THE EFFECTS OF THE ECONOMIC CRISIS AND MANAGERIALISM IN SOCIAL WORK: A STUDY OF WORKING PRACTICES AND RELATIONSHIPreshaping

LOS EFECTOS DE LA CRISIS ECONÓMICA Y DEL GERENCIALISMO EN EL TRABAJO SOCIAL: UN ESTUDIO SOBRE LAS PRÁCTICAS DE TRABAJO Y LA REMODELACIÓN DE LAS RELACIONES

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Abstract
Introduction. This paper explores some of the recent transformations in social work in Italy, against the backdrop of the economic crisis and the processes of rationalization. Specifically, the aim is to understand the relationship between managerialism and professional autonomy in social work.

Methodology. The article presents a qualitative study conducted in Northern Italy through 40 interviews with practitioners and managers from two different services. A comparative analysis of the representations of labor practices was performed.

Results. Managerialism has direct consequences on social workers’ professional practices. Efforts to achieve efficiency have led to the standardization of work and curtailed professional autonomy. Bureaucratic tasks have encroached on working time, leaving less time for professional relations.

Discussion and conclusions. The rise of managerialism can deplete the ethical content of social work practice. However, empirical data show that there is no confrontation between managers and practitioners, and that there are no signs of collective strategies of resistance to the risk of de-professionalization.

Keywords: social work, economic crisis, managerialism, de-professionalization, working practices.

Resumen
Introducción. El propósito de este trabajo es comprender algunas de las recientes transformaciones en el Trabajo Social en Italia, en el contexto de la crisis económica y los procesos de racionalización. Específicamente, el objetivo es el conocimiento de la relación entre el gerencialismo y la autonomía profesional del Trabajo Social.

Metodología. El artículo presenta una investigación cualitativa, realizada en el norte de Italia mediante 40 entrevistas con profesionales y directivos de dos servicios diferentes. El método de investigación se centra en el análisis comparativo de las representaciones de las prácticas laborales.

Resultados. El gerencialismo tiene consecuencias directas en las prácticas profesionales de los trabajadores sociales. La búsqueda de la eficiencia ha llevado a la estandarización del trabajo y la reducción de la autonomía profesional. La redefinición del tiempo de trabajo, debido a la ampliación de tareas burocráticas, reduce el espacio dedicado a la relación profesional.

Discusión y conclusiones. El desarrollo del gerencialismo puede agotar los contenidos éticos de la práctica del Trabajo Social. Sin embargo, los datos empíricos muestran la ausencia de un enfrentamiento entre gestores y profesionales; no hay indicios de estrategias colectivas de resistencia al riesgo de desprofesionalización.

Palabras clave: Trabajo social, crisis económica, gerencialismo, desprofesionalización, prácticas laborales.
Introduction

Since the 1980s, Western welfare systems, particularly in OECD countries, have undergone a radical transformation, throwing them into permanent crisis. In this scenario, neoliberal reforms have concentrated on economic considerations and efficiency, with significant cuts in financial resources. These changes have affected various aspects of practice in public social services and other helping professions. Especially in social work, management procedures aiming primarily at rationalization and cost control have increased in Italy as well as in other European Union (EU) and OECD countries. Arising from the growing intensification of work, these procedures affect social workers’ professional autonomy and professional identity. This paper presents evidence from a qualitative study based on 40 interviews with frontline practitioners (social-health operators, educators and social workers) and managers working in two different settings in northern Italy. The first is a large Social Service Department in a major city; the second is a small consortium of local Social Services in a suburban area.

Before presenting the study’s methodology, results, discussion and conclusions, the following section will summarize the theoretical background.

Permanent austerity of the welfare state and managerialism

In addition to the domestic economic and social transformations in each country, European integration and globalization are factors that have contributed to the “permanent austerity of the welfare state” (Pierson, 2001; Tylor-Gooby, 2002, in Ferrera, 2007), as it has put a number of constraints on national governments’ autonomy. The following transformations have been particularly noteworthy: the transition from a rapidly growing economy, able to sustain the welfare state and its structure, to a slow-growth or no-growth economy that is struggling to fulfill this role; demographic changes, especially those relating to the aging population and migration flows; and the transition from Fordism to a post-industrial economy. In Europe, moreover, with the processes of unification, countries have transferred part of their sovereignty to supranational bodies. In addition, since the last decade of the twentieth century, the EU as a whole has been subjected to the pressures of globalized capitalist market forces and to the economic interests of multinational corporations. The latter have sought to remove trade barriers and the ability of nation-states to allocate part of the proceeds of taxation to social redistribution measures.

These processes have had an effect on social services and on helping professions such as social work operating within European welfare systems. Social work is called upon to deal with increasingly precarious funding for
social services, where cuts in economic resources affect clients, and sectors of society and powers that have influence over social services sometimes perceive them as a burden for the community. In this scenario, social workers are managed professionals, working in formal organizations as officials engaged in balancing professional expertise with the demands of higher-level management (Trivellato & Lorenz, 2010; Albano & Dellavalle, 2013).

In Italy, social workers are mainly employed in public sector organizations, which, since the 1990s, have been affected by the spread of New Public Management (NPM). Several commentators have associated NPM with reforms and dimensions of change, including: a greater stress on discipline and parsimony in resource use; an active search for finding alternative, less expensive ways to deliver public services, instead of laying the emphasis on institutional continuity and the maintenance of public services; the introduction of explicit measures of performance; private-sector styles of management; contracting out and privatization (Hood, 1991, 1995; Clark, 2000). These changes have led to dwindling financial resources and, more generally, brought about a transition from a model based on universal citizenship rights to targeted services, to which access has been gradually reduced by stringent eligibility criteria (Jones, 2001).

One result of these changes has been the rise of managerialism in social services. Though there are ‘good reasons’ for this, in the form of transparency and efficiency of services, the solutions often end in proceduralism and standardization (Albano & Dellavalle, 2013). Recent studies show that the spread of management procedures in Italy has centered on the helping professions that work in social services, and on social work in particular, influencing many aspects of professional practice (Fargion, 2009).

First, there is an increasing emphasis on efficiency and rationalization, with the introduction of quality standards for services and tools for monitoring and cost control, through the massive use of budgeting (Rogowski, 2011).

Other significant transformations include the shift towards results orientation, performance evaluation, and viewing clients as ‘customers’ who can choose between different agencies. However, researchers have found that these transformations in Italy have been more theoretical than practical, relating only to the evaluation of results (Albano & Dellavalle, 2013). There is, in fact, an emphasis on progress monitoring rather than on results (Ibidem).

As a result of these changes, work has been fragmented into phases, and divided between separate areas and services for specific client groups.

Second, different hierarchical levels have been established, in particular with the creation of middle managers who perform a filter function between the upper and lower levels of the organization. The increase in the number of senior figures, combined with the introduction of standardization processes,
detailed procedures and mechanisms have raised questions about whether there is a rift between ‘frontline’ practitioners and managers (Kirkpatrick, 2006; Tousijn, 2012). Moreover, these changes can lead to a loss of practitioners’ autonomy and discretion, so much so that they risk creating an actual ‘distortion’ of the profession (Lorenz, 2005; Roose et al., 2010).

In social services, the system of procedures and activities is largely preordained, and practitioners are mostly controlled through the hierarchy, as is typical of “machine bureaucracy” (Mintzberg, 1979). Practitioners’ discretionary margins are thus gradually narrowed, as a result of control over their work. Coordination is based on standardized execution, where predetermined procedures and heteronomous rules are imposed on subordinate levels (Albano & Dellavalle, 2013, p.50).

These trends are part of the decline in professionals’ expert competence, including that of social work practitioners, which Garland (2001) analyzed with reference to the British and American penal-welfare system and Western welfare systems in general.

Changes in social work, control and risk of de-professionalization

The changes described above can be summarized as a general intensification of work, resulting, among other things, from a new definition of control in organizational processes. The use of technology and control over professional practice has created a new working environment, especially for social workers. As a result, the general rise in workload, plus the added burden of administrative and bureaucratic tasks, can deplete the ethical content characteristic of the profession (Facchini, 2010). From this perspective, management is chiefly concerned with goals such as cost control, effectiveness and efficiency, whereas the practitioner’s point of view focuses on ethical and professional values, such as the right to equity, health, social recognition, etc. Although scholars have noted that this distinction is not always so clear (Albano & Dellavalle, 2013), it is safe to say that there may be a conflict between the needs of management and the ethical and, consequently, methodological core of social work.

For Italy’s managed professionals, social workers in particular, it is difficult to strike a balance between control-based rules and autonomous rules. In the first case, or control regulation, individuals who exercise legitimate authority pre-order the activity of others, while the second case—autonomous or self-regulation—complements control regulation or opposes it. There may be control over others or negotiation/compromise (joint regulation) may prevail.

Professional groups affirm their identity and independence by developing rules that differ from formal ones; these rules can supplement those
established by managers, but can also be antagonistic to them. Managers, for their part, view such autonomy with ambivalence: though it is a resource, it is also a threat to the ability to control the organization. From the managers’ perspective, then, managed professionals’ autonomy should be governed: managers want practitioners to use their room for maneuver, but without challenging predetermined rules and objectives. Moreover, the autonomy that social workers need in order to exercise their profession is threatened by the demands of national and local government, which seek to harmonize and rationalize expenditure; rules and procedures can pre-encode action and thereby reduce autonomy based on professional knowledge and skills (Albano & Dellavalle, 2013).

Social work researchers have addressed the issue of managerialism in the relationship between professions and organization (Fargion, 2009; Lorenz, 2005; Dellavalle & Palmisano, 2013). With specific reference to the contributions of the sociology of professions and the work of Freidson (2001) in particular, we can affirm that there is tension in social work between the managerial-hierarchical relationship (“bureaucracy”), where control is hierarchical, and professionalism, where the rules are those of self-governance and internal control. In Italy, the National Association of Social Workers (Ordine degli Assistenti Sociali) considers these professionals to be near the idealtype of professionalism; on the other hand, the needs of organizational control place the work of social workers close to the idealtype of “bureaucracy” (Ibidem).

Moreover, some authors relate the increase of control to administrative bodies and the loss of autonomy that has weakened the social work profession (Lymbery, 2001). Studies on social work in the Britain, while recognizing the need for clear rules in the process of service provision, show that the redundancy and rigidity in procedures typical of bureaucratic managerialism have reduced practitioners’ autonomy and decision-making power, transforming the profession into a “technocratic bureaucracy” (Dominelli, 2004).

Clearly, then, managerialism raises a series of problems for the social work profession: the devaluation of professional knowledge and skills, the reduction of autonomy in favor of standardization and the formal definition of performance, and the emphasis on procedural rationality. Excessively detailed procedures risk stifling not only professional autonomy, but also the relational sense of the profession, which is based on recognizing the client as a person and an actor with real and potential personal resources (Dellavalle & Palmisano, 2013).

The high degree of rigidity in procedures, which is typical of organizations with a low level of professionalism (La Rosa, 1995), contrasts with the
organizational structures of highly professionalized social services such as the one investigated in the study presented here. Since the 1990s, in fact, social work in Italy has undergone reforms that have been viewed as substantial steps towards professionalization (Dellavalle & Palmisano, 2013). In this connection, it should be noted that the 1993 law establishing the Italian National Association of Social Workers (Ordine degli Assistenti Sociali) recognized social work as a self-regulated profession like medicine, law, etc. In the same period, educational levels were upgraded through the introduction of university bachelor and master degrees.

Lastly, it should be noted that the emphasis on the mechanisms of control over the delivery of services undermines social workers’ ability to invest in reflexivity and experimental innovation. On the other hand, the Italian social work profession “has always given little attention to the costs and benefits of interventions and has neglected the importance of accountability and making assessments of the effectiveness of their action” (Ibidem, p.181).

Empirical material and methodology

The paper presents evidence from a qualitative study conducted between 2012 and 2017, which reconstructs the forms of professional work and the mechanisms of managerialism in social work in order to understand whether there is a clash between professionalism and managerialism and how social workers cope with this tension in their daily practice.

The comparative study was carried out in two settings that differ in organizational structure and size. The first is a Social Service Department in a major city, a large organization with many different hierarchical roles, specifically middle and top managers. Each of the city’s ten districts (“circoscrizioni”) has a decentralized Social Service Department, each of which has two middle management positions with different tasks and characteristics: PO (Organizational Position, similar to a Head of Service) and an RAS (Social Area Manager, a sort of team manager) for each practice area dealing with specific client groups, viz., children and families, the disabled, the elderly, adults in need and administrative tasks. Top managers (Social Service Executives) are directors of local and central services: decentralization is not complete, since each department maintains a hierarchical link with the municipality’s Central Division of Social Services (Divisione Servizi Centrali e Rapporti Aziende Sanitarie) and does not have its own budget. In addition, there is a complex and rather fragile situation of dual dependence, as the local department depends on the Central Division for all basic services and can use the district budget for additional expenses, local services and administrative matters.
The second case study is a smaller organization: a consortium of local Social Services in a suburban area, with a simpler and more flexible structure made up of managers and frontline staff. Middle management is nearly non-existent. There are only two Organizational Positions (PO): one Administrative Manager and one Head of all Social Services. The managerial position for each area has not been filled, as social workers have refused to vote on candidates selected from among their ranks.

Data were collected through in-depth interviews with 40 managers and frontline staff: social workers, educators, social-health practitioners and istruttori assistenziali, i.e., administrative roles performing professional tasks. In addition, the interviewees provided some textual materials, mainly official documents and examples of assessment forms. All interviews were recorded and fully transcribed. Data were thematically organized and analyzed using the template analysis technique (King, 1998), which entails a list of a priori codes taken mainly from the interview guide, but then modified as the researcher reads and interprets the texts.

Questions were designed to shed light on social work practitioners’ representations of the changes outlined in the previous paragraphs, comparing managers’ and frontline practitioners’ “inner states” (Cardano, 2010). Specifically, questions addressed intents and purposes on the one hand, and the meanings of actions on the other. The study examined whether the economic crisis and the rise of managerialism affect the professional identity and autonomy of social workers and how they react to this supposed risk of distorting the profession (Roose et al., 2010).

The issues addressed in the paper focus on how frontline practitioners deal with these workplace changes in their everyday working lives, in terms of both internal and external relationships. The first type of relationships is between different hierarchical levels and occupational groups, and is particularly interesting because social workers’ specific tasks have been gradually entrusted to different professions, in line with the trend towards creating a sort of “single operator”, or a case manager with undifferentiated skills. The second relationship is that with service users, both at the individual and collective level, i.e., voluntary organizations or self-help groups.

The following sections provide a general overview of the consequences for professional work, examining the dilemma between the commitment to institutional goals, and the professional responsibility to help people in need and address social problems.
Results

Frontline practitioners’ point of view.

While in the Consortium it is hard to locate a specific turning point in the process of social-health service reform, the introduction and development of managerialism in the SSD of the major city can be seen as a consequence of local directives from 1999 and 2001. The goals of these directives were to strengthen cost control, entrusted to the different hierarchical roles; create uniform quality standards for the services in all districts; empower the IT system and reshape task distribution among practitioners on the basis of thematic areas.

The study found that budget management and control is considered a key aim of the agency in both settings, raising concerns that the budget is insufficient to meet clients’ needs, especially after the recent cuts dictated by the economic crisis. Indeed, the national funding delivered by regional government steadily declined between 2009 and 2013, to the extent that the Social Policies Fund (Fondo per le Politiche Sociali) was almost halved during the period. In the last year, moreover, the district budget dropped by 30%; as a result, several public tenders for local service management were canceled, and capital for social-impact projects was reduced.

Thus, though demand is growing because of the new needs resulting from population aging, migrations and the collapse of the middle class, some services are steadily cut back or have long waiting lists. Residential and home care for the elderly is an example: only the most serious cases are able to receive something.

In addition, the process of targeting aims to ration access to services by introducing strict eligibility criteria. As a means of cost control, this calls for user involvement and activation, and involves a very different interpretation of the term “empowerment”. This means that some clients’ requests cannot be met, producing a sense of frustration and powerlessness for social workers. Though clients are seen as ‘customers’, they have no real possibility of choosing between different agencies (access to services is dependent on the place of residence) or between the public and private sectors (the tertiary sector cannot make up for public service provision). As two respondents suggest:

Nowadays, we’re working only on emergencies. (Educator, Disabled area, Consortium)

We can’t get started on new projects, we’re only monitoring old ones. […] We are pushing many responsibilities back on to families, and many...
of them are unable to bear this burden. I am very uncomfortable with this situation! (Social-Health operator, Elderly, SSD)

In a situation of greater insecurity, there is a risk of burnout, as social workers cannot be honest with their clients:

We can’t say “no” to clients, because the public authority’s policy calls for them to be put on waiting lists, even if we know that there are no economic resources, in order to avoid clients’ complaints. However, we are social professionals and it isn’t right to give false information and promises to service users. (Social Worker, Children and Families, SSD)

On the other hand, as a consequence of the spread of new forms of poverty, social professionals interact with clients who are more troubled and in greater need than in the past, and they have to manage their reactions:

I had to call the police three or four times this month, because the subsidies haven’t arrived, clients have become more aggressive, money is very important for them in this period. (Social Worker, Consortium)

At times, moreover, practitioners have made intervention proposals that did not receive management approval, mainly for economic reasons, and thus had to inform clients of the refusal or choose alternative options, which can be cheaper but suboptimal. The classic tension between bureaucratic discipline and professional expertise (Gouldner, 1954) emerges in such circumstances, because social workers are faced with the dilemma between acting independently, in line with the ‘law of expertise law’, or conforming to a supervisor’s rule.

The majority of frontline practitioners complain of a sort of structural lack of clarity about the available budget: information, primarily given by PO, is unclear both before and after needs assessment. According to some of the practitioners, this can create disparities between different clients in relation to their “order of arrival”, against the local goal of equal provision and territorial uniformity. Specifically, the possibility of restraining professional autonomy is widespread in the first setting: as middle managers seem to act as mediators between frontline practitioners and upper managers (Social Service Executives), management control over social work practice is pervasive. Middle managers usually assign cases to the different practitioners during team meetings and though they may discuss the project, they seldom modify it after the Central Division manager’s opinion. In particular, they
discourage “expensive” interventions, such as admission to children and families’ communities. At the Consortium, the situation seems to be different, since management is understaffed and management supervision is not very frequent, both because the single PO cannot join team meetings, and because frontline social workers can have more direct contact with senior managers.

Many frontline practitioners in the major city consider that their department’s many hierarchical levels contribute to the system’s slowness and rigidity: for example, they complain that many signatures (four) are needed to have a project approved. They are often critical of the fact that the percentage of managers is growing at the same time as the percentage of frontline practitioners is declining because of the lack of staff turnover: attrition has produced an aging and dwindling workforce, and one that sometimes is also less qualified.

Alongside the reliance on outsourcing and contracting out, social workers’ specific tasks and roles have gradually been shifted to other professions, i.e., social-health operators, who are cheaper but less skilled. Indeed, there are tensions both within and between different social professions: on the one hand, frontline staff do not gladly accept managers who were previously colleagues, and frontline managers feel they are no longer part of the team. On the other hand, cases are assigned interchangeably, and sometimes even shared among practitioners whose different types of professional knowledge and expertise can lead them to adopt divergent interpretations of the case.

In addition, the rhetoric of service quality, together with the need to achieve efficiency and effectiveness, have created a new working environment for social workers, with detailed rules prescribing services and entitlements, standardized protocols and forms for needs assessment, which constrain decision-making, and may make relationships with clients mundane and routinized. Although the IT system seems to be inadequate—as the technology is old and inflexible, IT tools are used only to store data rather than process them—these changes entail a sort of Tayloristic organization of work. The latter is split up into phases (admission, case assessment and intervention proposal, service provision) assigned to different practitioners, and is also characterized by a high level of specialization, thanks to the service’s division into practice areas. Most interviewees state that the body of knowledge required to manage case situations is increasingly broad and interdisciplinary, making this division necessary, even if it can be an additional source of rigidity: neither staff nor information pass smoothly or regularly between different sections.

Most importantly, the need to respond to agency requests increases the time needed to deal with the bureaucracy and paperwork, at the expense
of time spent with clients; moreover, the call to speed up the pace of work in order to meet deadlines makes contact with the client more superficial and largely a matter of abiding by the requirements of tick-box forms. Some of these forms, specifically those for the elderly and disabled, are highly standardized, with precise scores, so they discipline social workers’ focus, limiting the professional autonomy and discretion that would enable them to acknowledge clients’ capabilities and customize interventions (Bouquet, 2004). Filling in the form, then, can be a frustrating experience, as one social worker suggests:

We’ve become mere accountants! (Social Worker, elderly, SSD)

In a vicious cycle, fewer interventions to prevent social problems makes difficult situations worse, and thus increases the caseload; this, together with the “standardization” of work, detracts from the time available for proactive activities like community and group work or finding funding for specific social projects. Lastly, the reorganization of working time reduces opportunities for dialog and debate with other professionals working in different fields either within or outside the Social Service Department. Social workers also sacrifice critical and reflexive practice, which is essential in order to re-examine the case study, in terms of professional assessment and self-assessment.

We will now turn to a comparison of frontline staff and managers’ points of view about the effects of managerialism on the goals and characteristics of social work practice.

Managers’ point of view.

As outlined above, management in both investigated settings is made up of different roles and levels: from frontline managers (PO and RAS) to Social Service Executives, either of local or central services. Though professional staff occasionally receive management training, management systems and capabilities seem to be underdeveloped, especially in relation to the information system and to performance and output evaluation. On the one hand, management by objectives shows certain specific shortcomings. The first of these regards goal setting, which is often formal and late, with limited attention to the contribution made by frontline staff: goals are established by managers on the basis of political considerations and are intended mainly to contain public expenditure. Second, the performance pay system seems to be inaccurate, because awards are often calculated mathematically (at the Consortium) or given in rotation (at the SSD). On the other hand,
management performance indicators are based solely on the number of cases taken on, so as Pollitt (1990) maintains: “quality is often equated with standardization”. Both managers and practitioners report the lack of systematic assessment of individual practitioners and collective areas, while evidence-based practice (Harlow et al., 2013) is virtually unknown.

However, the most important change involves the top-down nature of the organization: since 2001, social workers can no longer take part in local public-private development projects or meetings for the allocation of resources: their relationship with the political side is mediated by frontline managers. Social workers report that they are rarely consulted for a technical opinion: as a result, policy suggestions made by frontline staff, deriving from their daily practice and knowledge of the local population, are often neglected. They see themselves as simply executors of policy initiatives and decisions, “technocratic bureaucrats” (Dominelli, 2004) with no opportunities to discuss them or suggest alternatives; to them, this means a loss of proximity to citizens’ needs.

For their part, managers draw attention to the complexity of the current political situation: rules and requirements are changing continuously, so the single practitioner cannot keep abreast. Consequently, they emphasize their own positive roles in providing information about policies and resolutions during regular team meetings, and in receiving social workers’ requests (though the workers themselves do not confirm the latter role). Managers also underscore the benefits of their supervision of professional assessment: not having to shoulder all the responsibility for the intervention proposal is reassuring for field practitioners, especially when clients lodge complaints, as well as when difficult situations arise with strong emotional consequences, i.e. the decision to institutionalize a disabled person. The need to make a collective decision, together with the use of standardized forms, increases the accountability and transparency of social work, thus reducing the risks of malpractice and arbitrariness. As one PO suggests, this “can protect both the client and the practitioner, who can show and justify all the steps of his intervention”.

At the same time, some managers state that social workers feel supported and represented by their supervisors in multi-professional teams, when they have to interact with practitioners from the health sector. Frontline managers can not only mediate external relationships, but they also have an important function in internal team management: they can mitigate interprofessional tensions by exerting their authority during team meetings. On the whole, our study found no evidence of a rift between frontline practitioners and middle managers, thanks to the filter role performed by the latter, who come from
the same profession as their colleagues. As indicated earlier, this co-option of professional élites into management can create some embarrassing situations. However, as the soft bureaucracy thesis (Courpasson, 2000) suggests, it may lead to dialog and good personal relationships, because practitioners feel understood by their supervisors, and the latter's role is legitimized. Indeed, there are greater tensions between lower and upper strata of the organization, since Social Service Executives and managers of the Central Division of Social Services, who hold power over economic resources, often have administrative skills and training. Consequently, they express business orientation and managerial goals, defining their loyalties in organizational terms. This is probably also due to the lack of contact between them: only PO and RAS attend meetings with directors and executives, who rarely interact with frontline staff.

Lastly, budgeting can be a guarantee that money is spent for specific aims and for people to whom funding has been allocated: a small group of managers are critical of previous standards of social care, which they believe could create state dependency, since some clients took advantage of the generosity of public service in the past. They stress the importance of considering whether the intervention is appropriate both professionally and economically: social professionals must choose from a wide range of interventions, being aware of their costs as well as their benefits. In this sense, the lack of resources can be an opportunity to re-think social service and field creative responses to the economic crisis.

Discussion and concluding remarks

Our findings confirm the complex and ambivalent nature of social work as a “profession of boundaries”, functioning as a broker that connects different people and institutions, or rather, mediates between individual and social responsibility (Roose et al., 2010). We can also say that the classic conflict between the professional—as well as social—mandate (human rights protection) and the bureaucratic mandate (organizational and political goals) of these “managed professionals” (Trivellato & Lorenz, 2010) is always present. As “buro-professionals” (Prandstraller, 2004), social workers must find a balance between loyalty to authority—or hierarchical discipline, in Gouldner's terms—and professional expertise, which aims to promote social justice and improve the subjective well-being of individuals and communities. The majority of interviewees explain that the focus of their work entails assessing service users’ “real” needs and building a relationship of trust with them; at the same time, because of budget cuts and new working practices, some of them feel “they are losing the sense of what they are doing”.

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Consequently, the rise of managerialism in social work can deplete the ethical content of professional practice (Fargion, 2009; Lorenz, 2010), reducing the complexity of individual situations and contexts to prescribed and universal responses. This is evident in the different interpretation of the word “empowerment”, which in social work theory is taken to mean promotion of self-direction, whereas management culture relates it to users’ individual responsibility, without taking unequal starting conditions into account (Dellavalle & Palmisano, 2013). In addition, the overriding concern is with meeting organizational needs rather than users’ needs. Indeed—even though the culture of evaluation is not widespread—a practitioner’s success is often measured in terms of efficiency, i.e., whether managers’ targets have been met, while the efficacy of interventions in terms of impact on users’ well-being is largely ignored.

More precisely, the study presented herein indicates that the partial managerial reform that has taken place in social services has involved several elements of bureaucratization. In particular, a scientific organization of work has been introduced, packaging activities into repetitive and uniform tasks that can be executed by different professionals, in accordance with predetermined procedures and control over performance. This evokes Mintzberg’s “machine bureaucracy” (Mintzberg, 1979), which, unlike “professional bureaucracy”, limits workers’ margins of discretion and personal initiative. Although several respondents maintain that professional autonomy is recognized in the preliminary phase of their work—viz. contact with users and assessment of their needs—the balance between control-based rules and autonomous rules (Reynaud, 1988) is heavily tilted towards the first term of the dichotomy. As a professional group, social workers seem unable to develop and negotiate rules that are either supplementary or antagonistic to organizational ones. Middle managers act as a buffer between top management, the political system and their frontline colleagues, but seem to build a sort of “one-sided relationship”. Our data suggest that they focus entirely on communicating managerial imperatives to the lower strata of the organization and managing the latter’s reactions and relationships, rather than on representing social workers and passing on their requests, thus preserving their own professional identity and autonomy.

Indeed, as suggested earlier, there is a real risk of distorting the profession and undermining professional judgement (Rogowski, 2011). Hierarchical control and the use of standardized forms can have negative effects in terms of a shedding of responsibility on the part of the individual social worker and a sort of sterilization of professional practice, which becomes a mere application of routine procedures. This detracts from the most emotional and
relational aspects of caring work and produces mechanisms of self-defence against clients’ critical remarks or complaints.

The trend toward intensification and standardization, the limited opportunities for consultation with frontline staff, and the increasing lack of resources can undermine the ethos of social work, transforming it into a set of neutral tasks and obscuring its inner “social” nature, viz., its potential for defining social problems. Though frontline practitioners have voiced criticism, there are no signs of collective strategies of resistance to managerial innovations, like those documented in the literature on health professionals (Tousijn, 2012). Responses, when present, are mainly individual and focused on negotiating resources for specific situations, or providing the service directly if it is not possible to pay someone else. Despite the presence of middle managers who are neither categorically different from nor antagonistic to staff members, this process of “restratification” (Freidson, 2001) does not seem to be sufficient to preserve social workers’ professional identity and autonomy. As Lymbery (2001) recommends, it may be necessary to counter these de-professionalizing trends with a process of re-professionalization of social work. Such a process involves defending the balance between the autonomous professional judgement required to deal with unpredictable and complex situations, and the need to comply with agency requirements in order to make working practices accountable and take intervention costs and deadlines into account. This calls for a collective reflection about the possibilities for renewing the profession with its deep understanding of the social and political context in which social work is embedded and recovering its proactive elements. As some authors maintain (Ferguson, 2001; Roose et al., 2010), rather than adapting to the changes in the relationship between individual life worlds and collective expectations, social workers should be one of the main actors shaping this relationship.

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