ families, Parton and Parton are critical of the discourse of child protection and argue that the emphasis in child protection on the investigation of individual families, involves the axiom that the child should always be believed in allegations of abuse. They argue that such assumptions serve to re-confirm stereotypes of children as innocent, weak and passive. The Partons view the child protection system as resulting from a commitment to targeting resources at individual families who are calculated to be at risk, in an attempt to avoid unnecessary intervention into families where there is no basis for investigation. The implication of their argument is that such targeting merely has the effect of scapegoating mainly disadvantaged families who fit a set of dubious criteria for abuse.

To return to the Cleveland affair, the resulting inquiry report would appear to have been an example of the very proceduralisation of child abuse discussed above. Frost and Stein point out that rather than addressing the question of whether or not there was a basis for removing children, the report from the inquiry focused on the extent to which local agencies had shared information<sup>5</sup>. The articulate parents’ rights movement that emerged in the case and the activities of the local Member of Parliament, Stewart Bell, ensured that public attention was drawn to the intrusive and apparently unnecessary use of statutory measures to remove children from their families (Campbell, 1988).

While Parton points out in Governing the Family: Child Care, Child Protection and the State (Parton, 1991), the Children Act 1989 did not directly arise from the Cleveland affair, the Act nevertheless addressed issues which had been raised by the publicity surrounding it. I will return to a more detailed discussion of the Act and its accompanying guidance in Chapter IV, but pertinent to this discussion are the concepts developed in the legislation which point to an attempt to re-balance the relative rights and responsibilities of parents and children with the duties of local authorities - in other words

---

<sup>5</sup> Beatrice Campbell states that although all children were returned to their families, several were removed back into the care of the local authority because of continuing concerns relating to abuse (Campbell, 1988)



the duty to protect vulnerable family members while at the same time respecting the autonomy of the family.

Corinne Wattam has carried out a detailed study of the operation of the child protection system and the law since the implementation of the Children Act, in Making a Case in Child Protection (Wattam, 1992). Based on an ethnographic study of a social work office, and the analysis of case files, the study examines social workers' 'situated reasoning' strategies. Using methods from ethnomethodology, she asks on the basis of what kind of evidence do practitioners feel able to act in terms of a child protection case, rather than make a request for advice and services, or take no action at all? After Harvey Sacks, she describes the way in which social workers use 'Membership Categorisation Devices' in order to interpret referral information. Such methods of interpretation derive not solely from social workers' professional knowledge but are more broad cultural resources upon which they are able to draw. Wattam argues that the initial categorisation is particularly 'fateful', in that it is invariably the earliest interpretation of a case that is consequential for how it proceeds and is acted upon by social workers. She describes the extent to which the 'legal gaze' has permeated the collection of information in child protection work. For example, she argues that despite the chair of the inquiry into Cleveland stating that children should be treated as persons and not the object of concerns, children are nevertheless treated as potential objects of evidence. She found for example that social workers treated sexual abuse cases in particular in terms of whether they would stand up as cases in court, since:

If children are treated as people, with rights, feelings and wishes, and an entitlement to information about them, they can become tarnished as evidential objects (Wattam, 1992: 29).

This study suggests that social work with children and families has taken a forensic turn, that social workers increasingly 'see' the information before them, including the children themselves, in terms of potential evidence. One of the implications of this is that if a case is to go to a criminal prosecution, children cannot discuss the experience of abuse in the context of counselling/therapy prior to a court case as this could be construed later as 'coaching' the child and potentially contaminating of evidence. In a similar vein it is also



argued that cross-examination and the systematic disbelieving this entails has an extremely damaging effect on children who are already made vulnerable through the experience of abuse.

While social workers may increasingly respond to cases in terms of whether they will constitute adequate forensic evidence in criminal trials, it is not clear what effect this may have in their practices with families. In analysis of social work accounts and official guidance I found there was not an overriding concern with *legal* evidence as such, but rather the increasing attempt to render social work judgements warrantable and to deploy a more accurate calculation of risk. These are themes I will return to in discussion of the social work gaze and changing conditions of possibility in Chapter IV.

Neither does social workers' concern with forensic evidence necessarily translate into an increase in the prosecution for child abuse. The rate of criminal prosecution and conviction for child abuse is in point of fact low as a proportion of the numbers of children in the child protection system as a whole<sup>6</sup>. This was something social workers I interviewed commented on as a source of some frustration - pointing to caution on the part of the police and the Crown Prosecution Service as to what will stand-up as evidence as well as a concern to minimise further distress to children. To argue the point from a 'children's rights' perspective as Wattam suggests provides an ambiguous course of action. It has been argued for example that the legal system needs to be particularly tailored to children, involving the re-design of courts and mechanisms for giving evidence (the Memorandum of Good Practice (Home Office, 1992) has gone some way in this direction). While in my view the rights of children should clearly not override alleged perpetrators' rights to a fair trial, what these arguments highlight to me is the extent to which legal procedure and the criminalising of something called child abuse has

---

<sup>6</sup> An estimated 425 defendants were convicted for offences of violence against children in May 1988, 7 per cent of all prosecutions for such offences in the same period. 30 per cent of prosecutions were against defendants who were relatives and 29 per cent where the victim and defendant were known but not related. There are no figures for the numbers for incidents reported to the police of 'cruelty to, or neglect of children', and a direct comparison cannot be made between rate of conviction and prosecution since the figures for prosecution include cases which have proceeded from earlier years or for other offences, nevertheless, in 1992 for example there were a total of 450 prosecutions and 212 convictions for this crime. In 1997 there were 608 prosecutions for cruelty to or neglect of children and 390 convictions. (Home Office, 1999).



come to dominate debates about social work with children and families, if not social work practice itself. Indeed Wattam's work is evidence of how these debates, and their attendant kinds of categories and personhood have assumed dominance in commentary upon contemporary social work practices (see also White, 1998).

Further examination of social workers' categorisation work is carried out in Child Protection. Risk and the Moral Order (1997) by Nigel Parton, David Thorpe and Corinne Wattam. The authors are no longer focusing on the direct impact of state upon social work practice but on the 'situated reasoning' of child protection professionals. Here they respond to the changing nature of social work practice and in particular to a body of research commissioned by the Department of Health which was summarised in a document called Messages from Research (Dartington Social Research Unit, 1995). This research was itself commissioned as a result of a concern expressed in particular in an Audit Commission report (1994), which found that too many social work resources were being deployed in carrying out unnecessary child protection investigations. Costly practices were therefore needlessly involving families in unwarranted intervention. As I discussed above in relation to Michael Power's work, the role of the Audit Commission in reshaping social work policy is in itself significant, as social work has increasingly come to be measured in terms of its efficiency and outputs. The Messages from Research document summarised the findings from twenty research studies, which looked at child protection procedures and practices. The report argued that too many children were indeed being caught up in the net of child protection procedures, many of whom should have been treated in terms of the legal category of 'children in need'. Once child protection procedures were found unnecessary however, children often received no services. Accordingly, the report concluded that social workers needed to exercise particular caution in their assessment in order to avoid unnecessary child protection investigations, and to make sure that children who meet the criteria for 'in need' do not go without services.

In Child Protection. Risk and the Moral Order, the authors are highly critical of the conclusions of Messages from Research. They argue that while it is true that the

children and their parents caught up in unnecessary investigations often go without services they need, this is not something that can be corrected by extra vigilance on the part of individual social workers. They focus on the shift away from the provision of preventive services, on the emphasis on targeting resources at individual families and on the moral order in which social workers carry out their practice. The authors argue that the actual categorisation work of social workers has not been addressed by the Messages from Research report. In examining the work of categorisation in case files, the researchers found (after Harold Garfinkel, 1967) that the information in the files was that which the social workers felt it was relevant to record, i.e. what was *accountable* in the sense of necessary to record and document for organisational purposes. The researchers found that social workers followed a set of rules for filtering out cases that did not need to be pursued as child protection cases. They found, as in Wattam's earlier study, that these rules were based more on 'situated moral reasoning' rather than on statutory procedure. Such moral reasoning was *situated* in that it was in part derived from their professional knowledge, including knowledge of resources available, but more fundamentally was based on practical reasoning work which is not only characteristic of social work, but more broadly available cultural knowledge of age, sex and family role. While they argue that what is normal is at any time subject to negotiation, social workers are deploying 'common sense knowledge' of the roles, relationships and behaviour that should pertain within a family. The authors detract from Dingwall et al's identification of 'cultural relativism', as integral to the way in which decisions get made in child protection, since in their view it is 'more about how certain features of our own culture are reinforced by child protection investigation' (Parton et al, 1997:121); in other words normative expectations of family functioning. They found in their research that the social workers were not orientated to discovering the truth of whether or not abuse had taken place but whether the parents and the mother in particular could be said to comply with normative expectations of good parenting. This account of decision-making may be accurate, but in my view is not contradicted by Dingwall et al's description of professionals' tentativeness both in making judgements about parent's abilities to care for their children, and taking statutory action.



Parton et al address the issue of risk assessment in child protection social work. They argue that the identification of risk is a moral enterprise and that social workers are engaged in a process of risk insurance, rather than risk assessment - in other words that risks can never be wholly dispelled. In my study I am analysing the regulatory procedures and risk technologies available to social workers to minimise risks, both to children and to themselves. Moral categorisation is in my view integral to how social workers manage risks but as I will argue their concern to intervene warrantably and to be seen to follow procedure are also ethical concerns. Further, as will be seen, parents can in some instances negotiate and even refuse the practices of risk management.

As I have indicated, the focus of analysis has moved from critique of policy statements and documents to a focus on the practices of decision making, so that accounts of the rise of the New Right which have described social work as taking on an increasingly coercive role have been challenged by ethnographic descriptions of the dilemmas faced by social workers to either make judgements or intervene in family life.

Analysis of professional decision-making has thus been an attempt to address rather than simply assume a link between central policy and local practice, for example how the policy emphasis on the assessment of risk in child care social work corresponds to the designation of the status of Child Protection to a case. While Parton et al's examination of situated moral reasoning as the basis for social workers' decision making has provided a detailed description of practice, my work attempts to link social workers' repertoires of reasoning with discourses and technologies of risk, partnership and co-operation.

The literature has demonstrated the shifts in the way in which family life has been problematised in policies and legislation over the last three decades. The accounts have deconstructed child maltreatment in terms of prevailing political interests arguing that social work practices and the definition of child maltreatment have been infused by the defence of the normal family. Most recently this has taken the form of the attempt at more accurate calculation and prediction of risk, in order to avoid unnecessary intervention into family life, and the costs of child protection investigations. The extent

to which practitioners are able to resist the practices of surveillance, and normalising of family life (which commentators argue has taken an increasingly forensic turn) has been the focus of some debate. Increasingly social policy literature has moved towards the detailed empirical study of sense-making, and categorisation in decision-making. Judgements of parenting, it is argued, are based on the culturally available resource of commonsense knowledge.

In seeking to demonstrate the constructed nature of child maltreatment, authors have sought to link central policy formation and transformation with its effects on social work practice and on the population with whom social work is concerned. Authors have brought different theoretical and methodological frameworks to address the relationships between the central and local, the public and private, the state and the (poor) family, and the role that social work can be understood to play in the interstices between these oppositions. The question of the operation of government, and the workings of power in the construction of child maltreatment has therefore been central (if implicit) in all the literature discussed.

### **Conclusion**

In the first section of this chapter I discussed literature that destabilises the understanding of the universal human subject, and problematises the particular constitution of the subjects of liberal society (the working-class family, mother, child) in terms of their deployment as strategies of rule. In the second section I discussed literature that examines the role of texts, technological innovation and inscription in the production and stabilising of knowledge and the practices of power. What links the literature in the previous two sections with the literature discussed in the last section of this chapter is the following. Firstly the production of knowledge is not separate from practices of rule; strategies for knowing are also strategies for acting upon the subjects of knowledge. Foucault expresses this in terms of a power/knowledge relation (Foucault, 1972). Secondly, practices of rule are at work not only as macro 'state practices' but in addition, in the case of social work, in the collection and ordering of knowledge about families in relation to thresholds, concepts and sets of criteria. The heterogeneous, micro-practices of



assessment and evaluation carried out by social workers are textually-mediated practices of rule, which are made possible by historical, institutional and conceptual conditions. This is a particularly interesting insight for my purposes since I am examining an area of professional practice that is peculiarly mandated and shaped by statute. What is required is a literature which problematises 'state practices', and does not re-produce the public/private vocabulary of government. In different ways the literature I have discussed has been concerned to describe the emergence, re/discovery or organisation of distinctive forms of knowledge and related practices. The question for all the authors discussed has been how such phenomena can be explained or accounted for.

As Dorothy Smith argues, knowledge is always relational in that it is always knowledge by someone, and of something. The question then becomes who knowledge is for, and of what kinds of relations it is a part. It is Smith's contention that the distinctly textual form in which official forms of knowledge present, are characteristic of a form of rule in advanced industrial societies where texts mediate between professional organisations and individual experience. Her analysis of the production of facticity informs my interest in how concepts and categories operate, but depends upon a problematic opposition between the real and the textual. What Michel Foucault's work suggests is that the very foundations of thinking, knowing, seeing are historically constituted, and produced as a result of particular conditions. The world of experience is then no less historically constituted than the textual forms that seek to represent and order it. This becomes particularly relevant when we examine the emergence of the phenomenon of child maltreatment, where, as I will go onto discuss, social workers and associated professionals are in the business of generating the very object of their concern through the categories of their practice.

## **Chapter III**

### **Methodology**

In this chapter I describe the methodology I have adopted in carrying out this research. In the first section I describe the analysis of data that are social work interview accounts and social work policy documents. I describe the numbers of social workers I interviewed in two authorities, the sorts of questions I asked them and why. I list the key Department of Health documents on which I am focusing and describe how I am analysing their contents as providing a conceptual currency for social workers to make sense of and act on families. I describe how I have analysed the interviews in terms of their strategic character and provide an example of the analysis of one social work 'case'. In the second section I take up the theoretical question of social work as a practice of government and explain how I understand the operation of power after Michel Foucault as *productive*. I discuss Ian Hacking's notion of making-up people and how I am applying this to my understanding of the constitutive power of the social work gaze. I then turn to the social work practices of inscription on which I am focusing. I highlight how social workers' accounts of knowing families are imbricated in practices of documentation and inscription.

### **The Interviews**

The data for this thesis consists of interviews with social workers and social work managers from two local authorities as well as key social work guidance documents. I carried out interviews between November 1996 and June 1997 in one inner-city London authority, Authority 1 and in one authority in a town on the south coast of England, Authority 2. Although the two authorities provide a contrast to each in terms of their constituent populations, the way in which the social workers account for their practice in both authorities is remarkably similar. In referring to the interview extracts in Chapters Five and Six, unless it is particularly germane to the account, I have not identified the social workers as coming from one or other of the authorities. The following table describes the staff I interviewed in each authority.



<b>Personnel interviewed</b>	<b>Authority 1</b>	<b>Authority 2</b>
Children and Family Social workers	5	6
Duty manager	1	1
Team leader	2	1
Family centre managers		2
C/P co-ordinator	1	1
Senior Manager	2	1

Table 1. Social Workers Interviewed

The interviews were designed to explore how social workers describe child protection work. My initial focus in the interviews was how the legal categories and codes of the Children Act featured in social workers' sense-making. As I will describe, I found that even in the accounts of cases where the law had been resorted to, legal categories were not central to the description of the case. The accounts were organised by categories relating to the character of the clients and the ethical, warrantable practices of the social worker, and it is this rather than the categories of the law that came to interest me in analysis of the interview accounts.

The interview schedule was designed to find out how the work is organised, and secondly to investigate how child care social workers account for their practice. Because I was interested in the social workers' accounts of practical reasoning strategies in child care social work - how they talked about their work and the kinds of decisions they made - I was not concerned about the extent to which the social workers I interviewed were representative of social workers generally in terms of their ethnicity, age, sex and level of experience. I am therefore assuming that a way of making sense of social work practices and legislation is a feature of the organisation of social work in the department, social work training, and received ideas about 'good practice' and not connected to the individual social worker or their identity.

The interviews were semi-structured and were tape recorded and transcribed. As Catherine Riessman argues, the act of transcription involves decisions about how the language is to be represented and is itself an act of interpretation since the 'transparency of language' cannot be assumed. She asks:

Should [qualitative researchers] include silences, false starts, emphases, non lexicals like "umm", discourse markers like "y'know" or "so", overlapping speech, and other signs of listener participation in the narrative? (Riessman, 1993: 12)

I started off transcribing the interviews in some detail in an attempt to approximate as closely as possible to how the speech sounded. The slowness of transcription however and the fact that I was not taking a Conversation Analytic interest in the design of the interview data in terms of for example turn-taking, led me to transcribe later interviews with less attention to silences, false starts, and non lexicals. It is the content and organisation of the interviews as accounts that interests me rather than the micro-design of the talk as interaction.

Before carrying out the interviews in two local authorities, I piloted the interview schedule in a group interview with social work students. As can be seen in the interview schedule in Appendix I, I began the interviews by asking questions about social workers' length of service and experience, and then moved on to talk about the organisation of work in the department, and the nature of the policy and procedures they follow. I then asked social workers to tell me about two kinds of cases, one in which they had been involved that had involved applications for a care order, and one that had also been the subject of child protection concerns but had not involved an application for a care order. Where social workers had not been involved in applying for care proceedings, I asked them to tell me about cases where formal child protection procedures had been instigated. In interviews with senior managers and child protection co-ordinators, I asked questions about the management structure and the organisation of the child protection register and the child protection system more generally.



## The Texts

Local procedures for social workers are documented in Child Protection Handbooks that are available in every social work office. National procedures are referred to in Department of Health manuals and guidance. In addition to the interviews I am also analysing key documents produced by the Department of Health in order to guide practice. The documents upon which I focus for the analysis are those targeted at aspects of the organisation and practice of social work with children and families and are listed in the following table:

<b>Department of Health document</b>	<b>Date Published</b>
Protecting Children: A Guide for Social Workers undertaking a Comprehensive Assessment	1988
Children Act	1989
Working Together Under the Children Act 1989. A Guide to arrangements for inter-agency co-operation for the protection of children from abuse	1991
The Challenge of Partnership	1995
Working Together to Safeguard Children. A guide to inter-agency working to safeguard and promote the welfare of children	1999
Framework for the Assessment of Children in Need and their Families	2000

Table 2 Documents Referred To

Thus I refer to the Children Act (1989) as the document that provides the legal framework for social work with children and families. I refer to Working Together Under the Children Act 1989. A Guide to arrangements for inter-agency co-operation for the

protection of children from abuse (1989) and its recently updated version Working Together to Safeguard Children. A guide to inter-agency working to safeguard and promote the welfare of children (1999) as the document providing social services departments with the framework for setting up child protection procedures. I refer to Protecting Children. A Guide for Social Workers undertaking a Comprehensive Assessment (1988) and Framework for the Assessment of Children in Need and their Families (2000) which has superseded it, as providing practitioners with tools and techniques for assessing children and families. I refer to The Challenge of Partnership (1995) as the document that sets out the principles of an ethical position of social work with children families and providing techniques and methods for ‘working in partnership’. As I will describe, my interest in these documents is in terms of how they circumscribe the social work role, define and proscribe techniques of practice, and how they conceptualise the subjects of social work action. I am asking how these documents can be understood as an attempt to make ideas about the family, child care and the role of social work programmatic. I am not therefore assuming a direct link between the documents as ‘policy’, and social work accounts as ‘practice’. Indeed the policy/practice distinction can be problematised as a practice of government.

My aim in this study is to analyse the discursive content of social work talk and the texts they use. In addition I am interested in interrogating and making strange the ‘conceptual currency’ of social work. By ‘conceptual currency’ I mean the terms and concepts that appear in social work texts and that are used by social workers in order to describe and make sense of their work. Some of these are technical terms relating to, for example legal orders, other terms are ways of describing and making judgements about parents and children which though not specific to professional discourse nevertheless explicate an expert gaze. As I describe in Chapter IV, the conceptual currency of social work is historically contingent and linked at any one time to the contemporary focus of the social work gaze. I understand the social work gaze not only as what social workers see but what *it is possible for them to see*. The conditions of possibility furnish a historically specific network of psychological and ethical concepts about the family that it is my aim to anatomise in official texts.



### **The Examination of Texts**

The texts to which I will refer are thus the main Department of Health documents shaping child protection procedure and practice 1989-1999, including legislation. As I have indicated, the Department of Health texts are intended to shape local procedure and represent official advice on 'good practice'. The Department of Health act as commissioning editors for the texts. The Department exercises considerable editorial influence over the content and co-ordinate the development of drafts by expert practitioners and academics in the field through steering groups, and through consultation processes.

As I have said, it is the conceptual currency which official texts make possible in which I am interested and I am asking how these texts produce techniques for thinking about and acting in relation to families and children. They contain specific technical terms as well as providing social workers with schemes and techniques for making sense of behaviour, for identifying signs and establishing critical links between clusters of indicators. The documents contain terms and categories, concepts, principles, and codes (e.g. partnership, co-operation, No Order, parental responsibility) that I am examining in terms of the discursive fields from which they derive (legislation, psychology, discourses of human rights). At the same time as they enable a particular making up of the family the texts also define and circumscribe the social work role itself. I am thus asking how the social worker as well as the family is constituted through the good practice guidance and official discourse of Department of Health texts.

### **Analysis of the Interview Accounts**

In the interviews I asked social workers for information about their titles, the number of cases they have at any one time, procedures for allocation of cases and the organisation of the referral system. I asked social workers about what they do, and what procedures they follow. Their responses to these questions can be analysed for the factual information they provided about the ongoing organisation of work and of procedure in a local authority social services department. Questions about the organisation of work

elicited descriptions of the division of social work tasks within the department, the actual tasks performed (for example, checking child protection registers, referring to existing files, contacting teachers, phoning GPs, visiting families) and the order in which they are carried out. The main reason for asking such questions was to learn about how child care social work is organised and the lines of management and accountability that are in place within a social services department. Questions about the social workers' cases elicited descriptions of particular cases in terms of reports, events, appearances and decision-making.

I was given a mixture of straightforwardly factual descriptions of the organisation of time and work, and (sometimes critical) comment upon this organisation. Interviews with team managers for example provided information about the numbers of social workers in teams, how work is allocated through weekly allocation meetings, how referrals are taken, at what stage cases are passed onto the other teams and how the Duty system operates. Accounts of the organisation of referrals, allocations and the division of labour between the Duty and the Assessment and Family Support teams, are also accounts of the formal and informal procedures which standardise, order and provide a rationale for social work practice.

### **The Inscriptive Practice of Social Work**

As I described in Chapter II, the means by which social work knowledge is practised is highly inscriptive and it is on my methodological approach to this aspect of social work practice that I will now focus. I am examining social work texts and social work accounts in which social workers describe the textual, inscriptive processes whereby families are identified and defined as risky. I am interested to explain how social workers make such authorised accounts with reference to practices of reading and writing files in which the knowledge of families has become stabilised and objectified. In their accounts social workers describe how files feature as part of their knowledge work and how they make knowledge possible. Files as a practice of social work knowledge are already therefore a resource that is integrated into the accounts I am discussing. I wish to focus upon social workers' descriptions of the use of the files in accounts of cases in



which they have been involved. Following Smith I am arguing that the very possibility of concepts and categories emerging in texts, (and in professional discourse), is a function of their embeddedness in social relations - through the practical activities of people. I am interested in exploring how such practical activities are described by social workers in their interview accounts as a means by which they make their accounts authoritative. For example, I highlight the concept of the 'known family' in order to see how it represents an evidential warrant for social work action. The concept of the 'known family' is quintessentially inscriptive in that it derives from the accumulation of textual history about a family in social work files. The knowledge contained within such files is, as I will describe, reflexively authorising.

It is how textual practices feature in accounts of child protection, and the conceptual currency that they make possible that is of interest to me. Bruno Latour argues that to understand the production of knowledge we need detailed, empirically based analyses of the actual practices involved (Latour, 1986:2). Latour's commitment to 'the precise practice and craftsmanship of knowing', reinforces the value of explicating the specific practices that are entailed in an instance of knowledge production, or of a particular sphere of knowledge. To speak of 'child protection' as the simple implementation of centrally conceived dictum, is to miss out on the complex arrangement of routine, inscriptive practices which are made known in the interview accounts. As Latour argued in relation to science, social work is made possible by a visual language. Social workers' ability to see and report on signs and indicators of risk are contingent upon mechanisms for stabilising 'facts' about families in paper and computerised 'files', and in forums for establishing and confirming knowledge claims with other professionals. to texts governing them and processes of making action warrantable.

In examining the interview data I extracted the accounts of cases from the transcripts. In the interviews I had asked social workers to tell me about a case in which they had been involved where legal measures had been sought and a case where such measures had not been required. As I describe in Chapter II the idea of a 'case' derived initially from medicine and provides for a particular way of telling a life. The case

operates as a device for the textual organisation in social work files of individuals and families who have come into contact with social workers and provides for the collection, and stabilisation of officially inscribed knowledge about individual families

While my questioning occasioned the telling of the cases, the similarities between the character of the accounts seem to suggest that they are not simply a function of my questioning but shaped by the organising device of the case itself. I am interested in how the conceptual order of the 'case' appears to provide for the content and the organisation of the accounts. This means firstly, that certain particulars are selectable as relevant depending upon the *type* of case described and that social workers' abilities to account cases are not restricted to their own contact with a family. They are able to refer interchangeably to action taken and observations made by other social workers and action taken and observations made by themselves. The 'case' is both an accountable as well as an inscriptive form that as Forrester said provides for a way of telling a life as well as a means of stabilising facts about a family. The case and the files in which it is stored, thus seems to perform a role for social work knowledge analagous to that described by Bruno Latour as the technology of visual perception in science, ensuring as he describes it the 'the immutability of the displaced object' (Latour: 1986, 14). Latour argues that the *force* of inscriptive devices derives from the political process in which they play a part. It is the 'agonistic' field, or political intention in which inscription takes place, which alongside the technological innovations of textual and image reproduction, distinguish the character of modern knowledge production. The highly contested, interpretative and multi-disciplinary character of social work knowledge make the forms of stabilising and authorising knowledge claims particularly important. Further social work knowledge needs to be presented in a form that is recognisable and transferable across disciplines. I am exploring the way in which the agonistic context in which social work with children and families takes place, and the statutory, high-stakes character of that work, shapes how social work is accounted for within its own setting as well as outside it. I am interested to explore the role the 'case' plays in how social workers authorise their accounts.



In analysing social workers' accounts I am taking what they say at face value in so far as I am not attempting to read beyond the accounts to say what they *really* mean. Instead I am interrogating social workers' descriptions of practice as retrospective, reconstructive accounts, rather than simply 'what took place'. I am interested in how social workers made 'what took place' sensible and credible as such. As I have said, these accounts of decisions and practices are shaped in important ways by social workers' knowledge in hindsight of the outcomes of cases, as well as what they know to be good practice. The truth-making structure of their accounts can be analysed in terms of the way in which the facts of a case are told. I am therefore attempting to reveal the social worker's own analytical work. I am arguing that the accounts reveal analytical decisions taken in the course of working on child protection cases. The highly reportable, accountable nature of child protection work to which I have already referred, means that retrospective descriptions of cases are an important feature of this work. I am arguing that the kinds of accounts social workers provide are therefore already part of child protection work and reflexively related to such practice.

Of primary interest is how social workers describe the kind of interventions that can warrantably be made in the family, and the criteria for such action. In addition the accounts describe the procedures social workers must follow, the inscriptive practices they carry out, the 'lines of management' to which they refer in seeking to corroborate and verify decisions, the mechanisms of assessment they deploy, the categories of abuse and criteria for registration to which they refer. In their descriptions social workers are thus referring to a logic of action, a normative, statutorily endorsed set of practices. These practices which feature in the accounts as part and parcel of decision-making in child protection reveal the extent to which judgements are not the mental processes of individuals but are material practices, co-extensive with the institution of which the social workers are a part, but more broadly constitutive of social work knowledge.

It is how social workers make claims for the authentic rather than their presentation of the authentic voice of experience that interests me. I am interested in how social workers make their accounts credible and intelligible. I am not using rhetorical

analysis to analyse the interviews but as I will describe, I am analysing the accounts in terms of their general *strategic* character. What follows is an example of how I have analysed one interview account in terms of what counts as warrantable intervention.

### **What counts as warrantable intervention in one social work 'case': An Example**

The accounts of cases can be analysed for how they organise a particular understanding of events, how a particular 'kind' of family is made up. Social work action is presented as logically responding to sorts of problems and behaviours in relation to sets of procedure. A rationality of practice, of sense-making is thus apparent. The practices of providing facticity in an account are thus achieved through means which are both internal and external to it, relating to the organisation and structure of the account as well as to the institutional procedures from which it derives, what the account is about and the expertise upon which the social worker draws.

As I have said social workers must be warranted in their intervention in families, and as I have described the limits of social work powers are made central in social workers' accounts of cases. In analysing the interview accounts I therefore ask what counts as warrantable intervention, what in other words counts as a warrant? Since there are different orders of intervention there are also different orders of warrant, so for example the way in which a social worker was able to provide a warrant in the account for an application for a care order for the removal of a child from her family was different from the way in which she was able to provide a warrant for a referral to couple counselling for example. The following devices feature in ways in which social work action is accounted for as warrantable:



<b>Warranting Devices in the Interview Accounts</b>
<b>Moral/ethical</b> judgements of the parents/carers
The discovery/disclosure of <b>evidence</b> of abuse
<b>Risks</b> posed to children
The achievement/break down of <b>partnership</b>
<b>Good practice/</b> correct procedure

Table 3. Warranting Devices in Interview Accounts

These devices are analysable as features of both the accounts' structure and contents in order to describe warrantable practice. An illustration of what I mean by how moral and ethical judgements of carers operate as devices that 'structure' an account is derived from Dorothy Smith's analysis of accounts. In the same way the account of someone becoming mentally ill anatomised by Smith contains key 'instructions' for its interpretation so do the interview accounts I analysed (Smith, 1990a). For example, one social worker provides a summary of the type of case involved:

it was a baby of an alcoholic mother

This instruction contains an ethical judgement of the mother. The character of the problem is presented to account for the initial referral. 'Alcoholic' mother as 'heroin using' works as an 'initial instruction' to how the account should be heard (Smith, 1990). In order to describe warrantable intervention however, an 'initial instruction' for understanding the inadequacies of a mother in terms of her alcoholism is supported in the accounts by additional information about the mother's failing since social workers today are encouraged to enlist the co-operation and work in partnership with alcohol and drug-using parents, and certainly the fact of their alcoholism alone does not adequately warrant the application for a legal order. The instruction *intends* a way of understanding the account.

In analysing the accounts I listed statements that seem to operate as ethical judgements about a parents. For example the account which was prefaced by the

instruction ‘it was a baby of an alcoholic mother’, included the following statements about the mother:

- she wasn’t keeping appointments
- she had no motivation
- she just lost interest really [in her child]
- she had a history of having other children taken into care
- she realistically didn’t want that child back
- it was because she had the child taken from her
- she had to fight us

These statements are linked and mutually elaborative; they operate in a sequence to provide a cumulative effect. The statements would not necessarily work in other contexts as ethical judgements. For example not keeping appointments might refer to someone who was disorganised, or was a poor time-keeper. In the context of this account, and the *type* of case referred to, the mother’s failure to keep appointments to see her child is linked by the social worker to a lack of ‘motivation’ not only to work with social workers, but to be rehabilitated with her child, leading to the conclusion that she ‘did not realistically want that child back’. In order to provide for a judgement that is so wholly opposed to commonsense ideas of what ought to motivate a mother, the account generates a ‘kind’ of mother from an expert typology: the ‘game-playing’ mother<sup>1</sup>. Commonsense notions of *normal* maternal motivations and desires therefore provide an implicit opposition to the ‘game player’ in this account. The ethical constitution of the parent’s inadequacies in this account and others is therefore linked to accounting for legitimate intervention.

### **Studying The Government of the Family**

The idea of the family, its role, and its status as both public and private space is a central problematic of this thesis. Indeed as I discuss in Chapter V, the privacy of the family provides a practical problematic for making its members visible/ knowable for the

---

<sup>1</sup> The category of the game playing mother also features in the assessment guidance Protecting Children: A Guide for Social Workers undertaking a Comprehensive Assessment (DoH, 1988) which I describe in greater detail in Chapter V.



assessment of risk, at the same time as a theoretical and ethical problem for how social workers can intervene legitimately

The concern with legitimacy inherent in social work texts and accounts raises a question about the character of social work as a practice of government. This is the paradox wherein the family is both free to govern itself at the same time as a site of potential risk and danger. This is a methodological issue in so far as it concerns how I am considering questions of power in this thesis. The legal power of the state to protect children is only one form of power available to social workers. While, as I will describe, the power of the law is available to social workers, legislation, guidance and social work accounts emphasise that the use of legal measures is a last resort after all attempts to work with and support parents has failed. The techniques and procedures of assessment and surveillance of families, the means by which families are enjoined to govern themselves, as well as the shadow that is cast by the *threat* of legal procedure are important and effective mechanisms for regulation and in most cases are adequate to prevent the need to seek legal measures. My study suggests that while social work is apparently focused on the attempt to *change* parents, and to encourage them to work on themselves, more often a position of pragmatic acceptance is established on condition that parents are demonstrably co-operative with social workers. The social work gaze is therefore *tentative* in its exercise of power. In order for parents to demonstrate their co-operation with social workers they must render themselves visible and available for social work assessment by for example accepting regular contact with a social worker at appointed times. Moreover, guidance and procedure and at times regulation operate to govern the social worker who must demonstrate that she has attempted to work in partnership with parents.

I am asking how the work of professional discourse, of expertise, of therapeutic persuasion is a form of rule that is productive in how it imagines its subjects. In the case of social work this means the 'clients' as well as the social worker themselves. This is therefore an understanding of rule as a dispersed assemblage of specific techniques through which power is enacted rather than the wielding of an over-arching and

oppressive power of the state (Rose, 1996). Indeed the procedures and powers available to social workers would seem to illustrate precisely the way in which power becomes exercised through ‘modes of everyday life’ (Foucault, 1980: 125). It is at this level therefore that I wish to focus and where I am studying power relations in this thesis.

The contemporary concern to limit intervention into the family and to defend its privacy evident in my interviews and in social work guidance is clearly not new. I am understanding children and family social work as responding to a problematic which has been intrinsic to modern rule, that which Michel Foucault described as the two poles of ‘biopolitical’ rule; the simultaneous rule of the population and of the individual body that replaced the totalising rule of the sovereign in the seventeenth century. Foucault argued that biopolitics entailed a concern to limit the orbit of government. Thus nineteenth century liberalism was characterised by a concern to govern less, and indeed particular domains were singled out as anathema to the control and regulation of governmental intervention. Just as new techniques and political imperatives emerged to define the domain of the economy that for its proper operation was required to be unfettered by regulation, the public/private axis organised an understanding of the family as outside the remit of governmental control. As I described in Chapter II, the need for intervention into the family in the form of nineteenth century philanthropy was predicated upon the failure of the family to govern itself (Donzelot, 1979, 1997). Biopolitics involves the mobilising of techniques of expert knowledge through which individuals come to be ascribed to categories and populations, and thus constituted as cases. So John Forrester describes the practices of the new medical ethics as ‘biopower with vengeance’:

For questions concerning, for example, the termination of active medical treatment of severely handicapped newborn babies, there are now committees which will peruse the details of each case: how many siblings the infant has, the income of the father and mother, the likelihood of their divorcing, the cultural wealth of the home - all so as to make a decision about removing the feeding tubes in a post-natal intensive care unit (Forrester, 1996: 20)

Thus social workers’ accounts of assessing parents which I describe in Chapters Five and Six can be understood as biopolitical networks of action through which parents are linked



to social work calculations which include examination of their ability to work in partnership, their capacities to protect children and the standards of hygiene in the home. While, as I have described in Chapter II, Michel Foucault identified the 'case' as a means by which the subject of disciplinary knowledge became *individually* knowable, signalling a new kind of rule, as I will describe in Chapter V, the means by which individual cases are known and managed in social work seems to be in relation to the generic types to which parents can be said to belong. Categories of type seem to be generated through practices of assessment and examination once individuals are knowable as cases. Another way of understanding this link between individual caseness and type is through Ian Hacking's notions of kinds whose work I will now go onto discuss.

### **Social Work Subjects: Focusing on the Constitutive Practices of Social Work**

Such social work strategies of governing the family rely upon knowledge of the subjects, the 'at risk' population of children, and families who are the target of its intervention. Ian Hacking describes the new 'kinds' of personhood, of parents and children, 'made-up' through the 'emergence' and practices of investigation of child abuse (Hacking, 1995). He argues that these practices are at the same time constitutive of i.e. socially constructing of such new categories of person, as well as responding to their **real** discovery. As I will discuss, social workers preoccupation in their accounts would seem to be the authorising of courses of action in response to potential referrals of child abuse. They account for their action in terms of whether or not parents can be 'worked with', in relation to which the question of whether or not abuse did take place become secondary. The question of the constructed or real character of abuse does not feature in the accounts. While 'kinds' seem to me to be a useful way to think about how social work produces categories of personhood for intervention, I do not wish to pose the question of the constructive/real character of child abuse, but to focus upon the practical deployment of these kinds, the 'realness' of the effects of which cannot be called into question. I am arguing that the 'kinds', through which children and their parents are 'made-up' in accounts, are related to techniques and procedures of assessment. I am interested in the practical effects of social work's epistemology as it is made relevant in social workers'

accounts of their practice, and in documents intended to guide that practice. This is not intended as a version of 'labelling theory'; the adequate, responsible parent is as contingent a category as the irresponsible parent. What is interesting is the practical axis of 'un/co-operativeness'.

Mark Philp argued that the subjects of social work practice can only be those whose 'objective status' are not too threatening, where the possibility remains of redemption or we might say, making-up people differently (Philp, 1979). The contingent character of making-up the risky/abusing parent suggests however that such 'objective status' is continuously established both retroactively and retrospectively and is not a pre-existing self-evident category. In other words in the work of the children and family social worker it is often only with the knowledge of hindsight, that the 'objective status' of risky/abusive parent can be established unequivocally.

If kinds in child protection are contingent, it does seem to be the case however that the kinds available for social workers to understand the parents on/with whom they work circumscribe, legitimise and authorise a field of action. As Colin Gordon has argued in discussing Foucault's examination of how the human sciences are possible (and the Left's reception of this work):

if certain knowledges of 'Man' are able to serve a technological function in the domination of people, this is not so much thanks to their capacity to establish a reign of ideological mystification *as to their ability to define a certain field of empirical truth* (Gordon, 1980: 237 my emphasis)

It is this possibility of defining a field of empirical truth that interests me in atomising social work knowledge and how social workers know. Philp argues that the currency of social work knowledge is of human nature. There is then an ethical dimension to the social work task. In examining how social workers make-up parents and themselves I am interrogating the moral and ethical repertoire of social work.



I am thus interested in the content of accounts and documents in terms of the matter of which they speak. As I have described, I am also interested in the organisation of social workers' accounts and texts, not in how their account reflect reality but how they render the real of which they speak. I have argued that social workers' mechanisms for providing authorised accounts are inseparable from the discourses on which they draw, and the practices of which they speak. I am thus not interested in the individual social worker as the author of the statement but in the kind of statement and claims that it is possible for social workers to make. As will be described, the conditions of possibility for such statements and claims are given by legislation, policy documents and guidance. It is thus analysis of the rationalities of these documents in addition to the interview accounts that forms the data for this thesis.

## Chapter IV

### **Transformations in The Gaze and Conceptual Currency of Social Work**

Consider the following two extracts. The first derives from an account of 'family case-work' in a social work textbook published in 1950. The second is an extract from an interview I carried out with a children and family social worker in 1996. It is an extract from a long account of a case in which the social worker had become involved at the point of the permanent removal of the children. Comparison of the two reports, forty-six years apart reveals differences in the conceptual currency of social work knowledge, in how the family is problematised, and in the role of the social worker vis a vis the family. For the purposes of this chapter I am most interested in how the accounts mark differences in the social work gaze, the gaze anatomised in Foucault's *The Birth of the Clinic*, as a *theoretical way of seeing* and in changes in conditions of possibility over the forty-six year period.

#### **Extract i**

An anxious mother asked for a personal interview about matrimonial difficulties. After talking for some time about these she confessed that she suspected her husband of incest with the eldest girl. The seriousness of this was explained to her, but when action was suggested she refused utterly to go any further and withdrew many of her previous statements. The worker had little doubt from the circumstantial details already given that the first statement was correct, but she was quite unable to obtain the woman's permission to report the matter. This case was discussed anonymously at a case committee, and in this way it was possible for the caseworker to obtain the advice and help of other agencies for the benefit of the client 'at second hand', a service which the client herself was unprepared to accept at first hand and would never have sought directly  
(Cited in Morris, 1950)

#### **Extract ii**

SW1: there was evidence consistent with the fact that they had been interfered with

PR: right

SW1: so from this they took out their care order, and also the other preventative work had been carried out, and it was at this stage that contact was terminated and they said goodbye to their mother, father was taken to prison for a while [] I don't know what happened really

PR: so they said goodbye to their mother

SW1: mmh

PR: so was contact terminated with the mother as well?

SW1: because she denied, she was denying she had anything, that sexual abuse happened



PR: right, and it was decided that what

SW1: they were quite, well the girl was five and he was seven so it wasn't as though they were not able to express what had happened, they were at an age, well she was because she didn't have any delayed speech or anything because she was quite bright

PR: so why was it decided to terminate contact with the mother?

SW1: the court

PR: right

SW1: why, was it you said?

PR: yes

SW1: well because the mother was living, I mean she planned to live with the father, she totally denied that any thing ever happened to the children, she denied that the children had been sexually abused

(Interview with social worker 1996)

In examining the two accounts my key points of comparison are four-fold. Firstly, comparison of the two accounts reveals differences in proceduralisation and managerialism of the two cases. Secondly, the client and subject of the social work practices is different in the two accounts; while the earlier account is concerned with treating the family, in the second account, the child rather than the family is the social work client. The distinction between 'incest' and 'sexual abuse' as classes of activity and the attendant kinds of person-hood to which they are linked are striking and pivotal for the sorts of rationalities available in each account. While this distinction will not be the focus of this chapter, it none the less marks how differently the subjects of social work practices are constituted in both accounts. Thirdly, there are marked differences in how the child's point of view features in the accounts. Fourthly, there are differences in the two accounts in the willingness to use coercive methods.

The 1950 case-worker's response to the client's reported suspicion of incest by her husband to her eldest daughter, is to explain the 'seriousness' of her concerns, by which I infer from the account that follows, is meant explaining the illegality of incest, an official complaint about which would lead to a police investigation and the possible prosecution of her husband. In the absence of the woman's permission to report the matter, the action left to the caseworker is to seek advice and help from a 'case committee' where the anonymity of the woman's identity is preserved. In the second account an elaborate set of procedures; concepts and criteria provide the conditions of possibility for the statutory investigation, identification and registration

of what is known not as incest but 'sexual abuse'. The father has already been the subject of a criminal prosecution and has been imprisoned for sexually abusing his children. The concept of 'denial' is used to both explain the mother's actions vis a vis the children's 'disclosure' of abuse (as well as her decision to carry on living with her partner), and the court's decision to separate her from her children.

Although in both accounts, incest/sexual abuse is considered to have very serious implications, in the second account those implications are linked to procedures that focus upon the character and abilities of the mother to care for and protect her children. In the first account no existing procedures or statutory mandate exist for the caseworker in the event of a confession of the suspicion of incest. As I will describe, the focus of social work concern at this time was on children who were ill treated or neglected as a result of deprivation within the family.

In the second account, although the focus of social work practice is the mother as the children's carer and protector, it is the children who are the clients. In the assessment of the mother's inability to protect her children from further abuse, as a result of her 'denial' to social workers that abuse had taken place, and the risks thus indicated; the course of action for the child protection system is to effect the permanent loss of contact between the mother and child.

In the report of the 1950 social caseworker's actions no attempt is made by the caseworker to speak to the child. There would seem to be a contract of confidentiality between client and case-worker that cannot be breached, that the case-worker respects in the action she takes, and that is not overridden in concerns about the welfare of the daughter. The client's abilities as a mother are apparently not at stake. The account contrasts starkly with how such a disclosure/allegation is dealt with and responded to by contemporary social workers faced with what is understood as a child protection referral. Social work action and criminal prosecution of the father in the second account has taken place as a consequence of 'disclosures' made by the children that sexual abuse had taken place. The children's voices, and their rights to be heard in decisions regarding their future shape the course of action in the account. Although in such cases today, because of the difficulty of securing adequate evidence, criminal



prosecutions of parents are rare<sup>1</sup>, in this particular case, physical examination of the children following their disclosures, provided adequate evidence for a criminal prosecution of the father. As I will describe, police involvement in child protection investigations has become routine today.

The issue of incest/sexual abuse and the differences in how it is responded to provide a stark example of how what concerns social workers, and how they are statutorily empowered to act, has changed in the nearly fifty years between these two accounts. The perceptual grid of what both constituted and threatened children's welfare in 1950 was markedly different from today. One of the characteristics of contemporary reports of child protection practice is how they refer, on the one hand, to sets of professional guidelines and procedures and, on the other, to law. While as Parton has argued, laws have always constituted and provided the mandate for the system of child care and child care social work, the extent to which social work tasks have today become specified in sets of statutory procedures has given social work with families a definite shape (Parton, 1991).

In this chapter I am interested in how such transformations in the social work gaze as those revealed by comparison of these two accounts of cases may be linked to a shifting relationship between the perceived need for statutory measures and the application of psycho-scientific knowledge. In discussing statutory measures I am not only interested in legislation but in sets of official procedures that guide, standardise and regulate social work action. I am interested in the changing rationalities, priorities and problematisation of social work given by changing conditions of possibility in social work since the Second World War. I trace the emergence of the priority of the goal of 'protection' with its attendant threats of compulsion, its procedural and legalistic characteristics. I begin by examining the character of post-war social casework.

---

<sup>1</sup> See footnote 6 Chapter II.

## Professionalisation and Therapeutic Familialism: Social Work in 1940s and 1950s.

Historically, public attention, resources and legislation concerning child welfare have often centred around ‘scandals’ in child care where individual cases have been taken up by the press and served to crystallise attention on particular issues of child welfare. Although such scandals may have appeared to have driven policy changes, we know that the number of child deaths through ill-treatment has remained very stable since records have been kept, so that we must ask instead, what other conditions have existed to enable such ‘scandals’ to take on such prominence<sup>2</sup>. In this section I will examine the conditions of possibilities that gave rise to professional social casework after the Second World War.

In 1945 the death of Dennis O’Neill, at the hands of his foster-father, led to a public inquiry and was said in a contemporary social work text to have ‘aroused the public from its complacency’ about the welfare of children in public care (Hall, 1952). The death of O’Neill coincided with a post-war politics of consensus when the welfarist policies developed and debated earlier in the century had become ascendant. His death took place at a time of the professionalisation of social work, in the consolidation of its knowledge base and the emergence of academic departments for the teaching of social work. The Second World War mass evacuation of children and women from cities and towns had revealed to the middle and upper-class largely volunteer work force involved, the existence and extent of urban poverty.

The following extract for example derives from a post-war social work text book (Hall, 1952) and cites a study of urban deprivation carried out by the National Federation of Women’s Institutes (Women’s Group on Public Welfare, 1943)

the social changes brought about by the war and the rapid development of the social services which accompanied and followed it, helped to bring into the limelight the ‘problem families’ - families *‘always on the edge of pauperism and crime, riddled with mental and physical defects, in and out of the courts for child neglect, a menace to the community of which the gravity is out of all proportion to their numbers’* (Hall, 1952:133 my emphasis)

---

<sup>2</sup> Home office figures for 1987-1997 give a figure of between 70 and 80 homicides per year for children under the age of 16 and 10% of all homicides are by the victim's parent (Home Office, 1999).



The moral outrage expressed by the Women's Group on Public Welfare at the discovery of an urban poor 'poor, dirty and crude in its habits' (1943: xiii) was matched by psychological studies of and clinical work with children whose distress and disturbance was the consequence of evacuation, enabling the emergence of an understanding of the primacy of the mother/child bond via concepts such as 'attachment' and 'separation' in the work of John Bowlby and Anna Freud. Indeed as evacuation was important in the population it presented, and even created for the expert gaze of psychology and social work (Rose, 1989, 1999: 166). Three months after the death of Denis O'Neill in March 1945 the Curtis Committee was set up

to inquire into existing methods of providing for children who, through loss of parents or from any other cause whatever, are deprived of a normal home life with their own parents or relatives (Report of the Committee on the Care of Children, 1946)

The recommendations of the Curtis Committee which were accepted by the government and given legislative sanction by the Children Act 1948, led to the setting-up of local authority children's departments. The Curtis Committee considered that training in child care was necessary if high standards of child care were to be achieved, and in 1947 the Central Council in Child Care was established (subsequently to become the Central Council for Education and Training in Social Work – CCETSW).

The post-war professionalisation of child care social work was thus understood as responding to an unmet social need. Indeed in 1950 Clare Britton, who ran the course in social casework at the London School of Economics (Rose, 1999), commented that

The Children Act, 1948 could well be described as the attempt to ensure that the principles and methods of social case-work should be extended and applied to the whole child care field (Britton, 1950: 164)

Originally developed by the Charity Organisation Society at the end of the nineteenth century, casework had involved the rigorous inquiry through interview, as to the *worth* of candidates for relief. The new post-war courses in the principles and methods of casework taught trainee social workers and child care officers how to understand the troubled children and 'problem families', in terms of a

psychodynamics of family relationships (Rose, 1999). This was to transform the role of the social case-worker from one primarily concerned with assessing worth and need, to the operation of an expert, diagnostic gaze which looked into, and spoke for the whole person:

It is now demanded of her that she shall seek to understand the person in need, not only at that particular moment in time, but in all the major experiences and relationships which have gone into making him the person he is, with conflicts of whose origin he may be unaware, with problems whose solutions may lie less in external circumstances than in his own attitudes, with tensions, faulty relationships, inabilities to face reality, hardened into forms which he cannot alter unaided.

(Younghusband, 1950: 193 quoted in Rose, 1999:172)

The gaze of social case-work was thus concerned to explicate the internal, emotional make-up of the individual. This quotation reveals the extent to which the gaze was considered as a privileged expertise, accessing insights unavailable to the individual him/herself. The social work gaze, as a *theoretical* way of seeing made-up the social work client in relation to specific relevancies. It was thus a seeing of some things and not others. So the gaze of the post-war social caseworker was to penetrate beyond 'External circumstances' to the root of the problem that was deemed to lie 'in [the client's] own attitudes, with tensions, faulty relationships, inabilities to face reality'. The role of the diagnostic gaze was thus the clarification and definition of the *real*. The aim of this gaze was to enable the caseworker's client to acquire such knowledge of him/herself, and with the social worker's assistance, to act in accordance with the diagnosed need for change.

While the burgeoning profession of social work attempted to cater to the psychic needs of its (predominantly poor) client subjects, an array of post-war legislation was put in place for the mutual welfare of the population as a whole. While the Children Act 1948 was dedicated to providing substitute care for children whose families were temporarily unable to look after them, the National Health Service Act 1946 was intended to provide free health care for the sick, the National Assistance Act 1948 to provide residential homes for the elderly and care for the disabled. These three pieces of legislation collectively replaced the Poor Law Act 1930. Indeed the way that post-war welfare legislation constituted the recipients of its support and the



role of the (local) state represented a radical departure from the Poor Law with its provision that the local authority was to:

set to work and put out as apprentices all children whose parents are not, in the opinion of the council, able to keep and maintain their children (Poor Law, 1930, Section 15 (i) (c)).

In contrast to the Poor Law, the new legislation constituted the child in terms of her developmental needs rather than in terms of her potential for productivity. The Children Act 1948 was designed to provide public care for each child in:

such a way as to further his best interests and to afford him the opportunity for the proper development of his character and ability (Children Act 1948, Section 12)

Under the supervision of registered and qualified children's officers, case-workers would carry out the work with families formerly carried out by voluntary and charitable organisations many of which would continue to function with the help of government grants. State social work and the psychological knowledge on which it depended thus became a strategic element in a politics of social solidarity and responsibility, in which the social needs of individuals would be met in a contract of 'mutual claims and obligations' (Rose, 1999:228).

The post-war strategy of 'welfare' in all these spheres thus represented a new understanding of the role and responsibility of government vis a vis the population as a whole. Thus legislation was predicated upon an understanding of the sick, elderly, unemployed and orphaned children who were its targets, as *victims* of social ills rather than the authors of their own circumstances. The provision of the 1948 Children Act thus endorsed what Nikolas Rose has described as a 'therapeutic familialism' at which social work was the centre. The Act was concerned to provide substitute care for children without parents, or those whose parents had requested their reception into care. The narrow remit as cited above, of the Curtis Committee (and the 1948 Act that was its consequence) to provide for children who 'are deprived of a normal home life with their own parents or relatives' meant that the Curtis Committee did not feel 'called upon to deal with children who through suffering from neglect, malnutrition or other evils, are still in their own homes under their parents' care' an issue they hoped would be examined by others (para. 7). The benign model of the family on which the

1948 Children Act relied did not wholly replace the Children and Young Persons Act 1933 which as well as a battery of penal clauses, had attempted to respond to children who were considered to be 'in need of care and protection'. These children could be brought before a Juvenile Court (without being charged with an offence) and placed in care of a 'fit person' (which usually meant the local authority). Although there was therefore recognition in statute of the existence of neglect and cruelty to children, the focus of newly professionalised social work was the restoration of the 'normal family'. The post-war concern with the problem of 'juvenile delinquency' was thus considered to arise from deprivation in 'problem families' rather than an inherent, irreversible individual pathology (Rose, 1999, Parton, 1991). A second study by the Women's Group on Public Welfare entitled The Neglected Child and His Family concluded for example:

We are left with the impression not of wilful, cruel, reprehensible mothers (though these do exist), but of women struggling with inadequate equipment, mental and material, to deal with problems which would tax even those highly endowed (Women's Group on Public Welfare, 1948:71)

Such 'inadequate equipment' was to be targeted by post war social casework in the support of the problem family.

### **Support of the Problem Family: Social Work in the 1960s.**

The objective of social work with children and families was thus the support of the family in order to prevent the need to receive children into care. Beyond receiving children into care however, the 1948 Act offered no means of helping families preventatively despite the policy emphasis upon maintaining families intact wherever possible. This objective was given legal enforcement in the Children and Young Persons Act 1963 which authorised local authorities to give 'advice, guidance and assistance' with a view to 'diminishing the need to receive children into or keep them in care' (CYPA 1963). In addition, the Act gave social workers formal powers to assist families through the provision of material aid. This followed the recommendations of the Ingleby committee, Report of the Committee on Children and Young Persons (Ingleby Committee, 1960) the focus of which had been the prevention and forestalling of neglect to children.



The mechanism by which the local authority children's officer was authorised in his/her access to and work with the family was therefore through legislation; a statutory mandating of the therapeutic. The concern of the children's departments of the 1960s was focused on the provision of preventative support and services to families to address issues of poverty and the need to move children, who had been removed from the family out of institutional care and into foster care with the 'ordinary family life it was presumed to provide' (Packman, 1993:183). The fact that only a small minority (8.3%) of the children taken into care during the year 1965-6 were assigned by a court to a 'fit' person under the CYPA 1933 would appear to bear out the effectiveness of this non-judicial approach to social work with families (quoted in Marshall, 1972:139).

Concerns about rising levels of juvenile delinquency had set the terms of debate for committees of inquiries in the 1960s. The Ingleby Committee had been set up to consider both the means of helping young offenders in addition to the question of whether local authorities should be given new powers and duties to prevent the suffering of children through neglect in their own homes. The Committee found the social welfare and criminal justice approaches of the juvenile courts to be conflicting and contradictory, casting as it did the child as victim as well as offender:

The court remains a criminal court ... Yet the requirement to have regard to the welfare of the child and the various ways in which the court may deal with an offender suggest a jurisdiction that is not criminal. It is not easy to see how the two principles may be reconciled (Ingleby Committee, 1960, Para. 60).

The committee's recommendation that criminal proceedings for all children under 12 years of age, regardless of offence committed, should be replaced by welfare-orientated care and protection proceedings was not given legislative expression in the Children and Young Persons Act 1963 however. The White Paper, The Child, the Family and the Young Offender (Home Office, 1965) which was based on the recommendations of the Longford Committee went further than Ingleby in calling for the abolition of the juvenile courts and their replacement by family courts, noted the increasing public concern in the rise of juvenile delinquency. The controversy surrounding such a recommendation led to the commissioning of a second white

paper (Home Office, 1968) which recommended the retaining of the juvenile courts, and which provided the basis for the Children and Young Persons Act 1969.

Despite the regime of non-coercive support of the family which privileged the expert gaze of the social worker and circumscribed the legitimacy of the social work role, commentators have speculated that the low use of judicial measures to remove children from their parents' care without parental agreement might underestimate the extent to which the *threat of coercion* operated as a means of securing social work objectives at this time (Parton, 1991, Packman, 1993). Perhaps not only the threat of coercion but the very social work gaze itself, indeed as discussed, the power to define reality for their social work subjects, contributed to the 'benevolent maternalism' that Jean Packman argues, characterised the stance of 1960s social workers vis a vis their clients (Packman, 1993). Evidence submitted to the Ingleby Committee had suggested that it was the *untrained* volunteer caseworker that was most guilty of an authoritarian approach to the families with whom they worked in contrast to the qualified social worker:

The professionally qualified social worker, trained to help people to find their own solution to their difficulties, is more likely to avoid these elementary, but common, pitfalls that beset those attempting to impose advice and action on others. He not only has a deeper understanding of human motivation, but is imbued, by reason of code of professional ethics, with respect for the individual and his right to be heard in the ordering of his affairs' (The Council for Children's Welfare and the Fisher Group, 1958: 14)

Although the expansion of the cadre of trained social workers was to await the Seebohm reforms, a larger professionalised social work force organised as a 'family service' was conceived as providing a solution to the problem of the misuse of social work powers. Despite the professional rhetoric, the differences in social class between social worker and client and the threat which intervention posed mitigated against a consultative approach to working with families:

It is just as likely that the power and authority of the service went unchallenged through desperation, fear or deference to those who knew better (Parton, 1991:21)

While knowledge from the psycho-sciences had come to dominate the social work gaze and increasingly came to provide the sanction for decisions made in court, 'the judgement.. only possible, the sentence only legitimate, when it could be articulated



within the register of the psychological' (Rose, 1999: 158), the distinction between non-coercive social welfare measures and coercive judicial responses to the 'problem family' is less clear-cut than it might first appear. The conceptual authority of the social worker's access to, ability to know and to diagnose the family, while couched in terms of a therapeutics was clearly an exercising of a form of power in itself. Social work's deployment of such disciplinary knowledge would indeed increasingly be further problematised as a form of power itself in the decades to come.

Although the call for the complete abolition of the juvenile courts and the more wholesale social welfare approach to the problem of delinquency it suggested did not materialise, the recommendations of the Longford Committee's report on prevention through support of the family was channelled into the setting-up of the Seebohm Committee in 1965 to 'consider what changes are desirable to secure an effective family service'. The Seebohm report argued for the expansion and integration of preventative social services to children in the context of their families and the community. The integration of the previously separate social work services – children's, welfare and mental health – would allow the needs of clients to be treated as a whole. The new Departments would be larger, wield more influence and attract increased resources. Furthermore, the report argued in favour of the integration of services to delinquent children with those for the care and welfare of children. For, it was argued,

the availability of different forms of help should not be closely defined in terms of particular kinds of behaviour or the means through which children with difficulties come to the notice of the local authority.. for whether a young child commits an offence, goes on the loose, or is just unruly or naughty is purely fortuitous.. all forms of relevant help should be available to any child and family who need them (Report of the Committee on Local Authority and Allied Personal Social Services, HMSO, 1968: 57)

The Seebohm report thus rhetorically converted errant children from subjects of the judiciary to subjects of a heterogeneous network of help. The reforms put in place through Seebohm in the form of the Local Authority Social Services Act 1970 saw the massive expansion of professional social work in the creation of social services departments in 1971 into which the children's departments would be absorbed, with



the aim of seeking to support the family preventatively through a range of social work services.

At the heart of the 1969 Children and Young Persons Act, which Rose describes 'as marking the high point of therapeutic familialism' (Rose, 1999: 179) was thus this aim of diverting the delinquent child from the courts to the diagnostic and therapeutic gaze of social work. The Act created a procedural framework for investigating concerns about a child's welfare in the form of four statutory procedures, which nevertheless retained the criminal features of their design for dealing with children as offenders, rather than victims of abuse (Dingwall et al, 1983). Though in practice adversarial, the legislation was intended by the outgoing labour government to de-criminalise the 'problem family'.<sup>3</sup>

Therapeutic familialism had constituted the family as both the object of social work concern and the means for its own reform provided the right sort of expert help and material assistance was available. Legislative measures had come to be seen as mechanisms to enable that process of reform, with the care order providing a legal means of protecting children in extreme cases without punishing their putative carers, and even then, only rarely was the family considered irredeemable. In the same way that post-war professional knowledge and statute made-up the family as a corrigible entity, the role of children's officers was constituted through discourses of psychosocial expertise. Social work's self-espoused *therapeutic* role in laying bare psychological truths for its subjects to better know themselves was however also an operation of a form of power although clearly different in kind from juridical power. The post-war professionalisation of social work knowledge and the associated making-up of the social worker is best understood therefore as an exercising of a

---

<sup>3</sup> The CYPA 1969 transferred responsibility for delinquents from central governments under the Home Office to local government in the form of newly created Social Services Departments. The Act gave local authorities increased responsibility and discretion vis a vis young offenders. The juvenile courts lost their powers to make an approved school order or a fit person order; replacing these two orders with a general care order with the form of care left unspecified by the court, to be decided by the local authority. Twelve regional planning committees were established in England and Wales to plan community home provision in their areas, replacing the Approved school system. Responsibility for such provision was removed from central government to local authorities. The supervision order that replaced the probation order was linked to services in order to prevent children at risk of offending, coming into care.



productive, distantiated rule, sanctioned by the state and enacted and authorised through the lens of psycho-dynamic theories and psychological knowledge

### **Child Abuse and Questioning of the Effectiveness of Social Work: 1970s and 1980s.**

The confidence of social workers as well as general confidence in social work as an area of expertise was undermined in the 1970s when ‘child abuse’ and the response to it was to challenge the relationship between legal provision and social work, at the same time as shifting the focus of the social work gaze. While the emphasis of post-war social work had been the therapeutic and material support to the family with the increasing dependence of the courts on the diagnostic knowledge of social workers, this was to change in the following decades. The psychosocial knowledge that had been the foundation of social work’s status as an expertise was to be de-centred. The priority of maltreatment was to require a reconfiguring of the social work role, the objects, techniques and conceptual currency of the social work gaze.

While the murder of Denis O’Neill by his foster father in 1945 had been followed by a call for better *support* mechanisms for children in the context of the natural family and in addition had led to the expansion of social case-work; in the 1970s and 1980s the deaths of children within the family challenged faith in the natural family and identified failings in the practice of social workers. Maria Colwell’s death in 1973 at the hands of her stepfather has come to be seen as heralding a new kind of awareness of child abuse, and re-shaping of social work in terms of the priority of protection.

Parton argues however that faith in social work and the natural family was not initially shaken by the medical ‘discovery’ of the ‘battered baby syndrome’, which was indeed championed in the NSPCC Battered Baby Research Unit (Parton, 1991). The main feature of the NSPCC therapeutic model was:

the emphasis on intrapsychic and social factors, particularly emotional and social deprivations, as determining family relationships (Parton, 91: 22).

While the battered baby diagnosis **alone** was therefore not adequate to immediately shift the social work gaze away from ‘intrapsychic and social factors’ of the family as a whole, it nevertheless had an enormous impact on the governmental response to child maltreatment, the vocabulary and conceptual currency made available for thinking about child welfare and attendant, the practice and focus of local authority social work in the decades to come. Indeed it could be said that the ‘discovery’ of the link between maltreatment of children and the distinctive spiral fractures in long bones, represented a reshaping of knowledge equivalent to the navigational techniques described by Latour in the development of imperialism or the development of the examination of the individual patient described by Foucault as a decisive element in the birth of the clinical gaze.

In an article discussed in Chapter II, Parton identified the NSPCC as playing a crucial role in the dissemination/championing of the battered baby syndrome and argued that the individuation of ‘baby battering’ coincided with New Right attacks on the idea of preventative welfare state provision, and on the permissive liberatory politics of the previous decades (Parton, 1979). While these specific historic events and political currents undoubtedly contributed to the conditions of possibility which enabled the battered baby syndrome to be taken up in this country, the establishment of the diagnosis of the battered baby syndrome instantiates one of the processes described by Woolgar and Latour’s in their study of laboratory science cited:

The result of the construction of a fact is that it appears unconstructed by anyone; the result of rhetorical persuasion in the agonistic field is that participants are convinced that they have not been convinced, the result of materialisation is that people can swear that material considerations are only minor components of the ‘thought process’ (Latour and Woolgar, 1979)

X-ray technology presented the visual evidence to the medical establishment, the ‘materialisation’ that enabled the battered baby syndrome to be stabilised as an ineluctable scientific fact. As discussed Chapter II, Latour made a case for the particular role of inscriptive devices in scientific and cultural transformation in which he argued that no science exists without a visual language. How technologies of visual perception ensure that an object can be reproduced without its properties being changed is thus crucial for the construction of facticity, described by Latour as ‘the immutability of the displaced object’. Latour argues that technologies of visual



perception such as that provided by x-ray technology work by establishing a two-way relationship, 'a regular avenue through space' of an object and its recreated figure (Latour, 1986). The emergence of the battered baby syndrome served to focus upon the 'facts' now revealed that firstly, parents were capable of inflicting such injuries on their own children and secondly, that there were now established visual signs which a doctor could confirm were indicators of child maltreatment. The medical diagnosis of the battered baby syndrome thus decentred social work expertise, and transformed the role of the social worker whose knowledge became subordinate to medical expertise and legal relevancies. The corrigible 'problem family' was displaced as the focus of social welfare concerns, since the diagnosis of the 'battered baby syndrome' produced in Hacking's terms a new 'kind' of parent and a new, more urgent social phenomenon of child maltreatment. Changes took place gradually through the decade that were to lead to the focus and priority of social work centering on the response to child maltreatment, a concern which could no longer be described as preventative.

The 1970s thus saw a re-evaluation of social work on many levels and from many different quarters. The report of the Barclay Committee at the beginning of the 1980s (NISW, 1982), which endorsed the spirit of optimism of the Seebohm report and called for an expansion of community social work, was a minority voice amidst extensive questioning of social work's objectives and effectiveness. Although the intent of the Seebohm reforms was the support of the child in relation to more general preventative support of the family, in practice the 'generic' social-work departments created were not thought to have provided the family service envisaged. Within social work a number of commentators felt that the good practices developed in the Children's Departments had been lost (Packman, 1981).

As the effectiveness of social work could no longer be taken for granted, the costs and outcomes of local authority social services departments came increasingly under scrutiny in the 1980s through the Social Services Inspectorate and the Audit Commission. This coincided with unease from within social work itself regarding outcomes for children separated from their families as well as an increasingly vocal consumer movement that challenged the role and objective of social work (Parton,



1991). The increase in numbers of children in local authority care became a source of particular concern, and appeared to provide clear evidence that social work was failing children in terms of its own objectives of maintaining and supporting families<sup>4</sup>. There were two main routes into local authority care. The Child Care Act 1980 placed together statutory provision derived mainly from the Children Act 1948, the Children and Young Persons Act 1963 and the Children and Young Persons Act 1969. As with provision under the Children Act 1948, children could be received into care under Section 2 of the Child Care Act where there was evidence that the parents were unable to care for the child, where the child was orphaned or abandoned. This was usually referred to as voluntary care (although, as I have said, the extent to which parents views were taken into account in decision making, has been called into question). A child could also be committed to care by an order or interim order of the court as a result of care proceedings, criminal proceedings or domestic proceedings; and in cases of emergency a child could be removed to a Place of Safety for up to 28 days on the order of a magistrate, under continuing provision of the CYPA, 1969. In the late 1970s and early 1980s there was an increase in the numbers of children in care, an increase in the proportion of children committed to care by the courts under the CYPA 1969, and a decrease in the proportion of children received into care under Section 2 of the CCA 1980<sup>5</sup>. Of particular concern and the subject of research by Jean Packman (submitted as a memorandum to the Short Report, 1984, a review of child care law), was the misuse of the provision under the CYPA, 1969 of the Place of Safety Order that had also risen during the 1970s (Parton, 1981,1991). Packman also revealed that there had been an increase in the use of Parental Resolutions by local authorities, which denied parents right of participation in decision making relating to their children's future care.

As I have described, post-war statute and procedural measures had been predicated upon the notion of *prevention*. Local authority care had largely been

---

<sup>4</sup> For example in 1973 there were an estimated 89,000 children in local authority care in England, a proportion of one child in 150. This number increased in the following four years by over 96,000 children, or one child in 130 (Colton, 1988, Social Services Committee, Session 1982-83).

<sup>5</sup> For example in 1977 47.2 per cent of children in care had been received into care under S.2. CCA, while 24.6 per cent had been committed to care by the courts via proceedings under S. 1 CYPA 1969. Only four years later in 1981, 43.6 per cent of children in care had been received into care under S.2.



envisaged as providing a temporary stopgap in agreement with families. In the 1970s however, in the light of the new awareness of the risks posed to children within their families, measures under the CYPA 1969 for the *emergency* removal of children from their families appeared to be being used increasingly as a means of forestalling abuse to children within the family. Widespread media attention on the failings of social workers, DHSS guidance on non-accidental injuries throughout the 1970s, and inquiries into child deaths had provided social workers with the sense of the need to respond urgently to a 'hidden evil', and created the conditions for the increasing and often inappropriate use of methods of compulsion for the removal of children from their families.

Social workers were now therefore armed with a new knowledge and fear of 'non-accidental injury' or what would become known as 'child abuse'. Although the welfare of the child was the rationale for the increase in the use of care orders in this period rather than the punishment of parents, the effects of these measures were undoubtedly often experienced by families as punitive. The therapeutic intent of social work had thus become more acutely focused upon the individualisation of the maltreated child rather than the support of the family as a whole. Conditions were also being created for the emergence of campaigning groups comprised of children who had been removed from their families only to drift in local authority care, and parents of children who had been precipitously and sometimes unnecessarily removed from their families. The response to the increased use of legal measures was thus a counter discourse, which, in the 1980s was to contribute to an agenda of children and family 'rights'.

As I argue in Chapter V, in the nineteen eighties the problematic and programme for social work became one of uncovering risky families and rendering risks calculable. Thus while the prevailing teaching on social work training courses and the view of social workers themselves may have remained that neglect and abuse in families could be understood in terms of wider issues of social deprivation and intrapsychic factors; the growth in awareness of abuse within families coupled with

---

CCA, while 30.4 per cent had been committed to care by the courts via proceedings under S.1 CYPA 1969 (Social Services Committee, session 1982-83)

the uncertainty of its signs meant that social work resources were increasingly focused on the statutory need to protect children.

### **Prioritising Protection: The Changing Procedures of Social Work.**

Returning to the two extracts with which this chapter opened, one describing a case in 1950, and the second, an account of a case by a social worker in 1996, it is apparent that the category of sexual abuse on which the second account turns derives from the organisation of formal child protection procedures and practices for the registration and identification of abuse that emerged in the 1970s and 1980s. The formalisation of categories did more than simply re-name acts within the family but was linked to a new way of thinking about and acting upon the family. Central to this way of thinking was the anticipation and management of child maltreatment through sets of standardised procedures.

The formalisation of child protection procedures took place incrementally throughout the 1970s and 1980s through a series of government circulars that were concerned principally with the management of cases. While a 1970 DHSS circular had referred to the problem of 'battered babies', in 1974 the DHSS published a circular to all local authority social services departments which recommended the establishment of Area Review Committees (ARC's) for the monitoring of cases of 'non accidental injury' and that the duties and responsibilities of all people involved with any aspect of 'non-accidental injury' should be defined. In addition it was recommended that local practice and procedures should be devised, that education and training should be provided for all professional people involved, and that public awareness of non-accidental injury should be increased. Procedures should be established to ensure that children who moved to another area could be tracked, and continue to be monitored. In 1976 the DHSS advised that all areas should hold a central register of children 'at risk' and advised on the information that should be recorded. The importance was stressed of 'case -management' and the need to appoint a key worker for ongoing monitoring of the case. In the same year another circular advised that the police should attend all initial conferences. In 1980 the multi-disciplinary approach was consolidated and criteria for a child's name being placed on



the register for 'at risk' children included physical abuse, physical neglect, failure to thrive and emotional abuse. Sexual abuse was not included unless associated with physical injury. Circulars continued to be issued in the 1980s when Working Together: A Guide to Interagency Co-operation for the Protection of Children from Abuse (DHSS, 1988) emphasised the importance of a multi-disciplinary response to child abuse, social workers with statutory powers taking a lead role in the *management and coordination* of each case. Child abuse registers were re-named *child protection registers* representing a more proactive, predictive response to possible harm. Similarly 'case conferences', which had been a key element in social work since its inception in social case-work, became re-named child protection conferences, describing a more narrowly defined, practical orientation to these formally convened meetings which were attended by a specified range of professionals, and increasingly parents.

The remit and object of social work concern had become the urgent need to predict child maltreatment. The social work focus shifted from the benefits of the 'normal' family as a whole, to the assessment of a small number of parents for their propensity to abuse their children; in other words the development of techniques for differentiating and making visible the pathological (Parton and Parton, 1989; Rose, 1999)<sup>6</sup>. As well as a change in the focus of social work practice, the methods of social work were changing from counselling, and material assistance, to more standardised techniques of assessing, monitoring and surveillance of families, in order to render them knowable in terms of the new priority of protection.

### **The Impact of the Events in Cleveland and the Children Act 1989: New Concepts for Social Work With Families in the 1990s.**

The Short Committee report (1984) into social workers' use of child care law had revealed an increase in the use of emergency powers in cases where child abuse was suspected, and a worrying infringement of parent's and children's rights. In contrast to earlier debates concerned with delinquency, the legal and child welfare

---

<sup>6</sup> Inquiries into child deaths in the 1980s of Jasmine Beckford (1985), Kimberly Carlisle (1987) and Doreen Mason (1988), were crucial in the critique they presented of social work practice and in the part they played in the reshaping of child care policy (Parton, 1991).

models were not seen by the report as competing. Instead the Short report had seen the need for the clarification of the relationship between social work and courts, while also calling for a more preventative approach to the problem of child abuse. The solution to the use of overly coercive measures and the infringements of parents' rights was seen to lie in the creation of clearer criteria, checks and balances and lines of accountability in social work decision-making in conjunction with more appropriate care orders. The Short Report led to the commissioning of the Review of Child Care Law on which the draft of the Children Act was based. The process of drafting the new legislation involved consultation with representatives of a large number of user and professional organisations concerned with the use and effects of child care law.

As stated earlier, in a three month period in 1987 in Cleveland, 113 children were taken into local authority care, eighty-three on the grounds of risk of sexual abuse, compared with forty-nine Orders because of suspected sexual abuse in the whole of the previous year (Parton, 1991). The inquiry report states that in five months in 1987 – mainly concentrated in May and June - two paediatricians diagnosed sexual abuse in 121 children from 57 families (Secretary of State for Social Services, 1988: 243) The events that constituted the Cleveland affair are described in detail by the campaigning journalist Beatrice Campbell who understands the controversy in terms of the threat that its revelations represented for male police surgeons, hospital administrators and the fathers and stepfathers who were overwhelmingly the alleged perpetrators of the abuse (Campbell, 1988). What is interesting for my purposes about the events of Cleveland are the processes and controversy surrounding the identification of a physiological phenomenon in children which had previously not been sought and the extent to which the new gaze it enabled was both taken-up as a matter of conviction by some professionals and resisted by others.

What has become known as the Cleveland Affair therefore centred around the medical diagnosis of Reflex Anal Dilation (RAD), which was considered to be caused by damage to the sphincter muscles of the anus as a result of anal penetration. RAD



was described to the Cleveland Inquiry in the following way by the Manchester paediatrician, Dr Frank Bamford:

If the internal sphincter muscle is damaged, and it can be damaged by stretching, then the external sphincter muscle is the only muscle which can close the bowel adequately as you begin to inspect the anus. The problem is that the external sphincter muscle can only sustain a contraction for a relatively short period of time, and whilst the child may contract the muscle when you initially begin to examine him, because he cannot sustain the contraction, that muscle gradually relaxes and if the internal muscle has been stretched and is not working the anus gapes and you can see inside (quoted in Campbell, 1988: 60)

In fact the mark of RAD was not a new 'discovery' and had long been used by police surgeons and forensic pathologists to identify adult victims of anal rape. Its use by paediatricians as part of a diagnosis of sexual abuse was relatively recent however and had been the central diagnosis in a study of child victims of sexual abuse by Leeds paediatricians Dr. Jane Wynne and Dr. Christopher Hobbs published in the *Lancet* in 1986 (Wynne, Hobbs, 1986). This research and the seminars and training events that followed it led to a growing consciousness amongst some hospital doctors of RAD as a sign of sexual abuse in small children, boys as well as girls. The diagnosis was not uncontested however, and was for example positively resisted by two doctors who gave evidence to the Cleveland Inquiry.

As described in Chapter II, Latour emphasises the importance of inscription in the stabilisation of scientific fact as the mechanism through which a relationship is established between an event and its reproducible representation (Latour, 1986). As I argued above, the reproducible traces of broken bones representable through x-rays made possible Kempe et al's 'battered baby syndrome' diagnosis in the 1970s which was so significant in altering the social work task and gaze as concerned with the identification and investigation of child maltreatment. As I have indicated the acceptance of RAD as a sign of sexual abuse in young children was the focus of the evidence to the Cleveland inquiry and the inquiry report. Taking up Latour's arguments in relation to the role of inscription in the stabilisation of scientific fact, one can see that the weakness of RAD as a diagnosis is that its facticity derived from the interpretive eye of the 'converted'. Since the identification of RAD as a sign of sexual abuse rests on the interpretation by the examining doctor, an unconverted



doctor could offer an alternative interpretation or down-grade the significance or specificity of the sign as Dr Irvine and Dr Roberts did in their evidence to the Cleveland inquiry (see also Reardon et al, 1992; Claydon, 1988)<sup>7</sup>.

In addition to a lack of inscriptive corroboration of its existence the agonistic context of RAD as a sign of sexual abuse was complicated by several factors. Firstly, corroborating 'evidence' of RAD that led Doctors Wynne and Hobbs to examine a child's anus in the first place was not specifically *medical*, instigated as it was by the patients' own descriptions of their symptoms. Wynne and Hobbs' initial interest in the prevalence of RAD as a sign of sexual abuse derived from a concern to take children's 'disclosures' of sexual interference (and in particular, children's references to 'bums' and 'bottoms') literally. This involved them in a commitment to believing children's accounts and a readiness to accept a prevalence of sexual abuse in families. The doctors' stance was infused with a sensibility to 'disclosure' and 'denial' as well as to a theoretical model of the family derived from talking therapies and psy practices. Indeed the identification of RAD as a sign of sexual abuse took place in the context of other 'disclosure' work in which use was made of 'anatomically complete' dolls; practices which had been developed by US psychologists, social workers and therapists in the expanding professional field of child sexual abuse practice. Furthermore the field was highly politicised; at the same time as Wynne and Hobbs were carrying out research on the incidence of RAD, 'consciousness' of the widespread sexual abuse of children in families had been raised when rape crises centres - set up by networks of women activists and professionals - were inundated by calls from children who described experiences of sexual abuse on a scale previously unimagined (Campbell, 1988). Knowledge of the prevalence of sexual

---

<sup>7</sup> Samantha Ashenden's argument about the importance of generating scientific consensus in the stabilising of scientific fact, is supported by my discussion with a paediatrician in the Northern Region who states that particularly in cases for which doctors are likely to be called upon to give expert evidence in criminal trials for sexual abuse, in this NHS region, inscriptive traces are now produced through the use of a 'colposcope', an instrument which can be used to photograph anal abnormalities. The photographs are then discussed anonymously in peer review meetings and the evidence is submitted to court as the consensus of a group of paediatric experts rather than a single interpretation. As is stated in the report of the inquiry into the Cleveland affair, the colposcope was not in routine use in Cleveland in 1987. The doctor I spoke to emphasised that in her view 'you have to know what you are looking for', i.e. that the interpretation of RAD is a learnt expertise. This may be 'naïve empiricism' as Ashenden comments in her article (1996) but it does seem to accurately reflect the attitude of practitioners to their knowledge practices. As I will argue, social workers I interviewed



abuse did not thus derive exclusively from the scientific community. The diagnosis of RAD was thus already a politicised object. In addition to concerns about the way in which children had been removed from their families in Cleveland and their inappropriately being kept on hospital wards, the perceived misuse of Place of Safety Orders and Parental Resolutions and a user-movement which problematised the effects of social workers' decision-making, these factors meant that the therapeutics of eliciting disclosures of sexual abuse from children were open to criticism of partiality and coaching.

Samantha Ashenden has argued that in her inquiry report Butler-Sloss treats the contested diagnosis of RAD in terms of the adequacy of existing expertise, appealing for an increase in knowledge of child sexual abuse and thus reinforcing the 'possibility of adequate knowledge' (Ashenden, 1996: 80-81). The inquiry report responded to the precipitous nature of some of the practices in Cleveland that had clearly breached the tentative gaze upon the family - whether or not the diagnoses of sexual abuse and the professional intervention involved had proved to be warranted. Indeed one of the main recommendations of the report was not concerned with child abuse itself but related to inter-agency coordination in child protection. Thus the issue was framed in terms of the *management* of child abuse cases and by implication the management and regulation of the social work gaze. These were not new concerns. Indeed there are striking similarities between the recommendations of the report into the Cleveland affair and recommendations of the Curtis report thirty-seven years earlier paraphrased in the following way by Britton in 1950:

each child coming into public care should be treated as an individual in need of personal help, and not as an administrative problem (Curtis Report, 1945)

There is a danger that in looking to the welfare of the children believed to be the victims of sexual abuse the children themselves may be overlooked. The child is a person and not an object of concern. (Secretary of State for Social Services, 1988: 245)

The call in each report to treat the child as 'an individual not an administrative problem' (1945), and 'a person and not an object of concern' (1988) therefore

---

understood evidence of abuse as existing independently of their practices of investigation and discovery.

emphasised the regulation of the conduct of child welfare professionals rather than the incidents that had initially brought children into the child welfare system. While the inquiries into child deaths in the previous two decades prior to Cleveland had largely focused upon the need for social workers to intervene where there were concerns that the child was at risk of being harmed, the Cleveland report effectively called for a more circumspect and tentative gaze upon the family. This translated into a programme to reshape and systematise the social work gaze.

The phenomenon of RAD as a sign of sexual abuse thus straddled disciplines and derived its supporting evidence from theoretical models outside medical science, indeed from feminist and psycho-dynamic practitioners whose methods and criteria of investigation were open to the charge of being unsystematic. It is therefore not a coincidence that Protecting Children. A Guide for Social Workers undertaking a Comprehensive Assessment (1988), a document I analyse in detail in Chapter V, was developed after the events of Cleveland as an attempt to systematise and standardise the 'social assessment'. In recognition of the social work role as increasingly being one of looking-out for potential corroborating signs of child abuse, one of the consequences of Cleveland was the attempt to render the social work gaze more precise.

Sexual abuse became an independent category for child protection registers in the 1988 Working Together guidance for Area Child Protection Committees (prior to which sexual abuse was registered when accompanied by physical abuse). It was at this point therefore that its identification became an official focus for the social work gaze. In both the local authorities in which I carried out research in 1996, risk assessment guides were developed for use by social workers for the assessment of children who were suspected or established to have been sexually abused. I will now analyse one of these guides. In line with the messages that followed Cleveland, in families where sexual abuse is suspected, the emphasis in this authority is not on the immediate removal of the child from the family but instead upon asking the alleged abuser to leave the home and attempting to work with the 'non-abusing parent' whose



capacity to protect the child/ren is then assessed<sup>8</sup>. The social worker's gaze is guided in the assessment of key elements for assessing risk for possible rehabilitation of the abuser within the family home using the following instrument:

---

<sup>8</sup> The Children Act 1989 gives local authorities discretion to provide assistance to enable an alleged abuser to leave the family home whilst an assessment is undertaken.

	Low Risk	Medium Risk	High Risk
1.	Child is believed	Minimisation of abuse by adults in child's family	Denial of abuse
2.	Existence of several protecting adults in child's network, i.e. family, community and professionals	Non-abusing adults in existence - capacity to protect unassessed	No believing protecting adults in child's network
3.	Capacity to protect of protecting adults in an optional range of functioning	Capacity to protect is in mid-range of functioning	Capacity to protect is in dismal range of functioning
4.	Abuser accepts responsibility for the abuse and is motivated to participate in treatment. Can identify cycle of offending	Abuser accepts some responsibility. Minimisation of extent of behaviour and the need for treatment. Admission with justification	Denial of abuse. Victim blaming. Not amenable to treatment. No individual profile has been made.
5.	Family dynamics altered Children and non-abusing parents are empowered and can assert themselves. Participation in treatment	Parents needs are still paramount. Uncertain about who is responsible. Some blame attached to child	No alteration. Power relationships as before. No treatment Victim is scapegoated
6.	Appropriate distance and boundaries established between the family members. Members able to recognise grooming and communicate this.	Resistance to setting boundaries Grooming remains unexplained	No boundaries between family members

Table 4. Local Authority Risk Assessment Guide for Sexual Abuse



The guide takes concepts from psy practices based on long-term treatment through talk and distils them into indicators of risk. The social work gaze is thus honed in relation to key concepts that are concerned with belief/denial, the capacity of the non-abusing parent to protect the child, the responsibility/denial of abuse by the abuser, transformation of family dynamics, appropriate/inappropriate 'boundaries' between family members.

The extent to which the disclosure/allegation of sexual abuse is believed or denied by the family is a key element for assessment where belief represents a low risk and denial a high risk for the child's continued protection within the family. Belief of the child's disclosure also provides an 'optimal functioning' score in the separate assessment of the 'non-abusing parent'. Recalling the extracts at the beginning of this chapter, it was stated that whereas in the 1950 case account the mother of the child was the client, in the 1996 interview account the child was prioritised as the client. This guide for assessing risk in sexual abuse demonstrates how the child's needs are prioritised via the assessment of the 'non-abusing parent', as her/his character and capacity to protect the child is calculated. The concepts of belief/denial are also deployed in the assessment of the abuser. Belief of the child by the abuser necessarily requires that s/he 'accepts responsibility' for the abuse in order to present a low risk.

The acceptance/denial dyad is extended throughout the guide in which sexual abuse is presented as that which is concealed and unspeakable. The perpetrator's ability to conceal the abuse is thus related to his/her misuse of power. The reverse of this, the revealing of the abuse and the abuse as subject of talk, is constituted as liberation. Thus once the abuse is discovered and revealed, in order to represent a low risk the family must demonstrate how such consciousness has transformed and 'empowered' the non-abusing carers in their protection of the child. This is truly what Ian Hacking described as 'world making through kind making' where categories for the re/naming and articulation of events provide a new way for individuals to understand past experience in such a way that their own sense of identity is altered (Hacking, 1992). For example the risk assessment guide accords a

low risk to a family who recognises the actions of the abuser in terms of the concept of 'grooming' which is described in the following way elsewhere in the guide:

grooming involves the abuser preparing the environment including the non-abusing parent, siblings and victim to enable abuse to take place. This occurs on an emotional and practical level, e.g., encouraging the non-abusing parent to take an evening job or undermining the non-abusing parent's relationship and ability to care for the children.

The non-abusing parent is thus required retrospectively to re-assess the behaviour of the abuser in terms of their activities of abuse and the concept of 'grooming'.

Elsewhere in the guide it is stated that because criminal law requires a higher level of proof than do proceedings under the Children Act, this model of risk assessment can be deployed 'where there are previous or current allegations but no conviction, a not guilty finding or denial despite of conviction'. The Children Act burden of proof of 'reasonable cause to suspect' thus provides for the determination of truth and evidence using a different set of criteria than in criminal law. It would appear for example that where sexual abuse has been 'disclosed', the concept of denial can provide evidence of guilt. While Parton et al have argued that there is an increasing confusion between the Children Act 1989 and Criminal Justice Act 1991 standards of proof and that the criminal code requirements of 'proof beyond reasonable doubt' are increasingly taking precedence in child protection proceedings so that the threshold for Significant Harm is effectively raised (Parton et al 1997), the conceptual currency made possible through this local authority risk assessment guide suggests that the social work gaze is not straightforwardly 'legalised'. The guide provides social workers with techniques for the deployment of corroborating evidence and standards of proof derived not from criminal law but from psy disciplines. It is the concepts rather than the methods from psychosocial knowledge which are deployed in this guide and that are effectively converted to indicators of risk. The emergence of sexual abuse as a new category or kind can thus be seen to have sanctioned a new role for psychosocial knowledge - albeit in a proceduralised form - in the repertoire of social work techniques. As I will describe in greater detail in Chapter V the possibilities for what the social worker can know and see are regulated and made systematic through such practices of risk assessment.



The events of Cleveland, like the deaths of Denis O'Neil and Maria Colwell have become representative, even iconic of a turn in social work. As I have argued in relation to these child deaths, the changes in social work policy that subsequently took place are attributable to a heterogeneous set of conditions. In the same way, although the events of Cleveland in mid-1987 are widely seen as feeding directly into what would become the Children Act, 1989, the questions it raised relating to the rights of families to challenge social work decisions and the use of the Place of Safety Order had been pre-figured in the discussions and documents of the previous decade. The events of the Cleveland affair served to consolidate knowledge of the existence of sexual abuse in young children in terms of both medical and psychosocial knowledge. It raised a new set of problems as to how sexual abuse should be identified and responded to.

### **The conceptual currency of the Children Act 1989**

Despite the differences and transformations I have identified in the social work gaze, it would seem that the language and the intent of the Children Act 1989 represents a certain continuity in the way children have been considered by the law since the Second World War. Although the Children Act was presented as providing a new approach to working with families, commentators have also emphasised the extent to which it has served to simplify, integrate and rationalise existing legislation concerning children (Allen, 1989; Parton, 1991). Its most distinctive feature: the welfare checklist and the no order principle, for example, have been pre-figured in legislation and welfare policies concerning children and young people throughout the twentieth century. For example the principle of the welfare of the child is said to underpin the Act:

When a court determines any question with respect to the upbringing of a child, the child's welfare shall be the court's paramount consideration (Part I, Section 1(1))

The welfare principle has in fact been a provision of private law since 1925. It is thus the historically specific, heterogeneous set of conditions that provide for the definition of the welfare of the child in each generation of statute. The Children Act elaborates the principle with the welfare checklist for courts to bear in mind in making decisions about a child's future.

- a) the ascertainable wishes and feelings of the child concerned (considered in the light of his age and understanding)
  - b) his physical, emotional and educational needs;
  - c) the likely effect on him of any change in his circumstances;
  - d) his age, sex, background and any other characteristics of his which the court considers relevant
  - e) any harm which he has suffered or is at risk of suffering
  - f) how capable each of his parents, and any other person in relation to whom the court considers the question to be relevant, is of meeting his needs;
  - g) the range of powers available to the court under the Act in the proceedings in question
- (Part 1, Section 1 (3))

The welfare checklist thus specifies the aspects of a child's welfare that are to be considered in Children Act proceedings without elaborating how each aspect should be taken into account.

In Appendix II, I describe the provisions of the Children Act in greater detail. As well as creating new orders that courts can make in respect of children, the Act was taken as an opportunity for those in the child-care field to express principles of 'good practice', which can be seen as underpinning the legislation. While some of these principles, and directions for practice appear in the legislation itself, many can be found in the Department of Health guidance and additional documentation that accompanies the Act. The guidance is intended to be read by social workers and their managers in conjunction with the legislation. The guidance provides for a very particular interpretation and implementation of both the legislation and social work practice with children and families. Such guidance is important in the extent to which it seeks to direct the social work gaze. It provides the social worker with the definitions of his/her role, sets out what it is legitimate for him/her to see and gives the criteria for warrantable action. For example the concept of 'working in partnership' with families is considered to be a central social work principle and as I will describe in Chapter VI, relates to a social work ethos in which information is shared between social workers and the families with whom they work, decisions are made in conjunction with families and there is an emphasis on taking account of the views of the family and against autocratic and overbearing control on the part of a social worker. Partnership is also presented as the most efficient means of meeting social work objectives. The Principle of Good Child Care Practice in The Care of



Children, not technically Children Act guidance but produced by a Department of Health advisory group, and geared towards the implementation of the Children Act, states for example,

The development of a working partnership with parents is usually the most effective route to providing supplementary or substitute care for their children (HMSO, 1989:38)

Guidance and official documentation that accompanies the Children Act therefore steps in where legal statute cannot to make-up the social worker. It problematises his/her powers and role vis a vis his/her client and provides the limits and scope of the social work gaze.

### **Evidence, Procedure and Warrantable Practice in the Contemporary Gaze**

As I have said, in initially carrying out interviews with social workers I was interested in how the legal categories of the Children Act provided a texture of sense making for their practice. I found however that the categories and codes of the Children Act featured less in social workers' accounts of their practices than the need to make sense of their work in terms of evidence, procedure and warrantable practice. The social workers I interviewed overwhelmingly described their work in terms of the schema of finding facts (detection/investigation/assessment) and recent authors have also emphasised the extent to which the social work practice has become increasingly 'forensic' (Otway, 1996). Although it was sometimes difficult to find, social workers presented evidence as there, independent of their searching for it. What constituted 'evidence' in any account was not however isomorphic with that which would stand up as forensic evidence in a court of law but was more often 'evidence' in terms of the rationality of their accounts of warrantable practice. Characteristically such 'evidence' was only knowable retrospectively. Social workers talked for example about their 'realisation', and that 'it soon became clear' that parents were not capable of caring for their children. Similarly while the need to identify the likelihood of significant harm was sometimes accounted for in terms of legal relevancies, more strikingly it invested the social work task with a concern to be seen to be following procedure.

As I argue in relation to social work accounts in Chapter V, the equivocal and uncertain character of social work knowledge means that the search for evidence is inevitably interpretive and yet as I have indicated, social workers present an objectivist stance in the uncovering of evidence as existing independently of their practice. As has been described, social workers accounts are constructed to provide *warrant* for intervention into family life. In addition to marshalling evidence in the production of warrantable accounts, as I argued in relation to the risk assessment guide for sexual abuse, guidance provides social workers with techniques for the identification of corroborating evidence and standards of proof that are not derived from criminal or civil law but from psy disciplines. The emphasis in the accounts on investigation and the search for evidence is thus not exclusively in relation to legal relevancies. Although social workers displayed a knowledge of the principles and the orders of the Children Act, an awareness of the particular requirements of magistrates as well as a wariness regarding the nature of social work evidence in criminal cases, their accounts of practice challenge the extent to which the social work gaze can be said to be 'legalised'. What is characteristic about the exercise of legislative powers in my study is how social workers overwhelmingly describe procedures and models of good practice as designed to *avoid* the use of care orders. Social workers I interviewed described carrying-out complex practices of case-management that provide for their clients' partial visibility and are intended to secure their voluntary co-operation. They describe the deployment of techniques to maintain the engagement of families. These include carrying out assessments, drafting written agreements to be signed by parents, securing services and specialised therapy on condition that clients demonstrate their willingness to work towards particular standards of child care. These are disciplinary procedures designed to enlist client co-operation and to avoid the use of compulsion. It is through such routine acts of writing that the individual is made describable, categoriseable and known in the way characterised by Foucault in the examination:

The examination as the fixing, at once ritual and 'scientific', of individual differences, as the pinning down of each individual in his own particularity.. clearly indicates the appearance of a new modality of power in which each individual receives as his status his own individuality, and in which he is linked by his status to the features, the measurements, the gaps the 'marks' that characterise him and make him a 'case' (Foucault, 1977, 1991:192)



Practices of power indeed, but at the same time these practices for knowing and constituting the family in terms of categories and indicators of risk are also procedures for circumscribing and regulating the social work gaze. In my view therefore, the concept of the 'legalised gaze' fails to capture the reflexive, self-conscious character of social work practice. My interviews demonstrate the extent to which the social work gaze is heterogeneous in the fields of knowledge it draws upon and that social work powers are used reluctantly, tentatively and are practised outside the law through inscriptive, disciplinary ways of knowing.

The audit of social work power is reflected in recent events. Although an attempt was made in the Children Act 1989 and its accompanying guidance to limit social work intervention in the family, official concern has subsequently focused on how the procedures of investigation and assessment themselves constitute too great an invasion into the family. As was stated in Chapter II, in the 1990s there was a growing concern that too many families had unnecessarily become the subject of social work investigation and surveillance and in 1994 a report by the independent Audit Commission (1994) found that the vast majority of child protection investigations proved to be unsubstantiated so that too many resources were being devoted, and too many families were caught up in unwarranted child protection investigations. These findings were echoed in the 20 studies commissioned by the Department of Health and summarised in Messages from Research (Dartington Social Research Unit, 1995) one of the main conclusions of which was the need to *refocus* social work practice upon services and support to families 'in need' while finding more precise means of targeting those children suffering from or likely to suffer from 'significant harm'. Concern was thus centred on, not the *unnecessary* use of legal orders, but the explosion in (unwarranted) practices of investigation and assessment as well as the narrow focus upon child protection and absence of family support. As I will describe in Chapter V, new guidance has sought to further refine the social work gaze upon the family in an attempt to address what has been understood as the misuse of social work practices of investigation. This is a preoccupation with the governing of social work and with the risks entailed in arbitrary and unsystematic social work practice. It has been responded to through an attempt to circumscribe and limit social work powers and further regulation of the social work gaze.



The most recent version of the Working Together guidelines, Working Together to Safeguard Children (DoH, Home Office, DEE, 1999) refers in terms reminiscent of Seebohm that the family should be considered in relation to the wider community 'which should be supporting it', and that the statutory measures should be used only in exceptional cases:

In the great majority of cases, it should be the decision of parents when to ask for help and advice on their children's upbringing. Only in exceptional cases should there be compulsory intervention in family life: for example, where this is considered necessary to safeguard a child from significant harm (DoH, 1999:2)

The document includes lessons from summaries of research commissioned by the Department of Health, Messages from Research (Dartington Social Research Unit, 1995) described above<sup>1</sup>, in particular by emphasising that Section 17 of the Children Act (the extension of services to children who meet the criteria of 'in need') is as much a statutory obligation as Section 47 (the duty to investigate where there is suspicion of Significant Harm or its likelihood). Indeed the draft guidance encourages social workers to carry out 'wide ranging assessments' based on 'broad-based family support services' (DoH, 1999: 2). Nevertheless my understanding is that no alternative route to social work services is envisaged and therefore that such services would only become available to families via the former route of a child protection referral that will now involve a new process of assessment.

This attempt to regulate the social work gaze by targeting social work services more effectively and efficiently is based on the view that a population of children 'in need' exists independently of professional practices and methods of knowing it. The approach does not take into account how for example the medical 'discoveries' of physical signs in the identification of the 'battered baby syndrome' and the more equivocal signs of sexual abuse created a new conceptual currency through which categories and kinds of children become knowable. The finding that a large number of families are the *unnecessary* subjects of child protection investigations implies the possibility of eliminating 'false positives' through a more rigorous and systematic

---

<sup>9</sup> And generally the guidance promotes practice, which is 'evidence-based' in that it is based on research findings and actual evidence in each case.



honing of the social work gaze. In the same way that despite the police drama's depiction of police work involving 'fighting crime', most of police work does not involve the apprehension of criminals (Ericson and Haggerty, 1997), so most social work does not involve the uncovering of abuse. Ericson and Haggerty argue:

if you ask how many people in your city were in possession of marijuana or driving while impaired last night, you are asking a question of the same logical order as 'How long is a piece of string?' or 'How many grains of wheat are there in a heap?' (Ericson and Haggerty, 1997: 54)

Similarly incalculable are the population of children who could be designated as suffering from significant harm or in need. Indeed as the rise and fall in the numbers on child protection registers reflects different local authority styles as well as trends in the use of the child protection register over time (Corby, 1990) and as new categories for registration have emerged, one can see the difficulty of separating social work practices of uncovering and responding to populations of 'children in need' or children suffering 'significant harm', from the phenomena they uncover. Greater 'precision' in social work assessment in my view involves a readjustment of the social work gaze in the application of a new set of criteria for warrantable practice.

The child protection system therefore constitutes a mechanism to render calculable and make knowable a population of children in need/at risk. In part this involves making direct judgements in assessments of families, many of the investigations for which will prove unnecessary. In addition an increasing amount of social work time is now devoted to documenting, accounting for and authorising social work contact with families in terms of sets of multi-disciplinary procedures. Ericson and Haggerty argue that one of the key effects of the procedures developed in policing in the 1970s and 1980s was to convert police into 'knowledge workers'. Their term 'knowledge work' relates to their finding that the police are involved in generating knowledge for their own risk management as well as for a network of organisations' risk management needs. They quote Shadgett, a police officer who carried out an observational study of police work:

Reporting incidents was integral to investigations; in fact, the reporting of events, that is, accounting for them, amounted to the rationale and primary purpose behind many investigations, particularly those that could not be solved (Shadgett, 1990: 42, quoted in Ericson and Haggerty, 1997:21)

The need to make social work practice accountable was key in how the social workers I interviewed (whose accounts I will analyse in greater detail in Chapters Five and Six) described their work. They described, as in the following extract how accounting for practice is dispersed through multiple media and methods of recording, in paper and computerised files, standard forms, letter writing and communicating with other professionals:

- 1.SW2: Previously, there was not so much emphasis on the written stuff
- 2.because now, you know, over the years it's become very important how you
- 3.write your work, and how it should be detailed and concise and because you
- 4.know clients have access to the information now, so there's a lot of
- 5.emphasis on that, because you know the written stuff has to be good, you
- 6.have to do it, you know there's a standard that you have to meet, so therefore
- 7.you have to record everything, and especially child protection work, it's vital
- 8.that you do record all the information, other than, you know, you have to do
- 9.the written work and on top of that you have to do forms, computers, and
- 10.then obviously telephone liaison in multi-disciplinary assessments

Not only is there a need that documentation should be 'detailed and concise' (line 3) in forms and on computers, but in addition, the fact that clients now have access to their records imposes a new standard of stringency on social workers (lines 4-6) They must not only now act warrantably but also only record those things that can be warrantably recorded. SW3 described the administration required as 'overwhelming':

- 1.PR: what about administration and write-ups
- 2.SW3: that just seems to be
- 3.PR: does it take up a lot of your time?
- 4.SW3: it would take, if I could have a week free from seeing any client, free
- 5.from receiving any kind of calls I would be able to catch up with my admin.
- 6.PR: you'd need a whole week
- 7.SW3: I'd need a week to be absolutely on top of it, it's just overwhelming

In parallel to the spiralling of knowledge work in social work practice, social workers described the procedures of distrust through which the effectiveness and efficiency of social work is managed at a local authority level. The social workers in one of the authorities I carried out interviews were able to supply an answer to the question of



how much time they spent on administrative work because they had recently been asked to give a break-down over one week of time spent on each aspect of their work. This was to provide management with data for the more accurate specification of objectives for the organisation of social work time. These local authority procedures for managing and accounting for social workers' time indicate a distrust in professionals' ability to self-regulate that is again consonant with Power's analysis of the pervasive rationality of *audit* (Power, 1994, 1997).

The managerial preoccupation with time as resource was described by a team manager as a source of frustration in the following account:

1. SW4: well I think so it's my experience in this department that you get  
2. training in everything. You get training in procedures, you get can get  
3. training on you know managing staff's sickness, you can get that at the drop  
4. of the hat you know all these things the organisation would define as  
5. important to the smooth running of the organisation. We try to say that the  
6. social work service in this organisation needs to have a slightly different  
7. agenda as a professional service; sometimes you're looking at time. It's an  
8. argument you know that this should be a receptive setting for quality social  
9. work, it seems to me to go out the window and the organisational agenda  
10. around managing people and managing all the other branches of the  
11. organisation of housing, leisure take priority.

This extract points to the co-existence of sometimes competing rationalities governing social work. SW4's reference to the need to argue for social work as a 'professional service' (line 6) and for 'quality social work' (line 8) refers to an ethos of social work as an expertise<sup>10</sup>. This is an expression of dissatisfaction with management, which is incapable of differentiating between social work and other council services (line 10), since the objective of local authority management through audit becomes the conversion of all 'outputs' into performance objectives and targets for ongoing and post hoc evaluation<sup>11</sup>.

---

<sup>10</sup> In addition it refers to the policy described earlier in the interview - of which SW4 disapproves - for this authority to employ social work assistants who do not have formal social work training but come from one of the minority ethnic communities in the borough.

<sup>11</sup> Although none of my interviewees made reference to it, this practice has also been coordinated at the central government level through the Quality Protects programme, which manages through performance targets specifically designed for children and family social work. I discuss this programme briefly in the coda to Chapter V.



Although, as I will discuss, discourses of users' rights, empowerment and partnership have become integrated into social work practice, even where statutory measures are avoided its users are not straightforwardly voluntarist consumers of a service. Children and family social work with its stated objective of the *welfare of the child* and its access to legal measures for the identification of need and the obviation of harm thus conflicts with the discourse of consumer-rights/choice increasingly deployed in local government statements of purpose.

In terms of their actual practice, social workers describe what they do as increasingly concerned with documentation in accordance with sets of procedures and the gathering of data on families. The practices of maintaining up-to-date files on individual families thus simultaneously generates data on clients and makes social work action accountable in accordance with procedure. Information on families becomes stabilised and authorised once entered into the recording system. It can then be relayed back to managers and to multi-disciplinary networks of professionals. The overriding concern of child protection social work has thus become the management of uncertainty in the accounting and documentation of decision-making, the documentation of criteria for action and intervention and with the circulation and monitoring of data about families. As I have indicated, procedures for the management of uncertainty coexist and sometimes compete with emerging management strategies that attempt to render social work auditable.

What have I identified therefore as distinctive to the contemporary social work gaze? Post-Cleveland there has been a concern to make the social work gaze more accurate and systematic in order to avoid unnecessary intervention into the family. The 'raised consciousness' of sexual abuse signalled by the events in Cleveland has made a new conceptual currency possible for social work with the potential of uncovering signs which can be corroborated through a medical diagnosis. As was seen in my analysis of a risk assessment guide for sexual abuse, the emergence of sexual abuse as a kind of abuse has seen the proceduralised deployment of concepts from psychoanalytic knowledge in risk indicators that are designed to standardise and systematise the assessment procedure. The concern for social work practice to be seen to be warranted has become translated into the requirement for *evidence* for



intervention. As I have described in social work accounts this is linked to the increased regulation of the social work gaze that has not so much been 'legalised' as reshaped in terms of procedure and warrantability. The most recent problematisation of social work power has related not to the misuse of the powers of the law but the powers to investigate, survey and assess the family. This has led to what I have described as an audit of social work power, which has effectively turned the social work gaze upon itself in a search for more accurate practices and for techniques of making practice accountable through numerous tasks of documentation and record keeping

### **Conclusions**

In this chapter I have examined the formulation of legislation and policy shaping social work with children and families since the Second World War in an attempt to analyse transformations in the social work gaze. Such an analysis reveals the historically contingent, heterogeneous set of circumstances that have contributed to the characteristic of the contemporary social work gaze. Social work with children and families today is very different from that carried out by post-war children's officers in terms of its priorities, its objectives and the very client upon whom its practices are focused.

Whereas post-war children and family social work was dominated by a psycho-scientific diagnosis of the 'problem family', and the relief of deprivation; children and family social work today is dominated by making risks visible. This involves a range of administrative tasks as well as assessment of the family, of form filling, report writing and checking of existing data sources. Social case-work skills based in counselling clients in self-understanding have been de-centred. Although the individuality of clients is emphasised today, practices have become increasingly standardised in statutory procedures for accounting and managing cases. The recording and registration of children considered to be at risk of abuse and the tracking of the whereabouts of risky families are paramount - central to the priority of protection has become the need to anticipate future risk

Protecting children rather than prevention has thus become the dominant objective of social work with families. Although legislation and policies emphasise that children are best cared for in the context of their families, and although welfare is considered paramount in consideration of children's needs, the focus of social work activity has become more abstract and at the same time more specialised as parents and carers are assessed in terms of their capacities to meet their children's needs. Criteria and legal measures refer to *thresholds* of harm, the breaching of which indicate the threat of removing children from their families. As I will explore in the following chapters, the *potential* for compulsion represented by child protection procedures, exerts a powerful influence on parents and carers. While debates in the nineteen sixties focused on supporting the 'problem family' and practice centred on the (unrealised) objective of converting the delinquent child into the subject of the therapeutic social work gaze, in the nineteen eighties and nineties parents have increasingly become subject to a proceduralised gaze in risk management strategies which I will explore in the next chapter. The new problematisation of social work power, which is distinctive of contemporary concerns, has not been replaced by less power but with new categories and rationales for making-up risky families, and techniques for regulating and making auditable the social work gaze.



## **Chapter V**

### **Risk in Child Protection**

In this chapter I examine risk in child protection in three sections. In Section One I argue that the attempt to calculate risk is one way in which the paradox of the public/private family has been addressed. I discuss the concept of risk and probability and the language of balancing risks in child protection. In Section Two I explore how the notion of managing risks is operationalised in official guidance and procedures for dealing with child protection. I carry out an analysis of the Guide developed by the Department of Health in 1988 in order to assist social workers in their assessment of risk<sup>2</sup>. I argue that this technology renders the family knowable in terms of a perceptual grid of risk management. In Section Three, I anatomise social workers' talk about risk in the interviews I conducted with them. I ask at what point risks are assessed and argue that risk-thinking is characteristic of the social work gaze at all points of contact with families. I examine social workers' descriptions of how warrantable judgements of risk are made in relation to a number of accounting devices. These include the concept of the 'known family', sets of 'rule of thumb' indicators (often corroborated by medical diagnoses), an accumulation of risky factors and the extent to which parents co-operate with social work intervention. In concluding I ask how it is that this technology of risk management imagines its subjects, the risky client as well as the risk-taking social worker. In a coda to this chapter I briefly examine the most recent Department of Health assessment guide.

#### **Section 1 Risks in the Private/Public Family**

The paradox of the public/private family is very much at the heart of contemporary social work concerns, as the freedom of the family to govern itself is continually problematised by the need to intervene to protect vulnerable family members. As I will discuss, the concern to avoid arbitrary and unnecessary intervention into the family accounts for the preoccupation with the need for social work action to appear warranted today. The need for intervention to be seen to be necessary in turn requires a scheme that describes the basis on which judgements and decisions about families can be soundly made.

---

<sup>2</sup> As I will describe in the coda to this chapter, The Guide to Comprehensive Assessment has been replaced by the Framework for the Assessment of Children in Need and their Families (DoH, 2000)

The importance of balancing the need to protect children with the rights of parents to bring up their children as they choose, was emphasised by David Mellor in his introduction of the second reading of what would become the Children Act 1989:

We hope and believe that [the Children Act] will bring order, integration, relevance and a better balance to the law - a better balance not just between the rights and responsibilities of individuals and agencies but most vitally, between the need to protect children and the need to enable parents to challenge intervention in the upbringing of their children (Hansard, HOC, 27 April 1989, 2<sup>nd</sup> Reading, col.1107-1108)

The dilemma is clearly encapsulated by Mellor's acceptance that on the one hand there is a need to protect children, and on the other, a need for parents to be able to *challenge* social work intervention. The role of the legislation as a mechanism to both uphold parents' rights to bring up their children independently from intervention by the state, and to challenge such intervention where it may arise implies a distrust in social work judgements surrounding child abuse; the suggestion being that social work intervention could prove equally harmful to children.

As I described in Chapter III, the manner in which 'intervention' into the family has been problematised has shifted over time. It has included concern to de-institutionalise child care and support the 'natural family', concern (often expressed in terms of children's rights) about the damaging experience of local authority care, and concern about the family's autonomy being breached by the unwarranted removal of children, and unnecessary child protection investigations. It was the advent of the 'discovery' of child abuse in the 1970s and 80s that challenged faith in the family of the previous decade. The emergence of abuse and the series of inquiries that documented it, introduced a new loss of faith in the safety of the family, at the same time creating a culture where individual social workers were held responsible for child deaths. Most recently, and notwithstanding the explicit measures in the Children Act 1989 to limit social work intervention, official concern about intervention into the family has been oriented to how the procedures of investigation and assessment of the child protection system constitute too great an invasion into the

---



family, and that too many families have unnecessarily become the subject of social work surveillance and investigation.

Anxiety about intervention into the family has left the family itself as a largely unexplicated, 'natural' space in which to rear children. Protecting Children. A Guide for Social Workers Undertaking a Comprehensive Assessment (1988) a document which I analyse in detail in Section Two, asserts as a 'fact' that the family best meets the needs of children

It is accepted that the basic needs of children in our society are best met within the family structure offering security, consistency and continuity of love and care from natural or substitute parents (DoH, 1988: 9)

The use of 'it is accepted' in this statement operates as a device to 'black box' the facticity of the statement (Rose, 1998; Latour, 1987); the fact is rendered unchallengeable, axiomatic and the processes whereby the family has come to be regarded as 'best' at meeting children's needs invisible. As the excerpt from David Mellor's introduction to the second reading of the Children Act 1989 makes clear, the emphasis of the legislation was also to reinforce the family as the best place in which to bring up children and to minimise intervention of any kind into the family except in order to 'protect' children. The legislation is presented as a means of limiting what government can do and in this sense is characteristic of the *critical reason* of liberal government described by Graham Burchell:

Liberalism sets limits to what government can know or do vis a vis a civil society that must none the less be governed (Burchell, 1996)

As well as defending the rights to freedom from intervention of the governed, the legislation is implicitly designed to regulate the practices of social workers. It references a critique of former welfarist policies (with whom social workers are associated) and aligns both politicians and legislation with families who in this discourse become active consumers of services rather than clients of social work intervention.

The distinction between the public and private family is thus connected to notions of freedom from the orbit of governing practices. While parental rights and responsibilities can be statutorily recognised, it is to an *ethic* of family autonomy that such statements allude. This ethical view of the family as private and self-regulating is disrupted by social work intervention be it in the form of a child-protection investigation and ongoing scrutiny of family life by a social worker, or actual removal of a child from the family. Herein lies the liberal dilemma of promoting the freedom of the family at the same time as needing to protect individual family members.

As I will discuss in relation to social workers' accounts, such intervention can only be justified where there is an obvious and even urgent need for action. The problem arises in the indeterminacy of how action can be justified and the extent to which investigation itself can constitute too great an intervention into the family.

The family is private in so far as its activities do not take place in such a way that it has to account for itself. It does not partake in a continuous 'regime of visibility' (Rose, 1990:133) such as takes place in the school, factory or prison where surveillance and documentation are integral. In order for its vulnerable members to be protected, the family therefore has to be *made* visible at particular times and places, and this is as much a practical, as an ethical problem.

## **Section 2. Risk in the texts: Analysis of Guides for Social Workers**

### **i. The Meaning of 'Risk'**

As I have described, central to the problematic of advanced liberalism is the need to avoid unnecessary interference by the state in family life, while simultaneously identifying those children who *really* need protection, and who must be targeted for social work intervention (Parton, 1996). The technology of risk assessment tentatively makes calculable what is simultaneously considered to be non-calculable and natural i.e. the relations between children and their parents. A predictive risk assessment model provides a solution to the problem of respecting the freedom of the family while protecting the child. Social work powers are legitimated through the calculation of an identified risk; the technology of risk management thus provides a rationale for the restriction of freedom (Rose, 1996). The possibility and



positive necessity of identifying risks does not thus detract from faith in the private family as an ideal.

While child abuse problematises the family's entitlement to privacy, the possibility must be left open by the practices of child protection social work for natural relations between parents and children to be resumed. As I will discuss later, social workers describe how in order for the promise of the normal family to be worked towards parents need to demonstrate active insight into their problems in line with multi-disciplinary assessment. Prior to this however they must demonstrate co-operation with the intervention into family life that the process of risk-assessment itself represents.

How does the process of balancing the rights of the family to a private space so central to liberal government take place? In this section I examine how 'assessment' of families has been conceived in relation to discourses of dangerousness and risk. It would seem that the language and vocabulary of risk has increasingly featured in questions of policy and practice in child protection so that child protection policies seem to be framed today in terms of the need to calculate, however qualitatively, risk to a child. Parton has argued that up until 1987 the policy response to child deaths was focused on the need for greater knowledge of the factors indicating and causing child abuse. Following the events of Cleveland however, the concern was oriented to greater specification of 'high risk' in order to intervene less (Parton, 1996). The logic of risk management is paraphrased in the following way:

For in theory, the identification of the actually or potentially 'high risk' case or situation provides the mechanism for ensuring that children are protected, unwarrantable interventions can be avoided and scarce resources are allocated efficiently (Parton, 1996:100).

The notion of 'risk' would thus seem to fit with the concern to intervene less in the family. After the events of Cleveland, sets of procedures were put in place for establishing not so much a truth of whether something called abuse took place, and what might have caused it to occur, but whether there is a 'high risk' that a child may be harmed in the future. Working Together: A Guide to Interagency Co-operation for the Protection of Children was drafted in 1986, published in 1988 and rewritten in

1991 and included procedures and mechanisms for the formal decision-making, registration and monitoring of children<sup>3</sup>. As well as specifying the formal processes and procedures through which decisions should be made, the document provided standardised categories for registration in terms of risk or likelihood of 'significant harm'. The process of registration was designed to signal official recognition of concern surrounding the possible 'significant harm' to a child and in addition to commit social services departments to drawing up inter-agency child-protection plans.

Protecting Children. A Guide for Social Workers undertaking a Comprehensive Assessment (DH, 1988)(which from its orange cover, came to be known as the Orange Book) was produced as a companion to the Working Together procedures and was designed to provide social workers with practice guidance for formally assessing families who had entered the child protection system<sup>4</sup>. The initial recommendation for the development of the guide came out of a Social Services Inspectorate report following the inquiry into the death of Jasmine Beckford which examined the outcome of cases where children had been returned home after removal into the care of the authority:

it was evident that as a result a considerable amount of social work effort and resources are being misdirected, but more seriously, children are returned home without a **thorough assessment of the risks involved**, and this may mean they are inadequately protected (quoted in Parton 1990: 41).

As I argued in Chapter IV the guide can be seen as an attempt, following the events of Cleveland, to regulate and systematise the social work gaze.

The guide consists of 167 questions to be answered by the social worker herself, children, parents and other family members and carers<sup>5</sup>. In the guide

---

<sup>3</sup> It has most recently been republished as Working Together to Safeguard Children. A guide to interagency working to safeguard and promote welfare of children (DoH, 1999)

<sup>4</sup> Although as I will describe in the coda to this chapter, this guidance has now been superseded by a new framework for assessment in which children 'in need' rather than 'at risk' have become the focus, the guide was used by the social workers I interviewed and its terms of reference very much shaped social work assessment for over a decade following 1988. It is for this reason that I focus upon it in this chapter.

<sup>5</sup> Questions are organised in the following topics: The Causes for Concern, The Child, Family Composition, Individual Profile of Parents/Carers, The Couple Relationship and Family Interactions, Networks, Finance, Physical Conditions. The largest section is The Child the questions for which are organised under sub-sections for example Parents' Perceptions.



questions are preceded by discussion of research and theories established from child development, attachment theory, and psychotherapy. The aim of the guide was:

to understand the child's and family's situation well enough so that long term plans designed to protect the child and help the family can be soundly based (DoH, 1988: 5)

The resulting assessment has the status of findings on the basis of which decisions can be made concerning a child's future and the nature of future social work intervention. While the guide is designed to provide a systematic assessment of what kind of intervention or action can be warranted, the implementation of the guide itself constitutes a very particular kind of social work intervention in which the 'parent' is targeted.

The extent to which 'child abuse' has problematised both the family and social work is demonstrated in the way the role of the social worker prominent in the 'radical social work' of the 1970s - to befriend, advocate on behalf of, and gain access to resources and services for families- is harnessed and transformed in the use of the guide. The lists of questions require the social worker to observe family relationships and behaviours with a forensic eye, gathering evidence in order to arrive at a warrantable, practicable judgement.

What then is the focus of this gaze, and what might constitute evidence? While Robert Castel has argued that there has been a shift in social work away from focusing on the pathological individual and towards governing in terms of abstract categories - characterised as a shift from dangerousness to risk, (Castel, 1991) I believe the guide suggests a more complicated interplay between notions of risks and dangerousness, the particular family and the general types of families.

Much has been written in recent times about the emergence of a 'risk society' (Beck 1992a, 1992b; Giddens, 1990, 1991) in terms of how our lives are increasingly beset by real global dangers and that we take an increasingly calculative attitude towards the dangers with which we are confronted. Although it may be that the claims made for the pervasiveness of risk society are overstated, in social services and in particular in mental health services and children and family services there is an

increasing emphasis on the attempt to predict risks. As Rose has commented in relation to inquiries into murders and attacks by mentally ill people, the focus has been on the interrogation of how and whether or not the incident could have been anticipated as a risk (Rose, 1998). Similarly in services for children and families, the emphasis on the closure of children's homes, and supporting care of children in their own families, coupled with an anxiety about the unnecessary intervention into the family, presents a problem of calculating risk of harm to children in their families.

While the primary 'risks' in child protection are, on the face of it, the death or serious injury of a child, the Orange book suggests a more general 'riskiness':

It must be acknowledged at the outset that social work in this field is demanding, complex, **risky** and often unrewarding (ibid: 3)

To state that social work in this field is 'risky' points to a lack of certain knowledge. Indeed, Ian Hacking has argued that the modern usage of probability i.e. meaning susceptible to numerical measurement, first emerged in the seventeenth century as - 'a token of the uncertainty that characterises the Renaissance' (Hacking, 1975: 25). It is in conditions of uncertainty that the need to make calculated predictions arises, in order to 'tame chance'. The notion of 'risk' as it is used in Protecting Children. A Guide to Social Workers Undertaking a Comprehensive Assessment (1988) refers to the identification of family 'dynamics' and 'behaviours' which are taken to be established indicators of future harm for children. At the same time the notion of risk refers to the prevalence of uncertainty and *unpredictability*. The preoccupation with the need for social work action to be seen to be warrantable means that the risks managed are not only concerned with future harm to a child at the hands of her carers but are associated with harm as a result of the measures taken (whether founded or not) in the name of child protection. As I have described, this latter risk is as much about the risk to the right of the private family to rule itself as it is about the dangers posed to a child in substitute care. Further the injunction for social work action to be warranted relates to a risk to and for the social worker herself. Risk in this sense becomes a reflexive concept. There is the risk for example of what in hindsight becomes seen as an error of social work judgement with the public vilification that may ensue.



There are then a number of different understandings and orders of risks in child protection as they relate to the child, the family and the social worker involved, and though very different in their effect they all relate to the warrantability of intervention in the family. They include a 'general riskiness' and uncertainty that is an intrinsic feature of the work, risk indicators that are observable in family relationships and behaviours, and the risk of unnecessarily breaching the family's privacy. In the practices of child protection, risk becomes a trope, a way of thinking about social work in terms of prediction and future hazards. One way in which risk thinking is realised and made actionable is through Protecting Children.

In the guide the notion of risk coexists with and does not replace notions of dangerousness as is demonstrated by the following extract:

Practitioners should be aware of the constellation of factors often associated with dangerous families. Although the number of such high-risk families who come to the attention of the statutory authorities as a result of child abuse is small, they are usually the families that feature in child abuse deaths and subsequent inquiry reports. No simple checklist can be offered; indeed checklists are themselves potentially dangerous. Incidents of fatal or serious child abuser have to be understood in terms of the total family dynamics. Although the perpetrators in these cases are usually men, and often not the father of the child, the partner has often been aware of the danger of the situation and significantly failed to protect the child from abuse (DoH, 1988: 12)

In this quotation 'dangerous' families are equated with 'high risk' families. As Ericson and Haggerty argue in their study of policing, the idea of danger is integral to risk technologies: 'Risk technologies presume danger' (Ericson and Haggerty, 1997: 88); yet in the extract from the guide quoted above dangerousness does seem to relate to identifiable pathological features in a small number of families, rather than abstract hazards. The guide thus tutors the social worker in a forensic search for evidence of high risk, which while calculating does not dispense with the focus on the concrete, individual family members. As is clear from the above quotation, 'high risk' cannot be read off from checklists of characteristics (as risk indicators) but concerns 'total family dynamics'. As I will describe, the guide goes on to elaborate how a social worker can navigate the unequivocal indicators of the high risk/dangerous family in

terms of a continuum of characteristics. This is not therefore Robert Castel's narrow definition of a risk as

the effect of a combination of abstract factors which renders more or less probable the occurrence of undesirable modes of behaviour (Castel, 1991:287)

While deploying the vocabulary of risk the guide directs the social work gaze to the individual family, a gaze that is infused with therapeutic aims. Risk thinking as it is deployed in child protection assessment is closer to Lorna Weir's notion of 'clinical risk' where the individualising gaze of the social worker has not been wholly displaced by calculations based on abstract factors statistically derived from populations (Weir, 1996).

The notion of 'risk' in child protection therefore refers to the identification of family 'dynamics' and 'behaviours', which are known to be indicators of future harm for children. At the same time the notion of risk refers to the prevalence of uncertainty and unpredictability. Clearly however the very notion of calculation in relation to 'populations' of risk is distinctly inappropriate to the practices of child protection. Commentators have argued that the indeterminacy of the cause of child abuse means that it is not possible to determine 'factors' that are not more generally present in the population (Cleaver et al, 1999). For this reason, it is argued there has been a general rejection of an actuarial approach to risk assessment (Dalglish, 1997). Such arguments imply that were a more complete knowledge available of the causes of abuse, it would be possible to identify precipitating factors and characteristics. They fail to explicate however the way in which populations of risk are actively constituted through the practices of investigation, registration and assessment. While there is no conspicuous pre-existing population - no undisputed group of abusers who could be sampled - in practice the population which is objectified by child protection practices are those already practised upon and subject to the multi-disciplinary gaze of social workers, health visitors, doctors, teachers, drug workers etcetera. As I will argue in relation to the interviews, there is a re-cycling of the already 'known' population who



by default constitute a population of risk. It therefore becomes more difficult to associate risk with those who are not already the subjects of professional concern.<sup>6</sup>

Further- as was also demonstrated by the events of Cleveland - the very act of investigation and assessment in child protection posits a candidate status that is in itself stigmatising. Through the discourse of rights and the claim to family self-determination, membership of such a population can be resisted, even refused, in a way that other populations subject to risk assessment cannot. The practices of risk assessment in child protection are thus distinctively productive, and flexible in their making and un-making up of risky subjects (Hacking, 1986).

## **ii. The Justification of Risk: Collecting Evidence of Reasonable Suspicion.**

As I have said part of the history of the commissioning of the guide was a concern on the part of the Social Services Inspectorate that social work resources were not being used efficiently, coupled with the need for parents' rights to be respected. Respecting the privacy of the family provides a problem for **how** knowledge of the family is to be acquired. A systematic approach to assessment and attention to methodology provide warrant for the intervention that it both constitutes and which may ensue as a consequence of the assessment. The guide states that:

agencies should be careful not to invade the privacy of the family *without reasonable suspicion or evidence* that parents are harming, abusing or failing to protect the child or are unwilling or unable to meet the child's basic needs (ibid: 10).

The interrogative approach of the guide and the social worker's observation of the family are designed as techniques for acquiring 'evidence' with 'reasonable suspicion' providing the rationale for intervention into the family. Schofield and Thoburn make the point that the contemporary concern for finding evidence of abuse is a positive attempt to avoid comparing parents with an idealised 'normal' or even 'good enough' parent (Schofield and Thoburn, 1996). In my view however, the identification of evidence of risk or pathology can only be posited in relation to a tacit

---

<sup>6</sup> So for example Beatrice Campbell argued that the identification of sexual abuse in Middlesbrough during the Cleveland affair, could be so readily refuted and campaigned against, in part because the children came from middle-class families, and were not the already visible 'usual suspects' of social work practices (Campbell, 1988).

model of normal family relations or what a normal family is not. Further, the question of what counts as evidence is itself not unproblematic.

What might constitute ‘evidence’ for the purpose of assessing risks requires a stance of objectivity vis a vis the family. The guide emphasises that a social worker should be able to:

investigate allegations or suspicions of abuse and *assess objectively*, both initially and comprehensively, the needs of the child and the family including the risks of abuse and the need for protection (ibid: 10)

The guide instructs the social worker in how such objectivity can be achieved. For example the social worker is encouraged to observe the family interacting together at stressful times:

A meeting in the home can provide useful opportunities to assess what happens when the family is together and it is important to try to see the family when under stress such as at mealtimes, bedtime or nappy changing when children may be difficult to manage (ibid: 22)

In carrying out observations in the home, the social worker must generate *signs* of the underlying condition of family life based on standardised questions. As the following quotation demonstrates, in order for such signs to be considered as evidence they must be *representative* of family life:

It will be important for the social worker to spend time working directly with the family on a number of occasions, thus avoiding the risk of observation occurring by chance under unfavourable circumstances (ibid: 32).

Repeated observation of interaction in the home therefore provides a method for arriving at a sound judgement, one could say a ‘verdict’ on family life, which becomes a basis for action.

As I have said, for judgements *to be seen* to be merited, it is important they are based on ‘evidence’, in this case in the form of documented observations:



the social workers should note information on how the child normally looks from their point of view i.e. clean, tidy, grubby, smelly, unkempt, inappropriate clothing etc. The number of observations on which this is based should also be noted. Judgements should be backed up with a detailed description to show how they were arrived at (ibid: 35)

Attention to systematic observation and documentation apparently lends authority to claims and observations. The language in this extract betrays a legalistic interrogation of the foundation of social work judgement in which it is necessary for any intervention in the family to be seen to have been merited. The social worker is asked to imagine that she will be called to account for the quantity and quality of his/her observations. The above instruction effectively provides a means of separating the subjective act of seeing/knowing and the production of 'facts' about a child. The social worker following the guide is thus tutored in the arts of working up the objectivity of his/her textual accounts (Smith, 1990b)

Faith in the possibility of objectivity in the guide is combined with an understanding of ideas about child-care as bound to the class, culture and ethnicity of the social worker. In order to remain objective the social worker is required to actively suspend his/her own beliefs, so for example social workers must:

ensure that their own values and prejudices do not detract from their professional objectivity (ibid: 10)

The understanding of ideas about child care as culturally bound is, as it were intended to control for culture as a source of bias on the part of the social worker. Citing British Association of Social Work Guidelines, the guide states that social work judgements cannot be independent of the social worker's cultural, ethnic and social class values. The guide encourages a 'balancing' of cultural sensitivity with child protection, asking that social workers

incorporate a cultural perspective *but guard against being over sensitive to cultural issues* at the expense of promoting the safety and well-being of the child (ibid: 13, my emphasis)

The principle would seem to be that taking culture into account can only go so far before an absolute judgement of the 'safety and well-being of the child' takes over.

Social workers are thus invited to make allowances for differences in cultural understandings and traditions of child care to the extent to which *in their judgement*, the child's well being is not endangered. At this point an absolute judgement of child welfare is required and the social worker's culture, ethnicity and class, which might have influenced a more marginal decision, are no longer relevant. The nature of objectivity required by the guide therefore calls for reflection on the cultural/class/ethnic basis for decision-making at some times, and at others (presumably when the risks 'speak for themselves'), to make a judgement. The relationship of the individual practitioner to his/her own authority is thus complicated by the need for a degree of cultural relativism and respect for the rights of parents.

### **iii. The Statutory Shadow**

As I have indicated the guide draws upon a range of concepts and principles drawn from a hybrid of both psy disciplines (psychoanalysis, developmental psychology, systems theory) and common sense knowledge of signs and patterns of behaviour and dynamics within families. The social worker is encouraged to solicit the family's engagement and co-operation and the guide suggests that the family will find the assessment process therapeutic. The focus of the guide is the unique individual subject for whom the assessment will be 'specifically tailored'. However, as important as the bases of knowledge is the authority with which techniques of assessment and judgement are made. The assessment has a statutory purpose, its possible outcome, the removal of children from their family.

While the stated purpose of the assessment is the prediction of risk rather than the determination of past abuse, the juridical language of 'evidence' and 'reasonable suspicion' cast the social worker in the role of detective. But while police and lawyers have access only to material traces of past action, social work knowledge provides a means of interpreting hidden motives and unconscious desires, and thus of forecasting its subject's potential for change. The guide emphasises that signs of risk may be deliberately concealed from the social worker. The conduct and potential of parents must be made calculable in terms of a gaze that is capable of seeing through and beyond appearances in order to understand real and underlying motives. This is a gaze moreover that the family is encouraged to adopt in order to assess itself. In the



shadow of statutory procedure, a family's *co-operation* involves its enlistment in the assessment of risk.

While the assessment constitutes sets of judgements which are otherwise unavailable to professionals from other disciplines, in order to be authoritative social work knowledge must be presented in terms in which other professionals and in particular lawyers and magistrates will find adequate. The need for a forensic attitude is for example emphasised in the statement that the resulting assessment may be the basis on which judgements are made:

The format for undertaking a comprehensive assessment described in the guide may be of value in assisting the court or children's hearing to understand the family circumstances and therefore contribute to informed judgements on the child's future. (ibid: 15)

This quotation claims the particular contribution of social work skills in the preparation of the assessment to be 'understanding the family circumstances', but in order to be the basis of legal judgements, the assessment must be presented in a format which will be both comprehensible and adequate for a court. The guide states in addition that social workers' skills should include the ability to:

record carefully and be able to prepare thorough and objective reports, *to be used not only in the case conference and the court*, but as the basis for longer term decision-making. (ibid: 10, my emphasis)

The assessment is thus designed as an official statement of risk which must be understandable outside social work circles, and which may play a part in civil and criminal proceedings. The guide works to render social work knowledge amenable to legal and judicial process in the claims of 'psy' knowledge to see beyond appearances and in the means by which such knowledge is made intelligible.

#### **iv. The Normal Family**

The focus of the assessing gaze is the practices and behaviour of an individual family. Questions are listed for parents about mealtimes and diet; bedtimes and where a child sleeps; frequency of nappy changes and bathing. The accumulation of data on the quotidian practices of the family does not automatically provide a judgement on

the family (Hallet and Birchall, 1992) but does provide a stable visibility to be collected in the assessment dossier. It is on the basis of the responses to these questions as well as the social worker's observations that judgements on the family can be made. As Parton et al argue:

The minute observation of child/adult interactions and the detailed inspection of domestic conditions predicated upon child protection risk assessment procedures have a limitless potential clientele. In every family there is always room for improvement (Parton et al, 1997:52).

It is the routine care of children- everyday family life captured by the social worker at specific moments - that is put under the social work microscope and examined in terms of an unspecified set of criteria. In practice although the clientele may be limitless, the assessed population is limited to those made visible by social work practices. The gaze of the guide is one that seeks out pathological features; the normal is thus undefined, but assumed. It operates as a residual category. This can be seen in the scrutinising of the couple relationship for pathological features. Questions are asked for example on the length of the relationship and previous relationships:

Are you currently married? If so, to whom and for how long?  
Who are you currently living with? How long has this relationship lasted?  
Have either of you been married (or lived with someone) before. If so, how many times? When? For how long?  
What was each marriage or cohabitation like and why did it end?  
How did you feel about the end of this relationship? (Ibid: 57 questions 99-101c)

The rationale for these questions is given in the preamble in the following way:

It will be important to explore past relationships in order to determine repetitive patterns of behaviour. A succession of brief cohabitations, for example, would suggest an inability to establish a deep and lasting relationship. There may also be 'unfinished business' from a past relationship surfacing and affecting the current one (ibid: 55)

No aspect of family life is immune from the interrogative gaze and calculating judgement of the assessment in which 'repetitive patterns of behaviour' thus identified provide a clue to predicting future behaviour, and 'a succession of brief cohabitations' becomes a possible sign of risk. The preferred conditions for the care of children - within a 'deep and lasting relationship' - posits sets of standards which are morally and certainly statistically abnormal, but against which a couple



relationship is implicitly judged. Similarly, questions are asked about the couple's sex life:

How would you describe your sex life?  
Do you use any contraception?  
Do you plan to have more children? (Ibid: 58)

Assessment of families in order to arrive at a decision about the welfare of children provides a rationale for the unparalleled scrutiny and exacting judgement of the intimate details of family life to which parents must submit in order to be considered capable of 'working with' social workers.

Parents are not only assessed however on their own relationship, the day to day care they provide their children and their ability to cope with but in addition upon their capacity to assess themselves:

An ability to see oneself and one's strengths and weaknesses *realistically* would seem to suggest a person who has some control over his or her life and some energy to work on areas of change' (ibid: 50, my emphasis)

The social worker must not only observe the parent but also judge whether the parent's self-assessment is 'realistic' or not; in other words whether she evinces 'insight'. It is such 'techniques of the self', through which individuals are tutored to govern themselves and upon which advanced liberal government depends (Rose 1990). While social work practices work to foster the autonomy of the family, it is almost as if families have to earn their entitlement to that autonomy by taking on the social work language of 'realistic' self assessment and insight. In order to demonstrate potential for change for example, a parent needs to be able to show that she is ready to embrace the social worker's version of her situation. The deployment of such techniques renders the self observable, predictable and measurable for the purposes of the assessment, and as such they provide warrantable evidence.

The presentation of social work judgements in such an objective style lends authority to the assessment itself and to social work knowledge more generally. The systematic approach to the production of facticity - a scientific attitude and method for the separation of the observation from the observed - provides a scientific

legitimation for the breaching of the private realm of the family in which relations between children and parents, between parents, and even a parent's relationship with herself is subject to a close and detailed scrutiny. The methodological attention to evidence could be said to service legal processes, providing information in a form that can be the basis for legal decisions. It is through such attention to methodology that the family is made measurable and through which risks can be identified.

#### **v. Looking Beyond Appearances**

However, the gaze does not provide simple mechanisms for identifying risk. Social workers are invited to see families in terms of *types* of relationships, dynamics and conduct where such factors may be at play. For example, the guide sketches a typical scenario of the non-abusing female partner who, while aware of abuse taking place, has failed to protect the child from her male partner, typically not the father of her children. The typical abuser is characterised as a kind with whom social workers will already be familiar:

Practitioners will be aware of the characteristics of the seriously immature personality which craves immediate gratification, has low tolerance, makes superficial relationships and has little concern for others' (ibid: 12).

Such a 'personality' is further described as 'manipulative', and 'plausible', implying that it is the work of the assessment to *see through* the immediate appearance of plausibility. There is a suggestion that no appearance can be taken at its face value, so that even plausibility may be a sign of danger for a child. The guide thus provides a schema for judgement by typification of behaviours rather than single unequivocal risk factors. Signs are apparently always equivocal. For example it is stated following Dale that social workers should be on their guard with a parent who appears to be non-aggressive:

Dale suggests that the aggressive person has learned how far he can go with his aggression and therefore has established some control. He suggests that it is the quiet, over-inhibited person with a serious personality disorder whose dangerousness, in terms of exhibiting unexpected violence, is often unrecognised until too late (ibid: 12)

In this formulation the apparently quiet and non-aggressive parent may actually be *more* dangerous than the aggressive parent. The social worker is thus invited to avoid a face-value interpretation of conduct. In other cases the guide uses concepts from



therapeutic social work discourse such as ‘denial’ to provide a rationale for social workers to distrust the content of a parents’ responses to questions as in the following example:

Practitioners should be alert, [] to parents who firmly deny memories of early childhood experiences or in contrast present an idealised picture of their own parents that is totally at variance with the evidence (ibid: 49).

In this extract the social worker is put in the role of arbiter of truth in relation to an authorised version of a parent’s past. Positing denial becomes a device by which the social worker can as it were, ‘see beyond’ what is said to a more real state of affairs.

While the guide instructs the social worker that there are no unequivocal factors that on their own indicate risk for a child, it also directs the social worker in how to observe and interpret extremes. For example the guide states that it is important to gain the co-operation of a family in order to carry out the assessment successfully. The extent to which a parent is willing to co-operate with a social worker - or inversely is hostile to social work intervention - it is stated, *can be taken*, as a sign:

They may show hostility or aggression or alternatively may appear over-co-operative, passive or submissive. Such behaviour is often the means by which a family demonstrates its resistance to change (ibid: 23)

While a family needs to be co-operative with social workers, and hostility on the part of parents may pose a risk to children, it appears that it is possible for parents to be *too* co-operative indicating a different kind of risk for a child. Social workers are thus guided to make interpretations in relation to broad parameters of what can be considered typical. The guide states: ‘There is no clear pattern of characteristics that can be attributed to the abused child’ (34) and provides a range of widely variant signs:

Some children appear passive, withdrawn and sometimes protective of their parents. Such children often have poor confidence and self-esteem and are sorrowful in demeanour. Other children act out more, have temper outbursts, and are generally aggressive and defiant (ibid: 34)

Similarly, in observing the physical conditions of a home the social worker is asked to look out for the over-neat home - ‘suggesting obsession with cleanliness and routine’

- as well as the obviously unhygienic, dirty one. Acts of behaviour and personality characteristics observed by the social worker are thus never *categorically* identified in the guide as indicative of either abuser or abused; it is conduct or circumstances at either end of continuum (too neat or too dirty, too unco-operative or too compliant), which suggest cause for concern. Abnormality and therefore possible riskiness are to be found in the extremes of behaviour.

As I have said, the guide suggests that social workers interpret parents' responses to questions about their children in terms of a typical dynamic of abusing parent and abused child. The social worker is encouraged not to attend solely to the content of responses:

Care should also be taken not to focus only on the content of responses and thereby miss valuable insights into interactions within the family and between the family and the social worker and other professionals (ibid: 27)

In some cases then it is the manner in which parents respond to questions rather than the content of their response that is considered significant. In the following extract a typical way in which abusive parents talk about their children is presented:

With regard to the younger child, abusing parents often refer to feeding, sleeping and toilet-training problems. A particularly common feature is the complaint of a constantly crying, inconsolable infant (ibid: 34)

Here the guide draws the social worker's attention to the 'speech act' (Austin, 1962) of complaint as much as to the content of what is said. The social worker is expected to bracket the possibility that a child may in fact be constantly crying and inconsolable and that the complaint may be well-founded. Similarly, the guide states that assessment meetings should be arranged elsewhere as well as taking place in the home.

Sessions away from the home not only provide an opportunity for the family and workers to undertake planned work without distractions but also test the family's motivation to attend (ibid: 22).

Parents who manage to keep these appointments demonstrate to the social worker that they are 'motivated' to change, while non-appearance demonstrates a lack of



motivation to demonstrate their ability and willingness to care for their child/ren. Similarly a parent's vehement wish to prevent children being looked after by a local authority can be understood as a type of parent who is more interested in 'winning a game' with the authority, than in the welfare of their children. Such programmatic scepticism refuses to accept the integrity of the speakers' purpose and intent. The social worker is instructed to seek out the concealed and underlying motives, thus rendering visible the unconscious intent of the irredeemable parent.

## **vi Conclusion**

The guide thus provides no simple indicators of risk but a perceptual grid for observing and inscribing clusters and continua of behaviour. This is a gaze that is distrustful and sceptical, which must always look beyond appearances to underlying motives wherein risks lie. At the same time it is a gaze that is vigilant as to its own authority, which must always produce warrant, rationale, evidence for judgement and action. This is thus not an actuarial approach to risk but thinking in terms of multiple vectors of risk. As a schema for social work action it provides little security in an area of work fraught with uncertainty.

### **Section 3. Analysis of the Social work Interviews**

#### **i. "At Every Stage" Asking the Risk Question**

While the guide represents formal techniques for assessing risks, interviews with social workers in which they discuss their work show that the attitude and vocabulary of risk-assessment has permeated child protection work more generally.

Social Worker 1, a duty manager described three points at which risks are assessed:

- 1.SW1: Risk assessment is done in three ways really. It's done in discussion
- 2.with your colleagues, the child protection co-ordinator and the police. It's
- 3.done slightly wider in consultation with those people plus the professionals
- 4.out there which tend to be, if the child is under four, with health visitors, if
- 5.the child is under a month it's the midwives and if the child is over four and
- 6.in school then the schools so that, that's a type of risk assessment, we take
- 7.information and we decide the next bit of it
- 8.PR: before you've actually met them
- 9.SW1: yeah, yeah, so I would argue that's a risk assessment, I would argue
- 10.PR: right, right
- 11.SW1: and the other, 'cos the other risk assessment is when you actually go
- 12.and visit people, you send people down and say 'I now need to go and see
- 13.this family', and say 'look these are the worries, this is what the network is
- 14.saying', and people got as far as doing that, just going to see for ourselves,
- 15.that's a risk assessment and then the other risk assessment is the longer
- 16.more considered risk assessment is when a case is taken on by someone, so,



17. you know, you've been involved with them to get a fuller picture of it, and
18. the word that's used a lot now which means nothing really [] is the word
19. comprehensive assessment

From this account the three points at which risks are assessed are: i. the point of initial referral which usually means a phone call into the office ii. the point when a family is visited as part of a child protection investigation, and iii. the undertaking of a Comprehensive Assessment. SW2 described the concern for risk :

'SW2: at every stage you are asking yourself the level of risk'

This would suggest that risk assessment is not limited to the comprehensive assessment but dispersed as an attitude in child protection procedures more generally. I am arguing that social workers' accounts of child protection work are characterised by risk-thinking. This is not intended to refer to internal cognitive processes but to an orientation to the logic of managing risks. I will examine what counts as risks in social work accounts and how they describe the bases for making decisions about risk.

## **ii. The "Known Family" and Circuits of Data**

In the interviews I asked social workers to describe the procedures they follow from the point of referral. The initial decision as to whether a case should be responded to as 'child protection' requires judgements about whether a case sounds like it may be understood as 'high risk'. These initial judgements are highly consequential for how the case is pursued (Wattam, 1992) and are often made without actually seeing the family but on the basis of existing information about a family and discussions with other professionals as in the following account:

1. SW3: on duty we always do checks, so first of all you try and clarify from
2. the referral and you do checks. First of all you look up the file to see if the
3. file's known to see if there's a history, secondly you would look up the
4. computer system, to see if the address or the names are known there, thirdly
5. you would ring up our people who keep the register to see what they know,
6. then you ring up the NSPCC register to see whether the child's known to
7. them or any of the siblings, then you'd ring up the police and do a police
8. check and ask them if any thing is known about that, and talk about what the
9. referral is, the police child protection referral that is not the local police, and
10. what you intend to do and what they'll want to know once they get
11. involved. So you do the checks and any other ones, teachers, health
12. visitors, doctors, probation officers - any other significant person that you
13. know to do, at that level you put a report back to your team-manager and
14. then you decide on the level of action to take



The first three checks described are related to information about previous contact between social services and the family, intended to exclude the possibility that a child is not already in some way in the 'system', that no duplication of service to a family takes place and to find out what existing documentation might exist about past contact with the family. The concept of the 'known' family is key in the way in which decisions about risks are made. The previously 'known' are apparently more readily knowable. A child protection co-ordinator described this tautology in the following way in discussing families on the child protection register:

- 1.SW4: A lot of the cases are previously known to the department. It's rare
- 2.that you get a referral of a case that you have never seen before. Neglect
- 3.cases are the ones most previously referred, where there have been patterns
- 4.of previous concern with what used to be called problem families, but sexual
- 5.abuse is more likely to come out of the blue

The concept of the 'previously known' case (line 1) is thus linked by this social work manager to the registration category of Neglect (line 2), glossing a family about whom there have been diverse concerns and action over several years, the facts of which have been chronicled in case files. Multiple contacts axiomatically signal a risk. Again the complex process whereby 'previous concern' emerge drop away and families who have already been made visible are necessarily rendered more risky.

The process of checking existing sources of information can itself generate signs as can be seen in the following interview extract:

- 1.PR: right, and what would be, what does it mean activating the child
- 2.protection procedures?
- 3.SW5: right, it means that it would be entered onto the computer
- 4.system that there's a child protection referral for one, so that if the family
- 5.comes to anyone's attention in the future that information's there on the
- 6.computer record. It would also mean alerting the child protection register
- 7.because we wouldn't, in an informal check we wouldn't talk to the child
- 8.protection register
- 9.PR: mmh
- 10.SW5: and that can be an important trigger because if three inquiries are
- 11.made to the child protection register then the register automatically informs
- 12.the social services office of that so that you can see that a number of people
- 13.have had concerns over a period of time and that in itself is important
- 14.information to have

This account describes how the process of checking the register is self-authorising so that the third inquiry about a family to the child protection register is automatically



fed back to social work managers (lines 10-13). The check of the register, whether or not it is warranted, is thus deemed to mark a critical level of concern and itself constitutes an index of risk. The practices of reading, writing/inputting and activating are thus central to the process whereby knowledge about families becomes stabilised and through which notions of risk are generated.

The routine administrative work of writing-up files plays an interesting part in how individual social workers' knowledge of a family becomes generalised through a department. The division of social work into duty and assessment and support tasks means that social workers get involved in cases at different points i.e. either on duty, or when they are allocated a case after a child protection conference. Often the crucial decision about the risks involved had taken place before the social workers I interviewed had been involved with the family. This did not present a problem however in their ability to account the event and decisions that had taken place. The real time action becomes irrelevant to the history of this account. The textual/virtual organisation of social work means that the grounds for intervention can be assumed (Smith, 1990b). Practices are anonymised through documentation so that any social worker can understand and make sense of a family via the file at any time in the future. In this sense, when they are making judgements in relation to risks, social workers are for much of the time knowledge workers and moreover, the basis for their decisions are textual rather than knowledge of individual family with whom they have developed a relationship. Once inscribed in the internal circuit of data, the precipitating events and processes whereby previous decisions have been made, disappear, leaving behind mobile traces of facticity (Latour, 1986) which provide warrant for a level of 'concern', an initial screen for 'high risk'. We are reminded of Woolgar and Latour's assertion cited in Chapter II that 'The result of the construction of a fact is that it appears unconstructed by anyone' (Latour and Woolgar, 1979: 240).

### **iii Rule of Thumb**

The circuit of information is wider than the social services department. The fifth kind of check described by SW2 in his account of initial checks that are made, was with other professionals. This interview extract suggests that in order for a case to be considered in terms of child protection, a threshold of riskiness will have been reached in terms of previous knowledge about a family, which is then elaborated in



preliminary discussion with other professionals involved. As has been described, the family is not made knowable through one disciplinary regime but several so that there is a spatial distribution of gaze amongst professionals given an all seeing, panoptic effect in the social work investigation. The sharing of knowledge in multi-disciplinary working has been emphasised since Cleveland, as central to child protection work. Multi-disciplinary working is institutionalised in child protection procedures and realised for example in social workers' conversations with teachers, health visitors, and GPs after receiving a referral. Professionals including the police child protection team are presumed to share a common idiom of child protection concern and knowledge of what might constitute 'high risk'.

Indeed research shows that child protection referrals coming from other professionals are taken more seriously than from members of the public (Cleaver and Freeman, 1995). The following interview extract illustrates how the initial source of the referral and status of the referrer can be significant in terms of the decisions made about risks:

1. SW6: the children's hospital phoned us up and they said we've got a tiny
2. baby here, an eight week old baby with a broken arm. We're just looking at
3. the x-rays now and if we think it's non-accidental you'll need to come and
4. investigate. So that went to the duty senior and then it went to a social work
5. manager and it was very quickly clear that this was a child protection
6. referral. So there was risk of significant harm to this child
7. PR: it became clear it was a child protection referral once you, it was
8. established that the hospital said
9. SW6: yeah, yeah,
10. PR: that's what you mean when you say 'it became clear'?
11. SW6: umm
12. PR: or had you also interviewed the /parents
13. SW6: / no we hadn't interviewed the
14. parents at that time it was that, it was quite clear that that we were saying
15. right from the word go 'child protection referral'
16. PR: because of
17. SW6: because of what I'm saying, because of the risk to the child, the need
18. for immediate protection, umm the hospital opinion that it's a non-
19. accidental injury whilst in the care of the parents and that, that a baby of
20. that age umm wouldn't have had that kind of injury accidentally and that
21. it's a very serious injury, it's not one about umm is this bruise from a really
22. hard slap or just from a cuff, you know it's a very serious injury to a small
23. child.

While the calculation of risk is made problematic by its non-specificity and lack of



unequivocal indicators, in this account clinical opinion based on an x-ray of a broken arm in a baby provided adequate evidence on which basis the social worker was able to proceed with the case as ‘high risk’, warranting the immediate implementation of formal child protection procedures (lines 5-6). It is clear from social workers’ accounts that their work often entails the identification of marks on children who are then referred for medical examination. Social workers are therefore continually engaged in the generation of potential medical diagnoses. Since medical opinion is rarely able to state unequivocally that a mark is characteristic of abuse, an expression of concern from a hospital represents very strong grounds for action. In this extract, the authoritative voice of medical expertise, the nature and severity of the injury and the age of the child combined to signal determinate indicators of abuse and grounds for the implementation of child protection procedures.

A duty manager described what he called a ‘rule of thumb’ for making a decision about whether a referral should be acted upon immediately:

1. SW7: .. so, the rule of thumb is that if children have been hit and there’s
2. bruises, and it depends on the age, but the younger they are the more worried
3. you would get, you would tend to be going to do home visits with a lot of
4. that stuff, umm if there are general worries, and people are saying ‘these
5. children aren’t really coping’ that we would tend to be/ we’ll talk to an
6. expert and see what they have to say

This ‘rule of thumb’ corresponds with SW6’s account of ‘high risk’ in the case described above. In addition to existing information about a family stabilised within files and data bases, the age of the child, the existence of physical evidence (supported by an x-ray) and the status of the referrer are clearly all important in making an initial decision about risk. These factors could be said to operate like abstract risk indicators in terms of the kind of response they predicate. As described however the status conferred on families through child protection practices means that apparently stable indicators of risk – based as they are on the interpretation of evidence - become contested, negotiable and subject to challenge. As was discussed in Chapter IV even medical evidence is not immune from challenge by other clinicians. SW6 described how in the case of the baby about whom she had received a call from the hospital, the self-evidently ‘high-risk’ character of the injury and ‘high risk’ response to it was called into question when another doctor discharged the child into his parents car:



- 1.PR: /so the baby went home with the parents or was it kept
- 2.in hospital?
- 3.SW6: that was a really messed up thing I think, the person who saw the baby
- 4.and saw the x-ray and said this is non-accidental umm said the baby should
- 5.stay in hospital until the
- 6.PR: was that the paediatrician?
- 7.SW6: that was the paediatrician, and her boss the next day said that as well
- 8.but in the mean time an orthopaedic registrar which is a bone specialist saw
- 9.the baby in the presence of the parents and said 'oh this baby's fine she can
- 10.go home'. And so this orthopaedic registrar discharged the baby home to
- 11.the parents and at that time there were no paediatricians umm available to
- 12.prevent that happening and the next day umm the, or the paediatrics
- 13.department, some very, very senior paediatricians were umm very upset
- 14.that the baby had been allowed to go home

In this account the agonistic power of the inscriptive device (Latour, 1986) is emphasised by the social worker who describes the 'non-accidental injury' diagnosis as made by the paediatrician on the basis of seeing the x-ray (lines 4-5). Although it is not clear from the account, it is unlikely that the orthopaedic registrar was aware of the suspicion of the non-accidental character of the injury, since it seems that the decision to discharge him/her was based on an examination of the child carried out in the presence of the parents. The effect of the orthopaedic registrar's decision however was to throw into question the factual status of the paediatric diagnosis which had been the basis for the high risk response. The account describes how differences in medical opinion are built into local authority procedures: the social worker described referring to a departmental manual in which it was specified that the opinion of the paediatrician should overrule that of the orthopaedic specialist<sup>6</sup>.

Broad 'rule of thumb' categories exist which make some social work decisions regarding risk less equivocal than others. These are a combination of the uncontestable categories of the age of the child and the existence of clinical certainty based especially on materially verifiable evidence. As discussed in Chapter IV, physical injury resulting in broken bones can be verified through an x-ray whereas other diagnoses such as RAD for example as an indicator of sexual abuse has no accompanying material trace and is therefore less stable and more contestable as a diagnosis. The account given by SW6 demonstrates however that at times even a

---

<sup>6</sup> Here medical hierarchy could also have played a part in the agonistic contest since the opinion of a senior paediatrician conflicted with an (more junior) orthopaedic registrar.



distinctive, established indicator of risk which is corroborated by physical evidence can be called into question whether as a result of a lack of communication or a difference of clinical opinion between medical practitioners. Unlike the field of laboratory science described by Woolgar and Latour (Woolgar and Latour, 1979) in child protection clinical agreement and disagreement between practitioners cannot be allowed to range freely according to haphazard circumstance and fiat. Indeed in this field the agonistic process is anticipated and regulated through local authority procedure. Furthermore even medical diagnoses indicating child maltreatment can never be reduced totally to clinical decisions. Such diagnoses are necessarily ethical in character since they make-up carers in terms of stigmatising categories of abuse, challenge their abilities to look after children and herald statutory intervention into the family thus breaching its notional autonomy. If risk categories are beset with such uncertainty for practitioners with the status and authority of doctors who have at their disposal the possibility of marshalling physical evidence to support their diagnoses, how much more difficult such decision-making must be for social workers whose work involves looking for risks in the social work visit.

#### **iv. Seeing Risks in the Social Work Visit**

In the case described by SW6 the critical decisions concerning risks had already been taken by doctors before the social worker visited the family herself. In other cases however social workers described visits to a family following a referral which were critical for decisions about risk. It is at this point that the family is subject to the scrutinising social work gaze. In their descriptions of cases which had involved child protection concerns, social workers described a process of detecting and diagnosing signs and indicators rather than making interpretations of risk. In other words they do not understand their work as interpretive. In the accounts social workers describe unproblematically 'seeing' signs of risk in their contact with families. What is it then that they see? Although the social workers I interviewed presented this work as practical and self-evident I am not taking this objectivism for granted. Mechanisms for presenting practice as the only possible course of action are, in my view intrinsic to the production of warrantable accounts. Accounts of 'seeing' signs of abuse and finding facts are thus analysable as an explication of the social work gaze which is characterised by risk-thinking. This was demonstrated in the

---



following interview with a social worker who described a case referred to the children and family social work team by an adult mental health social worker:

1.SW8: The scenario was a Bangladeshi family being worked with by a  
2.mental health team on the basis of the mother's mental health. She was  
3.woman in her mid-twenties. She's been suffering mental health problems  
4.around post-natal depression for perhaps four of five years, and the case was  
5.known to them and the mental health team had been working with the  
6.family, but never approached us with any concerns around the impact of that  
7.situation of her two children. We got a call from a mental health worker  
8.following a visit that she'd made on a Wednesday about two weeks ago  
9.presenting to us in a way that she thought this was something we ought to be  
10.investigating, not as a child protection matter, she thought that there might  
11.be an impact on the family and on the children, so on that basis we didn't  
12.respond to it as a high profile child protection as we would  
13.PR: as an investigation  
14.SW8: but we said, perhaps we ought to see what's going on, so we  
15.arranged to do that the next day. So the duty worker and an interpreter  
16.went to see the situation and were absolutely appalled to see the physical  
17.situation, the mother was unable to sort of discuss or relate to any thing that  
18.was going on in, and the children were unclean, hadn't been fed, there was  
19.no food in the house, erm and we were just, the workers came back, really  
20.how could, you know, another professional, refer the situation twenty four  
21.hours ago that didn't excite her concern, the only possible explanation was  
22.this woman had had a major deterioration in twenty four hours

Although the social worker acknowledges that the condition of the mother may have radically worsened since the mental health social worker visited, the extract suggests that the child care social worker and adult mental health social worker were adopting distinct gazes with which they could 'see' the signs of impending crisis in their respective domains of knowledge. For the child care social workers for whom the focus was the children, the risks to them were self-evident, and moreover necessitated immediate action. The mother with whom social workers could not communicate, the dirty, unfed children and the lack of food in the house constituted adequate evidence to warrant the immediate removal of the children. Social workers were thus acting on visible, exterior signs that indicated the mother's inability to 'cope'. In this account the social worker is presented as responding almost commonsensically to the self-evident risks posed to the children rather than interpreting equivocal signs of risks.

In the following account a children and family social worker similarly presents her response as the only one she could have possibly had, on seeing a two year old child with a burn mark on her arm.

1. SW9: it was staring at me, how could I have not noticed on a two year old
2. child you see something like that and of course you pick up, so then it umm,
3. it went, well throughout the investigation

Although SW9 seems to appeal to common-sense knowledge in her rhetorical question, it is a knowledge grounded in the 'rule of thumb' described above, relating to the age of the child and the existence of the physical sign of a burn. The question 'how could I have not noticed?' (line 1), refers not to the social worker as any bystander but rather asks how could any one with my professional sensibilities and knowledge not notice such a mark and consider it to be possible evidence of harm? The social worker's concerns are therefore framed as basic to any child care social worker. As I have described however, what counts as a physical sign of risk can be open to differing expert interpretations. In this case medical examination confirmed a mark consistent with a burn but the question of how and when the burn occurred remained uncertain. The response to such uncertainty is to subject the family to a comprehensive assessment of risk rather than to focus on the specific mark. Lack of



certain evidence therefore by no means dispel risks, but provides the rationale for ongoing calculation and supervision of risks.

#### v. Risky Contexts and Warranted Action

In the extracts discussed so far in this chapter physical evidence provided initial grounds for risk decisions. The social work gaze is thus focused in these accounts on the exterior of the child. And as I have described, physical signs of abuse are more readily visible and authoritatively verifiable than are signs of sexual or for that matter neglect or emotional abuse. Social workers also described cases where the family 'context' was considered risky, independent of any concrete risks relating to the child. In the following extract, the social worker provides an example of a situation where there is an **absence** of visible evidence of actual, present harm to the child but where the none the less the 'context' indicated adequate risk for the child's name to be placed on the child protection register for 'physical abuse':

- 1.SW10:well we had two referrals, one from a maternity unit social worker
- 2.saying this young couple have umm, the mother had just had a baby boy, she
- 3.professed to be a heroin user, and there were blood samples indicated some
- 4.opiates still in the blood stream, none in baby but baby was admitted to the
- 5.special care baby unit because it had respiratory problems but later
- 6.discharged so the maternity unit just sent us a letter saying you need to be
- 7.aware this couple have moved into your area so we got that and on the same
- 8.day a referral from the police saying there'd been a domestic violence
- 9.incident the night before in which the couple were fighting and the baby was
- 10.sorry I didn't do the initial investigation, my colleague did the initial
- 11.investigation and then I picked it up just before we case-conferenced and at
- 12.the case-conference the child was registered re risk of physical injury
- 13.because of the violence. He remained on the register for about six months.
- 14.He came off the register
- 15.PR: so was there actual evidence that the child had been physically
- 16.harmed?
- 17.SW10: no the child had never been physically harmed there was no sign of
- 18.any bruising but the concern was what risk that this child would be exposed
- 19.to, if the parents continued in their violence

SW10 accounted for the registration of the risk of physical abuse as relating to the possibility of the child being caught up in the violence between the parents rather than any physical sign on the child (lines 16-18). Drug-using parents in combination with a report of domestic violence represent predictive indicators of risk, which are the basis for registration irrespective of the condition of the child. Both medical staff and police



are high status referrers so the coincidence of the police referral of the 'domestic violence incident' and the letter from the maternity hospital rendered the family highly visible as the subject of multiple professional concerns. Actual 'domestic violence' incidents - in which, paradoxically, until recently the police have been loathe to intervene- in addition to drug use provide 'context' which can warrant registration on the child protection register. It is clearly the combination and accumulation of these factors in combination with the age of the child and the involvement of other agencies which provide a critical mass of concern thus sanctioning a decision to place the child's name on the child protection register. Other cases were described where drug use alone were not adequate to merit registration:

1. SW8: I think and there has been a sea change in relation to the idea that
2. before, a certain would have been you know, the ideas of drug using
3. parents, their children would be registered fairly promptly, you would be
4. saying, well that would give us a way then to concentrate our mind on this
5. problem. We're less inclined to do that per se any longer in my experience.
6. What we are you know keen to establish is what the connection is between
7. their parenting, the supervision of their children, what sort of life style are
8. the children exposed to by the parents behaviour, and to try and focus,
9. because it seems like a more workable way of saying to parents 'can you see
10. the connections here?' rather than say 'look now you've got a conference
11. we're on your back, doesn't matter what's going on, now you have to deal
12. with us'

Drug-use alone may not therefore be adequate evidence of parents' inability to care for their children. The statement that the social worker's focus has to be on the implications of drug use for the children (lines 6-8) also expresses the sensitivity articulated by social workers in several interviews with the risk of unnecessary intervention, the discomfort with the role of moralising vis a vis parents' life styles and more positively, concern to be seen to respect the rights of parents to autonomy while at the same time working to protect the children. What is clear from this excerpt is that how risks are responded to has become increasingly circumspect and cautious. This is also illustrated in the following interview extract in which a social worker described working in partnership with a family where there had been concerns about the physical care of the children.



1.SW11: I think, you know, that sometimes people have to be up-front about  
2.the fact that the children go to school in dirty clothes or they're actually  
3.smelling because they haven't washed for several days, but you know you  
4.have to kind of confront that in a way that's going to have some kind of  
5.effect and not cause, you know, just an antagonistic response and [ ]  
6.sometimes in order for you to gain trust and respect, so over a period of  
7.time, things did improve

The issue of dirt, of dirty houses and dirty children features in several interviews accounts of child protection cases with which they had been involved, where dirt signals the possibility of the child protection register category of Neglect, or turns out to relate to Physical, Sexual or Emotional Abuse. As was seen in Protecting Children. A Guide to Social Workers Undertaking a Comprehensive Assessment, it is the extremes of dirt - too much or too little - that can be considered to signal risk. In the above account the context of dirty clothes and unwashed children was made relevant to the mother's problematic parenting, particularly her inability to adequately stimulate the children. Social workers described a strategy of earning the right to broach the sensitive issue of smelly children and dirty clothes. In the above interview account from which this extract is derived, this was achieved through developing a relationship of 'trust' with, and demonstrating 'respect' for the family. While concerned that intervention into the family is merited and warrantable, it is clear that intervention must also be strategic in terms of the results it delivers.

As I will describe in Chapter VI, the establishment of 'co-operation' between parents and social workers where families consent to social work intervention is preferred as a mechanism to manage the risks represented by drug use or dirt. The respect for the family as a private, self-governing institution organises descriptions of warrantable action. The strategy of 'working in partnership' is a pragmatic as much as it is ethical in that it arguably works to secure the continual supervision of risky contexts. While Dingwall et al's identification of a 'rule of optimism' speaks to the uncomfortable space occupied by social workers between the public and private, the rule operating in social worker decisions about child protection appears to be different. It is more like a 'rule of vigilance', of looking beyond the external appearance of circumstances, vigilance to the social work self, regarding how any intervention can be justified and vigilance to how intervention can best achieve



change. The social work gaze is therefore tentative at the same time as it is authoritative.

**(vi) The Co-operative Parent and Negotiation of Risks**

As I have described, it seems that despite the ways in which social workers describe the detection of evidence, at crucial moments the constitution of physical marks as evidence of risk is subject to negotiation. I will return to the case described by SW6 illustrate this point. The social work concern for co-operation from, and ‘partnership’ with parents can be seen to produce a therapeutic response to contested and competing versions of events. During the interview, prior to the extract cited, SW6 described the case conference that followed the baby’s discharge from the hospital. The paediatrician who had made the initial diagnosis marshalled expert evidence in order to support her view that the injury the child had suffered was ‘classically’ non-accidental. Other professionals also confirmed that there had been previous concerns about the parents’ ability to care for the older child, and that some of their behaviour such as leaving the baby in an adult size bath had been ‘silly’ and ‘risky’. The parents however continued to deny all knowledge of how the injury had taken place:

- 1.SW6: the parents at the case conference said we’ve been racking our brains
- 2.we don’t know how this injury happened but we didn’t do it, yes we are
- 3.struggling, yes we do have violence in our relationship, we do need help and
- 4.we don’t want the children’s names to go on a child protection register we
- 5.will not attend any family centre, we refuse to do that, we’re not , we are
- 6.happy to have a social worker or our health visitor visiting us at home, we
- 7.don’t mind two social workers, they named XX and myself to come in but
- 8.we won’t have anyone else and we’re particularly not having another person,
- 9.another social worker that they named, and we don’t mind people coming
- 10.and talking to us in our house and doing an assessment with us at home, but
- 11.we’re not going anywhere else, and you can come and you’ll see that we’re
- 12.good parents
- 13.PR: both parents saying that
- 14.SW6: both parents saying that yeah, and also at the case conference the
- 15.mum was ranting and raving, shouting and swearing and the dad was
- 16.saying every time ‘calm down, keep quiet, this isn’t the place, this isn’t the
- 17.time, these people’. That was about it. The decision of the case conference
- 18.was, you know, we’ll do what the parents want we won’t register, we
- 19.won’t ask for an expert assessment which we normally would, and we’ll
- 20.ask the health visitor and social worker, and it would be one of the social
- 21.workers that they named, XX or myself, to go and do an assessment with
- 22.them at home.



In this account the acknowledgement of 'risks' are not adequate grounds for statutory action, which is negotiated within the space of the child protection conference. The parents - who are experienced subjects of social services intervention and archetypally 'known' to the department - enable the short-circuiting of the information system described above, successfully avoiding registration. What may be critical in this decision is that the parents do agree with some of the professionals' assessment of them as struggling, and needing help (lines 2-3). As discussed above, Protecting Children. A Guide for Social Workers undertaking a Comprehensive Assessment finds parents who demonstrate knowledge of their failings more likely to be able to change:

An ability to see oneself and one's strengths and weaknesses realistically would seem to suggest a person who has some control over his or her life and some energy to work on areas of change... the extent to which parents continually resort to either denying their problems or blaming others for their predicament will be significant. If parents stick persistently to such mechanisms when faced with evidence to the contrary, this would suggest limited prospects for change. In contrast some movement towards reality gives grounds for hope (DoH, 1988: 50/51)

Although they deny knowledge of how the injury took place (line 2), in 'acknowledging' that they needed help, these parents may have been deemed by social workers to be moving towards a 'realistic' appraisal of their situation. Although for official purposes no 'risk' was registered, and the parents were able to some extent to determine the character of intervention and even who should carry it out, this was nevertheless contingent upon their submitting to a more extensive assessment in their home and the minute observation of their lives that would be entailed. The shadow of procedures was thus cast over the voluntary agreement. Registration of risk is therefore less significant than the surveillance that it enables. The parents do not therefore resist surveillance, which as I have said is a condition of non-registration, what they successfully resist is the category, or in Hacking's terms the 'kind' of parent who is made-up through their child's name being placed on the child protection register.

In the following extract, the management of risks through registration was significant in the legitimate access it afforded the social worker to the children:



1.SW12: it was a group of five siblings and a single parent and they'd  
2.obviously been known to social services for some time both to Authority,  
3.and other areas which they'd been to. They'd settled back in Authority, and  
4.came to this area in 1993. Previously two of the children had been registered  
5.and obviously, reading the file, there'd been a history of contact of mother  
6.and social services, and at that point it was Section 47 investigations where  
7.[ ] injuries to the children ... yeah physical injury and the children were  
8.registered for neglect at that point. It was only later  
9.PR: why would it be Neglect rather than physical injury?  
10.SW12: because it wasn't caused by Mother it was siblings, so more  
11.accidents really, because of lack of supervision, Neglect really  
12.PR: oh right, and how was that established that that had taken place?  
13.SW12: because the children themselves in the end told us what had  
14.happened. One of them was asleep and on one occasion the youngest child  
15.threw something that hit the boy. The child then went to school with his  
16.older brother and it was found out like that  
17.PR: so did the mother then ask for the children to be taken into voluntary  
18.accommodation?  
19.SW12: yeah she took them home at about the end of Month and then by the  
20.8th Month she asked for, she requested them to be brought back into care  
21.PR: after you'd discovered that the children were seeing this/  
22.SW12: /yeah, because I did a home visit during this period because one of  
23.the children was out of school, didn't have a school place and this man was  
24.looking after him so I asked him his details and who he was etcetera,  
25.etcetera, and then we visited with the police child protection team soon  
26.after that asking the mother for his details which she refused to give us. She  
27.actually never gave us them in the end. He actually came into the office and  
28.gave us his name and address and then when we checked out who he was,  
29.obviously his record dated back to the second world war, and the  
30.connection between him and the mum was an ex-boyfriend who this man  
31.had buggered ten years earlier and received a six year sentence for. This  
32.man had been introduced by mum's ex-boyfriend so that was the  
33.connection.

The initial concern which had occasioned a child protection investigation was a report from a school of a bruise on a child from this 'known' family. It was after the children had returned home from being accommodated in foster care with the mother's agreement (under Section 20 of the Children Act) that the social worker found the children in the care of a man who it subsequently transpired was a 'known paedophile'. The man's status as 'known' revealing previous convictions for sexual offences against minors, was thus not automatic or self-evident but required his active co-operation. Although there was not considered to be adequate evidence of sexual abuse to the children for a criminal prosecution, they were considered to have been exposed to at least the risk of sexual abuse. The apparently random social work visit



therefore uncovered information which shifted the focus of concern from neglect to sexual abuse and ultimately led to the children being taken into the care of the local authority. This account demonstrates the arbitrary, almost haphazard way in which risks can be uncovered. The social worker's visit and uncovering of information as to who was caring for the children was in a sense inevitable. However, the 'discovery' was key in that it suggested that the mother had concealed information from the social worker, and though not the perpetrator of harm herself, she had failed to protect her children from the risk of sexual abuse. Most importantly, she had sabotaged social workers attempts to work in partnership with the family. Such discoveries of otherwise concealed risks are made possible through the authorised, multi-disciplinary gaze attendant upon even voluntary contact with social services.

#### **(vii) Conclusion**

According to these social work accounts, although formal risk guidance techniques exist, the assessment of risk takes place at every point of contact with families in child protection social work. Techniques for ensuring that risks are uncovered are dispersed throughout social work practices at every stage. And it would seem that neither formal nor informal techniques can ensure that risks can be unequivocally identified. The chief aim of all such mechanisms is to make the family visible and knowable to social work practitioners. The procedures for keeping and updating data on families who have been the focus of child protection concerns ensures that they are never considered completely risk-free. A history of contact with the department provides legitimacy for further social work intervention. Multi-disciplinary sharing of information and checking of judgements through internal lines of management involves the deployment of 'rule of thumb' indicators of risk, at the same time providing accountability and sharing of responsibility for decisions taken. The strategy of soliciting the co-operation of families or working in 'partnership' provides a mechanism for ongoing supervision of families as well as warrant for further intervention. Managing risks through partnerships thereby contains a threat of compulsion.

## **Conclusions**

As I said in Chapter III my aim in this study is to analyse the discursive content of social work talk and the texts they use, and to make strange the ‘conceptual currency’ of social work. The conceptual currency of social work is historically contingent and linked at any one time to the social work gaze. While I have not claimed that there is a unidirectional link between social work texts and social workers’ accounts of practice I have attempted to show how the social work texts I have analysed furnish a set of psychological and ethical concepts about the family which make possible techniques for thinking about and acting in relation to parents and children.

I have thus analysed some of the mechanisms by which the family is knowable through the social work gaze. Inherent in any practices surrounding the family is the contradiction of the need to protect children at the same time as respecting the family’s right to govern itself. While the assessment of risk appears to provide a solution to the need to respect the rights of the private family while protecting its vulnerable members, attempts to calculate risk return to the problematic of how the family can be known.

Although the attention to the collection of evidence in assessment may present social work as a methodological science seeking out the signs and symptoms of abuse which reveal themselves to a multi-disciplinary gaze, practitioners report on their decision-making as both unproblematic and craft-like. They apply ‘rule of thumb’ knowledge that operates as broad indicators of risk based on the age of the child and the existence of physical evidence. In addition, whether or not the family is already known to social services plays an important part in decision-making. The desire to overcome uncertainty through the compiling and cross-referencing of information means that families who become the subject of the social work gaze are likely to be those who are the most visible, in other words those who are already known and whose history is inscribed and objectified in social work files and registers. The status of the referrer and the corroboration of concerns by other professionals can in addition produce a context of risk.



In the interpretative skills and regimes of knowledge through which the social worker constitutes the family, the limits of the social work gaze is also defined. The criteria for warrantable intervention mean that social workers are asked to apply a rule of vigilance in their child protection practice. The tentativeness of the social work gaze involves social workers not only in an interpretive search for risks but in addition in a reflexive vigilance concerning their entitlement to make judgements. Often it is only retrospectively that the 'real picture' can be known. Social workers' sense of uncertainty, of working with incomplete knowledge means that they are balancing different orders of risks in which the risks associated with intervention into families and the risks of their own vilification are balanced against the risk of harm to a child. Procedures and lines of management provide mechanisms for making decisions accountable, at the same time dispersing and generalising responsibility and thus risks.

Social workers are attempting to engage parents in processes of self-regulation; in the shadow of statutory action they tread a fine line between a therapeutic role and compulsion. As I will describe in the following chapter, soliciting parents' co-operation through partnership provides a warrant for voluntary intervention at the same time as a strategy for involving families in the management of their own risks. The parent is thus enjoined to acknowledge, work on and manage their own risks or forfeit their own autonomy. The private family therefore becomes a promise, the entitlement to which must be earned in a contract with social workers.

### **Coda: the shift from risk to need?**

Any thesis that refers to contemporary arrangements in policy and its associated ways of thinking/practising must contend with change. In the course of my research change has taken the form of a new government (and reigning political party) and several new policy initiatives that touch directly upon the conceptual practices through which social work and the family are governed. These include the National Family and Parenting Institute, the Sure Start programme and drives to *modernise* social services through management and re- organisation (DoH, 1998).

In September 1998 the government launched the Quality Protects Programme designed to reshape how children's services are managed and delivered. The programme requires that social services departments focus upon the improvement of performance in relation to particular objectives that were set out as measurable and reportable national objectives for children's services. The government's consolidated set of objectives for children's social services were published in September 1999. One of these objectives is the improvement of assessment of families who come into contact with social services departments.

As discussed in this chapter, the assessment guidance available to the social workers I interviewed in 1996/7 was Protecting Children. A Guide for Social Workers undertaking a Comprehensive Assessment (DH, 1988). The Guide was the subject of some criticism in the ensuing decade, summarised in the following way:

Inspections and research have shown that the guide was sometimes followed mechanistically and used as a check list, without any differentiation according to the child's or family's circumstances. Assessment was regarded as an event rather than as a process and services were withheld awaiting the completion of an assessment (DoH, 2000)

Significantly, the Refocusing Debate of the mid 1990's referred to in Chapters II and IV placed an emphasis on the assessment and provision of services for children determined to be 'in need'. It was pointed out that Section 17 of the Children Act which places a duty on local authorities to provide services for children 'in need' carries no less weight in law than Section 47, the duty to investigate possible incidents of child abuse. This signalled a move away from the narrow remit of *child protection* since a key finding from the Messages from Research publications had been that where assessments were carried out and child protection concerns not founded, families were often not offered any other services. Key to the means of refocusing the social work gaze were considered to be the revision of assessment techniques which was already taking place in some local authorities. Indeed Gillian Schofield and June Thoburn reported from their study of children's participation in the child protection system in 1996 that the model of assessment represented by Protecting Children (1988) was already decreasing in use in local authorities (Schofield and Thoburn, 1996). The development of a new assessment guide was announced by The Secretary



of State for Health in September 1998. A draft guidance that was available as a consultation document in September 1999 stated that the new 'framework' for assessment provided:

a *systematic* way of understanding, analysing and recording what is happening to children and young people within their families and the wider context of the community in which they live (DoH, 1999, my emphasis)

Working Together, the guide to child protection procedures that was first published in 1989 was also redrafted and published in 1999. An attempt to change the emphasis of practice was also indicated in the name of the new edition of this document. While the full title of the previous edition of the guidance was Working Together. A Guide to Arrangements for Interagency Co-operation for the Protection of Children from Abuse, the new document is called Working Together To and Promote the Welfare of Children (DoH, 1999, my emphases). Similarly the new assessment Framework is intended for the assessment of 'need' rather than filtering-out those children who are deemed not immediately at risk. The Framework for the Assessment of Children in Need and their Families has been integrated into the new Working Together guidance. There is thus an attempt to broaden the spectrum and target of social work activities towards offering support and services to a broader range of families and away from the policy focus of child abuse - an attempt, in other words to de-centre child protection.

As I described earlier in the chapter, Protecting Children. A Guide for Social Workers undertaking a Comprehensive Assessment consisted of a single volume including both questions for social workers in carrying out a comprehensive assessment, questions and areas for discussion with parents'/carers who are the subject of the assessment. The new assessment guidance published in February 2000 to supersede this document is much larger, consisting of four volumes. These include Framework for the Assessment of Children in Need and their Families, which sets out the legislative context and the conceptual framework of the guidance; The Family Pack of Questionnaires, based on established psychological questionnaires which are to be used in conjunction with Initial Assessment and Core Assessments Record forms which are contained in a third volume with accompanying guidance; Practice Guidance elaborates the methods and practice for carrying out the new assessment



framework and tools. The three main elements to be assessed are presented in the form of an equilateral triangle and include Child's Developmental Needs, Parenting Capacity and Family and Environmental Factors<sup>7</sup>.

**The category of 'in need' and the broadening of the population at risk.**

In line with its 'systematic' approach to assessment, a key emphasis of the new guidance is that assessment should be 'evidence-based' in its reference to recent research findings and to the evidence gathered in the course of the assessment itself. As I have said, a central critique of the Messages from Research (1995) studies had been that social work practices were too narrowly targeted at the small population of children at risk of child abuse. This has given rise in the new assessment guidance to an attempt to make visible a new population of children through an increasingly elaborate technology of assessment. The category of in need, created by the Children Act is very narrowly defined however:

Children who are defined as in need under the Children Act 1989 are those whose vulnerability is such that *they are unlikely to reach or maintain a satisfactory level of health and development, or their health or development will be significantly impaired without the provision of services* (DoH, 2000:5, my emphasis)

The provision of services to children in need, is clearly not designed to make services more accessible to families who decide they need them since the determination of need is firmly based in professional judgement following the completion of an assessment. The assessment framework would seem likely to operate as a gate-keeping exercise, circumscribing the allocation of services.<sup>8</sup> Furthermore, as stated in Chapter IV, my understanding is that no alternative route to social work services is envisaged and therefore that such services would only become available to families via the route of a child protection referral that will now involve a new process of assessment.

---

<sup>7</sup> The Child's Developmental Needs includes: health, education, emotional and behavioural development, identity, family and social relationships, social presentation and selfcare skills; Parenting Capacity includes basic care, ensuring safety, emotional warmth, stimulation, guidance and boundaries and stability; Family and Environmental Factors include family history and functioning, wider family, housing, employment, income, family's social integration and community resources.

<sup>8</sup> My interviews with social workers suggest that the threshold for receiving support services was by default those suffering or at risk of suffering from significant harm rather than 'need'.



Although the language of risk is not used in the guidance, the Framework for the Assessment of Children in Need and their Families none the less would seem to operate as a technique for managing risks. By widening the net of children who can be considered to be in want of services, it also widens those who are officially known to social services, as it lowers the threshold for the warrant for ongoing social work intervention.

### **Transformations in the social work role**

The new assessment guide places less emphasis than did the previous guidance on the diagnosis of the relationship between appearances and underlying or concealed feelings and motivations. Instead the new guide seeks to render family characteristics more precisely measurable in terms of a standard set of scores<sup>9</sup>. While Protecting Children (1988) tutored social workers in the observation and interpretation of signs indicating risk, the assessment tools and techniques provided by the new Framework leaves much less to the interpretation or judgement of individual social workers. While the new guide emphasises that the development of a 'relationship' between social workers and family remains key in the assessment process, the deployment of this set of standard tools suggest a shift in the social work gaze. Post-war social case-workers' abilities to report on their clients' needs and internal states depended upon the development of a type of relationship of trust and co-operation. We have seen how the role of the family case-worker became transformed throughout the nineteen seventies and eighties with the re/discovery of abuse and through procedures instituted with the priority of protection. In the new assessment guide the subjectivity of the social worker, as I discussed, made problematic in the earlier guidance, is now secondary to the standardised techniques

---

<sup>9</sup> The Family Pack of Questionnaires and Scales include the following questionnaires/scales: Strengths and Difficulties Questionnaires to be completed by a main carer of a child. The questionnaire is based on the Rutter A+ B scales used to screen for emotional and behavioural problems in children and adolescents. The Parenting Daily Hassles Scale is also an established scale that is completed by a carer who is asked to assess the frequency and intensity/impact (between 1 and 5) of 20 common parenting hassles. The Home Conditions Assessment to be completed by a social worker is designed to assess the physical conditions of the home. The Adult Wellbeing Scale to be completed by a main carer as an assessment of mental health. This is the Irritability, Depression and Anxiety Scale. The Adolescent Wellbeing Scale to be completed by young people designed to pick up possible depression in older children. The Recent Life Events Questionnaire to be completed by a main carer designed to look at life events that have occurred in the last 12 months and their continuing influence. Family Activities Scales to be completed by children to assess the extent of 'child-centredness' in the family. Alcohol User Questionnaire to be completed by a main carer and designed to identify alcohol misuse.



of assessment. The resultant assessments are highly 'systematic' in how the information is collected; the questionnaires, scales and standardised forms provide quantitative methods and criteria for evaluating the information gathered. For example, while Protecting Children (1988) provided guidance for social workers to make an assessment of extremes of dirt and cleanliness in the homes they visited, the new framework provides a Home Conditions Assessment scale that explicitly claims to 'help[s] with the objectivity of observation'. Moreover the editors of this volume who are both child and adolescent psychiatrists claim that the scoring for the scale

has been found to correlate highly with children's ability so that children from homes with low scores usually have better language and intellectual development (DoH, 2000: 24).

While the authors go on to qualify this claim as not holding in all cases, it none the less indicates the changed status of the assessment and the character of the social work task; social worker's observations are converted to 'scores' which can be 'correlated' as independent variables. The implementation of the Framework thus involves the mobilisation of 'black boxed' expertise in the form of the psychological questionnaires and their methods of scoring (Latour, 1987). This has the effect of assuming and authorising the claims and methods of psychological testing, the technicalities of which the assessor does not need to be familiar. The skills base of the assessment exercise has thus shifted away from the guided observation of the social workers, towards the implementation of psychological instruments.

Throughout the thesis I have described the social work gaze as tentative in its exercise of power. I described earlier in this chapter how social workers' ability to see and report on signs and indicators of risk are contingent upon mechanisms for stabilising 'facts' about families in files and on computer data-bases, making their knowledge accountable and establishing and confirming knowledge claims with other professionals. With the new assessment guide, the deployment of such established psychological scales and questionnaires aims to provide precision and objectivity in the calculation of aspects of family life. We might understand the development of a more precise technology of assessment of families as an attempt to master the tentative gaze. What I described as the uncertain, equivocal and interpretative signs



of risk are apparently transformed into questionnaire scores that can be correlated as stable, independently acquired facts. This is then a new way for social workers to render indicators of risk visible and to make that knowledge credible

## **Chapter VI Governing Through Partnership**

### **I The Notion of Partnership**

#### **(i) Partnership as a Strategy of Government**

While enlisting client co-operation has long been acknowledged to be the most effective means of practising social work it is only over the past decade that partnership has become codified in the regulation and audit of social work powers. Indeed the term has also been widely deployed outside the field of social work. Partnership has emerged to refer to joint ventures, shared initiatives, and joint working between different sectors and between different 'stake-holders'. These include 'partnerships' between the private and public sectors which attempt to mobilise the financial resources of private capital, 'partnerships' between local and central government involving joint working on specific and innovative areas of policy, and in the recent words of Tony Blair, Partnership between the government and the country 'to lay the foundations of ..[a] moral purpose' (Observer, 1999) <sup>1</sup>. While David Howe's reference to 'the endlessly promiscuous concept of 'Partnership' (Howe, 1996) would seem to capture its wide application, to understand partnership as a catch-all phrase, risks missing what is distinctive about it as a mechanism of a rationality that seeks to de-governmentalise rule, and to make subjects responsible for their own conduct (Rose, 1999: 264).

In social work with children and families the term partnership refers to policies which attempt to re-write the relationship between social workers and families, using the language of 'working together' to produce better outcomes for children without the need for legal orders or statutory measures. While policies of partnership seek to arrive at consensual arrangements for the care of children, the threat nevertheless exists where voluntary agreements are unsuccessful, of legal measures and of legal enforcement. Partnership is therefore defined in relation to the

---

<sup>1</sup> Tony Blair interview Observer 5/9/99

'We need to find a new national moral purpose for this new generation. People want to live in a society that is without prejudice, but is with rules, with a sense of order. Government can play its part, but parents have to play their part. There's got to be, if you like, a partnership between Government and the country to lay the foundations of that moral purpose'



threat of statutory measures<sup>2</sup>. This provides a tension that features in social workers accounts of ‘working in partnership’ with families. In this chapter I examine how partnership operates as both a set of practices and a strategy of rule in this area of social work. I am arguing that in addressing the relationship between social workers and the families with whom they work the notion of ‘working in partnership’ seeks to re-shape social work practice through the regulation of the social work gaze at the same time as it attempts to effect the ‘responsibilisation’ of the family.

## **(ii) Partnership and the Problematisation of Social Work Power**

The language of empowerment and liberation associated with partnership has an established lineage in social work texts that speak of the potential for injustice to the subjects of social work practice and demands that the fellow humanity and citizenship of clients is recognised (Sainsbury, 1989). Malcolm Payne for example describes the development of conceptions of ‘self-realisation’ and ‘self-determination’ through shared decision-making between social workers and clients in social work from the 1920s to the 1980s (Payne, 1989). Payne argues that a belief in the 1920’s that client participation created self-reliance, gave way in the 1930s and 1940s to the conception of shared decision-making as ‘therapeutically effective’ (Payne, 1989: 114). Notions of self-determination as a human right emerged in the 1960’s, and were increasingly radicalised through the user movements of mental handicap and mental health services and through young people in care organisations of the 1970s and 1980s. In more recent times a critical social work stance has set out the principles of ethical social working in the following way:

The ability to retain humanity, respect and courtesy, along with a passionate concern for the plight of fellow citizens whose basic rights are in jeopardy, is the hallmark of an ethical social worker (Jordan, 1990: 106).

Shemmings and Shemmings have argued that it is necessary for professionals to ‘embrace the idea that measures designed to increase accountability are human rights, not privileges within their gift’ (Shemmings and Shemmings, 1996:70). These

---

<sup>2</sup> OED: Partner. 1. *n.* Sharer (with person, in or of things); person associated with others in business of which he shares risks and profits; wife or husband; companion in dance (esp. dancing partner); player associated with another in game and scoring jointly with him. 2. *v.t.* Associate (persons, on with another) as partners; be partner of. 3. *~ship n.*, (esp.) pair of partners, joint business. In terms of the OED definitions, parents, in their Partnership with social workers, are more like ‘wall flowers’ who had to wait to be invited onto the dance floor, than business partners.

arguments focus on unequal relations of power between social worker and clients and the potential for abuse of power by social workers. The discourse of respect for clients' human rights provides a corrective as social workers are asked to imagine clients as 'fellow citizens' whose basic rights must be respected.

Howe and other authors have commented that the idea of 'Partnership' appeals to the left as well as the right (Howe, 1996; Shemmings and Shemmings, 1996):

where the left saw empowerment of the poor and disadvantaged, the right saw growth in personal responsibility, independence and individual choice (Howe, 1996: 84).

In social work discourse empowerment is also entwined with the promotion of personal responsibility the development of which is encouraged as a therapeutic, empowering and progressive objective. The need for the self-determination and self-government of clients is equated with the need for social workers to govern less. Thus what techniques of risk management and policies of partnership have in common is a concern with the legitimacy of ruling the private space of the family. Child protection policy and practice guidance does not therefore neatly spring from either left or right ideologies but combines the two in a heterogeneous therapeutic discourse. After Karen Baistow, I am arguing that partnership like other discourses of empowerment, is increasingly implicated in professional and regulatory practice (Baistow, 1994). Such rights and entitlements as are extended to parents in partnership with social services are not necessarily constitutive of a giving up of power by professionals and may involve the development of new spheres of professional practices. At the same time however, it would be disingenuous to ignore the extent to which policies of partnership do represent opportunities for children and parents to be consulted and included in decision making processes. For example, it has now become widespread policy for parents, and children (depending on their age) to be included in child protection case conferences. It would therefore be a mistake to substitute the zero-sum conception of power inherent in empowerment discourse, with a zero-sum understanding of the loss of/ lack of power for families involved in child protection practices.



The discourse of partnership is paradoxical in child protection since it is undoubtedly because the parent subjects of child protection practices are peculiarly *lacking* in choices vis a vis the care of their children, that partnership is mobilised. In other words partnership is a response to a problematisation of social work authority and the associated powerlessness of clients. The ‘shadow of the law’ (Piper, 1993) ensures though that parents can never be *equal* partners with social workers in that the relationship is not voluntarily entered into. Parents rarely avail themselves voluntarily of child protection practices, are not straightforwardly ‘consumers’ of services and do not take an equal part in decisions taken. As was seen in Chapter V, active participation in child protection procedures is largely contingent upon parents’ ability to align themselves with social work definitions of what is in the best interests of their children. The onus is on parents to demonstrate their co-operation with social work understandings and expectations in order to be considered candidates for partnership. Nevertheless in order to be considered to act warrantably and legitimately, social workers must be seen to protect children in such a way that simultaneously respects the human and civil rights of their parents.

### **( iii) Pressure for the Development of Partnership**

Partnership has, over the last fifteen years or so, become central in legislation and social work discourse. As discussed in Chapter IV, the events in Cleveland in 1987 were key in raising official concerns as to the treatment of parents particularly in the investigation of sexual abuse and more generally in child protection proceedings. Prior to the publication of the report into the Cleveland inquiry there had been growing pressure from the social work profession itself for the involvement of families in child protection proceedings that had become increasingly formalised. This pressure arose from a number of sources within social work and represented an increased awareness of the civil liberties of clients, which in turn raised questions about the legitimacy of the social work role itself. The pressure for parental attendance and participation in child protection case conferences came to represent an attitude to working jointly with and according rights to, parents. The issue of parental attendance of case conferences was the subject of a number of pieces of research in local authorities across England and Wales that overwhelmingly produced findings in favour of parental participation (Lewis, 1992, Thoburn et al 1995, Thoburn, 1999)

During the same time period civil servants at the Department of Health were being asked to deal with a growing correspondence from parents describing abuses of social work powers in child protection practices. This had the effect of creating a climate at the Department of Health that was extremely receptive to the findings of the report of the inquiry into the events in Cleveland. Butler-Sloss's report stated that:

Parents should be informed and where appropriate consulted at each stage of the investigation by the professional dealing with the child, whether medical, police or social worker. Parents are entitled to know what is going on, and to be helped to understand the steps that are taken (Secretary of State for Social Services, 1988: 246)

In order for social work practice to be considered legitimate there was thus recognition of the need to curb and regulate statutory powers. The conditions of possibility were therefore in place for the codification of a new ethics of social work practice.

## **II Partnership: An Analysis of the Texts**

### **(i.) Partnership in the Children Act**

Butler-Sloss's recommendations translated into good practice messages as well as mechanisms for 'involving' parents in proceedings as for example in the guidance, Working Together (DoH, 1991):

It is important that parents and/or carers be informed about the basis of an investigation or intervention....Parents need to know the reasons for professional concern, the statutory powers, duties and roles of agencies involved, their own legal rights and the changes in the family's situation which the agencies consider necessary or desirable in the interests of the child. Openness and honesty and the ability of professional staff to use authority appropriately are an essential basis on which to build a foundation of understanding between parents and professionals. Parents should be informed or consulted at every stage of investigation. Their views should be sought on the issues to be raised prior to a case conference to afford them the opportunity to seek advice and prepare their representations. They should be invited where practicable to attend part of, or if appropriate the whole, of case conferences unless in the view of the Chairman of the conference their presence will preclude a full and proper consideration of the child's interests. Parents should be informed of the outcome of a case conference as soon as is practicable and this information should be confirmed in writing (DoH, 1991: para. 5.45)



The need to provide information to parents as well as solicit information from them, to deal with parents with ‘openness and honesty’, and to use their authority appropriately reads as a set of instructions to social workers in respecting the human rights of parents limiting their rights to deal with their children as they see fit. Thus Working Together (1989) asks social workers to regulate themselves in their attitudes to and relationships with clients. The notion of partnership is made most explicit in two texts: the Children Act itself, and the supporting guidance for social workers, The Challenge of Partnership (1995).

The Children Act and accompanying guidance consolidated and provided a statutory basis for what had become collected together as a doctrine of ‘working in partnership’ with families. The Act makes a number of provisions intended to restrict the use of compulsory measures and to encourage the continuing involvement of parents in their children’s care. These are: the concept of parental responsibility, the No Order Principle and the provision of Section 20 accommodation. Although the term is not used in the legislation itself, as the following extract from Working Together (1989) describes, partnership is one of three ‘essential principles’ of the legislation, and it follows from and must be understood in the context of the other principles:

The essential principles of the Children Act provide the foundation for work on individual cases. They include

- The focus on the welfare of the child taking account of the child’s views in the light of his age and understanding.
- Partnership with parents and other family members, and support of the child within the family whenever possible.
- The concept of parental responsibility (DoH, 1991: 25)

As I have suggested, the principle of partnership is qualified by the need for social workers to make a judgement as to whether practices consistent with a partnership approach can be used. In the list of the essential principles of the Act quoted above, the Welfare of the Child – which is described as the paramount principle of the legislation – qualifies the concept of partnership so that practices of partnership can only be deployed where it is considered to be in the best interests of the child. Elsewhere in the guide the welfare of the child is described as the ‘overriding factor guiding child protection work’ (DoH, 1991:43). The messy, interpretative work of

establishing whether ‘working in partnership’ should be attempted and whether or not it is in the child’s best interest to do so is not captured in this list of essential principles. Partnership is thus something that it is in the social worker’s power to grant or not and is a distinctive method of practising social work. Such decisions as to whether a partnership approach should be adopted feature in the social workers accounts I will analyse later in this chapter.

Of the three ‘essential principles’ Parental Responsibility represents a legal definition rather than a principle or ethic of social work practice. As discussed in Appendix Two, the concept of ‘Parental Responsibility’ refers to the nexus of rights and responsibilities which are legally accorded to all mothers and all married fathers, *vis a vis* their children<sup>3</sup>. Parental Responsibility is only lost on children becoming adopted. Should a child become ‘looked after’ by a local authority whether voluntarily or through a legal order, Parental Responsibility is held jointly by the local authority and the parents, whereas formerly when a child came into local authority care, local authorities assumed parental rights. Parental Responsibility as a legal provision therefore represents a key change in the quality of relationship that must pertain between social workers and parents. This was stated clearly in the introduction to Working Together (1989):

as parental responsibility for children is retained notwithstanding any court orders short of adoption, *local authorities must work in partnership with parents*, seeking court orders when compulsory action is indicated in the interests of the child only when this is better for the child than working with the parents under voluntary arrangements (Working Together, 1989:1, my emphasis)

Parental Responsibility therefore translates the principle of partnership into expedience; social workers need to arrive at consensus with parents - for whose children responsibility is shared – with whom the social workers must remain in contact.

The No Order principle of the legislation supports a consensual approach in stating that legal orders should only be applied for if it is established that to do so is better than no order being sought. The No Order principle provides for the avoidance

---

<sup>3</sup> Unmarried fathers and other relatives can apply for parental responsibility



of compulsory measures – and by implication, the need for co-operative working with families. Where legal measures are avoided, social workers must nevertheless find mechanisms for regulating difficult clients – through securing their co-operation.

Lastly, the legislation attempts to bridge the divide between family support and child protection in the provision of Section 20 accommodation. Instead of ‘care’ of children by the local authority being seen exclusively as a punitive and/or an emergency measure, families can request that their children be voluntarily ‘looked after’ by the local authority. Under this arrangement parents are able to remove the children at any time and without having to give the authority any notice of their intention to do so.

The legislation therefore makes a number of provisions, which attempt to limit adversarial and legalised child protection proceedings and emphasise the continual involvement of parents in their children’s care. Developed as supporting guidance to the legislation, The Challenge of Partnership (DoH, 1995) elaborates what working in partnership means in day to day work with families in child protection work and sets out what I will describe as an ethical checklist for social workers. The guidance was published and circulated to all social work offices so would have been available to the social workers I interviewed.

**(ii) An Analysis of The Challenge of Partnership**

While the policies of partnership take place in the shadow of, and in relation to the threat of statutory measures, practices of partnership are also designed to avoid legal measures. Therefore it is in the day to day work with families, in social workers’ attitudes and language that practices of partnership need to be realised. The Challenge of Partnership defines partnership as a matter of degree, in terms of which social work practices move from at one end of a continuum, providing information to families, to, at the other, full participation in decision-making

Includes at least	Providing information	
		Passive involvement
	Participative action	
	Partnership	Active involvement

(DoH, 1995:10)

Active participation in decision-making – the highest level of partnership in this model – is presented in the guide as contributing to parents’ ‘self-esteem’, and ‘encourages adults and children to feel more in control of their lives’ (p. 10)<sup>4</sup>. The Guide argues that

Professional practice which reduces a family’s sense of powerlessness and helps them to feel and function more competently is likely to improve the well being of both parents and children (DoH, 1995: 10)

As Baistow has argued, such discourses of empowerment involve an unexplicated link between individuals’ internal personal feelings and the external world, a conflation of the personal with the political such that reducing a family’s ‘sense of powerlessness’ makes them better parents (Baistow, 1994: 35). Furthermore, empowerment is equated with professional practice. The reduction of a ‘family’s sense of powerlessness’ is something that social workers must do to and for families. While empowerment becomes a necessary means of legitimising social welfare practice, Baistow argues that it does not reduce but actually extends professional practices :

Far from being left roleless, or less powerful, by the process of user empowerment, professionals are increasingly being seen as central [] in a number of ways that extend rather than reduce their involvement and interventions in the everyday life of citizens (Baistow, 1994: 39)

While, in The Challenge of Partnership model, partnership is presented as a goal, to be aspired to in working with families, it is clearly the role of the social worker to decide whether the circumstances are right for, and whether families are good candidates for partnership practices. The assessment of whether partnership can take place links the discourse of partnership to the more circumspect and calculating language of risk assessment. The guidance requires that social workers assess whether practices associated with partnership can be used, and the level of action to adopt. Practices of partnership do not therefore substitute but combine with, and become involved in the management and assessment of risk.

---

<sup>4</sup>As described above, it is interesting that the link between ‘client participation’ and ‘self-reliance’ can be dated to 1920s social work discourse. (Payne, 1989, quotes Garton and Otto, 1964: ‘it was believed client participation created more self-reliance on the part of the client’)



I referred earlier to the kind of rights that a partnership approach seems to confer upon parents. I said that in Working Together (1980), the rights accorded to parents were human rights rather than rights qua parents to autonomy. Although the rhetoric of partnership suggests an equalising of relations of power between partners, the guidance is very specific about the kind of rights and responsibilities to be conferred upon parents and social workers. The Challenge of Partnership does not remove powers of compulsion, observation and assessment from social workers. What it does is to ask social workers to be aware of the implications of their powers for the families with whom they deal. The guide sets out a list of the 15 essential principles of partnership, which elucidate a rationality of government that makes-up both social worker and parent in very particular ways. The principles of partnership identify the individual social worker's practice as determining a family's experience of the child protection system. The guidance was based upon research and a consultative process in which real families described experiences of the child protection system in which they were not treated with dignity and respect by social workers<sup>5</sup>.

#### **Essential Principles of Partnership**

1. Treat all family members as you would wish to be treated with dignity and respect.
2. Ensure that family members know that the child's safety and welfare must be given first priority but that each of them has a right to a courteous, caring and professionally competent service.
3. Take care not to infringe privacy any more than is necessary to safeguard the welfare of the child
4. Be clear with yourself and with family members about your power to intervene and the purpose of your professional involvement at each stage
5. Be aware of the effects on family members of the power you have as a professional, and the impact and implications of what you say and do
6. Respect confidentiality of family members and your observations about them, unless they give permission for information to be passed to others or it is essential to do so to protect the child
7. Listen to the concerns of the children and their families, and take care to learn about their understanding, fears and wishes before arriving at your own explanations and plans
8. Learn about and consider children within their family relationships and communities
9. Consider the strengths and potential of family members as well as their weaknesses, problems and limitations.
10. Ensure that children, families and other carers know their responsibilities and rights

---

<sup>5</sup> This is not described in the text itself but was discussed in an interview with June Thoburn who acted as consultant and lead author of the guidance.



11. Use plain, jargon-free language appropriate to the age and culture of each person
12. Be open and honest about your concerns and responsibilities
13. Allow children and families time to take in and understand concerns and processes
14. Take care to distinguish between personal feelings, values, prejudices and beliefs and professional roles and responsibilities, and ensure that you have good supervision to check that you are doing so.
15. If a mistake or misinterpretation has been made, or you are unable to keep to an agreement provide an explanation. (DoH, 1995: 13)

The Principles are concerned to correct the attitudes with which child protection practice is carried out and the inhumanity that it identifies at the heart of such bad-practice. They represent an attempt to reshape the social work gaze upon families and to transform the social work art in relation to an ethics of empowerment. Three aspects of the social worker's conduct are targeted by the principles: firstly, how s/he should relate to the families with whom s/he works, secondly, the specific practices s/he should carry out and thirdly, his/her attitude to his/her own powers. Social workers are thus asked to treat clients with 'dignity' and 'respect', to be caring, open and honest (about their concerns) and to be professionally humble in relation to any mistakes or misunderstandings numbers (1, 2, 12, 15). While such principles apparently relate to the individual personality of the social worker, when viewed in relation to the principles to use jargon-free language, to listen and learn from the families' concerns and to inform families' of their rights and responsibilities (7, 10, 11) they elaborate a prescription for a re-thinking of professional practice with a client-group whose dignity and respect are called into question, who are relatively uninformed and whose views are not authoritative in the decision-making process. The principles of partnership thus prioritise the role of the social worker as articulator and informer of the rights and responsibilities of the parents and children. The imparting of such knowledge and information on the part of the social worker is conceived as enlightening families and casts the social worker as educator and empowerer.

The principles concerning the assessment of families' strengths as well as their weaknesses, the consideration of the child in relation to his/her family and community and the need to carry out work at a pace appropriate for the family more



straightforwardly direct social workers in how to operate in a manner which maximises the family's ability to take part in the process (8, 9, 13).

Finally the principles of partnership make-up social workers as self-regulators and auditors of their own power. Social workers are for example asked – with qualification - to respect the *privacy* of the families with whom they work and the *confidentiality* of the information they receive from families. Principles 4 and 5 for example highlight not only the need for social workers to act warrantably but in addition call for a reflection on the part of the social worker on the character of his/her conduct. Although the principles in general call for qualities of affect and an ethical practice which highlight the subjective experience of families caught up in child protection procedures, the social worker is simultaneously called upon to 'distinguish between personal feelings, values, prejudices and beliefs and professional roles and responsibilities' (principle 14), the implication being that feelings, values etc. must not taint a professional code of judgement. Policies of partnership thus attempt to reconcile in a professional code the contradictions inherent in the social work role; the caring social worker who may befriend, advocate for and empower a family, and the investigative social worker whose role is to assess parents and who is empowered to intervene to interrupt family relationships.

Partnership thus represents a style of practice in which the social worker is constantly called upon to take part in an exercise of self-vigilance. It refers to social workers' self-awareness and reflection upon rather than the removal of powers. At the same time as the principles prioritise the social worker's consciousness of his/her own powers they also emphasise the paramountcy of the welfare of the child which may involve the social worker in an application for legal measures.

According to the guide, such a style of working for example is not antithetical to the application for legal proceedings. Indeed, The Challenge of Partnership states that the essential principles on which participatory practice and partnership are based, still apply even when an Order is in existence:

where partnership may not be possible the principles that underpin it remain relevant (DoH, 1995: 40).

Partnership therefore refers to a general ethical orientation to clients as well as to specific measures to avoid statutory action.

While the principles of partnership are directed at the constitution of the social worker, at the same time they provide an implicit making-up of the parents who are invested with rights and responsibilities through the practices attendant upon partnership. Parents are thus imagined as holders of entitlements and rights. They are entitled to be listened to, to be informed, for language to be used that is accessible to them, and for the time-scheme of the proceedings to allow them to understand the implications of social workers' concerns. This is a discourse of inclusion. Parents are conferred unqualified rights to be treated with dignity and respect, as fellow human beings and fellow citizens. However, a family's rights to privacy and to confidentiality are qualified by the principle of the 'welfare of the child'; a judgement as to the child's best interests which involves an assessment (of risk) on the part of the social worker. The practices of partnership therefore require that, at a minimum, the family renders itself co-operative with and accessible to social work assessment and surveillance.

Elsewhere in the guide it is made clear that not every family can be worked with in partnership. When parents seek to deny access to social workers, or conceal information as to their situation, social workers are discouraged from seeking to work with them as partners. As I will discuss in relation to interviews with social workers, intrinsic to the practices of partnership are the specification of conditions and circumstances that must prevail in order for parents to be granted the status of partners and in which partnership may be withdrawn. The Challenge of Partnership is both explicit about what partnership can mean as well as when such an approach cannot be used. The guide states that practices of partnership may not be used for example with adults suffering from Munchausen's Syndrome by Proxy, or with allegations of 'organised abuse' - in other words where parents are suspected of elaborate deception and concealment. The third category about whom questions are raised as to the appropriate use of a partnership approach are 'unco-operative families'. The Challenge of Partnership states:



some families may become actively obstructive. Other families or individual adults will deny that any abuse has taken place and will decline to co-operate for this reason. The fact that they do not co-operate with professionals does not of necessity mean they are more likely to harm their child. However, the likelihood of the child being harmed at this time needs careful assessment (DoH, 1995:43).

Parents who deny the existence of abuse, who do not enter into a contract of working with social workers, do not demonstrably share social work understandings and assessments, or actually deny the social workers rights of access to their family, are held in (qualified) suspicion. In the following section we will see how social workers make sense of their Partnership practice in child protection work.

### **III Accounting for Partnership; An Analysis of Social Workers' Descriptions of Working in Partnership**

#### **(i.) Contradictions and Dilemmas of Partnership**

The problem of assessing whether or not to adopt a partnership approach was addressed by social workers I interviewed. Although as indicated from The Challenge of Partnership, a partnership approach can be adopted even where legal orders are applied for, for some social workers, partnership raised a choice of whether to represent the interests of the child or those of the parents. While the legislation and guidance requires for the welfare of the child to be 'paramount' at the same time as supporting policies of partnership with parents, many social workers found attention to the welfare of the child was in conflict with working in partnership with parents. Several social workers referred to the difficulty of reconciling a consensual approach to the implementation of measures to protect children, for example:

- 1.SW1: well, er, it's about I mean you know the working in partnership bit,
- 2.you know I think it's not always (laughs) it's not always easy, that conflict,
- 3.we try, I think we could do that when we're dealing with like Section
- 4.Seventeen cases
- 5.PR: when people want financial support?
- 6.SW1: yes, when we're doing family support, I think like preventative work
- 7.we can work in partnership with families, try, but when it goes further then I
- 8.think partnership goes out of the window really (laughs) it's the child isn't it,
- 9.it's the child's interest is paramount
- 10.PR: and when you have take out a care order to protect the children then
- 11.you can't really work
- 12.SW1: no there's no partnership at all
- 13.PR: right
- 14.SW1: it's conflicting isn't really, partnership would mean you know going
- 15.by the wishes and feelings of the parents as well

This extract suggests an understanding of partnership as parents' active participation in decision-making, (rather than the continuum presented in The Challenge of Partnership) and thus incompatible with the implementation of legal measures. In the view of SW1, a family-support approach lends itself to the attitudes and practices of 'partnership' in a way that the implementation of statutory measures for the investigation of, and response to child abuse i.e. the practices associated with child protection does not.

The incompatibility of a partnership approach with the implementation of legal orders expressed by SW1 was echoed in the following extract. In this interview the social worker described a case where evidence of sexual abuse resulted in the removal of children from the care of their parents. The parents were contesting a care order:

- 1.SW3: I think when it's contested you know the parents are always going to
- 2.oppose your views
- 3.PR: when it's contested legally?
- 4.SW3: yes, when parents oppose a care order almost partnership in some
- 5.respects goes out the window. The battle lines are drawn

SW3 found himself in an invidious situation where he was supervising contact visits between a father and child, where, in his view, the father was clearly a perpetrator of sexual abuse and was trying to manipulate the child to say he wanted to return home. The father's lack of co-operation with social workers objectives and failure to prioritise the welfare of the child as defined by social workers meant that he could not be worked with in partnership.

When a case was cited where it had been possible to work in partnership with a parent despite the existence of legal orders, this was explained in terms of the *timing* of the social work involvement:



1.SW4: I think initially at the stage where the care proceedings were initiated  
2.everyone was saying 'well, you know I think we should really be looking at  
3.the younger child going into care', and I think that's the line we would have  
4.been taking the level of concern was so high, but you know, now it's six  
5.months on and she's actually managing very well and working very well in a  
6.way that's surprised lots of us really and is far more open to talk about  
7.things and takes on you know quite a few of the issues that we talked about  
8.as well, that have been quite difficult for her in terms of the child who's still  
9.at home you know being able to look at, you know, some of her parenting  
10.issues of how she's responding to her  
11.PR: you mean that you are having to be quite critical of how she/  
12.SW4: I don't know about critical but I think that at times there's - I'm  
13.trying to think of an example, for example school rang up and said that  
14.child was going home and was watching videos that were inappropriate,  
15.and he was actually being quite frightened by them and so I went to talk to  
16.Mum about watching videos and about what she perceived as being  
17.appropriate and our perceptions of what is appropriate and even though it's  
18.got eighteen on the label, her sort of perception was that it's fine that he's  
19.watching it even though he's eight and saying you know he's [ ] you know,  
20.you do need to be thinking about what he's watching and talking it through  
21.and I think before her response might have been 'get the \*\*\* out of here.  
22.Don't tell me what to do' and now we're at the point where we can actually  
23.discuss things and talk about what it means.  
24.PR: why is that then that she's more receptive do you think?  
25.SW4: I think she's moved on, I think you know she's suffered many losses  
26.PR: in terms of losing her children  
27.SW4: yeah, I think at the time she went through with some of the work that  
28.has happened as well, having an opportunity to talk about that and some of  
29.her own personal feelings and she's so much more confident now and she  
30.is thinking about the needs of her children and being able to focus on them  
31.a bit more than she was able to, I mean I think there's still a long way to go  
32.and there are times when we do have concerns but not at the same kind of  
33.level as before, and she also acknowledges, part of her responsibility in that  
34.as well, in that she actually found it very difficult to cope, and I think in  
35.some ways there's an actual sense of relief for her that she's not having  
36.them at home all the time even though she's got very regular contact that  
37.does feel better to her  
38.PR: could a care order be reversed?  
39.SW4: yeah, she could go and apply to discharge the care order and I think  
40.that at one point her solicitor was advising her, she certainly contested the  
41.care order when it came to court, she was contesting and then there was an  
42.agreement about the contact, but yeah she could take it to court and  
43.discharge the order  
44.PR: other social workers have talked about the difficulty of working co-  
45.operatively with parents when a care order has been granted  
46.SW4: yeah I guess I was quite lucky in a way with that one because that  
47.she didn't perceive me as the person, because I came in at that point where  
48.the proceedings were already initiated, really it was only a few weeks



49. before that was happening and although I did make some statements to the  
50. court when I needed to about concerns about the children, I don't think it  
51. had the same impact as maybe the previous social worker who she saw in  
52. many ways as being the person who initiated that and some of the other  
53. agencies. And I think that it's certainly taken its toll on the work that's  
54. been able to happen afterwards for example she was going to see a  
55. counsellor but the counsellor had worked in the family centre that had  
56. written quite a substantial report that went to court as part of the care  
57. proceedings and she sort of said 'well how can I see this counsellor who  
58. was part of my children being taken into care?' and that made that work  
59. very difficult. So yeah, I think that in some respects that she's seen me as  
60. being supportive in saying 'how do we work through this now?' so in  
61. some ways it's made my role less difficult

This extract is interesting generally in how it makes-up the co-operative parent with whom it is possible to work in partnership. As stated, the social worker accounts for the possibility of working in partnership with the mother as contingent upon her non-involvement at the time of the application for care orders for the three older children (lines 44-46). This is a 'lucky' aspect of the case that sets it apart from the normal course of the enactment of legal powers to remove children from their parents' care. This aspect of the case suggests that parents find meeting the requirements of partnership with a practitioner they associate with such action, unsurprisingly, extremely difficult. The social worker lists the ways in which the mother has met the requirements of cooperative working. These are:

- Openness to take-on issues raised by social workers relating to her parenting of the existing child in her full time care e.g. to have her sense of what is appropriate challenged and reshaped by social work definitions
- Acceptance of social work intervention generally
- An ability to talk about her personal feelings about past events - 'moving on'
- Demonstrably prioritising the needs of her children
- Acknowledging responsibility [for parenting difficulties in the past]
- Accepting the benefits of her other children being cared for by the local authority

In this family, three of the children are in the care of the local authority and the mother has successfully acquired a contact order for regular home visits. In addition the younger child is at home and her name is on the child protection register. Working in partnership with this parent is thus an expedience, the most effective means of maintaining social work surveillance of the youngest child. The mother's willing to work co-operatively with social workers is coded in her 'openness' to regular social



work contact and social work tutelage as to what is considered age-appropriate viewing for a child. In the same way that social workers are asked to be 'open and honest' with their clients, so openness is also a requirement of the supervised parent. The 'openness' of the co-operative parent is thus cast in contradistinction to the 'obstructive' parent cited in the Challenge of Partnership above. The mother's willingness to engage with the social worker in therapeutic talk about her 'personal feelings' and to reappraise her past parenting practices in terms of the rationality of the care order similarly contrasts to the act of 'denial' indicative of the unco-operative parent. The concepts of the un/co-operative parent with whom it is im/possible to work in partnership are thus systematically constructed in both social work texts and social work discourse. They operate as devices in social work accounts that order and explain courses of social work action.

Thus in order for a partnership approach to be used the family must be considered to be redeemable and, with the necessary social work intervention, capable of providing the necessary care for children. In order for a family to be considered candidates for partnership, parents need to accept and agree with social workers' definitions of their children's needs.

What follows is a description of a case where it transpired that after a long history of contact with social services, a child had told his mother that his father had been sexually abusing him, and the mother had not responded appropriately, in other words she had not asked the father to leave or sought help from social services. The children's eventual disclosure to social workers of sexual abuse from which the mother had not been willing or able to protect her children, resulted in one (older) child being placed in a permanent foster place, and the other child being put up for adoption. In the following extract the social worker presents an initial summary of the case. One of the features of social workers accounts I am examining is that they are organised so that the outcome of the case - in this extract the removal of the children from their parents care - is presented as the inevitable conclusion of events. The events are presented as leading inexorably to the revelations or final decision; the social worker describes the mother as consistently unable to care for her children:



1.SW5: it was picked up by school, the child was constantly in dirty clothing  
2.and then the health visitors noticed that at home he was in dirty nappies all  
3.the time and hardly enough food around to prepare for two children, mother  
4.looked very depressed, not with it at all, constantly complaining about the  
5.boy, the girl was all right, she was managing with the girl, but the two of  
6.them, there was no sort of bonding with the boy, he was always the problem  
7.you know he wouldn't eat, he wouldn't sleep, she was complaining, and he  
8.wasn't sort of developing according to his age, he wasn't sort of walking  
9.when he was supposed to, language was behind, and then they were referred,  
10.there was sort of support like, the Child and Family consultation centre  
11.was involved, but appointments were not kept, appointments with social  
12.workers were not kept , and there was a lot of non-co-operation from them  
13.and then the child was taken in with foster carers and then he was back  
14.home, and then in foster care again. The child, there was consistent care  
15.with the daughter/ it was just the boy

This extract is interesting in terms of the work the social worker has to do to present the mother as unco-operative and therefore not candidates for partnership. First of all, SW5 cites the external authority of health visitor and school for the corroborative evidence of the mother's inability to clean, adequately clothe or feed the child. It was concerns raised by the school about 'neglect' that initially led to social work involvement with the family. In the account the charge of lack of basic care for the child is linked to the mother's 'complaints' about one of the children. The statement that for the mother: 'he was always the problem' (line 6) suggests that the child is unfairly singled out as a repository for the mother's negative feelings, i.e. that he is being rejected and scapegoated by his mother who has not 'bonded with him'; the content of the mother's 'complaints' about the child are treated with suspicion and are not taken at their face-value<sup>6</sup>. Within the logic of the account therefore the possibility of our finding that a child who does not sleep or eat may indeed be difficult to care for is closed-off. Instead the mother's 'complaints' further elaborate the interpretative scheme of 'irredeemable mother' or mother who is colluding with her partner's abuse of the children - she is, in other words, inadequate. An alternative understanding of the statement that the mother looked very depressed and 'not with it at all' could be a diagnosis of mental illness which – as in other accounts – would have set in motion a distinctive set of services and responses on the part of (another set of) social workers. Instead the social worker does not commit herself to an analysis of the mother's condition and says only that she 'appeared' depressed. The parents' inability to keep



appointments at the child and family consultation clinic also serves as further evidence of their unwillingness to take-up help that is offered, and confirms their non-co-operation with social services. In response to my question about why the mother had not been granted even postal contact with her children by the courts, the social worker cited her 'denial' of abuse:

16.SW5: well because the mother was living, I mean she planned to live with  
17.the father, she totally denied that any thing ever happened to the children,  
18.she denied that the children had been sexually abused

As was described in Chapter III, in anatomising the social workers' accounts I am attempting to reveal their analytical work. I am suggesting that social workers' accounts reveal analytical decisions taken in the course of working on child protection cases, which are then 'worked-up' (Smith, 1990) retrospectively in their interview accounts. Decisions about whether a family or individual parent can be worked with in partnership are analytical judgements that draw upon sets of interpretative, sense-making devices and rationalities. In providing accounts of their work, social workers are engaged in authorisation work so that the possibility of an alternative interpretation is cumulatively 'cut out'. Their accounts can be analysed as containing sets of instructions for how they should be heard (Smith, 1990a).

A demonstrable ability to acknowledge and take responsibility for problems would seem to require parents to be able to explicitly align themselves with social work definitions and objectives. The state of 'denial' where a mother denies that abuse has taken place and aligns herself with the abuser is the ultimate obstruction to partnership, and in this case signals total loss of contact with her children. As I described it earlier, to take responsibility requires the ability to see oneself through the social work lens. Self-knowledge must be made visible in specific ways. The mother's 'denial' in this account works as the central organising concept that in Smith's terms 'intends' a particular hearing of the story and in terms of which the additional failings in parenting are additional, cumulatively negative factors (Smith, 1990a).

---

<sup>6</sup> As discussed in relation to the guide, the social worker claims to have responded to the 'speech act' of complaint rather than its truth content (Austin, 1967).



Even where there would appear to be clear evidence of abuse, and/or parents who do not recognise the implications of abuse for a child's welfare, judgement of whether a family can or cannot be worked with in partnership is far from self-evident or obvious. This is demonstrated in a case reported by a team manager where evidence of abuse, and the mother's apparent inability to protect her children did not prevent social workers attempting to 'work with' the family. The social worker chose this case in the course of the interview in response to my asking her about a child protection case in which legal measures had not been sought. She had been involved as supervisor and manager of the social worker involved. The extract that follows represents an interesting contrast to SW5's account above in that it draws on a different set of sense-making techniques to give an account of a case where worries about (in this case physical) abuse did not prevent social workers attempting to work with the family:

- 1.PR: so an older child came into the office and made
- 2.SW6: yeah, allegations of abuse
- 3.PR: right
- 4.SW6: and that was only the tip of the ice berg really because there were
- 5.other concerns that came to light
- 6.PR: and was there an investigation on duty<sup>7</sup> or did it go?
- 7.SW6: no I think in that case it wasn't in our team to start with it started in
- 8.another team and then the family moved here and we took over the
- 9.investigation, yeah it would have started on duty, but erm, yeah it's taken a
- 10.while and the family haven't been particularly co-operative but we've
- 11.never sought to remove the children erm, we've tried to work with the, in
- 12.fact we encouraged the father to move home
- 13.PR: and you said that there were concerns about neglect and physical abuse
- 14.as well
- 15.SW6: yeah and we've worked with them, in fact we helped the family to
- 16.get re-housed which is why they were then in our area, and since they've
- 17.been re-housed the physical conditions have improved and
- 18.PR: you mean that the concerns about the physical abuse, they were allayed
- 19.the
- 20.SW6: well I mean, I think that it was quite difficult to work with the
- 21.mother because she didn't, because for a long time she didn't sort of appear
- 22.to understand why there was so much concern, and I think you know you
- 23.have to be prepared to stick with it really, but I mean, when she came to
- 24.this team [] and I think we were trying to help her with the sort of practical
- 25.aspects of parenting, sort of trying to make sure she had adequate money to
- 26.meet the children's needs, and through that she developed a better

---

<sup>7</sup> The duty social work team takes and responds to any urgent child protection referrals. In this authority duty is managed by full-time duty officer and staffed on a rota basis with children and family social workers.



27.relationship with the social worker whereby the other issues of neglect and  
28.lack of stimulation were being addressed and I think that you know that  
29.sometimes people have to be up-front about the fact that children go to  
30.school in dirty clothes or they're actually smelling because they haven't  
31.washed for several days. But you know you have to kind of confront that in  
32.a way that's going to have some kind of effect and not cause you know just  
33.an antagonistic response. And [] sometimes in order for you to gain trust  
34.and respect, so over a period of time, things did improve

Interestingly the allegation/disclosure of abuse barely features in the account. In contrast to SW5's account instead of focusing on the issue of dirty children and dirty clothes as evidence of the mother's inability to care for her children, these are described as the 'practical aspects of parenting' which can be worked on (lines 23-24). Although the case referred to by SW6 was initially self-referred in terms of clear child protection issues (the allegation of abuse, line 2) it seems to have been worked on and responded to in term of family support rather than child protection. Although in neither account was the mother deemed to be 'co-operative' with social work concerns, in SW6's account this was not a reason to cease working with the family or to remove the children. SW6 says instead: 'you have to be prepared to stick with it really' (lines 21-22). The key differences in the two accounts would seem to be the different way in which the cases were classified. The interpretive scheme of the mother's 'denial' of sexual abuse in SW5's account is a very different one from the mother's 'lack of understanding' in SW6's account: 'for a long time she didn't sort of appear to understand why there was so much concern' (lines 20-21). In terms of the underlying rationality of the accounts, 'denial' and the active suppression of disclosure of sexual abuse by her children corresponds to a more urgent and more draconian course of social work/legal action than does 'lack of understanding' which renders the mother more redeemable and more susceptible to social work support and tutelage. Absence of information can be worked-on whereas the obstruction of information cannot.

A comparison of SW5 and SW6's account suggests that it is the interpretive schema used to classify and understand the kind of cases they are, rather than the classification of abuse itself which are key for how the cases are pursued and accounted for. The cases outcomes provides their retrospective underlying rationality so that in SW5's account, where legal orders were eventually applied for, for the



permanent removal of the children from their mother, the *welfare* of the children supplies the underlying explanatory scheme. In SW6's account where the mother was successfully worked with in the care of her children, the family's right to autonomy provided the underlying explanatory scheme.

The version of working in partnership presented by SW6 demonstrates the point that partnership involves particular techniques of, rather than an absence of, professional intervention. Working in partnership in this account consists of a process of winning-over the family (with services and support) in order to solicit their respect and trust so that they will, in turn, accept social work intervention. The conditions were put in place for the mother in SW6's account to be considered capable of redemption and able to be taught the necessary skills in order to satisfy social workers that she could become an adequate parent for her children. Social workers therefore have at their disposal a range of sense-making devices in order to assess their clients, and to retrospectively account for their decision-making.

#### **(ii.) Partnership and Efficiency**

In the extract of the interview with SW6, partnership, amongst other things, represents a practical and effective means of arriving at the desired social work outcomes with a family. Partnership is presented as a strategy for efficient working, for gaining returns on the investment of social work time, in addition to a means of practising social work ethically. Other social workers also articulated the pragmatic view that the best means of arriving at measures for the care of children was through the establishment of co-operative working relationships between social workers and parents. For example:

1. SW7: I think you know we would all like to be approaching this work for the
2. highest motives, but in fact, if you approach it at your very basic, will it be
3. effective mode of how will I make my job easier? On that test alone. You
4. never sort out aspirational things about working with families to improve
5. their lot.

As is clear from this extract, working in such a way so as to solicit parents' co-operation makes the social work job easier. A *real politic* of social work with families is revealed based on ideas of what can 'realistically' be expected of parents in terms of outcomes and change, rather than idealistic conceptions of improving their lives.



In the following extract the social worker describes the focus of work as demonstrating to parents the critical link between their behaviour and their children's welfare rather than subjecting them to a general scrutiny of their failings:

1.SW8: rather than say 'look now you've got a conference we're on your  
2.back, doesn't matter what's going on, now you have to deal with us' that  
3.will work in some ways because we can't do anything else, if we'd tried the  
4.other methods, we've ended up with that sort of priority sort of thing saying  
5.you know, 'you're not going to, this is how we see it, this is what you've got  
6.to deal with'. But now increasingly before we get to that point we're trying  
7.to, if you like, to make sense for them if it's not already obvious, what the  
8.links are and how we can affect their choices.

This extract presents partnership as pedagogy where parents are invited to 'see through' the social work lens, and are encouraged to look at themselves in relation to sets of social work priorities and definitions (lines 7-8). This method of working is counterpoised to a former authoritarian approach to social work. The point is to make parents see for themselves how they can be better parents, and to make these objectives their own.

As has been discussed in an earlier chapter the emphasis on accountability has become central to the changing character of social work (Power, 1994, 1997). Power contends that audit works as a rationality of government:

a particular manner of *(re)presenting* administrative problems and their solutions, one that is becoming universal (Power, 1994:299, his emphasis).

The discourse of partnership can be seen to have become an element in the governmental rationality of audit, as a means of both regulating and legitimising social work. In my view audit has turned a regulatory gaze upon social work in distinctive ways that are illustrated in these accounts. The *efficiency* of social work is made measurable in terms of the warrantability of its interventions into the private family, translating into an increasingly scientised technology of risk management. Furthermore social workers are made responsible for auditing their own power vis a vis the families with whom they must be seen to have attempted to work in partnership.

### (iii.) Partnership as Threat

Social workers' descriptions of what they understand as working consensually differed enormously however. In the following case, a social worker described a case where repeated attempts on the part of social workers to apply for orders for the permanent removal of a child were turned down by the court:

1. SW9 there's one young child, this was one that I got involved with and then  
2. supervised, but it was a baby of an alcoholic mother and we, basically she  
3. kept on doing the right thing, she could get so drunk that she'd take the  
4. child, the baby [changed side of the tape] to casualty because she realised  
5. she couldn't look after it, at the beginning but it became a regular pattern.  
6. There were occasions where she was just too drunk to even take the child  
7. there. What we did is, she was very resistant for us to do it, actually this is a  
8. good example where we tried to not use orders. Basically we said to her 'you  
9. can't cope, we're going to have to try and work with you to get over these  
10. problems but basically the baby's left with you, you're on your own,  
11. there's no way we can take the risk you're going to drink yourself into a  
12. stupour and you'll be aware of that level just before when you become  
13. incapable and therefore you give up the child', and so what we said to her  
14. 'that in that case what we want to do is we want to receive your child into  
15. care, however if we cannot do it, we will' - I threatened her with a Police  
16. Child Protection order because it's quicker - and she saw that it would  
17. probably be best to do it voluntarily because that way she had more power,  
18. in the sense that she could always ask for the baby back, (and then we  
19. would have to go for a police protection order). So that went fine. We  
20. placed the child with foster carers and we tried to work with her towards  
21. rehabilitation.

The case is introduced as involving the 'a baby of an alcoholic mother'. As an 'instruction' for how to make sense of the case this is extremely eloquent; an 'alcoholic mother' is almost an oxymoron, and immediately raises a question as to the woman's ability to look after the child. The social worker frames the initial action in terms of an assessment of the *risk* represented by the child being left in the mother's care (lines 10 -11). SW9 says that this is an example of a case where they tried **not** to use orders (line 7-8), but as he describes it, the non-use of orders - and supposedly 'voluntary' agreement between social workers and mother - took place in the context of a threat of statutory measures, should the mother not comply with the agreement. This is an extremely weak version of partnership, which effectively consists of the enforcement of non-legal measures without offering the mother the opportunity to



contest the action in a court – something she was able to do once the social services department applied for a care order. The extract continues:

22.SW9: It soon became obvious to us that it wasn't going to work, but I think  
23.the difficulties were that we were getting advice from our legal section that  
24.we really had to show that we had gone to the utmost to try and rehabilitate  
25.her, rehabilitate the child and return it back to her. We had foster carers  
26.who were keeping in contact with her, trying to bring the baby up to see  
27.her, we had stuff like that. She would get too drunk, she wouldn't turn up  
28.for access visits or whatever, and we organised for example for her to  
29.spend day-times at the nursery with the child but she wouldn't turn up and  
30.stuff like that, it was very annoying, and yet when it came to any action her  
31.solicitor was the fiercest to like, we were getting in the way and the like

In the continuation of the interview extract, we see how the account is structured retrospectively so that SW9 is able to present himself and colleagues as knowing from an early stage what the outcome would be; i.e. that the mother and child would not be rehabilitable (line 21). The requirement to have been seen to attempt rehabilitation (before an order would be granted) is presented as a constraint under which the social worker *had* to work, despite his certain knowledge that 'it wasn't going to work' (line 21 -24). Attempting to work with the mother was therefore something that the local authority's legal section (and subsequent magistrates) had to be satisfied had been attempted before a care order would be granted. In the social worker's view the mother had already demonstrated that rehabilitation could not take place. Continued attempts at rehabilitation are therefore presented by the social worker as an obligation that was against his better judgement. The mother's inability to keep up with the access visits – because she 'would get too drunk' (line 27) is presented as providing evidence for the SW9's judgement that 'it was never going to work' (line 1). SW9 goes on to elaborate his assessment of the case in terms of the mother's psychological state:

32.PR: so when you say, it became obvious it wasn't going to work, it was the  
33.fact that she wasn't keeping appointments?

34.SW9: she wasn't keeping appointments, she had no motivation. I mean it  
35.felt to us that she saw the fight between herself and us, which is how it  
36.turned out to be, to be a simple one of games, you know. We didn't feel  
37.happy in our assessment that she realistically wanted that child back. It was  
38.because we had taken the child from her, she saw it, and she had to fight us,  
39.and in fact she had a history of having other children being taken into care,  
40.as it was then, but she lost interest really and she lost the battle, and had no  
41.contact, subsequently, with this case. I can't remember the full time-scales  
41.but it was about two years before we could actually go for a care order



It is interesting that SW9 cites the mothers' game-playing and lack of motivation - a type known to social workers and cited in Protecting Children - rather than her alcoholism, as the explanation for the impossibility of rehabilitation. Clearly however, the 'moral categorisation' (Parton et al 1997) of 'alcoholic' mother provides for the more detailed analysis of her psychological state (Valverde, 1998). The almost incidental mobilising of the mother's 'history' of having children taken into care (line 38) indicates her repeated attempts to prevent and then 'loss of interest' in her children being taken into care. The inclusion of this aspect of the mother's 'history' in the account references a 'type' of problem mother from the canon of social work knowledge. The constitution of the mother's life-history in this way is clearly made possible by the technique of the 'case' through which social work makes-up the particularities of a client's life in terms of its own relevancies. This analytical device enables the interpretation that the mother did not want the child back and was more interested in 'fighting' with the department. It explains why the mother appeared to 'lose interest' in her child, and provides the rationale for the social worker's analysis that it is in the child's best interests for a care-order to be sought for her permanent removal from the mother, once the voluntary agreement had been breached. Alternative ways of making sense of the mother's behaviour present themselves as open and unknowable questions within the account. The account exemplifies the point made in Chapter III that files as a practice of social work knowledge are a resource that is integrated into the accounts I am discussing. They are a means by which a social worker can authorise accounts by privileging aspects of the client's past from an official dossier of information. Furthermore the account demonstrates how the concepts and categories that underpin the rationality of the accounts are embedded in social workers' routine knowledge practices and ways of knowing. Although social workers' accounts present as commonsense explanations of events as they saw them, the accounts are imbricated in professionalised devices and techniques of knowing and constituting the subjects of their practice.

The judgement that the mother had demonstrated her inability to be rehabilitated with the child was contested by the mother, a guardian ad litem. and successive magistrates, and because the mother was unable to maintain access



arrangements within the required time constraints, the social worker's assessment was 'proved' to be right. In the following extract, legal measures follow the break-down of an attempt to work with the parents rather than anticipating such a break-down.

Earlier in the interview the parents had been described as: 'heroine users who led a very chaotic life style' and the following extract describes a crisis when working in partnership no longer seemed possible:

1.SW10: the child was removed from the register. The family still wanted us  
2.to be involved, not the health visitor involved. When we subsequently  
3.visited about three weeks after de-registration they said that they were both  
4.heavily using amphetamines and that's where their money went when they  
5.got their giro first of all, food for the baby came second, food for them came  
6.third so we case-conferenced and the child was put on the register re neglect.  
7.I tried to visit subsequently, no reply to letters, sent to them, they were never  
8.in when I went round to call either by arrangement or if I did any cold calls  
9.they were never in. Then one day I visited and both windows were wide  
10.open, clothes were on the front lawn, beer cans everywhere, it looked like  
11.stuff had been thrown out the window. No reply at the door, but the  
12.neighbour said that the child was with her so I explained who I was and  
13.that I needed to see the child. I went into her house and she was drunk to  
14.the extent that I felt that the child wasn't safe in her care. She was handling  
15.him quite roughly he looked very unsafe so I told her that I'd need to come  
16.back with the police immediately and ask them for their assistance. I  
17.understood the parents had gone to London with a friend and they would be  
18.returning that day so I went out the door to the police station just up the  
19.road, came back here with the police, informed my team manager who  
20.agreed should we need to we could go to court for an ex parte hearing.. for  
21.an application for an EPO which would have given us longer. In the end we  
22.just got the police to use their police protection powers. They removed the  
23.child and placed the child in foster care. The next day I applied for an  
24.interim care order from the, I mean actually I was filling out application  
25.forms for an EPO and an interim care order. When we got to court the facts  
26.spoke for themselves, so the magistrates were quite happy granting a local  
27.authority interim care order so we had that for a month

This account relies on a description of the events as they were directly witnessed by the social worker:

- An admission by the parents that they are not prioritising the needs of the child (lines 3-5)
- The parents' failure to enable social workers access to the child in breach of the agreement following the child's name being placed on the child protection register (lines 6-9)
- A critical incident where the child's safety was demonstrably put in danger (lines 9-14)



The cumulative effect of the accounts is as SW10 says that in court ‘the facts spoke for themselves’ (line 26). The organising devices in this account are the criteria of the child’s safety and the parents’ inability to prioritise the child. Child protection procedures and the social work/legal interpretation of Significant Harm therefore underpin the rationality of this account. The application for a care order had thus not operated as a threat to ensure the parents’ cooperation but had followed the parents’ demonstrable lack of co-operation and an event coincidentally witnessed by the social worker where the child’s welfare was demonstrably put at risk.

A comparison of SW9 and SW10’s accounts reveals the paradox of the social work gaze in relation to the unknowable character of risk assessment and the discourse of partnership. In SW9’s account the risk posed to the child is assessed to be such that legal measures were required as a threat in order to secure the mother’s co-operation. In SW10’s account, the decision to register the child is followed by the parents successfully avoiding social work contact until the point at which the child was found to be at an unequivocal risk. Partnership and the decision to work with the parents in this scenario represents something of a gamble in terms of the welfare of the child as well as a risk for the responsible social worker. These accounts reveal the extent to which eliciting parental co-operation (however tokenistically) and the *level* of partnership to be adopted is not separate from the assessment of risk, since these decisions are based on a prediction of parents’ abilities to meet social work expectations and to keep agreements with social workers within given time-scales.

#### **(iv.) Partnership and Negotiation**

In discussing SW9’s account, I referred to how the initial attempt to protect the child through a voluntary care agreement in the shadow of a legal order, involved the mother being deprived of the rights to contest social work judgements. Statutory measures can therefore provide a transparency of practice and accountability that can offer families the right to challenge social work decisions through ‘due process’. In the interviews, social workers made the use or non-use of statutory procedures, relevant to their own professional vulnerability, i.e. to risks to themselves. In the following extract a voluntary agreement with parents on the condition their child was *not* registered, meant that information was not passed to a social worker which could



potentially have proved harmful to the children and professionally damaging for social workers involved:

1.SW11: I went for my visit and there was no-one in and I wanted to leave a  
2.note to say 'contact me urgently this is extremely important' and I noticed  
3.that there was black smoke damage all the way around the letter box and the  
4.letter box didn't open because it was all melted so I couldn't leave a note,  
5.and I was very concerned, that was two appointments that they'd missed and  
6.it was the second, it was two weeks after the case conference, so that  
7.contract had already broken down so I immediately phoned the team  
8.manager and said 'look, I'm really concerned, I think we need to, we need to  
9.re-activate child protection procedures' and I talked through with her what  
10.we could do, and the first thing I did was I phoned the police and asked if  
11.they had had any recent contact and the police told me that they had a  
12.report that the two parents had separated, there'd been a domestic violence  
13.incident, that the dad had burnt the flat umm that the mum was seeking an  
14.injunction against the dad, blah blah blah, and that there was no-body at the  
15.flat, they'd moved out. So I went and visited her mum's address which was  
16.the address which the police had and this information was, the police had it,  
17.but hadn't passed it onto us whereas if the child had been on the register  
18.they would have told us right away.

Earlier in the interview SW11 had described concerns about the 'neglect' of the children of drug-taking parents. In a child protection case conference the parents had agreed to a comprehensive assessment, involving contact with professionals they selected, at times that were convenient to them, on the condition that, as has been said, their children were not placed on the child protection register. By apparently agreeing to co-operate with the assessment, in the spirit of working in partnership, they were granted the concessions they requested. The parents thus successfully negotiated the avoidance of the child protection register and the multi-agency surveillance it would have entailed, effectively removing themselves from one element of statutory gaze, but not from the anxiety of social workers. In the above extract, SW11 describes a set of unfolding events and 'discoveries' as they were revealed over time, which cumulatively account for and warrant the need to re-activate child protection procedures (lines 7-9). It is interesting to note that the social worker's initial concerns did not relate to any information about harm to the children, but to the parents' absence at successive pre-arranged visits, their non-compliance with the agreement to subject themselves to social workers surveillance and a police report of a fire and a 'domestic violence incident' between the parents. Had it been the case that the children been physically harmed, the agreement with them not to place



their children on the child protection register could have exposed the social services department to criticism. Practices of partnership can therefore represent a kind of brinkmanship, and professional risk-taking for social workers. This account demonstrates the extent to which parents are able to negotiate the character of contact with social workers as long as they are able to give the assurance that they will cooperate with, in this case, the social work assessment. The social worker accounted for the re-activation of child protection procedures, and withdrawal of the attempt to work in partnership with the parents – with recourse to the statutory measures of registration of the children - in terms of the parents demonstrated unwillingness/inability to render themselves visible to the social work gaze.

**(v.)The Responsible Partner**

Partnership therefore ‘translates’ the injunction at the heart of liberalism to govern less (Rose and Miller, 1992) into a social work ethic. Social workers must be seen to act warrantably and to use compulsion only where all other avenues have been explored. Although partnership may at times be the velvet glove on the iron fist of legal measures, where legal powers to protect children must be sought, partnership policies enjoin social workers to conduct themselves in such a way that makes their powers explicit and in a manner which emphasises the dignity, respect and humanity of families involved so as to ‘reduce[s] a family’s sense of powerlessness’ (DoH, 1995:10). In order for a family to be considered capable of benefiting from strategies of Partnership it must be seen to have ‘taken responsibility’ for its problems. As Baistow has argued in relation to discourses of empowerment:

Taking control of one’s life, or particular aspects of it, is not only seen as being intimately connected with the formation or reformation of the self as empowered, *it is increasingly becoming an ethical obligation of the new citizenry*. Not being in control of everyday living arrangements, your time, your diet, your body, your health, your children, and the satisfaction of your needs suggests that there is something seriously wrong with your ethical constitution (Baistow, 1994: 37, her emphasis)

The ir/responsible family is an important analytical device upon which social workers draw, to make sense of their child protection practice. This is exemplified in the following extract:



1.SW12: well every attempt at partnership doesn't always work.Partnership  
 2.doesn't work because social workers don't do it properly, partnership  
 3.doesn't also work because parents aren't good partners, and a lot of the work  
 4.we do is working with families who are not taking responsibility, and  
 5.partnership's certainly not about ignoring failings in families where they do  
 6.exist, there is - partnership gives rights to parents but it also gives  
 7.responsibilities. If they don't meet those responsibilities, even though you've  
 8.tried to continue partnership, you can't, they're breaking down the  
 9.partnership role or they're not participating in it, and so you go to your, as  
 10.much as you can to improve them but if they refuse to get involved you  
 11.can't continue to make up for their lack, but the partnership door must  
 12.always be open

Strategies of partnership thus invest parents with responsibilities which as we have seen involve co-operating with social work agreements. As has been analysed in the accounts, one of the ways in which parents need to be seen to 'meet their responsibilities' (line 7) - and a consistent way in which they are considered to be irresponsible - is by keeping or not keeping appointments with social workers, in other words making themselves available for social work scrutiny. In interview accounts I have discussed, social workers have cited as evidence of lack of co-operation incidents where parents have failed to keep appointments with social workers at home, with child guidance clinics, and for access visits to their own children. In these accounts failure to keep appointments signals a lack of 'motivation' on the part of parents to work with social workers, and hence lack of motivation to change. Parents' time-keeping and associated organisational skills would therefore seem to be equated with responsibility and motivation.

More generally however, families need to be seen to take responsibility for problems by acknowledging them. Failure to take such responsibility is understood as a hindrance to progress and to empowerment. In the following extract SW13 describes a family who successfully achieved such 'self-knowledge' through under-going couple-therapy:

1.SW13: And through that, that couple therapy, we moved to a stage where  
 2.Dad acknowledged that he had a problem with drinking, he was violent, and  
 3.he didn't want it to be that way and Mum became able to set boundaries for  
 4.herself, saying: 'if you're violent ever again, then I'm going to leave, I'm  
 5.strong enough, I can do it' and she said that kind of thing to him and he said,  
 6.'I don't want you to leave, I want to change' and they did kind of through  
 7.that process achieve change and recent contact with the family shows that  
 8.there is, that that violence isn't there any more, the children's behaviour has



9.improved they seem much more happy and settled children, and their names  
10.have come off the child protection register and it's a case that I'm going to  
11.be closing very shortly because it's now being, it was Month when they  
12.came off the register so it's now been nine months since registration  
13.stopped and the improvements continue, and the parents are now, they  
14.don't have to see me at all, because they know that the children's names are  
15.off the register, but they do now call me if they're having difficulty so they,  
16.they're working with us, and that means that we can actually say, okay, you  
17.know we'll close this case and you can come to us if you've got a problem,  
18.which we're now confident that they will do that so, and they've been able  
19.to accept the professional support and advice offered, and to, to make good  
20.use of it.

The problem for which the children were placed on the child protection register was violence between parents, which was deemed to have a direct impact on their children's welfare. SW13 reports the clients' statements to each other (lines 4 and 6) as an indication of their motivation and ability to change and to attain self-knowledge. As well as presumably managing to attend the pre-arranged couple-therapy appointments, the parents have revealed themselves to be adept at assessing themselves in terms of a professional discourse of couple therapy. They are able to demonstrably align themselves with social work understandings and definitions through their use of the language of self-reflection. Empowerment can thus be judged to have taken place through the couple's *performance* of self knowledge.

It is important to note that the parents in this case have not always been so co-operative. Later in the interview the social worker describes the epiphany they have undergone:

21.PR: so in that case it was their ability to work with you  
22.SW13: yeah, and probably if, if they'd, at the time of the first case  
23.conference, if they had said that they were willing to do that, then they  
24.might not have been registered. At the time of that case conference both the  
25.parents were saying, we don't want the children's names on the register, we  
26.don't need social services help. I think they knew that they'd got problems  
27.but they didn't deal with them, they didn't want to change

The social worker links registration to the parents' unwillingness to voluntarily submit to social work intervention occasioned by domestic violence incidents. Their entering into couple-therapy was thus part of the care plan devised once the children's names had been placed on the child protection register. Not only have the couple now apparently demonstrated their co-operation by engaging with and learning to



understand themselves in terms of the discourse of couple-therapy, but they also acknowledge the role of professionals in that transformation. An index of the extent to which they have become 'responsible' parents is signalled in the fact that even though they are no longer statutorily obliged to see the social worker, they are prepared to continue contact with social workers when difficulties arise (13-17). Paradoxically, SW13 sees this acceptance as evidence that the case can be closed.

### **Conclusion**

Partnership therefore functions in many different and sometimes internally contradictory ways. I have described the development of policies of partnership in child protection and how partnership, and its associated practices feature in social workers accounts of their child protection practice. Policies of partnership effectively challenge the legitimacy of intervention in the family, the authority of social work expertise, and propose a new active role for parents. It would seem that partnership with parents in child protection is multi-faceted. It relates to ethical social work practice, to the delivery of effective outcomes, as well as providing families with a mechanism for understanding and regulating themselves in terms of social work perceptions and priorities.

In the interviews social workers described decisions as to whether to work in partnership with families in terms of parents' willingness to co-operate with social work demands and assessments of their capacity for rehabilitation. I have argued that the analytical and interpretative work of authorising these accounts is also a feature of, and not separate from child protection work. Working in partnership is an important way in which social work is rendered accountable and thus legitimate.

In Chapter V, I discussed policies and accounts of practices of risk assessment, risk-management and risk-thinking in child protection social work that I described as an attempt to make the family knowable and calculable in the context of persistent uncertainty. While the discourse of empowerment and the principles and policies associated with partnership do not seem compatible with a preoccupation with the calculation of dangerousness and assessment of risk, as I have discussed in interview extracts, the two strategies coexist. Social workers make calculations about the

possibility and limits of partnership with parents. While the identification of risks appeals to the concern to avoid unnecessary intervention in the family, policies of partnership seek to engage and involve the family in their own assessment, thus providing a means of 'governing at a distance' (Rose and Miller, 1992). Discourses of partnership in child protection social work therefore have implications for both the authority of social work expertise and the responsibility of the family for its own welfare. The term operates to describe a different kind of relationship between family and state, providing a critique of former paternalistic practice. Partnership cannot equalise relations between social worker and family, but requires that social workers adopt ways of working-on clients in order to effect their responsabilisation. At the same time as partnership references mechanisms through which families can participate in child protection procedures it regulates social workers in how they conduct themselves and asks them to adopt a self-consciousness in relation to their own power.



## Chapter V11

### Conclusions

I have described how textual practices and inscription have played a part in the production and stabilising of knowledge claims concerning child maltreatment. The development of such diagnoses have in turn provided the *conditions of possibility* for social workers to seek-out potential signs of child maltreatment at the same time as they have effectively down-graded social work's claim to expertise. The task of social work, hitherto concerned with the support and rehabilitation of the sometimes neglectful and cruel 'problem family' has been profoundly reshaped by the emergence of phenomena that were not necessarily productive of psycho-social signs and that required medical expertise for their proper interpretation and verification. In addition, the emergence of child maltreatment required new legal mechanisms that encoded the rights of children and parents as well as sets of procedures for its multidisciplinary management and guidance in techniques for social workers to see and anticipate its signs.

As well as generating new *kinds* of personhood both in terms of 'abusive' parents and 'abused' children and new conceptual strategies for constituting and working upon them, child maltreatment has thrown-up a new element of *uncertainty* for the social work gaze. The uncertainty associated with social work knowledge, the loss of confidence in social work as an expertise and the manner in which social work has come to be made accountable have transformed the task and role of social work. While the focus of post-war welfarist legislation had been to create a cadre of professional case-workers to respond to the needs of deprived and neglected children and their families; the target of regulation, procedure and guidance today has become the reconstituting of the social worker in terms of the legitimacy, warrantability and proceduralisation of his/her role. I have described how the social worker is made-up or imagined in relation to a set of problematisations concerning what it is possible for him/her to see and how i.e. by which techniques, can s/he see it.

It has been my aim in this thesis to anatomise what is characteristic about the contemporary *social work gaze* which, after Foucault I have taken to refer to both a theoretical way of seeing and an exercising of a distinct form of power that is

simultaneously normalising and surveying. The clinical gaze described by Foucault was made possible by technologies *of seeing* in the examination and its attendant 'apparatus of writing' and in turn made possible the 'constitution of the individual as describable, analysable object' (Foucault, 1991:190). I have attempted to capture the extent to which the contemporary social work gaze is both a means of seeing and not seeing, as the criteria for what is looked for has become increasingly refined and the social worker is asked to be increasingly vigilant in his/her decision-making.

It is my thesis that, in the face of the increasingly contested and high-stakes character of child maltreatment, social work itself has thus become increasingly problematised as a site of government. I have described attempts to standardise the social work gaze through the proceduralisation of social work practices, the regulation of the techniques for social workers to see and the possibilities of what they can see. I have shown how the re-shaping of social work in relation to the seeking out and investigation of child maltreatment has conflicted with a re-assertion of liberal discourse of the family's rights to privacy and autonomy. I have argued that the need to intervene in the family in the interests of child's welfare while maintaining the promise of the autonomous family - which I have referred to as the public/private paradox of the family - has raised practical as well as ethical problems for legitimate social work practice. The two strategies of risk-management and of 'working in partnership' with families have emerged in order to, on the one hand render visible an 'at risk' population through disciplinary practices of assessment and surveillance, and on the other hand, enjoin parents and social workers to 'work together'. While the managing of risk in child protection social work has entailed social workers in attempting to identify the equivocal signs of abuse and abuser, the introduction of the discourse and policies of partnership has been an attempt by policy makers to integrate a rights discourse vis a vis the family. Partnership invests parents and children with rights, requiring that social workers use their powers reflexively and in relation to a particular ethical code; while at the same time they demand the paramountcy of the *welfare* of the child.

Department of Health documents were published in order to guide the social work gaze in relation to specific relevancies and criteria. These documents which



mark key governmental moments in the reshaping of children and family social work, are understood in the thesis as mechanisms of textually-mediated rule (Smith, 1990) that serve to constitute the social worker as well as the subjects of his/her knowledge. I have argued that while not determining the social work gaze, these texts provide its conditions of possibility, a vocabulary and conceptual currency for practice.

Protecting Children. A Guide for Social Workers undertaking a Comprehensive Assessment (1988) was thus an attempt to provide a model of assessment through an interrogative and observational process. The questions, and guidance for observation 'black-box' (Latour, 1987) concepts from psycho-sciences (including child development, attachment theory, family systems theory), the responses to which constitute a body of 'evidence' upon which the social worker is asked to arrive at a verdict upon family life and the risks posed to the child within it. The guide represented a data-gathering exercise in a cycle of child-protection procedures, the output of which was a synthesis of facts about and observations of the family.

The Challenge of Partnership (1995), the outcome of a consultation with families who had experienced child protection social work as unjust and alienating, sought to critique the way in which social workers carried out child-protection work and to re-write the role and task of social work in terms of an elaborate ethical code. While the emphasis of Protecting Children was the standardisation of the social work gaze in relation to a perceptual grid of risk-management, The Challenge of Partnership seeks to regulate the social worker in terms of the respect, dignity, honesty and openness s/he accords his/her clients and in terms of his/her acknowledgement of and reflection upon his/her own power. The Challenge of Partnership thus asks the social worker to audit his/her power and to reflect upon the manner (and sometimes literally, manners) in which s/he conducts his/herself in relation to his/her clients. At the same time, the guidance maintains the overriding principle of the need to prioritise the welfare of the child and the need, at times, for legal measures in order to secure the child's welfare. The concept of partnership presented by the guidance situates the social worker and the family as a site of ethical governance. Its prescriptions upon legitimate professional practice operate to invest family members with rights as human beings rather than as the subjects of

disciplinary/judicial practice and is designed to effect the responsabilisation of the family.

As is demonstrated by social workers' accounts of working in partnership, it is incumbent upon the social worker to realise such rights through particular strategies of practice - partnership is paradoxically something the social worker does to a family. Partnership therefore involves alternative strategies of deploying social work power rather than an equalising or negation of power. It is my thesis that partnership is not an alternative to risk-management and the techniques of assessment and surveillance that it involves but represents a new imagining of the social worker in terms of a reflexivity vis a vis his/her power and a tentativeness vis a vis the legitimacy of her intervention in the family. Furthermore, at the same time that partnership imagines the client as an empowered and responsabilised subject of social work practices, it takes place in the shadow of statutory procedures, should co-operative working break-down.

In my analysis I have examined both how social workers render their accounts *accountable* in relation to official procedure as well as the discursive repertoire upon which they are able to draw to provide rational accounts of practice. In other words I have examined how social workers authorise practice in terms of the contents and the organisation of their accounts. Social workers described the sets of procedures they followed in the course of carrying out child protection practice. Reporting practices are dispersed through multiple media and methods of recording and can be understood as techniques of managing risk. Social workers described how such 'knowledge work' has increasingly come to dominate their work. In addition, procedures for the management of risk sometimes compete with emerging management strategies that attempt to render social work auditable. The rationalities of audit may also conflict with notions of 'quality social work'. If social work time is conceived as an input, 'efficiency' may be constituted as the rapid through-put of cases rather than in the therapeutic notions of the 'empowered/co-operative parent' or for that matter the welfare notions of the protected child.



I have explored how social workers make sense of both risk and partnership in their accounts of practice. I have argued that the concepts and categories that underpin the rationality of the accounts are embedded in social workers' routine knowledge practices and ways of knowing. In Chapter II I cited Dorothy Smith who, after Marx argues that concepts and categories within texts express sets of social relations. As with official texts, it is my thesis that social workers' highly *textualised*, retrospective accounts of their practice rely upon a range of concepts and categories which work authoritatively to *intend* the overall rationality of events described. In Chapter IV I have described the character of the historically contingent sets of social relations in the organisation of medicine, psy knowledge and law that Smith argues: 'provide the conditions of the sense of concepts that express them' (Smith, 1990b: 41). Although social workers' accounts present as commonsense explanations of events as they saw them, in my analyses I have described how these accounts are imbricated in professional devices and techniques of knowing and constituting the subjects of their practice. At the same time social workers' reports of how some decisions are arrived at describe craft-like and ad hoc ways of knowing involving for example 'rules of thumbs' and devices such as the 'known family' whose caseness is inscribed in social work files. Indeed the unofficial criteria of the 'known' family exemplifies how the social work gaze is both a seeing and a not seeing since it would seem that there is an expectation that there will be a recycling of the known population of risk. This may mean that referrals from or about families who have not previously had a 'history' of contact with the social services department or who are not already visible to and known by the multidisciplinary network of school, health visitors, general practitioners etcetera. may be taken less seriously.

My analysis of interview accounts demonstrates that despite attempts to systematise and scientise social work knowledge, social work decision-making is an ethical enterprise. The construction of legitimacy in social work accounts relies upon appeals to proper procedure and warrantable practice. Social workers' accounts of practice have shown that what counted as legitimate or warrantable practice depended upon the outcome of the cases described. Although in Smith's terms warrantable practice could be said to be retrospectively 'worked-up' in the interview accounts, at the same time I have argued that social workers are appealing to existing interpretive

schema for what counts as legitimate practice. While warrantable practice was accounted for in relation to the prioritisation of 'the welfare of the child' in an account where a child was removed from an alcoholic mother, in another account of a case where support services had been used to clean-up a home and the social workers had managed to support the children's care by their mother without the use of care orders, warrantable practice was accounted for in relation to the need to 'work in partnership with parents'. The age of the child, the status of the referrer, the self-evidence of the harm, the presence or absence of 'denial' were all factors mobilised in the accounting of legitimate social work practice.

The most recent attempt to scientise the social work gaze in the Framework for the Assessment of Children in Need and their Families (2000) is based on the view that a population of children 'in need' exists independently of professional practices and methods of knowing it. Despite the sophisticated proceduralisation of the child protection system, the methods of referral that make families known to social services are not amenable to systematisation; the means by which the private family come to the attention of social workers are ad hoc and tend to recycle the 'known' population. Furthermore, despite a growing body of research on child abuse and its characteristics, indicators of risk are far from unequivocal. Uncertainty in child protection social work can thus never be over-come, only managed. The search for greater accuracy in the identification of risk is thus likely to reshape the role of the social worker to that of generating more and more data for expert interpretation and evaluation.



## Appendix I

### Interview Schedule

1. Can you tell me about a child care case post Children Act that has involved court action being taken?

What was your role?

Was this an ongoing case?

What were the concerns (e.g. the Child Protection register categories of neglect, emotional abuse, physical abuse, sexual abuse)?

What kind of events/occurrences/observed behaviour resulted in these concerns?

Was this behaviour that you saw or was reported to you/to the department?

Was this a family who had been known to you for some time?

How long had you been the allocated social worker

How did you proceed?

Did your concerns have to meet certain criteria?

What forms did you fill in?

How did you make that decision?

[Was there an attempt to meet the child's need some other way, working in partnership with the family, providing resources, was the child put on the child protection register, was there a child abuse investigation, what were the stages that were gone through before it was decided to apply for a court order, or was this an emergency procedure]

What kind of court order was applied for?

How was this decided upon i.e. what needed to happen?

What kind of decisions were you involved in making, was this as part of a team, was the case taken out of your hands?

Were the parent/s co-operative?

Were you happy with the way that this case proceeded?

**2. Can you tell me about a child care case post Children Act that you have been involved in that has been the subject of child protection concerns but has not resulted in a court order being applied for?**

What was your role?

Was this an ongoing case?

What were the concerns (e.g. the Child Protection register categories of neglect, emotional abuse, physical abuse, sexual abuse)?

What kind of events/occurrences/observed behaviour resulted in these concerns?

Was this behaviour that you saw or was reported to you/to the department?

Was this a family who had been known to you for some time?

How long had you been the allocated social worker

How did you proceed?

[Was there an attempt to meet the child's need some other way, working in partnership with the family, providing resources, was the child put on the child protection register, was there a child abuse investigation]

How was this decided upon i.e. what needed to happen?

What kind of decisions were you involved in making, was this as part of a team, was the case taken out of your hands?

Were the parent/s co-operative?

Were you happy with the way that this case proceeded?

## **Methodological Addendum**

### **i. Gaining Access to Local Authorities**

My interest in social workers' accounts of child protection practice led to a decision to interview a small number of social workers in one inner city authority and one other authority that would provide a contrast in terms of the client profile, the environment and working conditions for social workers. The selection of the two local authorities in which I carried out interviews was serendipitous in that my interviews took place in the first inner London borough and the first county authority from whom I received a positive response. In order to access an inner city authority I wrote initially to heads of children's services in six inner London boroughs. I received a positive response from the head of field work services in one social services department. Subsequently managers from two other inner London boroughs wrote to me expressing interest in my research but as I had by then gained access to one I did not seek to carry out interviews in these authorities. Reasons given by managers from the three authorities who refused access were pressure of work, major reorganisation of the authority and recent involvement in several pieces of research.

In gaining access to a second, contrasting authority I sought advice from researchers at the National Institute of Social Work at a meeting of the recently established Goldsmiths/NISW partnership. Following a suggestion from a contact at this meeting I attempted to gain access to an outer London authority which ultimately declined my request. I was then successful in gaining access to the second authority it was suggested I contact, a town in a south coast county which had recently been converted to a unitary authority .

### **ii. The Focus on Social Workers' Accounts**

My focus on social workers' accounts of their practice derived from an interest in accounts and conceptual practices more generally. The interviews were designed to elicit the kinds of descriptions that social workers might give to any one who asked them about their work. I wanted social workers to focus upon actual cases in which they had been involved as a means of eliciting accounts of particular instances of



decision-making as opposed to general accounts of practice and procedure. In addition to interviews with social workers, I had hoped that I would be able to observe a number of child protection conferences in order to examine how child protection concepts and categories are deployed in this official setting. In neither authority however did managers feel that parents or professionals would find my presence helpful at such sensitive meetings.

### **iii. The Selection of Social Workers**

Since I was interested in carrying out qualitative analysis of interview data and I would be transcribing the interviews myself I requested interviews with a small number of social workers in each authority - a minimum of eight field social workers, a duty manager and a child protection coordinator. As with the selection of the authorities, the selection of social workers was based upon their willingness to participate in the research rather than upon their representativeness. In both authorities social workers had been sent a letter by a senior manager describing my research and making a general request for cooperation. Area managers in the London authority gave me a list of social workers with whom I could request interviews and in the south coast authority I talked about my research and canvassed social workers to be interviewed at a social work team meeting to which I was invited. Several of the social workers I interviewed in both authorities expressed surprise at how helpful they had found the process of describing their work.

### **iv. The Analysis of Interviews**

Once it emerged in the process of carrying out the interviews that categories of the legislation were not key in how social workers made sense of cases, the focus of the thesis shifted from an initial interest in the operationalising of the codes and categories of the Children Act, to a more broad analysis of the strategic character of social workers' accounts of practice. The analysis of the interviews was thus led by the data as I found it. I did not make use of a computer programme for the analysis of qualitative data which would not have enabled examination of the accounts in terms of their strategic character, the 'instructions' they contained or their structure. I was asking how social work practice was made accountable, what analytical work was taking place in the accounts and how was facticity produced in the accounts. Key

themes were derived by a process of reading and re-reading the interview extracts. I examined the extracts for how and which expert knowledge, what sorts of categories and concepts were used to make practice accountable.



## Appendix II

### The Children Act 1989

The Children Act brings together in one document a large body of law (both ‘private’ and ‘public’) including law relating to children in divorce and child custody disputes, non-school attendance, fostering, adoption, children’s homes. In this appendix I will focus on aspects of the legislation as they relate to child protection work.

In addition to the principle of the welfare of the child and the welfare checklist discussed in Chapter IV, the Children Act makes provisions for several measures which have not appeared before in legislation. Where compulsory measures are taken and a child is the subject of a local authority care order, the Children Act requires that contact between the child and her family is maintained. Indeed a local authority is required to include plans for contact with the family in the application for a child protection order. Similarly, in the spirit of removing total authority and control from the local authority and vesting (some of) it with the family, when a child is being ‘looked after’ in local authority care as part of a voluntary arrangement, the family no longer need to give notice for the removal of the child from that accommodation. This is consistent with the aim of the Act to ‘balance’ relative rights and responsibilities of families and local authorities, as well as being consistent with the promotion of voluntary accommodation as a service that parents of children who are defined by the Act as ‘in need’, can choose.

The Children Act creates the category of *parental responsibility*, which replaced the former legal category of guardian, and of *parental rights and duties* in earlier legislation. The concept is intended to emphasise that parenthood is concerned with responsibilities and duties to a child rather than simply rights of guardianship. The legislation does not define what these rights, duties and responsibilities are:

all the rights, duties, powers, responsibilities and authority which by law a parent of a child has in relation to the child and his property (Part I, Section 3 (i))

Mothers and married fathers automatically have parental responsibility, only losing it on the adoption of their child<sup>1</sup>. Under the previous legislation parents would lose parental rights in some circumstances such as when their child had been under a care order for three years. Under the Children Act, if a child is in the care of a local authority or an appointed individual, parental responsibility remains 'shared'. Although the sharing of parental responsibility would seem to provide statutorily for parent's continuing involvement in their children's lives, the character of that involvement, with contact often supervised by social workers, is clearly unlike that normally associated with parenthood.

The Children Act also creates two categories that operate as criteria for the provision of local authority services (for example Section 20 or voluntary accommodation), and the setting in place of compulsory measures for intervention by SSDs and the NSPCC. These are the categories of *children in need* and of children suffering or likely to suffer significant *harm*. The definition of Children in Need contained in the Act is as follows:

a child shall be taken to be in need if a) he is unlikely to achieve or maintain, or to have the opportunity of achieving or maintaining, a reasonable standard of health or development without the provision for him of services by a local authority under this Part; b) his health or development is likely to be significantly impaired, or further impaired without the provision for him of such services or c) he is disabled (Part III, Section 17 (10))

Local authorities are given specific and general directions for the kind of services that should be available to be provided to children so defined, *where it is thought appropriate*. The second category created for the operation of care orders is that of *significant harm*:

A court may only make a care order or supervision order if it is satisfied -  
a) that the child concerned is suffering, or is likely to suffer, significant harm;  
and  
b) that the harm, or likelihood of harm, is attributable to-  
i) the care given to the child, or likely to be given to him if the order were not made, not being what it would be reasonable to expect a parent to give to him;  
or  
ii) the child's being beyond parental control (Part IV, Section 31, (2))

---

<sup>1</sup> Unmarried fathers named on the child's birth certificate now automatically acquire parental responsibility.



The definition of harm is specified in the following way:

“harm” means ill-treatment or the impairment of health or development;  
“development” means physical, intellectual, emotional, social or behavioural development;  
“ill-treatment” includes, sexual abuse and forms of ill-treatment which are not physical

(Part IV, Section 31(9))

The suspicion of significant harm taking place or proof of its existence are the sole grounds for the Emergency Protection Order, Child Assessment Order and for care orders. Social workers make applications when they think significant harm is taking place or is likely to take place. It is up to the court or in the case of the EPO a single magistrate to decide, on social work evidence, whether or not significant harm has or is likely to take place. Since a recent ruling the law has taken account of particular problems associated with child care cases, by making admissible, what is described as ‘hearsay evidence’ for which expert witnesses will often be called to offer independent professional assessment.

## Bibliography

- Allen, N. 1993, *Making Sense of the Children Act*, London: Longman
- Ashenden, S. 1996, 'Reflexive governance and child sexual abuse: Liberal welfare rationality and the Cleveland Inquiry', *Economy and Society*, 25: 64-88.
- Baistow, K. 1995, 'Liberation and Regulation? Some paradoxes of empowerment', *Critical Social Policy* 42: 34-46.
- Barry, A., Osborne, T. and Rose, N. (eds.) 1996, *Foucault and Political Reason*, London: UCL Press.
- Beck, U., 1992a, *Risk Society: Towards a New Modernity*, London: Sage.
- 1992b, 'From Industrial Society to Risk Society: Questions of Survival, Social Structure and Ecological Enlightenment', *Theory, Culture and Society*, 9 (1): 97-123.
- Bell, V., 1993a, *Interrogating Incest. Feminism, Foucault and the Law*, London: Routledge.
- 1993b, 'Governing Childhood: Neo-liberalism and the Law', *Economy and Society* 22: 390-405.
- Bennet, F. Campbell, B, Coward, R., 1981, 'Feminists - The Degenerates of the Social?', *Politics and Power*, 3: 123-137.
- Bridge Child care Development Service, 1997, *Report in Professional Judgements and Accountability in relation to work with the Neave Family*, Cambridge: Cambridgeshire County Council
- Campbell, B., 1988, *Unofficial Secrets*, London: Virago.
- Castel, R., 1991, 'From Dangerousness to Risk', in G. Burchell, C. Gordon, and P. Miller, (eds.) *The Foucault Effect*, pp. 281-298, Hemel Hemstead: Harvester Wheatsheaf.
- City of Sunderland Area Child Protection Committee (eds.) 2000, *Executive Report Following the Death of a Child - Laura Kane*. Sunderland: City of Sunderland Area Child Protection Committee.
- Clayden, G., 1988, 'Reflex anal dilation associated with severe chronic constipation in childhood', *Archives of Diseases in Childhood*, 63, 832-836.
- Cleaver, H., Freeman, P., 1995, *Parental Perspectives in Cases of Suspected Child Abuse*, London: HMSO.



- Cleaver, H., Wattam, C., Cawson, P., 1998. *Assessing Risk in Child Protection*, London: NSPCC.
- Cleaver, H., Unell, I., Aldgate, J., 1999, *Children's Needs – Parenting Capacity. The impact of parental mental illness, problem alcohol and drug use, and domestic violence on children's development*, London: The Stationary Office.
- Colton, M.J. 1988, *Dimensions of Substitute Child Care. A Comparative Study of Foster and Residential Care Practice*, Aldershot: Avebury.
- Corby, B., Millar, M. and Young, L. 1996, 'Parental Participation in Child Protection Work: Rethinking the Rhetoric', *British Journal of Social Work*, 26: pp.475- 492.
- Corby, B., 1990, 'Making Use of Child Protection Statistics', *Children and Society* 4: 304-314.
- Croft, S. and Beresford, P., 1992, 'The Politics of Participation', *Critical Social Policy*, 12: 20-44.
- Dalglish, L., 1997, *Risk assessment and decision making in child protection* (Unpublished Manuscript)
- Dartington Social Research Unit, 1995, *Child Protection and Child Abuse: Messages from Research*, London: The Stationary Office.
- Dean, M., 1991, *The Constitution of Poverty. Towards a Genealogy of Liberal Government*, London: Routledge.
- 1994, *Critical and Effective Histories*, London: Routledge.
- DHSS, 1970, *The Battered Baby*, CM02/70.
- DHSS, 1972, *Battered Babies*, LASSL, 26/72.
- DHSS, 1976a, *Non-accidental injury to children: Area review committees*, LASSL, (76), (2).
- DHSS, 1976b, *Non-Accidental Injury to Children: The Police and Case Conferences*, LASSL, 76, 26.
- DHSS, 1978, *Child Abuse: The Register System*, LA C396/230
- DHSS, 1980, *Child Abuse. Central Register Systems*, LASSL (80) 4, HN (80) 4, 20 August.
- DHSS, 1985a, *Review of Child Care Law: Report to Ministers of an Interdepartmental Working Party*, London: HMSO.

- DHSS, 1988, *Working Together. A guide to arrangements for interagency co-operation for the protection of children from abuse*. London: HMSO.
- DoH, 1988, *Protecting Children: a guide for social workers undertaking a comprehensive assessment*, London: HMSO.
- 1991, *Working Together under the Children Act 1989*, London: HMSO.
- 1998, *Modernising Social Services*, London: HMSO.
- 1999, *Working Together to Safeguard Children*.(Draft) New Government Proposals for Inter-Agency Co-operation. London: The Stationary Office
- 1999, *Framework for the Assessment of Children and Need and their Families*, (Draft) London: The Stationary Office.
- 2000, *Framework for the Assessment of Children and Need and their Families*, London: The Stationary Office.
- Dingwall, R., Eekelaar, J. and Murray, T., 1983, *The Protection of Children. State Intervention into Family Life*. Oxford: Basil Blackwell.
- Dingwall, R., 1989, 'Some problems about predicting child abuse and neglect', in O. Stevenson, (ed.) *Child Abuse: professional practice and public policy*, Hemel Hempstead: Harvester Wheatsheaf, pp. 28-53.
- Donzelot, J. 1979, *The Policing of Families*. London: Hutchinson.
- 1997, *The Policing of Families*. Baltimore: The John Hopkins University Press
- Ericson, R. V. and Haggerty, K. D., 1997, *Policing the Risk Society*, Oxford: Clarendon Press.
- Farmer, E., Owen, M., 1995, *Child Protection Practices. Private Risks and Public Remedies*, London: The Stationary Office.
- Fitzpatrick, P., 1995, 'Governmentality and the force of the law', History of the Present Seminar Series.
- Forrester, J., 1996, 'If p, then what? Thinking in cases', History of the Human Sciences, 9:pp.1-25.
- Foucault, M., 1972, *The Archaeology of Knowledge*, London: Routledge.
- 1973, *The Birth of the Clinic. An Archaeology of Medical Perception*. 5th ed. London: Routledge.



- 1984, 'What is Enlightenment?' Translated by Catherine Porter, in *The Foucault Reader. An Introduction to Foucault's Thought*, edited by P. Rabinow, pp. 32-50, London: Penguin.
- 1991, 'Governmentality' , in G.Burchell, C. Gordon, and P. Miller (eds.) pp.87-104.
- 1993, *The Birth of the Clinic: An Archaeology of Medical Perception*, London: Tavistock Publications.
- Fox Harding, L. 1991, *Perspectives in Child Care Policy*, London: Longman.
- Frost, N., 1990, 'Official Intervention and Child Protection: The relationship between the state and the family in contemporary Britain', in N. Parton and The Violence against Children Study Group (eds.) *Taking Child Abuse Seriously*, London:Unwin.
- Frost, N., Stein, M., 1989, *The Politics of Child Welfare: Inequality, power and change*, London: Harvester Wheatsheaf.
- Gibbons, J., Conroy, S., Bell, C., 1995, *Operating the Child Protection System. A study of child protection practices in English local authorities*, London: The Stationary Office.
- Giddens, A., 1990, *The Consequences of Modernity*, Cambridge: Polity Press.
- 1991, *Modernity and Self-Identity: Self and Society in the Late Modern Age*, Cambridge: Polity Press.
- Gordon,C.,1991, 'Governmental rationality: an introduction' in G.Burchell, C. Gordon, and P. Miller 1991 (eds.), p.p: 1-52.
- Gould, N., 1990, 'Political Critique of Kantian Ethics: A Contribution to the Debate between Webb and McBeth, and Downie', *British Journal of Social Work*, 20: 495-99.
- Grace, C., 1994, *Social Workers, Children and the Law*. Oxford: Clarendon Press.
- Gutting,G.,1989, *Michel Foucault's Archaeology of Scientific Reason*, Cambridge: Cambridge University Press
- Hacking, I., 1975, *The Emergence of Probability. A Philosophical Study of Early Ideas About Probability, Induction and Statistical Inference*, London:Cambridge University Press.

- 1986b, 'Making Up People' in T. Heller, M. Sosna and D. Wellberry (eds.) *Reconstructing Individualism*, Stanford: Stanford University Press, pp: 222-36.
- 1991, 'How should we do the history of statistics?' in *The Foucault Effect. Studies in G.Burchell, C. Gordon, and P. Miller 1991* (eds.), p.p: 181-96.
- 1992, 'World Making by Kind Making: Child Abuse for Example' in . M. Douglas and D. Hull (eds.) *How Classification Works: Nelson Goodman among the Social Sciences*, Edinburgh: Edinburgh University Press, pp:180-238.
- 1995, *Rewriting the Soul*, Princeton: Princeton University Press.
- Hall, P. M.,1952, *The Social Services of Modern England*, London: Routledge and Kegan Paul.
- Hallet, C., 'Child-abuse inquiries and public policy' in O. Stevenson (ed.) *Child abuse: professional practice and public policy*. Hemel Hempstead: Harvester Wheatsheaf, pp: 110-44.
- Hendrick, H., 1994, *Child Welfare*, London: Routledge.
- Home Office Circular 157, 1950, *Children Neglected or Ill-treated in Their Own Homes*, London: HMSO.
- 1965, *The Child, the Family and the Young Offender*, (Government White Paper), London: HMSO.
- 1968, *Children in Trouble*, (Government White Paper), London: HMSO.
- 1992, *Memorandum of Good Practice on Video Recording Interviews with Child Witnesses for Criminal Proceedings*, London: HMSO.
- 1999, *Aspects of Crime. Children As Victims, 1997*, London: Research, Development and Statistics Directorate, Home Office.
- Horne, M.,1987, *Values in Social Work*, Aldershot: Ashgate.
- Howe, D., 1994, 'Modernity, Postmodernity and Social Work, *British Journal of Social Work*, 24: 513-32.
- 1996, 'Surface and Depth in Social Work Practice' in N. Parton (ed.) *Social Theory, Social Change and Social Work*, London: Routledge, p.p: 77-97.



- Howitt, D., 1993, *Child Abuse Errors. When good intentions go wrong*, New Brunswick: Rutgers University Press.
- Ingleby Committee, 1960, Report of the Committee on Children and Young Persons, Command 1191, London: HMSO.
- King, M., 1997, *A Better World for Children. Explorations in Morality and Authority*. London: Routledge.
- King, M., Piper, C., 1990, *How the Law thinks about Children*. Aldershot: Gower.
- Latour, B., 1986, 'Visualisation and Cognition. Thinking with Eyes and Hands', *Knowledge and Society*, 6: 1-40.
- 1987, *Science in Action*, Milton Keynes: Open University Press.
- Latour, B., Woolgar, S., 1979, *Laboratory Life: Social Construction of Scientific Facts*, New York: Sage Publications.
- Lawlor, S. Sparks, I., Lewis, B., 1997, 'Who Will Care for Our Children?', *Guardian Newspaper*, January 29: 6-7.
- Lowe, R., 1994, 'Lessons from the past: The rise and fall of the classic welfare state in Britain, 1945-76' in : A. Oakley and S. Williams (eds.), *The Politics of the Welfare State*, London: UCL Press, pp:37-53.
- Marshall, T.H., 1972, *Social Policy*, London: Hutchinson.
- Marx, K., Engels, F., 1981, *The German Ideology*, New York: International Publishers
- Morris, C., 1950, *Social Case-Work in Great Britain*. London: Faber and Faber.
- National Institute for Social Work, 1982, *Social Workers. Their Role and Tasks. A Report of a Working Party set up in October 1980, at the request of the Secretary of State for Social Services, by the National Institute for Social Work Under the Chairmanship of Mr Peter Barclay*, London: Bedford Square Press.
- O'Malley, P., 1996, 'Risk and Responsibility' in A. Barry, T. Osborne and N. Rose (eds.), *Foucault and Political Reason. Liberalism, neo-liberalism and rationalities of government*, London: UCL Press, p.p:189-209.
- Otway, O., 1996, 'Social work with children and families: from child welfare to child protection' in N. Parton (ed.), *Social Theory, Social Change and Social Work*, London: Routledge, p.p:152-72.

- Packman, J., 1993, 'From Prevention to Partnership. Child welfare services across three decades', *Children and Society*, 7:183-195.
- Parton, C., Parton, N., 1989, 'Child Protection: the law and dangerousness' in O.Stevenson, 1989 p.p: 54-74.
- Parton, N., 1979, 'The natural history of child abuse: a study in social problem definition', *British Journal of Social Work*, 9: 431-51.
- 1981, 'Child abuse, social anxiety and welfare', *British Journal of Social Work*, 11: 391-414.
- 1985, *The Politics of Child Abuse*, London: Macmillan Education.
- 1991, *Governing the Family*, Basingstoke: MacMillan.
- 1994, 'Problematics of Government", (Post) Modernity and Social Work', *British Journal of Social Work*, 24: 9-32
- 1996, 'Social work, risk and 'the blaming system'' in N.Parton (ed.), 1996, London: Routledge, p.p:98-115.
- 1997, *Child Protection and Family Support: Tensions, contradictions and possibilities*. London: Routledge.
- 1998, 'Ideology, Politics and Policy' in O. Stevenson (ed.) *Child welfare in the Uk 1948-98*, Oxford: Blackwell Science, p.p: 3-21.
- Parton, N., Thorpe, D., Wattam,C., 1997, *Child Protection. Risk and the Moral Order*, Basingstoke: Macmillan.
- Payne, M., 1989, in S.Shardlow (ed.) *The Values of Change in Social Work*, London: Tavistock/Routledge, pp.114-134.
- Pfohl, S.J., 1977, 'The discovery of child abuse', *Social Problems*, 24: 310-323.
- Philp, M.,1979, 'Notes on the form of knowledge in social work', *Sociological Review*, 27: 83-111.
- Piper, C., 1993, *The Responsible Parent. A Study in Divorce Mediation*, Hemel Hempstead: Harvester Wheatsheaf.
- Power, M.,1994, 'The Audit Society' in A.Hopwood, P.Miller (eds.), *Accounting as Social and Institutional Practice*, Cambridge: Cambridge University Press.
- 1997, *The Audit Society: Rituals of Verification*, Oxford: Oxford University Press.
- Reardon, W., Hughes, H., Green, S., Lloyd Woolley, V., Harper,P., 1992, 'Anal abnormalities in childhood myotonic dystrophy – a possible source of



- confusion in child sexual abuse'. *Archives of Diseases in Childhood*, 67:527-8.
- Rose, N., 1990, *Governing the Soul*. London: Routledge.
- 1992, 'Towards a Critical Sociology of Freedom', An Inaugural lecture, London: Goldsmiths College.
- 1993, 'Government, authority and expertise in advanced liberalism', *Economy and Society*, 22: 283-99.
- 1996a, 'Psychiatry as a political science: Advanced Liberalism and the Administration of Risk' *History of the Human Sciences*, 9: 1-23.
- 1996b, *Inventing Ourselves. Psychology, Power and Personhood*, Cambridge: Cambridge University Press
- 1998, 'Governing Risky Individuals: The role of psychiatry in new regimes of control', *Psychiatry and Law*, 5: 177-95.
- 1999, *Powers of Freedom*. Cambridge: Cambridge University Press.
- Rose, N., Miller, P., 1992, 'Political power beyond the state: Problematics of government', *British Journal of Sociology*, 43:173-205.
- Rowbotham, S, 1994, 'Interpretations of welfare and approaches to the state 1870-1920' in A.Oakley and S. Williams *The Politics of the Welfare State* London: UCL Press, p.p:18-36.
- Sainsbury, E., 1989, 'Participation and Paternalism' in S.Shardlow (ed.) *The Values of Change in Social Work*, London: Tavistock/Routledge, p.p: 98-113.
- Schofield, G., Thoburn, J., 1996, *Child Protection. The Voice of the Child in Decision Making*, London :IPPR.
- Secretary of State for Social Services, 1988, *Report of the Inquiry into Child Abuse in Cleveland*, Cmnd 412. London: HMSO.
- Seebohm Committee, 1968, *Report of the Committee on Local Authority and Allied Personal Services*, Cmnd 3703. London: HMSO.
- Shemmings, D., 1996, Introduction in D.Platt and D.Shemmings, *Making Inquiries into Alleged Child Abuse and Neglect: Partnership with Families*, Brighton: Tennant Professional Books, p.p: xiii-xxv.
- Silverman, D., 1993, *Interpreting Qualitative Data. Methods for analysing talk, text and interaction*, London: Routledge.

- Smith, D. E., 1990a, *The Conceptual Practices of Power*, Toronto: University of Toronto Press.
- 1990b, 'K is Mentally Ill. The Anatomy of a Factual Account' in D.E. Smith, 1990 *Texts Facts and Femininity. Exploring the Relations of Ruling*, London: Routledge.
- Social Services Committee, 1984, *Children in Care*, HC 360, London: HMSO.
- Speight, N., Wynne, J., 2000, 'Is the Children Act failing severely abused and neglected children', *Archives of Diseases of Childhood* 82: 192-196.
- Stenson, K., 1993, 'Social Work Discourse and the Social Work Interview', *Economy and Society*, 22: 43-76.
- Strong, P.M., 1979, *The Ceremonial Order of the Clinic*, London: Routledge.
- Wattam, C., 1992, *Making a Case in Child Protection*, Harlow: Longman.
- Weir, L., 1996, 'Recent Developments in The Government of Pregnancy', *Economy and Society*, 25: 372-92.
- White, S., (1998) 'Interdiscursivity and child welfare: the ascent and durability of psycholegalism', *Sociological Review*, 46, 2: 264-292.
- Women's Group on Public Welfare, 1943, *Our Towns, A Close-up*, Oxford: Oxford University Press.
- 1948, *The Neglected Child and His Family*, Oxford: Oxford University Press.
- Wynne, J., Hobbs, 1986, 'Buggery in Childhood - A Common Syndrome of Child Abuse', *Lancet*, October.
- Younghusband, E., 1950, Conclusion in C. Morris (ed) *Social Case-work in Britain*, London: Faber and Faber.