University of
Strathclyde
Glasgow

Strathprints Institutional Repository

Hogg, Gillian M. and Laing, Angus and Newholm, Terry (2005) *Crisis of confidence: Re-narrating the consumer-professional discourse.* Advances in Consumer Research, 32 (1). pp. 514-521. ISSN 0098-9258

http://strathprints.strath.ac.uk/

CRISIS OF CONFIDENCE: RE-NARRATING THE CONSUMER-PROFESSIONAL DISCOURSE

Angus Laing, University of Glasgow

Terry Newholm, University of Manchester

Gillian Hogg, University of Strathclyde

ABSTRACT -

The professional-consumer relationship in professional services has undergone unprecedented change. Relationships which were traditionally dominated by respect for professional status are in flux as increasingly educated consumers challenge the professional establishment. This paper considers the nature of the professional service consumer and the implications for professional service encounters. Based on qualitative interviews we identify four patterns of consumer-professional interaction, compliant, collaborative, confirmatory, and consumerist, which reflect the nature of the discourse between consumer and professional.

INTRODUCTION

Professional services have traditionally been characterised by an in-built power imbalance where the consumer engages with the professional from a position of dependency, and the professional determines what is in the consumer's best interest on the basis of his or her professional judgement (Parsons, 1975). The professional consumer relationship in this context has however, undergone unprecedented change in the last 20 years: relationships which were traditionally dominated by respect for professional status are in constant flux as increasingly post-modernist consumer cultures come into conflict with modernist professional establishments (Laing et al, 2002). Driven by the intersection of socio-economic and technological trends, this has resulted in an increase of high profile service failures. Ranging from the mis-selling of investment products to professional disregard for patient rights, such negligence has, at least in popular consciousness, been viewed as symbolic of the failure of the established professions to address the needs of contemporary consumers. In this paper we consider the nature of the professional service consumer and the implications of an informed and knowledgeable consumer on the nature of professional service

encounters. We argue that as many consumers turn to the internet as a convenient and accessible source of information, as well as consumer mediated knowledge, they are increasing likely to challenge the traditional power structure in professional relationships and to perceive service providers as failing to meet their individual service requirements. The primary concern of academic research into service failure to date has been with the operational level management of service 'recovery', i.e. recovering the traditional position, rather than acknowledging the potential requirement for change in the underlying format of the professionalBclient relationship (see for example Smith et al, 1999; Colgate and Norris, 2001; Holloway and Beatty, 2003). In the context of the flux of contemporary professional service consumption, however, such an operational perspective does not address the underlying clash between professionals, protecting a status that has traditionally been based on the possession of specialist technical knowledge and superior access to information, and consumers empowered by access to such knowledge and information. By focusing on the professional-client relationship as an evolving discourse, or set of discourses, this paper provides an alternative framework through which we can develop an understanding of the consumption of professional services.

DISCONTINUITIES IN THE PROFESSIONAL SERVICES ENVIRONMENT

In modernity certain categories of services, for example health, legal and financial services, were protected by the concept of professionalism. This was characterised by a number of key features. Firstly, an esoteric discourse generating the perception of homogeneity, secondly a rational scientific rhetoric of reliability, thirdly restricting entry to the profession through vocational education, fourthly a domineering approach to alternatives simulating a knowledge monopoly and lastly an asymmetry of information between the profession and its consumers that suppressed debate. In such circumstances the question of service failure, other than in terms of operational processual dimensions, rarely surfaced. However, in contemporary western societies, professional services have increasingly been exposed to the corrosive effects of a number of interconnected trends.

$ education and information: reduction in the asymmetry between professionals and clients in terms of the level and diffusion of education (Ham and Alberni, 2002).

$ informed consumers: increasing access to information of a highly specialised nature from within and in opposition to the dominant discourse (Hogg et al, 2003).

$ consumer culture: consumer awareness of the proliferation of service alternatives (Laing et al, 2002)

$ questioning of science: post-structural and social challenging of the claims of science and rationality (Lyotard, 1984; Foucault 2003; Elam and Bertilsson, 2003)

$ pervasive media: publicising and exploiting professional disagreements leading to perceptions of heterogeneity (Petts et al, 2000).

$ risk society: the individualisation of risk and ascription of major risks to human activity (Beck, 1992; Giddens, 1990).

Consequently, patterns of consumption, the basis of professional status, and the format of professional-client relationships are in constant flux as increasingly post-modernist consumer cultures come into conflict with modernist professional establishments (Laing et al, 2002). Thomson (2003) in exploring consumption of alternative health care services encapsulates this tension. "The patient as consumer desires to produce his/her own medico-administrative identity through interaction with physicians, nurses and technologies. This has contributed to the diminuition of medical authority as well as increased expectations (and incidences of dissatisfaction) regarding the quality of service. Yet these post-modern currents inevitably collide with the more intractable, modernist features of the medico-administrative system." (p103.) Associated with theses trend many professional services have, in popular perception, become inexorably linked to specific socio-economic features of contemporary society. Conventional healthcare has become associated with the medico-pharmaceutical complex, financial services with the City or Wall Street, and legal services with the political establishment. As a consequence there is an association in the minds of consumers between professional service providers and malpractice, indeed of failures generally within the associated institutions. Having lost the independence associated with professional status through the corporatisation of such services (Vermaak and Weggeman, 1999) established professional service providers have increasingly suffered from negative associations.

SERVICE FAILURES AS SIMULATION AND DIVERGENCE

Adopting a post-structuralist perspective, practices such as the service encounter require to be viewed as inherently precarious. The continued mutual understanding of both consumer and professional that a service encounter is categorised as a 'professional-client consultation' does not rest on some essential and absolute structural quality relating to the encounter. Baudrillard (1988) sees the label profession as a simulacrum masking the absence of any 'real' characteristics that differentiates the professional discourse from competing 'non-professional' discourses. Rather the understanding of the nature of an encounter, in this case as a professional consultation, is dependent on evolving shared practice. As Holt (1997) contends "patterns of understanding are reproduced only if they are inscribed in everyday actions, and actions remain patterned only to the extent that we retain the same understanding of what they mean" (p343). Consequently as the key features which have conventionally marked the boundary between professional consultations and other service encounters such as information and knowledge, are eroded, there is a need for a reworking of the established professional discourse to take account of evolving practice.

At the heart of this is the divergence of the consumer and professional discourse, and the concomitant mutual effort required to pattern a new common narrative. Reflecting the socio-economic and technological changes in contemporary society, a diversity of consumer narratives have increasingly evolved semi-independently of the established professional discourse. Conventionally the consumer narrative drew primarily on the professional discourse for its construction and consequently was closely aligned with and indeed mirrored that discourse. However, drawing increasingly on independent sources of information, and critically independent consumer mediated means of knowledge construction, there is evidence that these consumer narratives are increasingly diverse and distinct from the professional discourse, both in respect of

the service delivery process and the selection of service options. In turn the dynamic of interaction within the professional service encounter is fundamentally altered. Although professionals have reacted to these changes, these responses have been slow, limited and often only reluctantly conceded, reflecting the innate conservatism of professions (Abbott, 1991; Aldridge and Evetts, 2003). Such grudging responses to the interests of consumers may be viewed as having further undermined consumer confidence in professional values, specifically the notion that professionals' primary concern is with their clients (Friedson, 1986; Abernethy and Stoelwinder, 1995) and in turn the validity of the professional discourse. Within the emergent consumer-professional service interactions the evolving divergence of the professional discourse and consumer narratives and the associated proliferation of patterns of consumer-professional interaction can be represented as follows:

Reflecting the complex drivers behind the emergence of diverse alternative consumer narratives, from the research data four 'ideal-type' formats of consumer-professional interaction can be postulated, ranging from conventional professional ascendancy through to emergent consumer ascendancy. These ideal-types are (a) compliant interaction, where the client acquiesces to the professional's superior knowledge and judgement; (b) collaborative interaction, where both parties expect, and are expected, to bring information to the encounter and judgement is negotiated; (c) confirmatory interaction, where the client has made a decision but wants a professional opinion to bolster (or blame) and; (d) consumerist interaction, where the consumer expects to choose their service provider (or whether to use a provider) and to make the service decision independently with the professional confined to an advisory role. Associated with these evolving consumer narratives, the dominant professional discourse has similarly changed with the professional discourse, the 'official' characterisation of the service encounter, having developed from a traditional largely paternalistic rhetoric to a revised collaboration ethos.

This does not imply that professionals uniformly and unquestioningly subscribe to this official understanding and articulation of their role. Rather, that while a range of perspectives is now more apparent among professionals, a revised but nevertheless dominant 'official' perspective is still discernable from professional associations. Critically the evolution of the professional discourse has lagged significantly behind the more rapid evolution of consumer narratives. The degree to which professional and consumer expectations diverge can be framed in terms of consumer 'under expectation' and 'over expectation'.

The resultant discourse-narrative gap sees increasing consumer (and professional) dissatisfaction with the interaction at the core of the service encounter and a concomitant perception of service failure, that is, crisis of confidence. On the one hand some consumers will want to take control of their consumption experience within an overall biography (Giddens, 1991) in a manner that conventional professionals find potentially unacceptable. This disparity can be characterised as 'over-expectation' on the part of the consumer, with the crisis of confidence resulting from the consumer narrative being in advance of the evolving professional discourse. On the other, professionals are aware of going beyond the wishes of more conventional consumers in what can be characterised as an 'under-expectation disparity' where the dominant or 'official' professional discourse is in advance of the consumer narrative, similarly resulting in a crisis of confidence. The potential

development of a more compliant pattern of interaction is a recognition that in contemporary consumer cultures the parameters of the consumption experience are increasingly less constrained and exhibit unprecedented variation.

In this evolving situation both parties face fundamental challenges. For the consumer the challenge is to negotiate alternative patterns of service provision, ranging from either changing the basis of the narrative and hence encounter with existing conventional service providers or identifying alternative, that is non-conventional service providers. At the extreme this may involve reliance on other knowledgeable consumers, so called expert patients or semi-professional litigants (Moscrop, 2002; Oldham and McVeight, 2002) and emergent semi-formal service providers existing outside the conventional institutional frameworks impacting in turn on the boundaries of professionalism.

RESEARCH CONTEXT AND METHODOLOGY

This paper examines the evolving divergence between consumer narratives and the professional discourse in the context of three distinct professional service settings, namely primary healthcare, civil legal advice, and investment management. Specifically the paper explores the way in which professionals characterise consumers and view their role within the professional service encounter, and the nature of the consumer-professional relationship. The research reported in this paper aims to examine the impact of information access, generally but not exclusively via the internet, on professional-consumer relationships in contemporary society. Interviews were conducted with eight professionals from primary healthcare, investment management, and legal services (n=24). Relevant demographic data on the interviewees is outlined in Appendix I. The respondents were identified through the relevant professional associations as representative key opinion formers with an interest in the changing nature of the professional discourse, the impact of the emergence of an informed consumer culture on professional roles, and the nature of that profession in contemporary society. The interviews were structured through use of a standard interview protocol allowing comparison across interviews. Key questions were designed to "'lead' in a direction opposite to that in which [we expected] the answer to lie, thus avoiding the danger of misleadingly confirming [our] expectations" (Hammersley and Atkinson 1995). The interviews were audio-recorded and later transcribed verbatim.

The data were analyzed using QSR N6 qualitative data analysis software to facilitate the identification of recurring themes as well as contradictions across interviewees and sectors. Specifically all text units (except general salutations etc.) were categorised to avoid inadvertent or deliberate loss of information (Coffey and Atkinson 1996). Seven general categories: 'professional as'; 'consumer as'; 'consultation as'; 'environment as'; 'profession as'; 'officialdom as'; 'ICT as' facilitated the analysis. A further 130 categories and subcategories were developed progressively within these but these were generated from the data (Glaser and Strauss 1967). Exceptions or 'negative findings' (Coffey and Atkinson 1996) were either coded within the relevant category or constituted a sub-category. Most of these 'grounded' categories were generated during the initial analysis of the first interview from each sector. The themes developed therefore arise from our categories. The

theme presented here is our interpretation of the professionals' representations of their consumers.

CONSUMER AND PROFESSIONAL EXPECTATION DISPARITIES

RESULTS

Drawing on the data from the professional interviews the specific nature of the four postulated categories of consumer narratives that is compliant interaction, collaborative interaction, confirmatory interaction and consumerist interaction is critically examined. In this the key features of consumer behaviour in each ideal type category, as well as the implications for professionals and the overall service delivery process are explored.

Compliant Interaction

The conventional format of the professional service encounter is characterised by the client acquiescing to the professional's perceived expertise, with such acquiescence having been based the professional's specialist training and access to technical information. There was an implicit expectation that the consumer would defer to the judgement of the professional. Such compliant patterns of consumption also reflected the prevalence of a marked social distinction between the professional and the majority of consumers. Although there is a trend away from such a paternalistic discourse among professionals, it is evident from the data that a proportion of the consuming population remain wedded to the compliant narrative reflecting ongoing trust in professional expertise. The following excerpts illustrate such patterns of interaction.

... when we start saying what we want to do, we want to do this, they say, "oh, well, just do what you think's the best", even if you try and say, well, offer them alternatives, they don't particularly want to get involved in that sort of discussion. [Medical 3]

... in fact friends of mine that complain about doctors and they'll say, "and I went to see my GP and all they could say is what do you think; I went to my doctor to be told." So that, anecdotally, there's a lot more annoyance about us asking them, 'what do you think'; 'what would you like'; 'what do you think is wrong?' [Medical 8]

These professional accounts of consumer behaviours also often function as a demonstration of the extent to which professionals have adjusted to the new cultural condition, that is adopted the emerging dominant 'official' discourse of a collaborative encounter. Yet they equally demonstrate that for a section of the consuming population there remains an attachment to the established compliant encounter, highlighting the existence of an under-expectation disparity within the encounter. Although most commonly associated with older consumers, the expectation that professionals act as the decision maker within the service encounter is not restricted to generations that were socialised to be compliant. Rather the continuation of such

patterns of interaction highlight the potentially significant costs facing consumers in becoming active partners in the service encounter. Encompassing not only the time and opportunity costs associated with the acquisition and interpretation of information, the emotional investment, particularly for vulnerable consumers, constitute prohibitive costs which consumers may be unwilling to carry. Deferring to professional judgement offers the means of reducing these costs as well as offsetting the costs of personal responsibility for decision making. The following excerpts amply illustrate the central influence of consumer vulnerability in promoting the retention of such compliant narratives in the face of socio-economic, technological and political drivers promoting less compliant, more consumerist patterns of interaction.

You know, sometimes people are feeling so ill that they just want to be given something ... [Medical 4]

People who are vulnerable will often not have that capacity, I think for independent research, even if it means ... even if they do have a PC on their desk at home and they need the support. Um, the handholding, I suppose to be able to be taken through that as well. [Legal 4]

They're totally traumatised and concerned... they've probably never seen a solicitor before so the whole thing of seeing a solicitor is pretty tough and the concept of trying to get to grips with the law is very ... so there's quite a large proportion who are just totally reliant and don't really look up anything. [Legal 5]

The emerging new 'official' professional discourse based on the development of collaborative relationships with clients reflects the impact of increased education and information, the questioning of science, and the emergence of a 'risk society' on contemporary western societies. Yet for certain consumers and certain consumption contexts, this collaborative discourse fails to address consumer requirements and expectations, leading to under-expectation disparity and mutual dissatisfaction with the format and outcome of the service encounter.

Collaborative Interaction

The emergence of the collaborative discourse as the dominant professional view in contemporary society is reflected in professional accounts of changes in professional training, where the conventional focus on developing technical expertise is increasingly complemented by the development of expertise in interacting with clients. Central to this is the ability of professionals to communicate, to engage in a dialogue of equals. A relatively young medical practitioner spoke of an ongoing culture change that had brought the development of communication and facilitation skills to the forefront of professional training.

[T]here's been a big culture shift towards communication and involving patients, patients participating much more in decision making, um, giving patients choice, listening, reflecting ... all these sorts of things, our communication skills are valued very highly in ... certainly in general practice it's a major component of membership examination nowadays, all the Royal Colleges are sort of considering communication skills, whereas I would say even 10 years ago that wasn=t the case. [Medical 1]

The central feature of the collaborative interaction is the pooling of information, knowledge and values, with both parties expecting to bring their respective perspectives and 'expertise' to the encounter. The encounter is characterised by being dialogue rich with service outcomes being negotiated between the parties. From this perspective, the informed consumer is an asset rather than a threat to the professional. Thus the consumer's possession of a base level of knowledge obviates the necessity of the professional starting the encounter from first principles. This facilitates a more sophisticated dialogue and process of negotiation, and in turn the tailoring of the service outcome to the requirements of the client. The following excerpts illustrate the nature and format of the collaborative interaction.

Um, it can be nice if they've got some information to start with, but I think... I think what matters most is a thing that they can understand the information that I've been able to give them....And, you know... and feeling that they've taken a sort of... you know, that we've collaborated on the decision. [Medical 6]

Yeah because then you can have more of a two way discussion about things and yeah, that would be great actually, as opposed to me telling them what the law is etcetera, etcetera. It would be great if they had a bit more idea because you could really sort of explore what options they've got and it can cut down on the time as well. [Legal 3]

[Patients are] more prepared to expound their own health values ... and making sure that we take that into the decision... new patient this morning, with high blood pressure and I'm saying you've got to bump your tablets up and she actually said to me, "you must know, doctor that I'm actually into homeopathy and... something else, you know, and I'll go up this time but, you need to bear this in mind". [Medical 2]

Such upbeat portrayal of the collaborative encounter, however, masks varying degrees of tension between the consumer and professional during the process of negotiation. This is particularly central in service settings, such as divorce and coronary heart disease, where the service outcome is uncertain and where a range of potential service options exist. Central to this tension is the issue of the weighting given to consumer versus professional information and to consumer versus professional judgement. Though collaborative, such encounters may be highly contested and represent the front-line in the post-modern clash between the veracity of alternative bodies of knowledge and bases of expertise. The veracity of the information and knowledge brought to such negotiated encounters is a fundamental issue in defining the respective consumer and professional roles, and the boundaries of these roles.

I may cast doubt on what [information] a patient brings to me but what I can bring to that patient also needs to be checked out, I know that. [Medical 2]

They'll come with a pre-conceived idea, I think it's a wrong judgement they've come to, it may be very difficult to persuade them otherwise. If I was sufficiently convinced they were going the wrong way and they were looking at the wrong things, then I would really try to pull the stops to, show them that although they had done the research, their research was flawed in particular areas, in what they were doing. [Financial 5]

If they come in and say, yes, I know about this and I know about that and I will check it out, but actually you know, [laughs] to make sure that actually their understanding of the grounds of divorce or whatever, is the same as mine. [Legal 4]

A recurring theme was the perceived lack of both contextual and underpinning technical knowledge (e.g. in respect of basic physiology or financial market structures) among consumers. This was associated with an identified tendency for consumers to seize on specific elements of specialist technical information that suited their particular requirements, taking this information out of context and without reference to their broader circumstances. The failure to adequately contextualise this information, was viewed as raising the risk of inappropriate decision making where the consumer expected the dominant role in the decision making process. For professionals a central element of their role, and indeed of their professionalism in the context of collaborative encounters, was to provide this contextual information and technical knowledge. There was, however, an acknowledgement that in certain circumstances (e.g. chronic diseases) where consumers had lengthy exposure to relevant service, not only might they possess a technical knowledge base comparable to that of the professional, but they frequently had more extensive information on service options than the professional. The balance of authority in the collaborative encounter with such patients was reversed with the professional effectively learning from the consumer.

And I mean I will certainly take advice from someone who's an expert patient, um, about treatment because, I mean, they know more of it than I do, um, very often. [...] The information that is held now by some patients, is tremendous and they will be able to manage their disease with us much better than if they didn=t have that information. [Medical 4]

Confirmatory Interaction

Although the data indicates an increasing expectation on the part of consumers for active participation in the professional service encounter through contributing information, knowledge and personal values, there is equally evidence that there are limits to the extent to which consumers ultimately wish to exert their authority and act independently of the professional. That is, although consumers may have made service consumption decisions based on independently acquired information and knowledge prior to meeting with a professional, professional input is sought as the final step in the decision making process. Such input is not sought in order to review or overturn the decisions made by the consumer, but rather to confirm and verify those decisions, to secure professional approval. The role of the professional within the confirmatory narrative is thus to confirm the consumer's decision and bolster their resolve in following a particular course of action. Associated with this is the perceived desire on the part of some such consumers to abdicate personal responsibility, and for the professional to act as a scapegoat in the event of the consumers' decision not delivering the expected outcome. Such abdication of personal responsibility might be a reaction to the 'risk society' (Beck, 1992). The desire for professionals to provide confirmation and solace concerning the outcomes are evident from the following excerpts.

He really wanted to know, was he going to be incontinent after the operation ... and was he going to get his sexual abilities back? And then the questions the... the statistics about sexual ability [on provider website] looked pretty dodgy to me, really, because you have to ask how many men in the prostate range actually had a decent sexual ability beforehand. [Medical 2]

They want your affirmation that what they've done is correct. And that's part of the motivation for them coming to see you. "Been on the internet, sorted this out, and I think this is what I want. Would you agree?" [Financial 3]

... the ones who come in knowledgably, um, and they sometimes just come in for one meeting, having read it all, just wanting confirmation of what ... whether they're on the right track ... so they've read it all up and they're convinced. [Legal 5]

Although representing a further extension of consumer authority, service encounters characterised by confirmatory interaction are qualitatively different from collaborative interaction based encounters. Of limited duration, the consumer-professional dialogue is highly circumscribed, being confined to the confirmatory agenda of the consumer. As such confirmatory interaction based encounters effectively reverse the conventional format of the professionally dominated paternalistic encounter where dialogue was constrained but the professional determined the course of the encounter. For both consumers and professionals, this reversal can create a mismatch in expectations between the consumer and the professional, leading to a situation of over-expectation disparity on the part of the consumer.

Consumerist Interaction

The ultimate outcome of the erosion of informational asymmetries characteristic of professional services, together with the growth of consumer mediated knowledge through online communities (Hogg et al, 2004), has been the emergence of explicitly consumerist narratives among professional service consumers. In such narratives the professional is reduced to acting purely as an advisor with the consumer both evaluating the advice and making decisions independently of the professional. Implicit within these consumerist naratives is the freedom of the consumer to select between the advice offered by alternative, indeed competing, suppliers without reference to a professional gatekeeper. For example, the advice of a physician may be considered alongside the advice of an osteopath or reiki therapist, with the weight attached to advice from a particular 'professional' being shaped by the values of the consumer. Central to such consumerist interaction is the erosion of the established authority of the professional as a result of the questioning of conventional basis of knowledge (Foucault, 2003). A plurality of professional and quasi-professional discourses consequently compete for legitimacy among consumers, with consumers exercising the independence to choose between these alternative offerings. Consumerist patterns of interaction are most evident in areas of contested knowledge and expertise, and where there is disagreement as to the merits of alternative service options, as is illustrated in the following excerpts.

I had a patient dying of that who, whose husband, um, brought a lot of things in about leading-edge research into motor neuron [disease] in an American university and discussed about the, the relevance of that to his wife's particular situation, and then I

had to go and try and explore where that was in the list of what was accepted as medical knowledge and it wasn=t very far up it, shall we say, at that stage. It certainly wasn=t within what the NHS would reckon as therapeutic at this stage. [Medical 4]

At the end of the day they're the ones that tell me how they want to deal with it and how they want ... to put their case. I can advise them on the best way to do it and what I think, for example a divorce, what I think they're likely to... achieve, but at the end of the day they make the decisions. Whether it's based on my advice or not it's a matter for them ... it's not me who decides, it's them. [Legal 3]

Well, you've given them the information and if they want to go away and spend money on somebody rubbing their feet or whatever... staring at their eyes intently, well, that's entirely up to them. [Medical 3]

Although access to information and the possession of relevant technical knowledge is central to the articulation of such consumerist narratives, the issue of time, and implicitly consumer interest, are equally critical influences on the embracing of a consumerist pattern of interaction. According to professional accounts, the essence of professional expertise is the ability, born of familiarity with the field, to rapidly assimilate complex technical information and utilise such information to make decisions. For the consumer lacking such familiarity, the time implications of adopting a consumerist pattern of interaction necessitate a deep personal commitment to the service requirement, as the following excerpt illustrates.

I've had one client in the last couple of years who has wanted to exercise total control over his investment decisions... He wanted some advice on investing lump sums which we did. Then he said, okay, I'll do the investment decisions ... and the company I recommended to him allowed him to make investment decisions, because of the myriad funds they had at their disposal, at least 100 and he could move between all of these funds, in different geographical sectors, as well as different types of funds, so that could keep him busy into the wee small hours of the morning. [Financial 3]

For professionals the emergence of the consumerist narrative poses fundamental challenges in terms of their role in the delivery of professional services, the nature of professionalism, and indeed the place of professionalism in contemporary society. Equally, however, the consumerist narrative poses significant challenges to consumers in terms of the building of the necessary knowledge base, acquisition of information and the evaluation of that information. Central to this are the time implications of embracing the role conventionally undertaken by professionals, and the risks associated with taking personal responsibility for decisions. Despite the existence of such inherent constraints, for those consumers embracing a consumerist narrative, the reluctance of professionals to cede authority and power to consumers beyond the newly dominant collaborative discourse is central to the divergence between consumer and professional expectations, resulting in a situation of over-expectation disparity on the part of the consumer.

CONCLUSION

The dominant theme to emerge from the data is of consumer variation. Specifically the idea that the conventional 'mass' narrative has fragmented, has dis-aggregated, into a multiplicity of sub-narratives existing along a spectrum from compliant to consumerist. The conundrum facing consumers is that although the professional discourse within the established professions has evolved, albeit slowly, in line with the overall shift towards a consumer oriented ethos where authority lies with the consumer, the professional discourse has remained unified. The inevitable consequence has been a proliferation of crises of confidence, both under-expectation and over-expectation disparity, across the spectrum of consumer narratives as they abut a unified professional discourse based on collaborative interaction. The challenge for professionals in responding to such crises of confidence is to manage the tension between the need to adapt in response to multiplying consumer narratives while retaining the coherence of the profession, and critically some basis of professional authority.

APPENDIX

PROFESSIONAL INTERVIEW PROFILES

REFERENCES

Abbott, A (1991) "The Order of Professionalisation", Work and Occupations, 18, 355-84.

Abernethy, M, Stoelwinder, J (1995) "The Role of Professional Control in the Management of Complex Organisations", Accounting, Organisations and Society, 20(1), 1-17.

Aldridge, M and Evetts, J (2003) 'Rethinking the Concept of Professionalism: The Case of Journalism', British Journal of Sociology, 54(4), 547-564.

Baudrillard, J (1988) 'Simulacra and Simulations' reprinted in Poster, M (ed.) Jean Baudrillard: Selected Writings, Polity, Cambridge.

Beck, U (1992) Risk Society: Towards a New Modernity, Sage, London.

Coffey, A and Atkinson, P (1996) Making Sense of Qualitative Data, Sage, Thousand Oaks.

Colgate, M and Norris, M (2001) 'Developing a Comprehensive Picture of Service Failure', International Journal of Service Industry Management, 12(3), 215-233.

Elam, M and Bertilsson, M (2003) "Consuming, Engaging and Confronting Science: Emerging Dimensions of Scientific Citizenship", European Journal of Social Theory, 6(2), 233-52.

Foucault, M (2003 [1976]) Society Must be Defended, Allen Lane/Penguin Press, London.

Friedson, E (1986) Professional Powers: A Study of the Institutionalisation of Formal Knowledge, University of Chicago Press, Chicago.

Giddens, A (1990) The Consequences of Modernity, Polity Press, Cambridge.

Giddens, A (1991) Modernity and Self-Identity; Self and Society in the Late-Modern Age, Polity Press, Cambridge.

Glaser, B and Strauss, A (1967) The Discovery Of Grounded Theory: Strategies for Qualitative Research, Aldine, Chicago.

Hammersley, M and Atkinson, P (1995) Ethnography (2nd edition) London: Routledge.

Hogg, ; Laing, A W and Winkelman, D (2003) 'The Professional Service Encounter in the Age of the Internet: An Exploratory Study, Journal of Services Marketing, 17(5), 476-494.

Holloway, B and Beatty, S (2003) 'Service Failure in Online Retailing: A Recovery Opportunity', Journal of Services Research, 6(1), 92-105.

Holt, D (1997) 'Poststructuralist Lifestyle Analysis: Conceptualising the Social Patterning of Consumption in Post-Modernity' Journal of Consumer Research, 23, 326-350

Laing, A W; Lewis, B; Foxall, G and Hogg, G (2002) "Predicting a Diverse Future: Directions and Issues in the Marketing of Services" European Journal of Marketing, 36(4), 479-494

Lyotard, J F (1984) The Post-Modern Condition: A Report on Knowledge, Manchester University Press, Manchester.

Moscrop, A (2002) "Expert Patients will Help Manage Chronic Disease", BMJ, 323, 653-4.

Oldham J and McVeight K (2002) 'The Law Closes in on Internet Gossips' Scotsman, 24/6 p.7.

Petts, J., Horlick-Jones, T and Murdock, G. (2000) Social Amplification of Risk: The Media and the Public, Report for the UK Health and Safety Executive, London.

Smith, A; Bolton, R and Wagner, J (1999) 'A Model of Customer Satisfaction with Service Encounters Involving Failure and Recovery', Journal of Marketing Research, 35, 356-372

Thomson, C J (2003) "Natural Health Discourses and the Therapeutic Production of Consumer Resistance", Sociological Quarterly, 44(1) 81-107.

Vermaak, H and Weggeman, M (1999) "Conspiring Fruitfully with Professionals: New Management Roles for Professional Organisations", Management Decision, 37(1), 29-44.