Navigating the Anti-Relational Force: Ambivalence and Performance Management in a Child and Family Social Work Department

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Abstract

During the 1980's, the two dichotomous worlds of accountancy and social welfare came crashing together in the form of performance management (PM). This central feature of New Public Management (NPM) is now utilised as both a way to measure and prescribe a process to UK child and family social work. This study utilises a psychosocial approach to explore how six social workers and two managers in an English Local Authority child and family social work department experience PM. The study is heavily influenced by psychoanalytic theory, alongside trauma and complexity theory, and is methodologically informed by free association narrative interviewing techniques and data analysis, as well as reflexive thematic analysis. As such, both conscious and unconscious process occurring within individual and organisational experiences are explored within the data.

The study finds that ambivalence is a central organising concept to understand both social workers' and managers' experience of PM. Ambivalence is experienced in multiple different forms both individually and within the group experience and this constitutes layers of ambivalence that are embedded within the functioning of the organisation. Six layers of ambivalence are identified within the data which are critically and theoretically analysed to develop an understanding of participants' experience of PM.

This thesis contributes to knowledge in several ways. Firstly, in establishing the role of ambivalence in experiences of PM, both from an individual and organisational position. Secondly, by providing an understanding of how the relatively new phenomenon of sharing performance data with frontline social workers is experienced, both from the position of those sending and those receiving this. Thirdly, through pluralist application of psychoanalytic, trauma and complexity theory, new findings into how PM is functioning organisationally in child and family social work are established.

Contents

Chapter One

Introduction

This introductory chapter explores my personal context and research influences that have led to the construction of this thesis and focus of research. An historical exploration of the literature in relation to NPM and PM is outlined to set context to the study, with a definition of PM being formulated that is utilised throughout this thesis. I then explore the reasons and necessity for a psychosocial approach to the study before outlining the research questions. Finally, a structure of the thesis is offered.

1.1 Personal context and research influences

Sixteen years ago, I began my social work training at the Tavistock and Portman NHS Foundation Trust and University of East London. I soon found that the unique nature of studying social work at the Tavistock brought some interesting dynamics to my social work practice. My early professional influences came from seminal texts exploring systems and psychodynamic approaches to practice (Preston-Shoot and Agass, 1990), critical explorations of NPM and PM (Cooper, Hetherington and Katz, 2003; Cooper and Lousada, 2005; Munro, 2004), and psychoanalytic understandings of organisational life (Menzies Lyth, 1960; Obholzer and Roberts, 1994). Furthermore, I entered social work at a tumultuous time for the profession. The death of baby Peter Connelly, a 17-month-old boy killed in London by his main care givers, became public knowledge during this time (Shoesmith, 2016). An independent review of the child protection system, influenced largely by the theoretical frameworks discussed above, found a PM culture was driving social work practice during my early career (Munro, 2011).

I began working in a statutory child and family social work team in a London Local Authority immediately after my studies. Full of fear and 'imposters syndrome', I promised myself I would complete a year in the long-term safeguarding team but soon realised this was nowhere near enough time – I had only just began to find my professional feet and started to feel I was making some kind of difference. Furthermore, these moments of difference brought an immense amount of reward and encompassed the very reason I chose to become a social worker. They were also shrouded in a professional context that was full of sadness, anger, trauma, exhaustion and anxiety which was often fuelled by the organisational and bureaucratic context in which I worked. I found, very early into practice, that I flourished in opportunities to action the reflective practice I had studied (Schön, 1983) and further develop my skills in working relationally with families, completing a Postgraduate Certificate in Systemic Practice a short time into my role. Through this additional training, I developed new

understandings and ways of working with families that encompassed a systemic family therapy approach (Burham, 2005; Cecchin, 1987; Mason, 1993).

Such influences on my career not only shaped my intrinsic understanding of myself and what I brought to practice (Ward, 2010), it also supported me to develop a set of skills to engage relationally with families (Burham, 2005; Cecchin, 1987; Mason, 1993). Furthermore, I often reflected on how my early training experiences helped me navigate a system that was incredibly challenging to negotiate. Being trained to tune into my own emotional responses, often with support from my supervisors (Harvey and Henderson, 2014), as well as some of the psychoanalytic processes occurring in the organisations I was situated (Halton, 2019) became some of the most useful tools that enabled me to navigate relational practice alongside the requirements of a system embedded in a PM culture (Hingley-Jones and Ruch, 2016). I left social work practice after seven years with a continuing determination to change it for the better and when coming to decide on a research topic, this was my primary concern. Having completed numerous assignments and literature reviews in my first two years of doctoral study, I soon found myself swinging a pendulum between two very different research topics; either the implementation of systemic practice into statutory social work, or the issue of PM and how this is experienced by social workers. I soon came to realise that the two topics represent what I largely believed to be the solution towards better social work and the other being its biggest problem. The evaluations of various 'practice models' I read as part of my preliminary research were appearing to consistently find that bureaucracy was a barrier to implementation of more therapeutic practice. This initiated a curiosity in the perseverance of this apparently destructive system of PM that was preventing relational and therapeutic practice.

Having been a social worker for some ten years at this point, I inevitably held my own experiences and opinions about this. Within my professional lifetime, I have seen a change in how performance data is used by Local Authorities. Whilst the use of performance data has been in existence for a number of years, this had less of a presence in the labour of social work when I started working in the profession, at least in my experience, and appeared to be more of a senior management issue. However, I have observed a change in this practice, with performance data increasingly being shared with individual social workers, whole teams or whole services. This was a particular shift in how performance data was being used and an issue that required attention to understand how this is experienced by social workers and how this impacted their practice, a position which was exacerbated by the dearth of research in this area. Furthermore, I have worked within and alongside at least ten Local Authorities in

the UK and worked on training programmes for social work students and social work managers, engaging with a range of Local Authorities nationally. This experience has highlighted both similarities in how social workers and organisations appear to experience PM, as well as an array of differences in how this is managed by Local Authorities, an observation that sparked my curiosity in relation to this subject.

Being removed from practice and furthering my interest in this area, I have had an opportunity to reflect on my own experience of PM. There are numerous incidents throughout my social work career where I felt particularly punished by PM and the restrictions this has placed on my ability to work directly with children and families. At the same time, I often found having a directive structure a welcome relief when I felt unable to progress my work and unsure where to turn. Furthermore, I understand the need to professionally protect social workers from professional harm and the need to evidence practice within the current sociopolitical context.

A particular experience that stands out occurred with one of the very first families I ever worked with. This gave me a swift awakening to the emotional investment I had unknowingly made in the PM system when a baby I was working with was taken to hospital with an injury that was accidentally caused in their home. I recall experiencing a great deal of sadness and upset in relation to this incident, and also being hopeful he was going to make a full recovery. When going through my recordings on the PM system, I soon discovered that I had failed to record a minor injury I had observed on another child in the home some weeks previously. I experienced huge amounts of anxiety and some paranoia in relation to this failure. Surely, if I had only recorded what I had seen previously, the injury to this baby would have been prevented? I had started to develop a, perhaps unconscious, belief that the injury caused to the baby was my fault. Whilst all this was happening to me, I do not remember ever acknowledging where my anxiety was coming from, or even that it was there. I was simply experiencing a range of overwhelming emotions which could not be deciphered at the time but were directly attributable to my experience of the PM system in the context of an injury to a baby.

Such emotional experiences in relation to PM, and even those related specifically to anxiety, are not particularly new revelations to social work. These were articulated throughout the Munro review (2011) as a necessity to understanding the current bureaucratisation of social work practice. However, when trying to understand the social work experience of PM, this only further highlights the need for a research position that can actively engage with the emotional experiences of the research participant and the researcher, even where they may

not be aware of this themselves. Thus, a psychosocial approach that enables these complex emotional experiences to be captured is necessary to exploring this issue.

1.2 The historical context of NPM and PM

This section explores some of the historical literature in relation to NPM and PM before developing a definition of PM that is utilised in the thesis. The purpose is to provide a historical overview of the research topic including the political, social and economic debates that set the context for the emergence of PM in social work. Such context is important to consider in both understanding of the research topic and to inform some of the later discussion points in the thesis.

Traditional ideas of 'public administration' (the work of civil servants) began to be dominated by a new political discourse of 'public management' from the 1980's, with NPM emerging as one aspect of this (Bovaird and Loeffler, 2023). Seminal work by Hood (1991; 1995) argues the philosophy of NPM is based on a set of administrative doctrines that lessened the sharp divide between the public and private sector and moved towards a form of accountancy based on results rather than process. Based on the assumption that public sector organisations could be more successful with the adoption of private management processes (McAdam, Hazlett and Casey, 2005), the NPM claimed to be universally applicable across different organisational contexts such as health care and education, local and national governments, as well as being politically neutral despite many academics firmly situating this with the 'New Right' (Hood, 1991).

Recognition of the global social, political and economic influences on public sector bodies were clearly articulated by the OECD, who highlighted the need for public sector bodies to enhance performance in the face of "mounting demands on public expenditure, calls for higher quality services and, in some countries, a public increasingly unwilling to pay higher taxes" (Curristine, 2006). This led to public sector organisations being under "relentless pressure" to demonstrate improvements in performance and objectives being met (McAdam, Hazlett and Casey, 2005, p.256). From the late 1980's, the OECD organised a series of conferences to bring together experts in its member states to share best practice, as well as commissioning several comparison studies in PM (Verbeeten and Speklé, 2015). In 2004, they set up a network dedicated to cross-country learning in relation to this economic agenda which they continue to advocate for today (Organisation for Economic Co-operation and Development, 2019).

There is historical debate, and not one single explanation, as to why NPM appeared in public administration. Some academics regard this as a political fashion trend holding "the necessary qualities for a period of pop management stardom", however, the only explanation that explains why NPM emerged at the point in history that it did lies in the social conditions that led to economic growth in the developed world since the end of the Second World War (Hood, 1991, p.6).

1.2.1 Performance Management

Emerging as a central feature of NPM, the intention of a PM system was to provide a managed system of economic efficiency and transparency based on outcomes, or output, with the provision of performance information intending to support better decision making by politicians, ultimately enhancing outcomes for society (Curristine, 2006). Such a focus on results inevitably diminishes concern on the process to achievement; "As long as the results are proven, it does not really matter how they came about" (Van Dooren, Bouckaert and Halligan, 2015, p.8).

Seminal literature on NPM has situated PM as a key ingredient that introduced measurable standards of performance into public services (Hood, 1995). The push towards economic efficiency and value for money public services is undoubtedly enshrined in the discourse of NPM's "quest for economic rationality" (Verbeeten and Speklé, 2015, p.954), as well as the expression of administrative values of 'doing more for less' on which NPM is based (Hood, 1991). Indeed, one of the key features of performance budgeting as outlined by the OECD involves non-financial performance indicators and targets being presented in budgets (Organisation for Economic Co-operation and Development, 2019). Interestingly, "No other country went so far in the use of performance indicators in government regimes" than in England, with performance indicator systems and targets being heavily embedded across its public service organisations (Van Dooren, Bouckaert and Halligan, 2015, p.8).

Gerrish (2016) outlines seven key features of a PM system, as outlined below:

"1. Setting performance goals or creating performance measures through fiat, negotiations, or models

2. Using incentives to achieve performance goals, including monetary rewards

3. Collecting performance information for use in strategic planning

4. Providing evidence that performance information is used in organizational decision making

5. Benchmarking current performance to previous performance or performance of other entities, inside and outside the organization; similarly, grading, categorizing, or recognizing performance from benchmarking

6. Linking agency, departmental, or organizational budgets or autonomy to achievement of performance goals

7. Publishing performance targets and results for managers, staff, stakeholders, and the public"

(2016, p.50).

When considering these features in relation to child and family social work, several questions arise; what does it means to 'perform' within this context? Who decides what a good result looks like? How do we measure performance in relation to issues such as child abuse and neglect? These are all critical questions that are explored within this thesis. The central concept of PM is defined as a set of administrative and managerial practices based on the principles of economic efficiency and transparency that are used to measure the performance of staff and set targets intended to improve the output and productivity of an organisation. This is differentiated from the use of the same term which describes the specific processes that are utilised to manage poor staff performance from a human resources perspective (Armstrong, 2000). Such processes can at times be linked, however, when social workers are unable to meet the organisational demand for performance information and data requirements and may experience negative or poor performance reviews on their individual performance as a result. Such phenomenon are explored further within the proceeding sections of this thesis.

1.2.2 The impact of PM
Research into the impact of PM has largely taken place in, firstly, the field of management, from policy case studies using self-reported surveys from managers that examine the effect of management and performance and, secondly, in the field of social policy scholars examining the impact of PM within their respective fields (Gerrish, 2016). In a meta-analysis of 49 studies of PM systems across policy areas, Gerrish (2016) found that the measurement of performance in and of itself does not improve performance significantly, albeit this has a small but positive impact on performance. However, when combined with management best practice the impact is much larger (two to three times as large), thereby concluding that PM must be moderated by the management of performance information.

Furthermore, whilst a key feature of PM is to satisfy the needs of an organisations stakeholders (Armstrong, 2000), this is far more challenging in a public sector organisation due to the complexity of multiple stakeholder relationships that sometimes have conflicting requirements and are oversimplified in a PM system (McAdam, Hazlett and Casey, 2005). Thus, cross-sector and international analysis of the impact of PM remains challenging. What appears to be the case is there is little evidence of this having a significantly positive impact on public services, albeit this continues to be a debate amongst several disciplines (Van Dooren, Bouckaert and Halligan, 2015). Literature exploring the specific nature of PM within a UK child and family social work context is explored in the literature review.

1.3 Psychosocial studies

The emergence of qualitative research has posed a significant paradigm shift that challenges hegemonic acceptance of traditional empirical and 'scientific' methods to determine knowledge and 'truth' (Frosh, 2003). This has enabled the emergence of subjective knowledge, including a greater acceptance of the study of the unconscious through application of psychoanalysis, which has traditionally been developed outside of academia in the context of clinical settings and conventionally isolated conferences and journals (Rustin, 2019). Despite this early and arguably current marginalisation, however, psychoanalysis has emerged with an abundance of empirically grounded theories and techniques that enable its current legitimacy as a recognised form of knowledge (Rustin, 2019).

Stemming largely from the field of sociology and psychoanalysis, psychosocial studies are deeply rooted in an acceptance of subjectivity. Whilst not dismissing that the human subject is also a 'biological' entity, psychosocial studies essentially provide a bridging between a traditionally psychological approach that sees the individual as an isolated entity separated from society, and a sociological approach that seeks to understand the social with a lesser focus on individuality, by considering the human subject as *always* a social entity (Frosh, 2003).

Through its affinity with social constructionism (Burr, 2015), the psychosocial approach encompasses an ambivalence of power, viewing the human subject as being equally constructed by social forces but also holding individual status that embodies subjectivity, and enables resistance and utilisation of this power, such that this operates as a 'meeting point' for inner and outer forces that is equally constructing of the social (Frosh, 2003). Such individual subjectivity is seen as a potential resource for the researcher rather than a

hindrance, thus, challenging traditional assumptions that there is an objective separation between the observer and what is being observed (Clarke and Hoggett, 2009).

British psychosocial studies have developed as a 'cluster of methodologies' over the last twenty years or so, seeking to provide new insights into social life and experiences through the application of psychoanalytic theory and utilisation of clinical techniques that enable a focus on what is happening beneath the surface of the research encounter, as well as what is said within it (Clarke and Hoggett, 2009). One such methodology, Free Association Narrative Interviewing (FANI) is highly informative of this study, and its utilisation is critically explored in the methodology chapter.

The reflexive practitioner is at the heart of this understanding, engaging researcher's critical evaluation of the self, their positionality in relation to, and impact on, the study findings (Berger, 2015). This includes emotions, imagination and meanings that the researcher experiences being viewed as useful and informative (Holmes, 2018). From this position, the researcher is an integral part of the research experience including the ontology of how reality is created (Clarke and Hoggett, 2009). This focus on reflexive knowledge challenges positivist notions of the "value-neutral observer", viewing the influence of the researcher's values as an inevitable part of the process of constructing knowledge (Alexandrov, 2009, p.37).

This sits neatly next to, although is not entirely synonymous with, the psychoanalytic concept of countertransference. Experiences of the psychoanalyst allow a means of understanding the unconscious mind of the patient, with the processes of projection, introjection and containment being highly pertinent to this (Rustin, 2019). Applying this to the research context, this form of countertransference can be used as a helpful research tool that might reveal something of this usually hidden world (Clarke and Hoggett, 2009). This should be treated with some caution, however, such that researchers do not simply assume a mental state has been projected into them but can explore this as one possibility amongst many, utilising a more collaborative and relational approach to understand this (Holmes, 2018). Thus, by engaging with the notion that the unconscious mind plays a role in the construction of social phenomena, and that research participants and researchers are not simply rational human beings without an unconscious or defences, psychosocial studies may provide further insight into understanding not only how, but why, certain phenomena occur (Clarke and Hoggett, 2009).Thus, my professional interest, experience, scholarly background and a rather emancipatory goal had led me to a research topic and approach.

1.4 Research question and aims

In the literature review, I establish several gaps in the research in relation to PM in child and family social work in the UK. This informed the following aims of the study:

- To construct an understanding about how child protection social workers and managers experience measures of performance.
- To understand how and why performance measures are shared with social workers.
- To understand what the impact of sharing performance is on social workers (cognitively and emotionally) and what happens to their practice in response to this.

My original research question captured the focus on performance measures as such:

How do social workers and managers in a statutory children's services department experience measure of performance?

However, once the interviews had been completed and data analysed, it became apparent that participants were discussing all aspects of PM in multiple different forms. The research question was therefore slightly broadened to capture these more holistic experiences and finalised as such:

How do social workers and managers in a statutory children's services department experience performance management?

To support the study design process further and the answering of this question, I developed a set of sub-questions, which are as follows:

What does performance mean to child protection social workers and managers?
How is individual performance shared with social workers and how do they respond to this?
What kind of emotions do performance measures evoke in child and family social workers and managers?
What do social workers and managers think about performance measures?

What happens to social workers practice with children and families in response to performance measures?

1.5 Structure of the thesis

Chapter two of the thesis offers a review of the literature that is integral to the research question covering four main areas; PM in child and family social work, anxiety and stress, theoretical underpinnings and primary research utilising this, and finally, considerations to reduce stress and anxiety. Chapter three explores the methodological approaches utilised in the study and offers a critical analysis of its use. Chapter four is the first of two findings chapters, discussing the first four layers of ambivalence identified that focus on social work practice, with chapter five exploring the following two that focus on the management role. Chapter six brings together a discussion of the findings, theory and research and finally, chapter seven offers some concluding thoughts to the study.

Chapter Two

Literature review

2.1 Introduction to chapter

A literature review allows researchers to move from the 'known' to the 'unknown' by establishing what already exists within the literature on a particular topic, and where any gaps might be (Aveyard, 2019). Hart (2018) posits that scholastic (or narrative) reviews carry equal importance in academic work, although are generally devised for different purposes to systematic reviews and encompass all types of theory, research, policy, and grey literature, generally developed to acquire greater levels of understanding about a particular issue, such is the purpose here.

This scholastic review explores four key areas of study that are pertinent to the research question. I firstly consider the specific nature of PM in child and family social work and provide a historical analysis of its emergence and impact. I then offer a brief exploration of the literature in relation to stress and wellbeing and consider this in the context of organisational life and PM. The third section discusses theoretical literature on complexity, psychoanalytic and trauma theory relating to organisational studies. This informs the theoretical lens adopted in this study. I also explore primary research informed by the psychoanalytic organisational paradigm in child and family social work. The final section examines empirical research relating to practices that try to reduce stress and anxiety experienced by social workers.

2.2 A note on methodology

Whilst consideration to completing a systematic review was necessary, such a task was beyond the scope of this study both in terms of the word limit of the thesis and the capacity of one researcher, as opposed to a team of researchers, who often conduct such an assignment (Aveyard, 2019). Systematic reviews are considered a legitimate form of scholarly enquiry and analysis conducted through rigorous, pre-published protocol that identify transparent and reproducible search terms and databases (amongst other steps taken), to avoid bias in the search for literature (Aromataris *et al*., 2024). These should be conducted using tools such as the Preferred Reporting Items for Systematic reviews and Meta-Analyses (PRISMA), which provide guidance on how to report why a systematic review was done, the methodology used and the findings of such reviews (Page *et al.*, 2021).

This literature review provides a different purpose, however, exploring multiple forms of literature that, in line with the study methodology, acknowledge the role of social constructionism, critical realism, and inherent bias and reflexivity that inform the search and interpretation of literature (Berger, 2015; Bhaskar, 2008; Burr, 2015). Adopting this position,

enables literature reviews to move from a positivist methodology and positioning to one which is inherently systemic and dialogical (Walker, 2015). From this position, the author holds the role of a conductor who observes how the literature speaks to one another, finding connectedness and creating new forms of knowledge (Walker, 2015).

Furthermore, both the necessary breadth of topics covered in the literature review, as well as the inclusion of the range of literature discussed above, meant a systematic review was not a suitable methodology for this study. As such, literature discussed includes a broad range of quantitative and qualitative methodologies, as well as expert opinion pieces and grey literature to compliment such studies. This reflects the value of clinical expertise and experience necessary to consider in a practice-near professional doctorate.

Holding this position in mind, it remains necessary to outline the steps taken to conduct the literature review in this study. Search terms utilised were varied and dependent on the specific topic area. These included PM OR bureaucracy AND social work OR children's services OR child protection. As the search for literature included a range of both subject areas and types of literature, consideration was given to what literature to include within the confides of the required word limit. Factors I considered in relation to the inclusion of literature included relevance to the research question, the geographical location of the study, age of the study and academic rigour. As the literature review grew organically through numerous reviews and readings of the literature, studies were excluded throughout the development process. For example, geography was particularly pertinent for this study. Many member countries of the Organisation for Economic Co-operation and Development (OECD) utilise a PM system in public services, albeit this has been implemented in different ways. Therefore, where relevant, international literature has been included. However, a plethora of international research that is relevant to the research question but published outside of OECD countries, or countries that may not have a similar model of social work practice, was excluded. Examples of this include Okeke-Uzodike and Chitakunye (2014) which explores PM in public services in Nigeria and South Africa and He (2022) that explores the impact of COVID-19 on social work in China. Sections that discuss social work in the UK directly, only include literature from UK sources and the most recently published literature in this field.

Once relevant literature was identified, a snowballing technique was utilised to broaden inclusion of literature and to encompass previous knowledge developed during the first two years of study on the doctoral programme. An initial reading of titles and then summaries of papers that met the inclusion criteria was conducted. As the study took over six years to

complete, the literature review was updated numerous times to include newly published research that fit the inclusion criteria.

Empirical research included has been peer reviewed. Whilst a full CASP analysis of every study was beyond the scope of a literature review of this nature and size, CASP tools and questions were used to guide my assessment of the robustness of the empirical studies included (Critical Appraisal Skills Programme, 2025). Consideration was also given to the academic robustness of the theoretical literature included. Seminal texts by Freud (2001), Bion (1961; 1962), Klein (1935) and Menzies Lyth (1961) were read, with more recent psychoanalytic work explored and analysed in relation to this. Much of this set of literature was published in book chapters and written by psychoanalysts in recent clinical practice and research.

2.3 PM and child and family social work

This section explores empirical research in relation to the impact of PM on child and family social work in the UK. I begin with an outline of child and family social work practice before providing a critical analysis of the historical context in which PM emerged. I then consider the impact of PM, the complexity of measuring such work and finally, attempts at reform.

2.3.1 Child and family social work practice

Whilst there is historical debate about the very nature of social work as a profession, undoubtedly, this involves working in the most intimate and private spaces of people's lives (Ferguson, 2011). This statutory profession, underpinned by principles of social justice, involves working with children and their families who may be facing a range of difficulties and providing support and / or safeguarding to children who are at risk of harm (British Association of Social Workers, 2023; International Federation of Social Workers, 2024). Relationships with children and families thus involve a complex array of skills that form the basis of the work and its greatest resource (Ruch, Turney and Ward, 2018).

Inherent to social practice is the management of complex emotional responses, albeit these experiences are largely under-researched (Winter *et al.*, 2019) and difficult to depict in research findings, often occurring in unconscious and undiscovered places (Ferguson *et al.*, 2020). Reflective practice is a core concept of the profession that enables social workers to utilise their emotional experiences to inform an integral part of their knowledge and understanding, including risk to children (Ruch, 2018; Bjerre and Nissen, 2021). Albeit the professional self (as it is considered in this research) is not a limitless entity and at times

social workers may engage in a defended self and not reflect in action to manage complex practice encounters and protect themselves from overwhelming anxiety (Ferguson, 2018a). Furthermore, social work practice takes place in people's homes. Home visiting is a deeply emotional, sensory experience that embodies practitioner-led creativity and skill (Ferguson, 2018b). At times, relationships with families can be characterised by hostility and are often emotionally challenging to manage (Ferguson, *et al.*, 2021). Experiences of overwhelm could disrupt social workers ability to make sense of and manage the home visit, thus a space to process emotional responses is integral to social work practice (Cook, 2020; Harvey and Henderson, 2014; O'Sullivan, 2018).

2.3.2 PM and social work in context; an historical exploration

PM is now utilised throughout UK Local Authorities and statutory child and family social work departments, with performance targets being imposed by central government in a similar vein to other UK public sector organisations (Broadhurst *et al.*, 2010). Social workers engaging in performance-managed work, such as recording home visits on the information technology system, enables Local Authorities to utilise data from their teams and use this as a guide to measure organisational output with the intention of improving services. PM was rather discreetly introduced into social care following the establishment of the audit commission in the 1980's (Munro, 2004; Cooper and Lousada, 2005). A fast-paced 'audit explosion' swept across all sectors of society, forming "New careers in checking" (Power, 1997, p.3) and appeared in public services without much public awareness (Cooper and Lousada, 2005).

Vast social and political changes had been emerging in the UK since the 1970's, including substantial changes to family life, and new social constructs of childhood that led to an increased anxiety about how to manage this (Parton, 2006). Furthermore, social workers were experiencing a new political context that increasingly located blame within the individual (usually the mother) whilst seeing the social impact of poverty, overcrowding and hunger impacting families (Shoesmith, 2016).

Alongside this, an apparent 'new' emergence of horrific cases of child abuse leading to child death came into public view. Whilst these appeared to reflect a decline in professional capability to protect children, a sequestration of child death by welfare agencies from the 1930's - 1970's meant this was paradoxically presented as a new social problem that had not occurred previously, when in reality it is more likely that less children were dying (Ferguson, 2004). The idea that something can and should be done to prevent child death is a relatively

new phenomenon that emerged in the late-nineteenth century (Ferguson, 2004). Arguably, the public and political response to the killing of Maria Colwell, a seven-year-old girl who was killed by her stepfather in 1973 whilst subject to a supervision order to the Local Authority, was a catalyst in the policy sphere, bringing a new expectation that social workers are able to predict and prevent such tragedies occurring (Lees, Meyer and Rafferty, 2013).

Far more scathing public and political responses to child death were seen some thirty years later, with the deaths of Victoria Climbié in 2000 and Peter Connelly in 2007 (Laming, 2003; 2009). Laming's (2003) inquiry into Victoria's death saw a new emphasis on how information was *managed* within inadequate *systems*, which, despite its intention to manage uncertainty, led to further uncertainty and complexity emerging in different forms (Parton, 2004). Recommendations were largely focused on greater inspection and scrutiny of practice, increased training of staff, and centralised an upsurge in audit and bureaucratic procedure as a means to safeguard children (Laming, 2003). Thus, the inquiry shouldered a significant disconnect between policy aims and the complex emotional work that is the reality of social work practice (Cooper, 2005). Furthermore, the recommendations eroded the sense of reasonable risk taking inherent in social work, generating further decline in trust in the profession (Pithouse *et al.* 2012) and initiating a "radicalization of doubt about the ability of professionals to protect children in time" (Ferguson, 2004, p.107).

The public and media disdain for the profession perhaps reached its height in 2009 following the death of 17-month-old Peter Connelly. In the month following the conviction of the perpetrators, 3000 newspaper articles were published about the story, with his allocated social worker named and described as lazy and incompetent and the director of Children's Services publicly sacked by the Labour secretary of state for Children, Schools and Families, a decision that was overturned three years later by judicial review (Shoesmith, 2016). Such visceral media reporting on child deaths has arguably fuelled a greater intrusion of social work by government forces that seek to eliminate risk (Pithouse, 2012) by creating a social work practice that is "regarded as little more than rule following" (Ferguson, 2004, p.10).

This brief historical exploration demonstrates that PM emerged in child and family social work during a period of substantial social, political and economic change. The factors outlined above highlight an increased social anxiety about childhood and family (Parton, 2006), a new public understanding about horrific cases of child abuse and child death that had previously been hidden from public view (Ferguson, 2004), a political belief that following process and procedure will prevent child death (Ferguson, 2004; Cooper, 2005; Laming, 2003; 2007), the media, public and political vilification of social workers (Pithouse, 2012;

Shoesmith, 2016), and a decline in trust in the profession (Ferguson, 2004; Pithouse *et al.* 2012). This culmination of factors has generated an anxiety in social work founded on a genuine fear in professionals of getting it wrong or failing to protect children (Ferguson, 2004).

2.3.3 The impact of PM on child and family social work

Since its implementation, there has been widespread academic and practice-led concern about the impact of PM on social work practice. A series of research studies found that, rather than improving the performance of social workers as intended, PM has led to a deterioration in actual standards due to substantial increases in the bureaucratic workload of social workers, increased procedural practice and increases in professional exhaustion and staff turnover. Concern has been voiced about the amount of time that social workers spend away from families and on computers, with one survey finding that up to 80% of a social worker's week is spent completing administrative tasks and 20% in direct work with families, a figure the association are campaigning to reverse with the 80-20 campaign (British Association of Social Workers, 2021).

Furthermore, it has been argued that the application of corporate processes to human services work has led to a commodification of social work practice that undermines the importance of the human relationship that forms the basis of social work (Cooper, Hetherington and Katz, 2003; Ruch, 2018). The implementation of the Integrated Children's System (ICS), the first information technology resource in child and family social work, was rolled out in Local Authorities in 2007. This was largely considered as providing a 'business process' to social work that "squeezed out discretion and vastly swelled the bureaucratic load" (Wastell and White, 2014, p.214). Early research from a two-year ethnographic study across five Local Authorities in England and Wales found a series of worrying practices that were driven by (and prioritised the needs of) the PM system over and above children and families. This included the use of standardised decision-making, deflection of referrals, and discouraging contact with children (Broadhurst *et al.*, 2010). Relying on technical systems designed to serve the needs of non-human commodities were found to be inadequate when considering the inherent uncertainty and complexity in managing risk to children. This led to actions by workers being disguised so they could respond to the needs of families appropriately, creating a back firing of the intended transparency the system is designed for (Pithouse *et al.,* 2012). Whilst PM was designed to improve safeguarding, therefore, the authors argue this, in fact, was doing the opposite, bringing additional risks and increasing the possibility for error.

Furthermore, the inherent risk in producing an over-proceduralised workforce is the mitigation this provides to organisational learning and adaptation when errors do inevitably occur. Such a bureaucracy driven organisation not only denies capacity to hold the complexity of the work, but also social workers ability to respond to and learn from errors, thereby adversely increasing risk to children (Munro, 2010).

An independent review of the child protection system in England conducted by Professor Eileen Munro in 2010-11 provided a pivotal understanding of how PM had impacted child and family social work. Bureaucracy was found to be prohibiting relational practice and children were becoming lost in a defensive system. The review recognised how previous attempts at reform – even where there was an emphasis on lack of knowledge and skills of workers – focused on compliance and bureaucracy. A number of 'unintended consequences', led to a system where targets and performance indicators had now become the *drivers* of practice (Munro, 2011). This substantiated long-standing academic concern that PM systems were deteriorating standards whilst "sustaining an illusion that they are achieving the opposite" (Cooper and Lousada, 2005, p.72). As Hoggett (2010) identifies, NPM had created an illusion in public services, with an increased focus on PM leading to services existing in a 'virtual reality' which must paint the illusion of success when it is actually causing its decline.

More recent ethnographic research has provided close-to-practice insights into how children become 'invisible' in everyday child and family social work encounters (Ferguson, 2017). Whilst most children in this study were engaged with meaningfully, workers were found to experience different degrees of detachment from children, including 'fully invisible and unheld children' when they "reach or go beyond the limits of anxiety and complexity that it is possible for them to tolerate" (Ferguson, 2017, p.1014). Whilst several factors influenced this complexity, children can become 'invisible' when social workers reach a "bureaucratically preoccupied state" and their mind is still occupied in this 'virtual world' (Ferguson, 2017, p.1019).

Some of the most recent understandings of PM in the child and family social work system come from the Independent Review of Children's Social Care (MacAlister, 2022). This acknowledges some of the challenges PM poses in terms of time away from families, suggesting a factor which impedes this further is the two thirds of social workers who hold management and academic positions that do not work directly with families. This identifies a series of 'drives' for unnecessary paperwork; national policy, legislation and guidance, impact of inspection, local infrastructure issues, quality assurance and risk

aversion. The recommendation of a 'National Data and Technology Taskforce' is intended to improve this, with one of its aims to increase the amount of time social workers spend with families (MacAlister, 2022). There is a distinct lack of discussion on the role of anxiety within this, as is discussed by Munro (2011).

Alongside the independent review, the Child Safeguarding Practice Review Panel published their review into the murders of Arthur Labinjo-Hughes and Star Hobson and found a key reason the children were not protected was due to poor communication between professionals; "too often we see critical, life changing decisions being taken for children by children's social care alone or with only superficial and partial involvement of other agencies" despite 'multi-agency working' being emphasised for decades (Child Safeguarding Practice Review Panel, 2022, p.10). This review also largely negates the stress and anxiety underpinning child and family social work that impacts on social workers capacity to protect children (Ferguson, 2022). In light of these recent reviews, the poor use of data and lack of effective technology systems in social care has been publicly recognised by government in the children's social care data and digital strategy, as well as steps outlined to improve this, however, the impact of this is yet to seen (Department for Education, 2023c).

This set of literature has established several consequences of PM that are detrimental to social work practice, thereby having the opposite effect of its intention to improve performance. This includes social workers spending a vast majority of their time completing paperwork (which both reduces time available to spend with families and leads to an absenteeism when in their presence), complex practices being reduced to standardised commodities, a number of unintended deflection strategies including redirecting referrals and the disguising of practice, reducing capacity to learn from mistakes and potentially increasing risk to children. Such findings corroborate a recent systematic synthesis of 39 cross-national qualitative studies of social workers experiences of bureaucracy that identified a range of negative impacts of this, and an increased focus on it, arguing for a complete overhaul of the system to hold the profession true to the values on which it was built (Pascoe, Waterhouse-Bradley and McGinn, 2023).

Inevitably, therefore, social workers must try to find a way to navigate this challenging work context, and this can lead to a consistent tension between the techno-bureaucracy and emotional complexity of their work, something which requires a sophisticated level of skill to manage (Hingley-Jones and Ruch, 2016; Ruch *et al.* 2017). Cooper (2018) posits that although the sociopolitical forces in which PM is enshrined are extremely powerful, they do not fully determine what social work practice looks like or the organisations that oversee this.

This can manifest in 'acts of resistance' that enable workers to hold onto to professional discretion whilst still appearing to be compliant to the PM system (Pascoe, Waterhouse-Bradley and McGinn, 2023; Pithouse *et al.,* 2012; White *et al.*, 2010). Furthermore, social workers are often required to shape the more instinctive and emotionally complex areas of the work to fit the bureaucratic processes required of them (Lees, 2017). Working in this context, however, is challenging and often the power of the PM will win this battle, leading to social workers having to compromise their practice and the values that brought them into the profession in the first place (Cooper, 2018; Pithouse *et al.*, 2012).

2.3.4 The complexity of measuring child and family social work

In the current political context, PM is considered vital to understanding social problems, as well as being part of the regulation of public services. However, this is not a straightforward task and involves a multitude of different ways of measuring services that do not always correlate with one another. Importantly, performance data is presented to central government from Local Authorities in the form of statutory returns (Hood, 2019). However, consideration of exactly what and how to measure social work is complex and contradictions exist throughout different forms of measurement, although all are based on an empirical assumption that practice <u>is</u> measurable (Hood, 2019). This is questioned by Wilkins and Antonopoulou (2020) in their study of Ofsted inspections. Despite Ofsted's purpose being to raise standards of practice, previous criticism has arisen for inspections focusing too heavily on compliance to procedure. This has recently been amended to further reflect the quality of work completed with children and families (Wilkins and Antonopoulou, 2020). However, finding consistency in how Ofsted draws it conclusions and determines ratings is difficult. In this study, the only variable found to have a correlation and therefore predictive power was the level of deprivation with the Local Authority; the more deprived the area, the more likely they were to be in 'inadequate' or 'in need of improvement' (Wilkins and Antonopoulou, 2020).

2.3.5 Attempts at reform

Around the same time as the Munro review and in recognition of the increasing bureaucratic demands on social workers, attempts at reforming practice were introduced in Hackney children's services, with their whole organisation 'Reclaiming social work' model seeing the implementation of a systemic family therapy model into frontline social work practice. The initial success of this indicated dramatically improved outcomes for children, with a 40% reduction of children coming into care, as well as staff sickness and agency staff rates

reducing (Goodman and Trowler, 2012). A large-scale evaluation in five Local Authorities found the quality of practice was significantly higher when using the model, as assessed using a skills coding framework and as reported by families (Bostock *et al.*, 2017). Subsequently, a number of other therapeutically informed 'practice models' have been implemented into child and family social work, supported by the Children's Social Care Innovation Programme launched in 2014 (Department for Education, 2022). However, evaluations of practice models embedded in statutory services have found less than encouraging results, with studies into the popular 'Signs of Safety' model finding little to no evidence of improving outcomes for families (Baginsky *et al.*, 2020). Despite its initial success, the Restorative Practice model evaluation cited organisational constraints as barriers to embedding the model (Mason *et al.*, 2017). Furthermore, it's peer led improvement programme required more time to embed and evaluate the model (Ruch and Maglajlic, 2020). A large-scale randomised control trial measuring the impact of a twelve-week motivational interviewing training found this had very little impact on social workers' skills or outcomes for families within a performance-driven organisational culture, concluding "culture eats training for breakfast" (Forrester *et al.*, 2018).

Numerous evaluations have therefore continually found these practice models to have a varied impact when implemented in a quagmire of bureaucracy, including some that have no impact on outcomes for children and families whatsoever. Considering what counts as evidence is complex in this field and should be considered critically in a profession that is highly dependent on the practitioner's relationship with the client, which is in danger of being considered less important in this context (Ruch, 2018). As explored above, the attempts made to measure social work practice based on a set of outcomes remains a deeply complex task (Hood, 2019). What these large-scale evaluations demonstrate is the continued barriers that bureaucracy poses to more therapeutic and relational social work. It is perhaps a more pertinent question, therefore, to ask *why* such reforms are having such limited impact on social work practice (Forrester, 2016). This question is further explored in the methodology chapter of this thesis.

2.4 Anxiety and stress in child and family social work

The level of stress experienced by child and family social workers is a concerning issue for the profession. Social workers are directly exposed to their client's trauma on a regular basis; this is an inherent part of the role that may lead to vicarious trauma (Singer *et al*., 2020). However, much of the UK research in this area points to bureaucratic demands and the

organisational context that social workers operate within. This is a key area to consider, therefore, when understanding social workers' experience of PM.

The most recent government statistics show the number of child and family social workers fell for the first time since 2017 (when the government first started publishing such data), with many Local Authorities citing recruitment and retention to be issues. The year also saw a series high in vacancies, use of agency staff and an increase in staff sickness. The turnover rate of children's social workers increased to 17% (Department for Education, 2023b). In some Local Authorities this rate is much higher, however, with one Local Authority service having a vacancy rate of up to 80% in 2019 (Blackwell, 2020).

Research in this area does not paint a positive picture. A recent study including a survey of 3,421 social workers and 15 follow-up interviews found that social work is one of the most stressful professions in the UK and organisations need to focus on changing factors that cause stress, in particular workload and managerial support (Ravalier *et al.*, 2021). This substantiates the finding in a systematic literature review of 65 studies that found child protection workers are particularly vulnerable to burnout, with organisational culture playing a significant role in whether workers choose to stay or leave the profession (McFadden, Campbell and Taylor, 2015). Findings from 427 social workers in England found that levels of chronic stress were high across a range of indicators, with 63% of social workers reporting difficulties sleeping, 56% reporting emotional exhaustion and 75% concerned about burnout (Beer and Asthana, 2016).

Antonopoulou, Killian and Forrester (2017), found that when social workers completed the General Health Questionnaire (a widely used tool that measures psychological stress) scores were elevated when compared to the general population. When comparing working conditions across five Local Authorities, workers experienced least stress where working conditions and resources were better. Thus, this study found that organisational context is the most salient factor that influences stress experienced by social workers. Furthermore, Coffey, Dugdill and Tattersall (2009) conclude that Children's Services staff are most affected by stress when comparing with other departments (aside from the Adult Mental Health service, from which there was no available data). Their qualitative data found that the "largest number of responses by far indicated that the most difficult aspect of social service staff's jobs was the lack of time and rigid timescales…exacerbated by a shortage of staff" (2009, p.427). This is contested by findings in Antonopoulou, Killian and Forrester's (2017) study, which found that characteristics including a sense of job clarity and control, and administrative support, can be more influential than limiting workload.

During covid, social workers wellbeing deteriorated over time, although coping strategies played an important role reducing these stressors (McFadden *et al.*, 2021). This large-scale cross-UK study of health and social care workers in multiple disciplines found an overall deterioration in the mental wellbeing of social workers and increased burnout, with almost 60% of workers reporting feeling overwhelmed by increased work pressures. Major themes identified were increase in demand and referrals, increased staff shortages, greater complexity of cases and higher emotional impact of the work. Client-related burnout remained low, implying that the primary stressors identified were organisation-related (McFadden *et al.*, 2023).

Thus, whilst some of the research in this area points to slightly differing factors that impact on social workers wellbeing depending on what and how this is measured, the evidence is clear that organisational demands placed on social workers have a substantial impact on their wellbeing and retention within the profession. Furthermore, this is getting worse, with a deterioration in wellbeing, retention and staff sickness seen in recent years and COVID-19 having a detrimental impact on this. Social work is inherently a stressful job, at times involving intervening in circumstances that are difficult for society to even conceive of (Cooper, 2019). In order to practice safely, social workers need a nurturing environment in which they can process the emotional impact of their day-to-day practice (Cook, 2020; Harvey and Henderson, 2014; O'Sullivan, 2018). However, this literature review has found that social work organisations are currently doing the opposite, causing more stress to social workers in addition to the regular exposure to trauma encompassed in their work.

2.5 Psychoanalysis, complexity and organisational trauma

The theoretical basis for this thesis is derived from complexity theory, psychoanalytic theory and trauma theory in relation to organisations. This section provides a critical overview of some elements of these theories. Whilst theoretical pluralism is a helpful feature of a psychosocial approach (Frosh, 2003), this is treated with caution and sensitivity within this thesis, such as to avoid 'wild analysis' within the findings (Clarke and Hoggett, 2009). Furthermore, this body of work constitutes a breadth of literature which, although reviewed in depth over the course of this doctorate, is beyond the scope of exploration within this final thesis. Nevertheless, discussion of these paradigms is necessary to understand the findings of the study and therefore only concepts that inform the findings directly are discussed. I also consider UK child and family social work research that has been informed by this area of study.

2.5.1 Complexity theory

Complexity theory is a metatheory concerned with complex adaptive systems which, unlike a complicated system, cannot be taken apart, or reduced, into its component parts and then reassembled, thus, challenging Newton's Laws of linear causality in centring the notion that "the whole is greater than the sum of its parts" (Byrne and Callaghan, 2014, p.4). A complex adaptive system assumes that causal factors are interactive and not simply additive, and this creates emergent properties in a system (Cooper and Wren, 2012). Unintended consequences are thus a key feature of a complex system and often occur when technical-rational responses are provided for complex behaviour (Smith, 2019). Thus, within this organic, dynamic whole the value of the input into the system does not necessarily equate to the output in the same way that it can in closed systems (Stevens and Cox, 2013).

This kind of mechanical, linear thinking is considered no longer adequate in policy making due to the complexity of the work engaged in in modern day welfare (Chapman, 2004). However, this has been largely informative of the historical construction of child and family social work, both at the macro state policy and micro practice level (Stevens and Cox, 2013). Complexity theory therefore offers an alternative conceptualisation and approach to the profession, which is based on complex, human experiences (Stevens and Cox, 2013).

2.5.2 Psychoanalytic theory; Ambivalence

Ambivalence is a psychoanalytic theoretical concept centred in the work of Sigmund Freud, the founder of psychoanalysis, and is the central organising concept for the findings of this study. The intrapsychic conflicts of the mind formed much of Freud's work, and conflict between the life and death instinct can be considered "the deepest source of ambivalence, anxiety and guilt" (Segal, 1989, p.20). Melanie Klein, a psychoanalyst who, from the 1920's, pioneered the application of psychoanalysis to work directly with children, considered the role of ambivalence as an important psychic progression and a normal part of human development (Waddell, 2019). Klein's work both developed from and departed ways, somewhat, from Freud's early theory, positing that children are born into a paranoid-schizoid state of mind, embodied by a terrifying persecutory anxiety which must be defended against to help them manage very early emotional experience that they have no capacity to process, resulting in extreme feelings of good and bad being defensively projected outwards, initially into the first object, that being the mother's breast (Waddell, 2019). At around four or five months of age, however, children start to experience an integration of these mind states and the 'loss of the loved object' when ego is unable to maintain this binary as the child gets

closer to the external world and starts to understand "that the loved object is at the same time the hated one" (Klein, 1935, p.171).

This process represents continual loss of the idealised good object, a process which causes much distress and anxiety but is assisted by an early consistent parental relationship. Ambivalence is an important element of this process, enabling greater trust in real and therefore internalised objects which will then dimmish when this is established in the child's reality and eventually become an established part of this depressive position (Klein, 1935; Waddell, 2019). Realisation that the good object is the same as the bad enables these hated, fearful experiences to be tolerated. The ability to hold ambivalent experiences is therefore a major step forward in human development and the recognition of reality (Segal, 2019). The realisation of ambivalence, however, can be extremely painful and could lead to powerful defences that impel regression to more 'primitive' states of mind (Segal, 2019). Indeed, the continual epistemophilic experience of loss of the ideal world must be tolerated by ego as when unable to do so, this could lead to a psychotic state of mind (Britton, 1992). An 'unresolved ambivalence' can be seen when regressing to mechanisms such as denial, splitting and projection (Segal, 2019). Furthermore, even when a depressive position is established, at any point, but particularly at times of heightened anxiety, a person might move between these states of mind and be holding a more paranoid-schizoid position (Waddell, 2019). In this sense, ambivalence must be realised and tolerated to avoid such regression (Segal, 2019). Therefore, ambivalence is the holding of two contradictory mental states which are a part of human development, however, when this is unable to be tolerated, ambivalence can be distressing and lead to defence mechanisms developing.

The term 'phantasy' is used in this thesis to describe the unconscious expression of such mental processes, including that of instinct, defence, wish fulfilment and ambivalence, all of which are experienced in phantasy. English translators of Freud developed the spelling of the word 'phantasy' to differentiate the psychoanalytic term from the term 'fantasy', which is popularly referred to as a conscious daydreaming like process (Issacs, 1952).

2.5.3 Containment and projective identification

Wilfred Bion, a student of Klein's and pioneer of group analytic processes, initially named the intolerable sensations experienced by babies as beta elements, "suitable for evacuation only" (1962, p.13). This form of emotional communication can be held and transformed by the mother's alpha function and introjected back to the child as alpha elements. These sensations have the capacity to be digested and managed by the child, a process which is now

understood as emotional containment (Riesenberg-Malcolm, 2001). This process occurs from birth and, over time, becomes an important part of human development, eventually supporting a child to develop their own thinking mechanisms through introjection, that eventually become part of their unconscious, much like children learning to walk before walking becomes a conscious process (Bion, 1962). A process of being 'contained' therefore, is something akin to when a parent gathers "the bits and pieces of the child's upset…and to offer him a sense of an emotional fit, a coherence between his mind and hers", an experience which feeling loved is inseparable from (Waddell, 2019, p.32). It is this safe, containing mother who can tolerate unknown sources of anxiety, to support the child to process their emotions, and provide them with everything they need to develop, grow and live independently of her. Projective identification is a process related to this concept, with Bion directly linking its occurrence to a 'failure of the alpha function' (Holmes, 2018). This occurs when a person successfully 'exports' a state of mind into someone else, who then experiences this as their own whilst simultaneously "being aware that something has ambushed him internally" (Cooper, 2019, p.24)

2.5.4 Humour

Freud described jokes and humour as unconscious experiences that, like dreams, involve processes of displacement and generate emotional meaning (Newirth, 2006). Joking, the comic mode and humour are three types of laughter situations that are important to understanding the way individuals and social groups operate (Bahun, 2017). Freud understood 'joke work' as a process through which perceptions and drives are pulled into the unconscious, such that they produce jokes and laughter (Newirth, 2006). This allows a creative means to defend against threatening psychic energy, as well as the promotion of wellbeing (Cristini, Camporese and Forabosco, 2017). This process is highly economical in that psychic energy that represses emotion is released through laughter, thus, utilising psychic energy and resulting in pleasure (Bahun, 2017). In this respect, the expression of jokes and humour operate differently from other defences. Whilst they are a means to alleviate suffering, they do not lose contact with the reality of suffering, thereby not leading to a deterioration or repression of mental state but are, rather, an expression of the unconscious in a more advanced psychic function (Cristini, Camporese and Forabosco, 2017). In later writing, therefore, Freud seemed to conceptualize humor as a potential asset, a way for the individual to triumph over the inevitable limitations of life, suffering, and external reality (Newirth, 2006).

Importantly for this study, Freud viewed the act of joking as a social activity, thus, the study of jokes is a sociological one (Bahun, 2017). Humour is considered a psychic state that is highly infectious by the telling of a joke to another person, whilst still representing an individual psychic process (Newirth, 2006). The social aspect of jokes are released in the response of the other person, one cannot make a joke alone (Bahun, 2017). In this respect, humour is a social mechanism that enables one to make sense of life by facing its most hidden adversities with a smile (Cristini, Camporese and Forabosco, 2017).

2.5.5 Organisational psychoanalysis

Like it's understanding of the individual human mind, psychoanalysis provides an approach to understanding organisations by exploring the unconscious life operating within them (Halton, 2019). From this position, psychoanalysis is interested in the emotional experience of the organisation, this being not just the property of an individual, but "In work with organizational clients…is always, or always contains, a factor of the emotional experience of the organization as a whole – what passes or passages between the members" (Armstrong, 2019, p.6). An important aspect of this work is understanding the 'primary task' of the organisation, which, whilst generally regarded as the task that must be performed for the organisation to survive in its environment, is often a complex and multifaceted concept in modern day welfare systems that exist in a rapidly changing social context (Roberts, 2019). Understanding the projections that are happening within the organisation, particularly from the client group, and how the organisation is responding to this, is fundamental to this theory; when an experience of projective identification can be realised, work can be done to support the workforce to manage and contain the projections they are experiencing (Halton, 2019).

Seminal work in relation to psychoanalytic understandings of organisations and groups were largely developed by Bion (1961) and Menzies Lyth (1960). This has influenced a body of literature on the subject since this time, some of which pertains to current understandings of child and family social work. In *Experiences in Groups*, Bion distinguishes between the 'work group', that works towards the primary task, and the 'basic assumption group' that constitutes an unconscious avoidance of this (Stokes, 2019). The "regressive pull" towards one of the three basic assumptions seeks to evade the painful development of the work group and this creates an unconscious, codependence that is necessary for group functioning (Armstrong, 2019, p.145) such that "if the group has to work constantly at maintaining a sophisticated structure, there must be a pull in the opposite direction towards one of the three

basic structures" (Bion, 1961, p.86). In brief, Bion's basic assumptions involved 'dependency' (groups functioning solely for the needs of its members), fight-flight' (the indifferent focus on a presumed enemy without any specific action being taken) and 'pairing' (a belief in an illusory future that will save the functioning of the group problems and pairing of individuals to do so), (Stokes, 2019). These regressions often lead to the denial of group problems and ambivalence (Segal, 2019).

Menzies Lyth's study of a London teaching hospital has a near iconic status in the field of psychoanalytic organisational consultancy (Lawlor, 2009). The study identified a social defence system had been constructed to 'protect' nurses from anxiety relating to their primary task of caring for patients, often at the end of life, that stemmed from their relationship with the patient. Practices such as depersonalisation of patients, restricting contact with patients, and detachment and denial of feelings were all defensive practices that had become embedded in the organisational structure. However, rather than serving to reduce the anxiety nurses experience, this in itself "arouses a good deal of secondary anxiety as well as failing to alleviate primary anxiety" (1960, p.110).

This study provides a helpful insight into the unconscious life of organisations that can be applied to a child and family social work context. Munro (2011) identified almost replica anxieties and defence mechanisms to Menzies Lyth, in particular PM acting a sector-wide defence against anxiety (Lees, Meyer and Rafferty, 2013). Nevertheless, whilst the study has influenced the social care field positively in the implementation of practices such as supervision of staff, this has had less of an impact on the policy makers and designers of organisations, with emphasis remaining on PM rather than quality of care (Lawlor, 2009). Furthermore, whilst the study identifies anxiety throughout the organisation, the original work does very little to suggest what to do with it, albeit Menzies Lyth later stated that this laid in the organisational role of containment of staff anxiety (Lawlor, 2009).

Further work by Cooper (2019) highlights that whilst some aspects of this work are applicable to primary task-related anxiety in social work, a new set of anxieties have evolved that are unrelated to the primary task. A new model to understand these 'forms' of anxiety, which are described as 'rationing anxiety', 'performance and audit anxiety' and 'partnership anxiety' is required. In addition, social workers experience persecutory anxiety from their organisation in the form of 'survival anxiety', a very real threat to the self that arises from the catastrophic sense of failure and blame experienced if something is missed or goes wrong. These anxieties are not present in the organisational context discussed by Menzies Lyth,

however, the policy context of 21st century social work has "given these anxieties a life of their own" (Cooper, 2019, p.68).

2.5.6 The social defence system in child and family social work

Whilst limited attention has been paid to how social workers experience anxiety in relation to their organisational context in research (Cooper, 2019; Antonopoulou, Killian and Forrester, 2017), much of the UK literature points to the defence mechanisms that have been developed as a result of the complexity that PM has brought to practice (Ruch and Murray, 2011; Lees, 2017; Whittaker, 2011; Smith, 2019). A review of the research in this area finds defensive practice identified in numerous different practice 'episodes' across child and family social work that bear striking similarity to the anxiety defences identified in Menzies Lyth's study (Lees, Meyer and Rafferty, 2013). This includes, but is not limited to the following: reducing and suppressing the emotional experience of the role, repetitious checking of information, rigid application or upping of thresholds (Lees, 2017; Whittaker, 2011; Ruch and Murray, 2011), deferring and signposting referrals, partially completing tasks, closing cases, (Ruch and Murray, 2011; Broadhurst, 2010), not 'seeing' children (Ferguson, 2017; Broadhurst, 2010), acrimonious cases transfers, unnecessary court applications, reducing behaviour into component parts, tick box supervision practices (Smith, 2019), upward delegation to managers (Whittaker, 2011), and parenting the professionals (Ruch and Murray, 2011). Ruch and Murray (2011) also identify 'taking flight' from sharing information with families by other professionals, thus putting the responsibility of this onto social workers. Furthermore, at times of highly emotionally charged encounters, social workers actively choose not to reflect in action, engaging in a 'defended self' to protect them from unbearable emotional complexity so they can act in the moment (Ferguson, 2018a).

What is somewhat remarkable about this list of defence mechanisms identified in the research, is the sheer volume of practices and rituals that have emerged in response to, and in conjunction with, organisational anxiety that have become an embedded 'way of doing' social work. Many of the studies point to the 'skew in priorities' identified in the Munro review (2011). This can appear as though social workers are making active choices to engage in performance managed computer work, rather than the primary task of relational work with families, because they play an important role in keeping social workers feeling safe at work (Ruch, 2018; Whittaker, 2011), something that is also actively encouraged by their organisation (Broadhurst, 2010; Smith, 2019). Thus, careful consideration needs to be given

as to how to 'dismantle' this structure (Whittaker, 2011). This can go some way to explain why the weight of bureaucracy goes largely unchallenged (Hingley-Jones and Ruch, 2016).

2.5.7 Trauma in organisations

Authors from both a psychoanalytical and a trauma perspective have shown recent interest in the idea that trauma exists within an organisation. Advances in neuroscience stemming from trauma research have brought new forms of evidence that support psychoanalytic hypotheses founded in clinical settings, thus leading to a greater opportunity for 'bridge-building' of psychoanalysis with other disciplines (Rustin, 2019). Hopper (2018) offers one such psychoanalytic take on this, positing that although it is psychoanalytically important to study envy, it is more important to study shame, helplessness and traumatic experience that are intrinsic to the human condition. Stipulating the theory of Incohesion:
Aggregation/Massification as the fourth basic assumption to Bion's theory, this argues that the group functions in a form of incohesion between an aggregate and a mass that questions its survival. In an aggregate, the group members experience a substantial amount of disconnect and contact-avoidance, like the unconscious grouping of a flock of birds that they are dependent on for their survival but do not have a great deal of association with one another. A mass, on the other hand, requires too little rather than too much individuality, and is the formation of an enmeshed state of a shared being. The two different types of personal organisation, one being characterised by 'fission and fragmentation' and the other as 'fusion and confusion' act as powerful defences over the other, thus, as a defence over fear of aggregation, the group is likely to become a mass and vice versa. Incohesion is caused by trauma, which, in group trauma might be the failure of the group or experiences of helplessness, whereby "experience of failed dependency on parental figures is likely to provoke feelings of profound helplessness and the fear of annihilation (2018, pp.xxxvi). Trauma theorists have also developed a set of ideas in relation to organisational functioning, influenced by multiple theoretical frameworks, including psychoanalysis (Bloom, 2011; Bloom and Farragher, 2011; Treisman, 2021). Whilst most of this work has been conducted in the USA, the concepts developed are highly relevant to the findings of this study. Moreover, this takes account of accumulative, social trauma, such as poverty, racism and homophobia that psychoanalytic perspectives are often criticised for omitting (Ruch, 2018) and therefore is applicable in a psychosocial study.

This perspective views the organisation as a living being, susceptible to illness, injury and trauma and considers modern human service organisations as deeply 'injured' due to their

multiple traumata experienced in recent years. Viewed as a complex, adaptive system, this perspective considers multiple 'layers' of trauma operating within the organisation, all of which are impacting on each other all of the time. Thus, in the same way that individuals who have suffered chronic and enduring trauma become organised around their trauma, so do organisations. Organisations that are traumatised from all angles are saturated in trauma, such that they become 'trauma organised' and start to engage in behaviour that is maladaptive on both a conscious and unconscious level, that is often contrary to the purpose of the organisation (Bloom, 2011; Bloom and Farragher, 2011; Treisman, 2021).

Some of the key ideas in this literature are applied to the findings of this study. Notably, the ethical conflicts that occur when staff are unable to fulfil their role due to organisational conflicts are "one of the most underestimated, but chronically unrelenting sources of stress in today's human service delivery environment" (Bloom and Farragher, 2011, p.84). This term is now recognised as 'moral injury', occurring when a professional is required to make ethical judgements in complex circumstances that compromise one's morals or ethical code, potentially leading to experiences of shame and guilt, alterations in cognitions and beliefs, and maladaptive coping mechanisms (Williamson *et al.*, 2023). Social workers often practice in morally injurious contexts and as such, more research is required in this area to understand its impact more fully (Haight *et al.*, 2016). In one survey of 817 Finnish social workers' experiences of 'moral distress' (described in similar terms as moral injury), 77% of participants felt they were unable to do their job as well as they would like to, with 36% feeling they often had to work in a way that compromised their values, with perceived insufficient resources being clearly associated with experiences of moral distress (Mänttäri-van der Kuip, 2016).

Influenced by psychoanalytic theory, organisational trauma literature considers the 'parallel process' and 'mirroring' (terms that are used interchangeably), that can occur in organisations dealing with trauma when they start to behave in ways that mirror the trauma they are working with. This can lead to service users being presented with a service that, rather than helping them recover, provides a re-traumatisation of their experience (Bloom, 2011). Furthermore, such responses can be 'passed down' the organisation from its leadership and become embedded in the fabric of the organisation if this is not named, inducing further trauma for the users of the service and its workforce (Treisman, 2021).

Applying an organisational trauma perspective to child and family social work in England allows one to consider the multiple 'assaults' the profession has experienced in recent years. As discussed within this literature review, this includes an increased anxiety in relation to

childhood, scathing media and political responses to child death, increased performance-driven practice and a decline in relational work, forced decision-making in the interests of bureaucracy, substantial cutting of budgets and squeezing of resources in the austerity agenda, increases in child poverty, workloads, staff vacancies, turnover rates and decreases in staff wellbeing exacerbated by the impact of COVID-19. Applying a trauma-lens to the literature reviewed, therefore, provides a helpful consideration of these layers of trauma that are impacting on and organising child and family social work organisations in England, in the same way as other human services organisations across the world (Bloom, 2011; Bloom and Farragher, 2011; Treisman, 2021).

2.6 Reducing stress and anxiety, improving wellbeing

Despite the apparent stress that social workers experience in relation to their organisational context, a number of mechanisms have been developed that support social workers to manage stress and anxiety experienced in their role. As explored above, the social work role inherently involves complex and often challenging emotional responses that require a protected space to process (Cook, 2020; Ferguson, *et al.*, 2021; Harvey and Henderson, 2014; O'Sullivan, 2018; Winter *et al.*, 2019). Despite this, there is limited research on what happens in these spaces (Smith, 2022; Turner-Daly and Jack, 2017; Wilkins, Forrester and Grant, 2017) and furthermore, what type of interventions reduce social workers' stress and anxiety, and support their wellbeing.

In a systematic review of 15 quantitative studies of interventions targeting the mental health, wellbeing and retention of child and family social workers and the impact on child and family outcomes, the evidence base was found to be too poor to make recommendations for services (Turley *et al.*, 2021). Similarly, a systematic review of nine studies relating specifically to burnout in child and family social workers, found the quality of studies completed to be poor and was unable to make recommendations on the effectiveness of interventions (Bryce, Povey and Cooke, 2024). Both studies point to the need for more methodologically robust, quality studies to understand what interventions could be effective in reducing the poor mental health and wellbeing of the child and family social work workforce (Bryce, Povey and Cooke, 2024; Turley *et al.*, 2021). A number of qualitative studies exploring this issue has emerged in recent years, however, and literature in relation to this is explored below.

2.6.1 Social work supervision

Social work supervision is considered an integral and established part of UK child and family social work practice. Both the professional standards governing the profession, and the code of ethics that informs it, emphasise its importance in holding a critical space for social workers to reflect on practice and support professional development (British Association of Social Workers, 2021; Social Work England, 2019). Provision of supervision is an integral task and professional capability expected in management and leadership roles (British Association of Social Workers, 2018). It is widely agreed across practice, policy and academic domains that supervision is an integral part of quality social work practice (Wilkins, Forrester and Grant, 2017).

Despite this emphasis, there is limited research conducted into what supervision practices look like in child and family social work, or how these influence practice (Smith, 2022; Turner-Daly and Jack, 2017; Wilkins, Forrester and Grant, 2017). Empirical research analysing 34 recordings of supervision sessions found that despite a consistent structure occurring, case discussions were primarily serving management oversight (Wilkins, Forrester and Grant, 2017). Counter to what social work managers said they want to do in these spaces, there was limited space to reflect, think critically, or for social workers to receive emotional support (Wilkins, Forrester and Grant, 2017). Longer term ethnographic research held in two different organisations, as opposed to the one organisation studied above, found that differences in organisational culture and office design impacted on supervision practice and could stifle reflection and creativity (Beddoe, *et el.*, 2022). Supervision held in an organisation housing large, open hot-desking spaces was found to be driven by compliance and was "physically and emotionally debilitating", as opposed to those held in a small shared office environment where reflective conversations naturally arose, supervision was largely exploratory, a more therapeutic space emerged whilst still holding important elements of compliance and accountability necessary (Beddoe, *et el.*, 2022, pp.529). Other self-reporting, small-scale studies have found quality of supervision depends largely on both the characteristics of the supervisor and the organisational context, with a typical focus being on case management rather than reflective practice (Turner-Daly and Jack, 2017).

Much of the research has, therefore, focused largely on the deficits of social work supervision and the 'cliché' of pointing out its limited evidence base (Wilkins, 2024). Wilkins (2024) argues that a focus is now needed on the positive aspects and examples of excellent practice that has been observed in a decade of research on this subject. This has led to the proposal of

a framework based on seven principles of effective supervision that include collaboration, reflection, emotional support and managing risk (Wilkins, 2024).

2.6.2 Group supervision

Group supervision models have developed traction in UK child and family social work over the last 15 years, many of which have been implemented as part of the whole systems practice models discussed above (e.g. Goodman and Trowler, 2012; Mason *et al.*, 2017). The literature in relation to group supervision models is varied. Large scale evaluations funded by the Department for Education have focused on participants' experience of group supervision, observed this directly and assessed impact on practice (Bostock *et al.*, 2017; Bostock *et al.*, 2019). Some much smaller scale empirical research and expert opinion pieces with less methodological rigour also add to the literature in this area (Bingle and Middleton, 2019; Domakin and Curry, 2018).

Whilst different models of group supervision are utilised, similarities exist in relation to how they structure discussions about child and family case work. Systemic models of group supervision are developed from the concept of the 'reflecting team' (Andersen, 1987). These aim to generate multiple perspectives, cultivate reflexivity and enable practitioners to adopt positions of hypothesising, circularity and neutrality (Cecchin, 1987). This model was originally implemented in Hackney children's services as part of the Reclaiming Social Work model, where it is regarded as the 'heart' of practice (Bostock *et al.*, 2017; Goodman and Trowler, 2012). It has since been studied in a number of social work organisations and implemented into social work education programmes nationally (Bingle and Middleton, 2019; Bostock *et al.*, 2017; Bostock *et al.*, 2019; Domakin and Curry, 2018; Smith, 2022).

Research highlights that these spaces are valued by social workers, who generally regard them as a safe space to reflect and unpick anxieties related to risk (Bostock *et al.*, 2017). Furthermore, the quality of the group discussion in a large evaluation had a statistically significant impact on the quality of practice with families (Bostock *et al.*, 2017). Domakin and Curry (2017) also identified group discussions as a source of learning and reflection for student social workers utilising this model. It has been suggested that application of a systemic approach is challenging in child protection practice and, in the one group discussion that was observed in this study, a tension between 'being' in a systemic posture and 'doing' child protection social work arose (Bingle and Middleton, 2019).

Other studies have explored the application of reflective practice groups and work discussion groups developed from the Tavistock model of reflective group supervision (Lees and Cooper, 2019; O'Sullivan, 2019; Rustin, 2008). These psychoanalytically informed spaces focus on emotional processing of the work and are structured in a similar way to the above groups with a reflecting team and practice leader to support discussion (Lees and Cooper, 2019; O'Sullivan, 2019). Such spaces have been found to reflect positively on outcomes for practitioners, reduce staff vacancies and indicate positive outcomes for children and families in mixed-methods, longitudinal evaluation (Lees and Cooper, 2019). These findings are essential to consider in relation to the question of how to reduce stress and anxiety in child and family social work, suggesting that, in a climate of high levels of regulation and certainty in relation to risk, providing group reflective space can provide some emotional containment from the anxiety this provokes (O'Sullivan, 2019).

Recent empirical research has turned its attention to unconscious processes occurring in systemic group supervision, posing new insights into the presence of anxiety in these spaces (Smith, 2022). This study found that where higher levels of uncontained anxiety were present, less reflexivity and systemic practice was able to occur (Smith, 2022). Furthermore, parallel processes, (a term used interchangeably with mirroring or projective identification described above), could offer valuable insights into work with families when this is engaged with and explored in group supervision spaces (Smith, 2024). The process of containment is therefore a crucial feature of group supervision, such that this enables emotional processing of anxiety which, if left unattended, could detrimentally impact on practice with children and families (O'Sullivan, 2019; Smith, 2022; 2024).

2.6.3 The role of the social work manager

Recognition of the imperative nature of the management role across the practice, academic and policy spheres has led to several national leadership and management training programmes being delivered in recent years (Research in Practice, 2025; The Frontline Organisation, 2023; Samuel, 2024). Empirical research into the social work management role is limited. Some findings can be drawn from the research explored above, however, as the role of the supervisor is positioned as imperative to supervision spaces they hold for social workers (e.g. Smith, 2024; Wilkins, Forrester and Grant, 2017).

Ruch (2012) explores the inherent tension in the management role, namely that between reflective and relational practice, and the technical-rational managerial requirements shaped

by PM and NPM. Proposing a psychodynamic model that accommodates some of these tensions, it is argued that a reflective space to hold the emotional complexities, anxiety and uncertainty practice brings is fundamental for managers, as much as for practitioners (Ruch 2012). Such a model would allow a space where both relational practice and technical-rational managerial responsibilities are held in a creative tension (Ruch, 2012).

Whilst research has identified that managers play a significant role in how working conditions are experienced by social workers, little attention has been paid to how managers themselves perceive their role (Tham and Strömberg, 2020). This study of 42 Swedish social work managers identified a coexisting conflict within the management role that was skilfully accommodated to enable continued support to social workers, providing some empirical evidence to the above identified tension (Tham and Strömberg, 2020). Managers perceived social work as a highly complex task and subsequently social workers expected to be managed in this way, however, their organisational context and NPM reforms "force" managers' attention to increasing, unrealistic bureaucratic demands and a management style associated with control, monitoring and authority that was not favoured by them (Tham and Strömberg, 2020, pp.381).

2.7 Conclusion to chapter

This chapter has explored four areas of literature that inform this study and establishes a range of findings. When considering the emergence of PM in child and family social work, this appeared at a time of heightened anxiety, particularly in relation to child death, and a political response that looked to 'solve' such tragedies occurring by implementation of procedure. The impact of PM on child and family social work is largely found to have a highly detrimental impact on practice, with the removal of social workers from family homes (either physically or emotionally / spiritually) and numerous unintended consequences that have led to deterioration of standards and highly defensive forms of practice emerging. Furthermore, the literature in relation to stress and anxiety experienced by social workers clearly points towards organisational factors being the biggest issue impacting social workers wellbeing. When considering the theoretical literature explored, both anxiety defences and trauma responses emerging in social work organisations are evident. Qualitative studies in relation to supervision, group supervision and the role of managers and supervisors, show a varying range of promise in relation to the ability of the organisation to work with and reduce the stress and anxiety experienced by social workers, with some finding much more positive effects than others. Alongside the large-scale evaluations of whole system practice models

designed to implement reform, these studies highlight the challenges of implementing such approaches in a system that is swamped in and shaped by bureaucratic demands, performance indicators and targets, many highlighting this as an inherent tension to this work (e.g. Smith, 2022; O'Sullivan, 2019; Tham and Strömberg, 2020).

Such challenges identified in the literature, alongside my own practice experiences described in earlier chapters, largely fuelled my ambition to research this area. It led me to question, can social work be truly systemic, relational, and hold the emotional complexity required of the role within the current system of PM?

My curiosity was further sparked by the finding that the research in relation to PM is becoming increasingly dated. The largest study identified that explored this issue is 15 years old and substantial reforms have occurred within child and family social work since this time (Broadhurst *et al*., 2010). There has been an admiral shift in the research that spotlights the increasing complexity of child and family social work (and the changing nature of the support required to manage this), within the context of a modern-day social work shaped by NPM and PM (e.g. Bjerre and Nissen, 2021; Cook, 2020; Ferguson, 2018a; Ferguson, 2018b; Ferguson, *et al.*, 2021; O'Sullivan, 2018; Smith, 2022; Wilkins, 2024). However, no recent study has focused on social workers and managers experience of PM, specifically the experiences of managers sending social workers performance data. Furthermore, it appears there is a theoretical gap in the literature. Numerous studies have identified a series of organisational tensions inherent in child and family social work organisations. Furthermore, a plethora of literature has applied the key theoretical concepts utilised in this study to varying organisational contexts. However, no study has conceptualised or explored this as an organisational form of ambivalence from a theoretical lens of psychoanalysis, trauma and complexity theory. This study therefore provides new insights into the research literature in these areas. It explores recent phenomenon relating to experiences of PM by social workers and managers and furthermore, explores new theoretical insights that support an understanding of the functioning of modern-day social work organisations. By doing so, the study addresses the gaps in research identified in this literature review.

Chapter Three

Methodology

3.1 Chapter overview

This chapter explores the methodology utilised within the study and explains why choices were made in relation to the structure and design. I firstly outline the ontological and epistemological position, before explaining the study design and process of sampling and recruitment of participants. I provide a critical exploration of the methodology employed including elements of FANI and reflexive thematic analysis, both of which inform the methodological approach to the study. I outline the data analysis process used to develop the findings of the study. Finally, I explore ethical considerations with a specific focus on the elements of FANI utilised before discussing my experience of the methodology used in this study.

3.2 Ontological and epistemological position

The research paradigm and philosophical underpinning are fundamental to the formation of a research study and heavily inform the practice of the researcher and are, therefore, important to identify (Creswell and Creswell, 2018). A research paradigm should take account of the researcher's ontology, epistemology, axiology, methodology, and rigor (Park, Konge and Artino, 2020). Positivism and interpretivism are two worldviews that have largely informed research design in social sciences (Walliman, 2022). Interpretivism emphasises the subjective meaning in social action and how human actors socially construct social and cultural life and thus, our understanding of reality (Chowdhury, 2014). It aims to "describe, understand and hopefully explain any area of social life by first getting inside that world and learning how the inhabitants conceptualize and understand it" (Blaikie and Priest, 2017, p.98). Interpretivism holds a relativist ontology and subjectivist epistemology that aligns with post-modernist thought and believes knowledge is subjectively constructed (Levers, 2013). This sits largely in opposition to positivism, where an objective, real world can be observed and measured, and researchers are separated from the certain, single truth they are creating (Park, Konge and Artino, 2020).

More recently, critical realism has provided another approach that moves between these two paradigms (Sayer, 2000). Created by Bhaskar (2008), critical realism posits that there is a need to think critically of positivism and scientific Humean causal law, as this does not take account of theory to help us understand the 'why' of phenomena and it focuses solely on closed systems. Bhaskar and Hartwig (2016) posit that there is a need to make a distinction between knowledge, or what is known, (epistemology) and being (ontology) to understand the world. Critical realism is helpful to understand social work practice today, potentially

allowing a meaningful application of philosophy to the profession by holding in mind both a realist ontology and more constructivist epistemology, with an emancipatory goal (Craig and Bigby, 2015).

A critical realist position is adopted in this study. Not only does this align with the values and belief system of the researcher, but it also provides the most useful lens to apply to the research topic. Critical realism is interested in the mechanisms, structures and patterns that exist beneath the phenomena rather than the phenomena itself, that have traditionally been the focus of study (Bhaskar, 2008). The psychosocial position and theoretical lens adopted in this study enables a multilayered approach to understanding organisational dynamics that is heavily influenced by critical realism. Whilst the 'surface' level phenomenon examined here is performance data, timescales and recording systems, the *experience* of these systems requires, from a psychosocial perspective, an examination of what is happening beneath this surface, in the unconscious layers of individual and organisational life (Bion, 1961; Frosh, 2003; Clarke and Hoggett, 2009; Halton, 2019; Armstrong, 2019; Roberts, 2019). This interest in mechanisms functioning beneath the surface in open systems, as opposed to a reductionist focus on individual phenomena, lends itself well to considering the functioning of the child protection system, through the lens of complexity theory (Stevens and Cox, 2008). As identified in the literature review, such positionality has informed a plethora of literature and government reviews of the child protection system (Lees, Meyer and Rafferty, 2013; Munro, 2011).

Adopting a critical realist approach can therefore provide a means to develop empirical knowledge in social work research whilst holding to account the complexities involved in its practice (Craig and Bigby, 2015). This is often a challenge for methodologies that adopt positivist positions that looks to explain 'what works' in child and family social work by using quantitative measures to evaluate interventions (Craig and Bigby, 2015). These often result in finding an intervention has no impact on outcomes for children and families (e.g. Baginsky *et al.*, 2020), but fail to ask why this is, despite this question being fundamental to understanding the current social work system (Forrester, 2016). Furthermore, the focus of such evaluations has often been on government priorities of reducing care placement numbers, as opposed to understanding how the process of such interventions, and the relationships that lie at the heart of them, might systemically lead to better practice (Craig and Bigby, 2015; Ruch, 2018; Turnell, Munro and Murphey, 2018).

This study is particularly concerned with the why of phenomenon occurring beneath the surface of an organisational structure. It delves into the hidden depths of organisational life to

understand and spotlight phenomenon as emergent patterns that exist in multiple layers with complex interconnectivity, permeating the group and individual experience (Armstrong, 2019; Bhaskar, 2008; Bion, 1961; Halton, 2019; Treisman, 2021). PM is thus positioned as both an objective reality, but one which is socially, culturally, emotionally and spiritually constructed by participants experience of this. It is this philosophical position that has always fuelled my social work practice. Whilst issues relating to child and family social work, namely child abuse and neglect, are fundamentally socially and culturally constructed phenomenon, I believe there is, nevertheless, an objective understanding of harm that must be upheld in the profession. Failure to do so risks extreme violations of rights justified by arguments of cultural relativism (Zechenter, 1997).

3.3 Study design

3.3.1 Ethical approval

Ethical approval was sought from the Tavistock and Portman NHS Foundation Trust and University of Essex and was approved in January 2022. Ethical considerations in the study are explored later in the chapter.

3.3.2 Recruitment of research participants

To recruit research participants, I used professional networks, approaching a Local Authority in which I had trained social work students but had very little involvement in the wider workforce. I was therefore unknown to my participants, as far as I was aware. Access to participants was sought via the principal social worker. This used a convenience sampling strategy as participants were targeted according to who was available and willing to take part in the research. However, there was an element of purposive targeting by the principal social worker, who informed me they had chosen participants based on a varied range of time since their qualification. This may mean there was a level of bias, however, there was no prior conversation about who should or should not be approached between them and I. Whilst I had considered focusing solely on social workers experiences in the project, the inclusion of managers enabled exploration of organisational dynamics and individual experiences at the management level, providing a deeper insight into the 'organisation in the mind' (Armstrong, 2019).

The inclusion criteria consisted of the following:

- Social workers who work in a safeguarding team
- Managers employed in the role of deputy team manager, team manager, service manager or director of Children's Services.

Exclusion criteria:

- Staff who work in Children's Services but are not social work qualified.

Consideration was given to including personal characteristics such as race, gender and age in the sampling strategy, particularly in relation to race. I explore my rationale for these considerations below.

As with all research studies, this study has occurred over a time of social and political movement. It began in 2019, just prior to the death of George Floyd, an unarmed black American man murdered by a white police officer in 2020 (Eichstaedt, *et al.*, 2021). His death saw significant increases in anger and sadness across America, and subsequent traction in the anti-racist Black Lives Matter movement (Eichstaedt, *et al.*, 2021). Furthermore, the social work profession started to investigate and amplify black and minority ethnic social workers experience of racism within the profession in a way that had not been seen previously. Empirical data has demonstrated concerning levels of institutional racism, as well as direct racism reported by social workers. A survey of almost 2,000 social workers conducted by What Works for Children's Social Care, found that 28% of social workers said they had experienced racism from colleagues at least once in the previous year, with 19% reporting that their experience of racism had increased their anxiety and 13% said their mental health had worsened as a result (Pierro, 2022). Data from the national regulatory body has found that social workers of 'Black, African, Caribbean and Black British ethnicity' are overrepresented in the referrals received and in cases that reach the hearings stage of the fitness to practice process (Social Work England, 2023). More recently, data representing almost 98,000 social care staff, almost 40,000 of which worked in children's social care, has revealed staff from black and minority ethnic backgrounds are 48% less likely to be appointed from shortlist, 37% more likely to face formal disciplinary action and are underrepresented in senior management (Skills for Care, 2025).

Thus, experiences of black and minority ethnic social workers are important to consider, particularly for a study that is concerned with social workers and managers experience of PM. Research explored above indicates that black and minority ethnic participants would be more likely to experience disciplinary action in relation to their performance and that experiences of racism negatively impact on anxiety and mental health of the workforce. Not only are these key areas of exploration within this study, inclusion of participants from black

and minority ethnic backgrounds would enable the study, and myself as a white British researcher who cares deeply about this issue, to hold an anti-racist position that could contribute to the growing body of literature and practice resources in this field (British Association of Social Workers, 2024; Simango and Moore, 2021).

The research study, however, was conducted in a predominantly white British area and the workforce is predominantly made up of white British women. Census data from 2021 found some of the lowest numbers of residents from a black and minority ethnic background nationally. Residents identifying as 'Black, Black British, Black Welsh, Caribbean or African' being significantly less than one percent of the population, a statistic akin to neighboring Local Authority areas (Office for National Statistics, 2025). During my time working within this part of the country, I have observed a substantial difference in the demographics of the workforce to that in the London authorities in which I worked, from which a much more diverse sample of participants could have been sought. During my first visit to a Local Authority in the area, a colleague told me that they could 'count on one hand' the number of black and minority ethnic families that had been referred to the entire service the previous year. This dynamic has taken time for me to adjust to, having been used to working with children and families, and colleagues, from a rich diversity of backgrounds and with whom I had always tried to be an anti-racist ally to.

During the study period, I also met my life partner and married into a black Zimbabwean family. This meant I became much closer and more intimately connected to racism experienced within public services and wider society, particularly living in an area with little diversity. These experiences, alongside the recent developments of anti-racism within social work practice, have required attunement and emotional work to engage in my own white privilege, something which I continue to try and engage with and encompass in my practice and training I provide (Eddo-Lodge, 2017; Reid, 2021). The intimate connection I now have with my family's experiences of racism, alongside the learning I have obtained in recent years and my activism in the anti-racism movement have led to new insights and behaviours that were less present in my life at the beginning of the study. I consider this an area of growth and development that has simultaneously occurred alongside the time of completing this project, and is something I continue to work on.

Undoubtedly, I wanted to include a diverse range of participant backgrounds within the sample, particularly in relation to race, and for the study to speak to issues of racism in relation to performance. However, the sample was both small and already difficult to recruit, and, due to the issues discussed above, it was highly unlikely I would be able to access black

social workers within the organisation that I had access to. I initially attempted to challenge some of my own white privilege and racial biases within this research context by requesting that I did not have an all-white supervisory team. I also discussed this sampling dilemma with one of my supervisors at the time of constructing the study design. We discussed the sampling strategy and the need to include specific personal characteristics. We both felt this would make accessing a sample of participants too difficult to recruit. I therefore chose not to include any additional inclusion criteria on the basis of race or any other personal characteristics. This led to a participant sample made up of entirely white British participants. During the research process, I did come across a practice manager from a South Asian background as part of an observation of a 'performance clinic', however, I was unable to utilise this data as I was not able to obtain consent from everyone present. I recognise, much more so now than at the beginning of this journey, that this limits the sample and I reflect on this decision, and the implications this had for the study, later in the thesis.

3.3.3 Sample characteristics

I obtained some personal details from participants, which are detailed below:

Pseudonym	Age range	Ethnicity	Gender	Time since qualification	Role
Susan	40-49	White British	Female	8 years	Social Worker
Mary	20-29	White British	Female	3 years	Social Worker
Adam	30-39	White British	Male	18 months	Social Worker
David	50-59	White British	Male	8 years	Practice Manager
Emma	40-49	White British	Female	10 years	Senior Practitioner
Rachael	40-49	White British	Female	10 years	Social Worker
Anna	50-59	White British	Female	24 years	Practice Manager
Eleanor	40-49	White British	Female	3 years	Social Worker

3.3.4 Data collection

In February 2022, the principal social worker sent me a list of seven social workers and two practice managers who were willing to take part in the study. I contacted each participant by email. Six out of seven social workers and two practice managers proceeded to take part in the project, with attempts to contact the seventh social worker being unsuccessful. Data collection took place between March 2022 – May 2022.

Whilst face-to-face interviews have traditionally been considered the 'gold standard' in qualitative research, the pandemic required adaptation to virtual data collection to protect the safety of participants and researchers (Roberts *et al.*, 2021). The data collection period took place after the COVID-19 pandemic, however, many social workers were still working at home at the time of data collection. I therefore allowed participants a choice as to whether they wanted to be interviewed face-to-face in their office, or on zoom, providing a mixed response with four interviews taking place in person and 12 online.

3.4 Methodology

My research question necessitates a methodology that is qualitative in nature, as it looks to provide a rich, nuanced understanding of people's experiences by exploring meaning in social problems (Creswell and Creswell, 2018). I had originally hoped to combine two methods of enquiry in the study: free association narrative interviewing (Hollway and Jefferson, 2008; 2013) and psychoanalytic observations (Hinshelwood and Skogstad, 2000). By combining research methods, I hoped to be able to create depth to the data and provide new understandings of how PM is experienced in child and family social work. I was only able to set up one observation and had significant challenges in doing so. This was an observation of a 'performance clinic', described to me by participants as a space for managers to work out patterns, explanations and responses to performance data. Despite my best efforts, I was unable to obtain consent from all the attendees prior to the meeting, nor following this. I was therefore unable to use the data gathered in this observation as part of the study.

3.4.1 Free association narrative interviewing (FANI)

This study utilised elements of FANI, a psychosocial methodology developed by Hollway and Jefferson whilst conducting their research into peoples' experience of crime (Hollway and Jefferson, 2008; 2013). Whilst this methodology informs the study design, I chose not to apply the methodology in its fullest form and found that this required some adaptation to the research question of concern. Thus, a critical exploration of this approach, alongside my

decision-making process in relation to its applicability, is outlined in this section. Described as a 'hybrid approach', FANI brings together traditional narrative analysis and psychoanalytic theory (Lukac-Greenwood and Van Rijn, 2021). Freud initially developed the concept of 'free association' and applied this to his work with patients, believing that allowing a patient to talk freely without interruption allowed access to the unconscious through the observation of internal mental conflicts and 'parapraxes' such as saying, reading, or hearing something different to what is intended (Freud, 2001). The analyst's role, therefore, is to maintain an almost anonymous, internal monologue that does not allow for an interpersonal relationship, a concept which is used to varying degrees by psychoanalysts today (Schachter, 2018).

Applying the concept of free association to qualitative research, FANI assumes that when research participants are free to structure their own narratives with minimal interruption, unconscious connections will be revealed through the structure in the narrative (Hollway and Jefferson, 2008). FANI challenges the view that participants "are transparent to themselves", which resembles a starting point for most qualitative, interview-based research (Hollway and Jefferson, 2008, p.298).

Fundamental to FANI, is the concept of the defended subject. This assumes that participants and researchers are invested in discourses that protect the self from anxiety that they may not be aware of. This enables the researcher to develop interpretations based on the whole form of the narrative, including any contradictions, tensions and links that may not initially be obvious, as well as the researchers own experience and countertransference (Hollway and Jefferson, 2013). By paying particular attention to anxieties and their defences, this give rise to underlying incoherencies, enabling the researcher to bring them to the surface, making them visible in the analysis where previously they may have been left undiscovered (Hollway and Jefferson, 2013). The participants 'gestalt' (the unconscious structure that lies beneath the narrative), may present itself as 'bigger than the sum of its parts' (Lukac-Greenwood and Van Rijn, 2021).

When exploring methodologies to conduct the research, therefore, FANI appeared to present an appropriate and helpful approach. The emphasis on individual biographies allowed a small number of participants' experiences to be explored in depth, illuminating the particularities of the individual. Engagement in a practice-near research encounter, as it is applied in this context, poses a genuine challenge to a positivist worldview, something which is much needed in social work research (Cooper, 2009). This upholds our professional responsibility to highlight the often unthinkable aspects of our work that are so easily missed within

analysis based solely on what participants have said (Cooper, 2009). It is particularly fitting for a critical realist study that is concerned with the 'why' of social phenomenon (Bhaskar, 2008). Furthermore, this allowed me an opportunity to draw on the expertise and experience of the supervisory team at the Tavistock, who were well acquainted with this methodology. Its application to a number of other British social work studies has demonstrated its use in exploring psychoanalytically informed narratives and experiences within this context (e.g. Gregor, Hingley-Jones and Davidson, 2015; Bolaji, 2022; Archard, 2021)

3.4.2 Interview structure

Having decided on a methodological approach for my interviews, I proceeded to plan the interview structure. In FANI, two interviews are conducted, with analysis taking place in between and as part of the interview process (Hollway and Jefferson, 2013). The first interview that takes place involves an element of free association, allowing the participants story to emerge as much as possible without intervention (Brett, 2019), such that interviewers become "almost invisible" (Hollway and Jefferson, 2008, pp.309). I devised an initial interview question which I felt would capture participants' narrative in relation to their experience of PM as much as possible; *'Can you tell me about your experience of measures of performance within your current role in statutory children's social work? By performance, I am referring to statutory timescales, procedures and recording systems that you are required to work with in your role. Take your time and include as much detail as you can.'*

I also devised a set of follow-up questions to ask, should I need them:
How do you receive feedback on your performance?
What do you think about performance measures?
What are some of your emotional experiences of performance measures?
Do you think that performance measures have an impact on your work with children and families and if so how?
How does the way in which you receive feedback on your performance measures impact on you and your practice?

It became evident to me after a couple of interviews, that the FANI interviewing technique was going to be more difficult than I had anticipated, particularly with interviews conducted online. The interviews were much shorter than I expected, and many participants talked solely about what their performance work looked like, i.e., what forms they had to complete,

with little discussion or critical thinking about their experience. Whilst this provided important insights into their experience, (an issue that is explored within the findings chapters), on discussion of this in my supervision, I decided to change the approach to the second interviews, such that this elicited a broader narrative of participants' experience of social work. Congruent with the FANI method, I re-listened to each of the first interviews, noting down any areas of interests, contradictions, or tensions I had noticed in the data (Hollway and Jefferson, 2013).

Second interviews are designed to "seek further evidence to test our emergent hunches and provisional hypotheses" (Hollway and Jefferson, 2013, pp.40). At the start of the second interview, I explained this to participants and advised them I might discuss some of my initial thoughts with them. Furthermore, I did not have any set questions, but wanted to try and capture their whole story and would like to begin with what drew them to social work. These interviews were conducted in what felt like a much more informal sense, with a more conversational style that responded to what participants were bringing to the interview and not rigidly sticking to a set of questions. Whilst I held in mind questions that might help elicit a broader narrative, such as asking what social work means to them, or how they would explain social work to someone who didn't know anything about it. I continued to utilise aspects of FANI interview style as much as was possible, including allowing pauses, using participants own language, and not interrupting or influencing the narrative.

3.4.3 Data analysis

Data analysis took place over a period of 20 months, from March 2022 to November 2023 and involved several stages. In order for qualitative research to be accepted as trustworthy and credible, a thorough and transparent discussion of the data analysis process must be provided (Nowell, *et al.*, 2017). In psychosocial research, and with a sample of this size, it was important that I was able to capture the depth of the analysis. This is a distinct feature of psychosocial research and one which differentiates this from methodologies where a larger sample might be employed. By doing so, several different methods can be used to analyse the data. This part of the study was by far the most challenging for me, not least in that I needed to commence on a path of the unknown, beginning to employ a method to understand such a vast amount of data, a process at which I was a complete novice.

Stage 1

The first stage of data analysis involved immersing myself in the data through the process of transcription (Hollway and Jefferson, 2013). Although this time can feel futile, it is an

important part of the early stages of analysis and enables a much richer understanding of the data (Braun and Clarke, 2006). This stage took approximately six months. In order to capture important utterances, pauses, stutters and repetitions that might provide some insight into the participants 'gestalt', I listened to each recording at least twice and also slowed this down to 50% speed. Some interviews were initially put through a transcription software before going through this process, however, the accuracy of this often meant it was quicker to transcribe by hand.

Stage 2

Following the FANI method, I completed some data analysis between the first and second interviews, which were generally around two weeks apart. Process notes were made that encompassed any tensions, contradictions and avoidances following a re-listening of the interviews. Within this, I identified an overall 'tension' in all interviews between finding performance data both helpful and unhelpful. I discussed this with participants in their second interviews where it was relevant to their story to explore this in greater depth and to 'test' my hypothesis about this being an integral part of their experience (Hollway and Jefferson, 2013). I also identified a significant unspoken narrative, which was actual work with children and families. Analysis of the data at this point allowed a tailoring of the second interview to open the conversation to this narrative. I kept a journal throughout the interview process and noted down any strong emotional responses, observations of body language or areas that might not be picked up on a traditional analysis of the data but were, in my view, significant to the participants experience.

Stage 3

This stage of data analysis involved me finding a method that enabled me to systematically analyse the data to produce robust findings. This was somewhat of a challenge, as I felt that I had two very distinct pieces of data. Interview one was very focused on performance data with some, albeit limited, interpretations of what that might mean. Interview two involved the exploration of very personal stories involving participants childhood, their experience of working with trauma and deeply meaningful personal and professional relationships. It therefore felt appropriate to employ different methods to analyse the data. Interview one was incredibly important to my research question, however, it did not tell the whole of participant's story and I was therefore unable to use the FANI method of holistic case analysis. I therefore commenced with a structured way of understanding and organising the data using reflexive thematic analysis, with the intention of combining this with FANI methods of analysis later in the process.

3.4.4 Reflexive thematic analysis

Braun and Clarke (2006, p.78) argue that reflexive thematic analysis should be seen as a "foundational method for qualitative analysis", providing the core skills that researchers need to learn to be able to conduct other forms of data analysis. Positing that this should be seen as a method of analysis in its own right, reflexive thematic analysis looks for themes or patterns in the data, allowing an organisation and description of the data to develop. Importantly, this is not tied to an established theoretical framework and thus, this enables some flexibility in the application of theory (Braun and Clarke, 2006; Nowell, *et al.*, 2017).

3.4.5 The process of reflexive thematic analysis

I used Braun and Clarke's (2022) *Thematic Analysis: A Practical Guide* which explains each stage of the process and some of the likely challenges, surprises and anxieties that might be met along the way. Following this model closely, I completed the following phases:

Phase 1: Familiarising yourself with the data set

Becoming 'deeply and intimately familiar' with the data set, by reading and listening to each data set and noting down any initial analytical thoughts.

Phase 2: Coding

Working systemically through the data, the researcher captures fragments of data that are interesting or meaningful to the research question and applies 'code labels' to them which provide a pithy analytic interpretation of the data.

I found coding initially very challenging, as I tended to lean towards providing a word or label that simply surmised what the data fragment said, therefore, my first attempts at coding were widely useless and unable to provide any meaning to the data that initiates the early stages of the analytic process (Liamputtong, 2009), with early examples of codes that were discounted being 'Colour coding highlights performance'. Coding was something I became more skilled and efficient at the more I persevered through the process, enabling the establishment of meaningful codes that could develop analysis, such as 'Visits are shortened to meet timescales'. For more detailed examples of coding, see appendix 5. By the end of the coding process of the first interviews, I had developed 137 codes.

Phase 3: Generating initial themes

This stage involves collating codes that seem to have a shared meaning or core concept, thereby identifying a pattern or a theme that is emerging across the data set that might provide an answer to the research question.

I printed out the codes and began to map them onto a coding map. Themes were developed inductively, by looking for shared meanings in the codes which answered my research question. Nine themes were initially developed. These were written on post-it notes and added to a coding map, with the relevant codes surrounding them (appendix 5). Within this stage I disregarded some further codes that did not provide any interpretation of the data.

Phase 4: Developing and reviewing themes

During this phase, themes are reviewed by going back to the whole data set and checking them with both the coded extracts and the full data set. This might involve significant changes, consideration of the relationship between themes, and reviewing the 'central organising concept'. Presenting the themes at a research seminar in February 2023 also supported with this process and led to changes in some of the themes. A new coding map was created.

Phase 5: Refining, defining and naming the themes

Further refinement enables the narrative of each of the themes to be extracted and clearly understood. I collated the codes into one document and wrote a paragraph that captured its meaning and core concept. I also gave the theme a more accurate name. This was an important part of the development of the themes and deeply enriched my understanding of them.

Phase 6: Writing up

This phase should begin early in the process with reflexive journalling and recording of each stage. The final write up involves fusing the analysis of the data with the data extracts to produce a narrative that answers the research question. I began the writing process at the beginning of my data collection and throughout the data analysis stage. This helped me to track the development and progress of my thinking through the data analysis process and supported the development of the themes. The final writing stage was completed following full analysis of the data.

Stage 4

Whilst reflexive thematic analysis had proved to be a helpful resource and appropriate form of analysis for the first set of interviews, I turned my attention back to FANI to analyse the second set of interviews. Hollway and Jefferson report that the FANI method of analysis they developed allowed them to move between the "parts and the whole" (2013, p.68) of participants stories. In exploring the participants 'gestalt', they capture all the data in relation to that person and pay attention to the 'emotional logic' in the story; it is only by doing so

that the whole can be considered as greater than the sum of its parts (Hollway and Jefferson, 2013).

As part of their analysis, Hollway and Jefferson created a 'pen portrait' for each of their subjects, effectively a piece of writing that would 'bring the participant to life' for the reader (Hollway and Jefferson, 2013). I decided to exclude pen portraits of participants following completion of both interviews. Whilst all participant details are anonymised throughout the study, participants told me deeply personal stories about their life including aspects of their childhood and some of their most vulnerable times. I chose not to include this information in this format, in the event that they would be identifiable within this very small sample. Furthermore, having commenced the first pen portrait and feeling uncomfortable with the detail included in this, I did not find this a particularly useful mode of analysis in this study. Whilst aspects of personal life history were shared in the interviews, the interview itself was focused on participants experience of their professional role. Furthermore, personal stories shared tended to be fragments a participant's life. Whilst these were integral to the data analysis, this meant a development of a holistic narrative that could be constructed into a pen portrait was challenging. I therefore chose to proceed with the analysis without pen portraits with a view to return to this if I felt it became necessary.

The second element of analysis for Hollway and Jefferson involved the creation of a pro-forma which helped to 'categorise' the data into themes that were emerging. This allowed links to made across the data set, considering the whole of the data whilst not losing sight of the 'gestalt'. I began to develop a pro-forma by reading through each of the second interviews again and noting down areas of interest that provided some meaning to my research question. On each reading, I began to organise the notes into themes and continually added to and amended these until I developed themes that were present across the data. The proforma that was completed for each participant can be seen below:

Participant	
Age	
Gender	
Race	
Role	
Time since qualification	

Employment history	
Personal values	
Values and rewards	
Disappointments and distress	
Managing the performance-practice tension	Where the participant is purely performance driven is scored at 0 and purely relational practice driven is at 10, where does this participant score?
Anxiety and it's defences	
Relationship with management	

3.4.6 Reflexive thematic analysis and psychosocial research

Utilising both reflexive thematic analysis and FANI methodology to analyse my data requires consideration of the synthesis of the two models. The application of reflexivity in Braun and Clarke's model allows a psychosocial approach to this type of analysis through the application of psychoanalytic theory. Braun and Clarke argue that if we are not aware of what assumptions researchers are making about their data, this makes evaluation and comparison of the study with others difficult to achieve. Acknowledging the researcher's role in this, is an essential part of the process (Braun and Clarke, 2006).

Furthermore, Braun and Clarke's model acknowledges the 'level' at which the researcher is coding and thus, developing their analysis. Semantic codes are ideas expressed at the surface and stay close to participants language, whereas latent codes focus on deeper, below the surface meaning. Whilst the model does not privilege one over the other, the application of latent coding tends to be more present in constructionist projects, and this enables application of reflexive thematic analysis to psychosocial research. It is usual for researchers to be more focused on latent codes as confidence in coding and development of the analysis occurs (Braun and Clarke, 2022), as was the case with my own experience.

The combination of reflexive thematic analysis and FANI analysis meant that the development of themes across the whole data set could be considered whilst also ensuring I accessed the necessary depth required for a psychosocial study (Brett, 2019). One criticism of thematic analysis is that the fragmentation of data may lose some of the meaning in the participant's story. Using purely free association methods makes finding themes across the data more difficult and this can invite critique about the generalisability of findings. Thus, the combination of both methods across my data set not only employs a method of analysis that is most suited to the data presented, but also supports the robustness of the findings.

Stage 5

Following initial coding and theme identification in the first interviews, I was left with two important codes that did not fit into any of the themes but were seen throughout the data set and were hugely important to my research question. Whilst it may be tempting to abandon initial codes that seem irrelevant, researchers should be hesitant to do so immediately, as these may be essential to the construction of theory (Liamputtong, 2009). These were 'Tension in the primary task' and 'Stats are both good and bad'. I noticed that the themes were developed in quite binary terms, i.e., that social workers experienced performance as either good or bad. Whilst there were still nuances and tensions within the themes, they did not capture the complexity of ambivalence discussed by participants. Attempting to understand these codes further, I included a section in the pro-forma relating to participants experience of ambivalence under 'Managing the performance-practice tension' including a scaling question. This told me there was a substantial differentiation in the extent to which participants are driven by performance.

Completing the pro-forma highlighted that understanding the 'performance-practice tension' was not an adequate depiction of some participants' experiences. It was evident across the data set that PM was experienced in ambivalent terms by every participant I interviewed, however, the complexity of this experience went beyond this initial umbrella concept of 'drive' or motivation. Furthermore, the scaling question above meant that motivation by PM and relational practice were placed in opposition to one another, and this did not accurately represent all participants' experience either. In bringing together both sets of analysis completed for interviews one and two, I identified the following experiences of ambivalence to be present across the data set:

Ambivalence experienced by both social workers' and managers':

- PM is both helpful and unhelpful to my work

- PM provides meaning to my work but is also meaningless

Ambivalence experienced by social workers' only:

- Performance makes my work with families both visible and invisible

Ambivalence experienced by managers' only:

- Social workers need to be both protected and exposed to performance

This went some way to begin to develop concepts in the data and formulate findings. Again, I scored each participant against these experiences based on my understanding gained from analysis conducted thus far in the study. The scoring of participants was conducted by positioning the participant on a spectrum of how they experienced the tension. Each participant was scored against each tension; see appendix six for further details of the question asked and scores provided. Whilst the scoring was a helpful tool for organising my initial thoughts about the data, this was problematic in numerous ways. Not only did this provide a too simplistic account of the different forms of ambivalence experienced by participants, it also highlighted that the tensions were not linear in nature but deeply complex in how they interacted with one another. For example, whilst some of tensions could be 'laid out' in a continuum of experience, such as how helpful the participant found PM to their work, others could not. In particular, it became apparent that the notion of invisibility was not a linear form of tension but rather, an increased sense of visibility from the PM system was leading to an increased sense of invisibility for some participants and thus, numerical scores were not able to accurately represent a continuum of experience in this regard. Furthermore, in conversation with my supervisor, we reflected on my own need to complete this task being a form of mirroring, parallel process or projective identification experienced between the research participants and I (Bloom, 2011; Cooper, 2019; Smith, 2024; Treisman, 2021). Faced with a task feeling deeply overwhelming, I had leaned into a too simplistic, quantitative measure to try and find some order amongst a perceived chaos. Therefore, whilst elements of this process were helpful and some of this analysis has been integrated into the study findings where relevant, the use of this form of analysis is limited due to the recognition placed on the limitations of scoring participants in this way and lack of complexity that can be brought to their experience by focusing on a reductive, quantitative measure.

One I had identified these key forms of tension in the data, I then deductively re-analysed the data by listening to and re-reading the whole data set to find where and how each participant was experiencing these forms of ambivalence and extracted data on each of these. It became

apparent that the first two forms of ambivalence encompassed a broad range of experiences and had several different themes within them, thus, these were broken down further. For example, within 'helpful and unhelpful', there were several themes identified under 'helpful', such as 'The work management tool' and 'A prompt to 'see' families', and under 'unhelpful', such as 'A barrier to direct work'. Identifying these themes allowed a more structured analysis of the data to take place and systematic review of each interview for evidence of the theme. Data was extracted on each theme for each participant or noted as 'not reported' where there was no evidence of this.

Stage 6

Upon beginning to write the first findings chapter, I soon noticed that the narratives of some participants were directly contradicting themselves. The same participants were stating performance is both helpful and unhelpful to them in relation to the same thing, such as in managing their workload. The narrative was starting to become more than the sum of its parts. I began to identify different layers of ambivalence emerging in the data that were formed across the organisation and participant experience. I restructured the findings to capture these layers of ambivalence around specific phenomenon within the data and sought to explain these in the final analysis.

3.5 Analysis of the unconscious

Analysis of the unconscious occurred throughout the research project and in multiple formats. This was largely an iterative process, integrated into each element of the data analysis process discussed above and in the final writing of the thesis.

Analysis of the unconscious in individual participants occurred in the following formats:

- During stage one, the transcription process, I listened for any utterances, pauses, stutters and repetitions that might provide some insight into the unconscious and ensured these were transcribed.
- During stage two, analysis in between interviews, I made note of any tensions and contradictions in the data, as well as any emotional processes that could provide insight into the unconscious.
- During stage three, I coded any emotional process that could provide insight into the unconscious and those that were relevant to the research question, utilising Braun and Clarke's (2022) latent coding method of analysis.

- During stage four, I completed the proforma for each participant, writing down emotional processes observed in the data and extracting data to illustrate this. I also, having developed this form inductively from the data, included a section specifically in relation to anxiety defences. Within this section, I noted down any anxiety defences that I had observed in the data and captured the interpretation of this on the proforma.

Analysis of the unconscious in the whole data set:

Once individual data analysis had been completed, the data set was brought together to consider psychoanalytic processes occurring across the whole of the data. This process commenced during stage five of the analysis process, whereby the data from interviews one and two, alongside journalling and supervision notes, was re-analysed systematically and deductively, based on the layers of ambivalence emerging within the data set. The layers of ambivalence developed were largely unconscious in nature, they did not appear in the awareness of participants conscious narrative but rather in the reconstruction of the narrative around specific ambivalent phenomena present across the data set. This approach emphasised the importance of form as opposed to content in participant narratives, with a particular focus on incoherence and contradiction in stories emerging that might provide some meaning beyond the conscious awareness of the participants (Hollway and Jefferson, 2013).

Furthermore, whilst aspects of life history had been shared with me by participants where they chose to do so, I decided to deviate away from a purist FANI approach to the methodology in not including pen portraits of participants, as discussed above. The data I had available, alongside my ethical considerations as to how to deal with it, meant that a purist approach was not entirely suited to this research project. The focus on experiences of a specific work-related phenomenon as opposed to life history, where the methodology was originally developed, meant I tailored the approach to suit this project (Clarke and Hoggett, 2009). Aspects of life history and my interpretation and hypotheses about these were included in the data analysis in an attempt to get closer to and understand participants experiences. These have been interwoven into the findings and discussion chapters where they provide some insight, meaning or interpretations of the data that speak to experiences of PM, some of which appear to sit in the unconscious.

3.5.1 Unconscious analysis of the self; dealing with countertransference and reflexivity

During interviews, I paid attention to my own thoughts and feelings, as well as any unexpected or defended behaviour I was noticing in myself, making note of anything of

interest in my journal. I was also in a fortunate position to be studying at the Tavistock and Portman NHS Foundation Trust, where reflective research seminars were an integral part of the doctoral course. This meant over the six years of study, I attended regular reflective research seminars that were structured around a reflective group discussion model (Rustin, 2008). Once data has been collected, I was able to present segments of data or emergent themes from the data at these seminars. This meant several colleagues had sight of my work and I was able to develop a richer understanding of the data, and my own role within the interpretation of this, as an actor within the data itself (Frosh, 2003; Clarke and Hoggett, 2009). Having colleagues reflect on the data whilst I listened, enabled a deeper understanding of the self and my role as a reflexive researcher to develop (Berger, 2015). This, alongside my supervisors' expertise in this field, allowed rich discussion in relation to unconscious processes occurring in the research encounter to develop. Such discussions were recorded in note form and contributed to the development of findings and application of theory.

As the project developed, so did my understanding of the nature of the defended self and the necessity to engage with this in psychosocial research (Hollway and Jefferson, 2013). Below, I outline examples of where I noticed the defended self emerge in the research process. I also explore the role of countertransference and reflexivity and how I dealt with these encounters in the research process (Berger, 2015; Clarke and Hoggett, 2009; Hollway and Jefferson, 2013; Rustin, 2019).

3.5.2 Susan

The first interview I conducted was with Susan. I felt somewhat deflated and a little disappointed in the result. Not only was this much shorter than I had imagined, Susan did not employ the frustration at 'the system' that I was expecting and, perhaps more importantly, hoping for in the study. Feelings of disappointment, or 'wanting something more' from participants, can be considered as a form of 'countertransference boredom' in the research process, which positions the researcher as wanting the participant to do some of the analytical work themselves (Archard, 2020). In supervision, I discussed this interview with my supervisor and shared that as Susan spoke, a vivid image a person's head being drilled into came into my mind when she talked about how performance data had been 'drilled into us'. We discussed the importance of this imagery to the research process and understanding of Susan's experience (Holmes, 2018). During this discussion, I came to consider that I was

perhaps projecting my own frustrations at the PM system onto Susan's experience and not paying enough attention to how she was communicating her own experience.

Following this discussion, I went onto transcribe the interview. Immersion in the transcription process, alongside this application of reflexivity, meant a new understanding of what Susan was saying emerged in the data. Whilst I experienced an element of apathy in her presentation (which is different to how I would discuss this issue), I came to understand this as an important defence mechanism and way of surviving the PM system. In getting closer to her words and my own unconscious imagery, I saw that she was very clearly articulating how PM is unhelpful and prevents her from doing meaningful work with children and families. Therefore, use of reflexivity had implicitly changed and developed my understanding of Susan's experience once I had 'sorted out' my own experience of transference, something which is an important and enriching experience in practice-near research (Cooper, 2009).

3.5.3 Rachael

When I met Rachael, I had a very different reaction. I very quickly identified with her experience of PM. I resonated strongly with Rachael's anger at the barriers PM was placing on her work with families and the injustice of being questioned by management about timescales despite being exhausted from working over and above her role. Rachael also presented as the most knowledgeable about the PM system and was the only participant that discussed how PM might shape commissioning of services. I felt Rachael was able to capture the complexity of how PM was functioning in a way I hadn't heard before. I also found myself with a huge amount of respect for Rachael. In discussion of her childhood experiences, she alluded to overcoming adversity and was proud of her achievements to be a social worker, her anti-oppressive values shining through in this discussion. Following my first interview with Rachael, I wrote in my journal:

"I was finally greeted with the disdain and anger that I expected in the project. Felt quite angry afterwards but also pleased that this had come to light...I heard her passion for practice shining through and that she didn't want to be one of those tick box SWs. I identified with this feeling well. She has been the most difficult to pin down and this makes sense – she clearly prioritises relationship and practice"

When I came to develop the findings of the study, I identified a theme that related to an ambivalence of being both exposed by and invisible to the organisation in relation to

performance. This theme was initially identified in Rachael's experience, her clear articulation of this experience being an important part of her narrative. In deductively re-analysing the data during stage five, I noticed that I was placing a substantial amount of emphasis on Rachael's experience within this theme, with pages of data relevant only to her experience. Other participants experience of this, however, appeared to be much more nuanced. There was a subtlety to their experience that I didn't appear to be capturing. In further analysis, it came to light that feelings of invisibility related more to participants experience of feedback. Invisibility being directly caused by the PM system could actually only be identified in Rachael's data, albeit this may have been a contributing factor to others' experience that was not articulated or identified in analysis of the unconscious and emotional processes in the data.

I came to understand this experience as a form of countertransference, with my own experience of the defended self initially skewing my perception of this theme. As explored above, there have been times when I have felt persecuted by the PM system and been physically and emotionally exhausted by my social work role. My interaction with Rachael had triggered this experience in me and my countertransference was now shaping my understanding of and approach to the data (Rustin, 2019).

In identifying and understanding my own unconscious processes and my over identification with Rachael's experience, I was able to respond reflexively to this process and change my approach (Berger, 2015). It became evident that I needed to separate Rachael's experience from other participants within the final analysis. As such, this has been presented as a distinct and unique experience to her. Analysis that captured a range of experiences, and a more nuanced approach relating to varying experiences of feedback, has been presented in light of this.

3.5.4 Application of theory

Finally, analysis of the unconscious developed further when writing the findings and discussion chapter and applying psychoanalytic theory in greater depth to the data. The writing process itself was often iterative, involving a return to the data and then back to the thesis to ensure rigour. Application of psychoanalytic theory occurred throughout the research project, namely, in the process of being attuned to unconscious processes, as discussed above. This meant several versions of the thesis were developed to iteratively apply theory and develop the findings which are presented in the final thesis. Some findings of the study rely heavily on psychoanalytic concepts, such as projective identification. Inevitably, this leads to an emphasis on findings that are theoretical in nature. Indeed, the central concept of

ambivalence on which the findings depend, is a theoretical one. The theoretical nature of these mean they should be understood as one interpretation of the data that have been developed according to the methodology outlined in this chapter (Holmes, 2018).

3.6 Ethics

The consideration of ethical issues is fundamental to the construction of any research study. Psychosocial studies pose particular ethical issues which will be explored in this section, as well as the impact of the COVID-19 pandemic.

Underpinning the ethics application and my ethical stance throughout the project, I upheld the six core principles defined by the Economic and Social Research Council (Economic and Social Research Council, 2021), Code of Practice for Research (UK Research Integrity Office, 2023) and the British Association of Social Workers code of ethics (British Association of Social Workers, 2021). Informed consent was sought as defined by the Economic and Social Research Council. This was achieved through several means, outlined below:

- The creation of an information and consent form that detailed important information about the project and ensured participants were able to make a meaningful choice about whether to take part. This included what it means to consent to being a participant, anonymity, data storage, dissemination, right to withdraw and support services available.
- Signed consent was received from each participant via secure email and verbally checked at the start of each interview, with an opportunity to ask any questions. Whilst pre-covid methods would require signed consent to be obtained in person, this is a common adaptation following the pandemic which is often preferred by participants due to ease (Morton *et al.*, 2023).
- I stayed alert to subtle signs of coercion throughout the research process, which can occur when participants may be vulnerable or feel pressured to take part (Josselson, 2007). If I noticed a participant struggling with a particular discussion, I paused the interview and checked in on their wellbeing and whether they wanted to continue, thus, ensuring process consent throughout.
- Checking in with participants experience at the end of the interview.

All interviews were recorded on an encrypted digital recording device and immediately uploaded to my University Onedrive account and deleted from the device. In online

interviews, I chose not to use the video recording feature as this felt too invasive. Personal details forms were stored in a separate file to transcripts, which were anonymised using pseudonyms, a method I employed throughout the data set including in my handwritten journal and seminar presentations.

The COVID-19 pandemic required additional consideration of the need to adapt elements of the study to the changing social context, whilst maintaining the same level of ethical rigour. Many of the core values of ethical, qualitative research, including building a rapport with participants, reducing power imbalances, and promoting participant welfare, were built during times of in-person data collection and thus, translation of these to a virtual context requires consideration (Morton *et al.*, 2023). One example of this is conducting virtual interviews with participants in their own homes might allow a greater level of physical safety and allow choice in presentation (such as choosing to share their video or not), yet researchers must also consider the additional intrusion into a participant's personal space (Roberts *et al.*, 2021). On the other hand, there were equally times where I was concerned about participants being too 'public', noticing that they were in an open office, albeit with no one else present. With each of these scenarios, I allowed participants choice, checked they were in a confidential space, and were comfortable to hold the interview.

3.6.1 Ethics in psychosocial studies

As narrative research is inherently relational, exploring human connection and rich personal experiences, ethical dilemmas are complex. As such, I strived to reduce harm to participants, being emotionally aware and sensitive to their experience (Josselson, 2007). In this regard, I found that the FANI method of being 'invisible' was not always helpful and often participants were looking for reassurance in their responses and finding silences difficult. Staying true to the methodology in my initial first interviews, I tried to intervene as little as possible and stick to the question and sub-questions I had designed, however, to my surprise, some participants presented as being quite anxious within the interview.

The clinical use of silence within the methodology has been questioned by researchers who have had similar experiences of participants feeling 'duped' by silences in the interview. Moreover, in clinical psychoanalysis, silences are approached with caution, a moment of the patient allowing the skill of the therapist to help them, yet, in a research context, they can be presented as the interviewer trying to steer the participant into a certain self-realisation (Archard, 2020). I allowed the second interviews to be far more conversational in response to this, which appeared to put participants (and probably myself) at ease and allowed much

richer data to be collected. This may also, of course, be influenced by their familiarity with me as a researcher and some level of trust being obtained by this point.

One of the key ethical issues in relation to exploring the unconscious relates to the researcher's theoretical interpretation of the findings, particularly where one could identify aspects of the self that the participants were unaware of or disagree with (Josselson, 2007). This has led to criticism of Hollway and Jefferson's approach holding an 'expert' position in relation to participants' unconscious experiences that can place them in storylines not of their choosing (Wetherell, 2005). Furthermore, a multitude of complexities come into this act of interpretation, including the researcher not usually having the same level of training, and acting in an entirely different role and context to an analyst (Archard, 2020). An important area of my data analysis is to ensure that the concept of the 'defended subject' is not just applied to my participants, but also to myself as a researcher (Hollway and Jefferson, 2013).

3.7 Conclusion to chapter

Within this chapter, I have outlined my epistemological and ontological positioning and provided a critical exploration of the qualitative methodology used, informed by FANI alongside reflexive thematic analysis. It is without doubt that I would not have been able to reach the findings that I did in this study without the use of a psychosocially informed methodology. Whilst there were aspects of the FANI methodology that were of particular use to me, such as the proforma, I found that I was unable to apply the methodology in its holistic form in this study. Conducting a purely FANI method for my first interview did not reach the level of depth I was looking for in the data. On the contrary, I found that once I lessened this approach and was more conversational and responsive to my participants, they too were more open, critical and engaged. I must take note of the change in my own positioning in relation to this and my asking of much broader questions that were focused on their holistic experience of social work that undoubtedly had an influence on this. However, the interpersonal relationship I was able to build with participants which free association traditionally avoids appeared in this case to provide a greater level of depth to the data and a more comfortable ethical position for me as a researcher. This is not a particularly uncommon experience for psychosocial researchers, many of whom do not follow the purely 'unstructured' approach in FANI that was developed specifically in relation to life history research (Clarke and Hoggett, 2009).

Data analysis in this project was lengthy and involved several different techniques. It is perhaps reflective of my journey and development in confidence that I started with a very

structured method of analysis and moved further away from this the more the project developed. The application of reflexivity has been particularly helpful in understanding the participants' story in its holistic form. In applying these varying forms of analysis, I have learnt a great deal about methodology, including what not to do! I have ventured to new cognitive and emotional spaces in the analysis of this data and found the writing of the findings incredibly challenging. I see this an important but painful regression, necessary for me to take the 'developmental leap' required to develop the analysis that I did.

Chapter Four

Findings; social work practice

This first of two findings chapters presents data from the analysis, exploring participants' experience of PM. Whilst the psychoanalytic concept of ambivalence is fundamental to understanding the findings, a more in-depth theoretical analysis is presented in the discussion chapter. Four layers of ambivalence were identified in relation to social work practice and two in relation to the management experience. As such, this chapter explores the first four layers of ambivalence; the workload management tool, the anti-relational force, the safeguarding role and organisational feedback. The second, much shorter, findings chapter, explores the management role in relation to PM.

4.1 First layer of ambivalence; The workload management tool

This layer of ambivalence explores how participants experience ambivalence in relation to PM being a workload management tool. Participants discussed in this section experience PM as having a grounding, orienting effect on their day-to-day work, such that for some, it is difficult to conceive of being in their role without it. At the same time, some participants are rejecting of the system in this regard and find their own way of navigating this when the system is unable to meet their needs.

4.1.1 Workload management

Data suggests that five participants experienced PM as a tool that could be helpful in supporting them to manage their workload. Susan, Mary, Emma, Rachael and Eleanor explicitly named PM as a useful tool to organise their work by providing them with reminders, tracking information or the following of a process or procedure that can hold them to account. Tracking home visits and other core social work tasks, alongside the provision of reminders of when they were due, was seen as particularly useful in the context of this being a busy, multifaceted and complex role.

"it gives me reminders and I'll put it on my to do list. Sometimes you think 'aw, that's extra to go on your to do list' because you already really, really busy, but it's a good it's a good prompt because I think without that we'll probably would forget to do our case summaries as much as we should and, because those are the little tasks that we kind of put at the bottom of the to do list…it's about just blocking out that time, erm, and getting them done and I, I think I use it as a positive strategy really…to keep up to date and prevent delay for young people and children and families. So yeah, it's a positive thing, I think."

(Eleanor interview one)

An authoritative but helpful figure appeared to be emerging in this narrative, where participants positioned PM as guiding them through their role.

During data analysis, Rachael stood out from other participants in several ways; this is explored in the proceeding chapters. Rachael was by far the participant that presented as the most unhappy, stressed and anxious about PM. She scored 10 for all three of the identified tensions for social workers and was the only participant that scored 10 in any of the 24 scores given (see appendix 6). Despite this, she still recognised, or at least felt the need to say out loud, that performance 'has its place' in relation to workload management:

"I think I would say in a good way, cos obviously keeps you kind of focused on…because sometimes you can be so busy you think…ee I need to go and see that child I haven't seen them for ages and I'll check me form and I'm like, no, actually, I saw them last Monday."

(Rachael interview one)

Two participants, Susan and Mary, both describe the function of PM in this regard as helping them to 'know where they are', or 'know where they are at', with Mary also naming her 'dependence' on this in helping her manage her workload. This level of dependency is iterated in Eleanor's second interview:

"I do, I do think we would be lost without them because you could get embroiled into whatever you're doing and forget when things are due…"
Me: Yeah. What do you think we did do before them because we haven't had them for that long I don't think?
I don't know, because obviously I've only been working in social work for like three and a half years now.
Me: Yeah
So they've always been there for me.

(Eleanor interview two)

Of particular significance, PM had a grounding and orienting effect on these participants without which, they would somehow be lost in their work without a sense of direction or understanding of what they were doing. This experience appeared to be particularly pertinent for Eleanor ,so much so that she struggled to conceive of her role without a PM system. When stating the above, I sensed that Eleanor was truly unable to consider what social work

might be without a PM system and at times I worried about her understanding of her role and how close she was able to get to family's experiences. My interpretation of Eleanor's experience was that, in her mind, there is no such thing as social work without PM. Other data corroborates this interpretation. When exploring what social work meant to Eleanor, and in describing her work with children and families, I continually sensed that she was not truly seeing, understanding, or immersing herself in family's experiences in the same way as other participants. Eleanor's background is interesting to consider here. A mother of four children, she described multiple personal and professional responsibilities throughout her life that, at times, felt impossible to manage from a young age. She did a psychology degree and found the transition to social work studies more difficult, describing this as 'not black and white' and commenting on her love of numbers and not enjoying qualitative research studies. The closest I felt I got to Eleanor's practice experience was her description of working with a young person engaging in 'risk taking behaviours' which involved her bringing in other professionals to work with him. Eleanor's comment about PM being there for her, therefore, appeared to epitomise these experiences through a genuine sense that she needed PM to understand herself, to lead her and to ground and shape her professional identity. It is perhaps unsurprising when considering Eleanor's own history, why she appears to have unconsciously developed a professional identity based on a strict allegiance to tight timescales and procedures, and struggles to engage with the complexity that social work practice brings. Anna (a manager who has worked in social work for years before the introduction of PM systems) alluded to this sense of being 'led' by performance:

"I, I think work, workers in particular do feel very

Me: right

erm, pressured by I think the data, because that's what's led us for so long."
(Anna interview two)

I sensed here that Anna was describing a dictatorial form of leadership that deeply saddened her. The language of 'pressure' and being 'led' was not communicated to me in a positive sense. Furthermore, Anna discusses throughout both interviews the importance of workers being 'free' from the data, this is a consistent narrative in Anna's story and one which is explored within the proceeding chapters. A large part of her role, she understands, is providing support for social workers when the pressure gets too much, ensuring they were not entirely 'led' by the data, but by children and family's needs.

The narrative held by these participants suggests the PM system has created a level of dependency in relation to managing workload requirements. For some participants, it was evident that this was a helpful tool for them in some way. In a world of complexity and unmanageable workloads, they appreciated the guidance and grounding this provided to them, as well as the prompts and procedures that provided them with structure and reminders. This dependency, however, appeared to have a darker side. The starkest example of this was for Eleanor, who would be 'lost' without PM, and appeared unable to consider what social work would be in a world without PM. For others, it provided a sense of knowing 'where they are at', helping them to navigate through their world with a guidance that appeared useful to them.

4.1.2 Rejection of PM

The contradictory side of this layer of ambivalence identified in the data found that participants positioned PM as being either an unhelpful intervener, or entirely redundant in the task of supporting workload management. This emerged in the data three different ways, described below as own system development, emailing and knowing.

4.1.3 Own system development

A number of participants discussed with me their propensity to develop their own system to manage their workload. Mary, Adam, Emma and Eleanor had developed a unique system of workload management. This was described in several ways including having their own spreadsheet, keeping a tracking document in their diary, or putting prompts in their calendar. It meant the creation of a unique system, designed by themselves and for themselves only, with a better user interface to help them do their job, guide them through tasks and keep them grounded in similar ways to that described above. For these participants, there was a sense that the PM system became redundant in providing a tool to manage workload and guide them through their role.

"I've actually got like a, like a spreadsheet which has got like all me families on, it's got like contacts and teachers, but it's visits and stuff so I know that, you know, when, when children have been seen, cos we've got that on [the PM system] *but for me, the weeks sometimes come round so quick you could have like a crazy week and before you know it you're like 'aw I need to go and see such and such'"*

(Adam interview two)

4.1.4 Emailing

In addition to this, there was an established, agreed alternative system of emailing when the PM system failed to adequately capture data required to support the workload management of social workers and managers. Emails were sent between social workers and managers in instances where the PM system was unable to capture data required to support workflow, such as when a visit had been completed but not yet recorded. Susan, Mary, David, Rachael, Anna and Eleanor all discussed engagement with this alternative system. The system was created, I was informed, to satisfy both the management and workers of evidencing practice.

"I do actually email my manager and say well, actually I've tried to see, and copy everybody in, I've tried to see du, du, du, du, so everybody knows that I'm not slacking, people tend to do that, you know, 'well actually I've been out twenty times to see du, du, du, du, du"
(Susan interview two)

The purpose of this alternative emailing system, therefore, replicated that of PM system. It ensured both parties were made aware that the processes embedded in the PM system were being followed, even where there were gaps in recording on this. What this alternative system meant, however, is that the workforce had deemed it necessary to create a workaround in the face of a system that was not able to meet the organisational need to evidence practice with children and families. Not only does this question the level of organisational trust held between the organisation and its workforce, it, seemingly being led by social workers as well as managers, creates a feedback loop that means social workers are positioned as having to 'cover their backs' in the event that gaps are identified in the PM system. This inadequacy lies within the functionality of the PM system and not the workforce. The emailing system, however, effectively meant a secondary recording system had been developed that could duplicate the recording of tasks where the PM was unable to adequately capture work completed.

4.1.5 Knowing

A final observation was made in relation to Mary and Emma, who described how they simply 'know' if a visit was going outside of timescale, rather than having to rely on either the PM system or their own system of workload management. For Emma, there is a sense that she instinctively knows when her visits are due because she understands the expectation of her role without the PM system:

"I'm a planner, I generally keep me visits within timescales, they're done in a timely manner, they're done within kind of what the expectation is of timescales. For those who potentially don't stick to that, that should be used as a guide, but for meself, it's just an additional tool, I suppose."

(Emma interview one)

Here, the PM system is minimised to being an 'additional tool' which is secondary to Emma's own understanding of her role, her professional integrity and her sense of knowing how to plan her workload.

For participants discussed in this layer of ambivalence, it appears they experience a rejection of the PM system. This emerges in light of system inadequacies and a need to hold agency over their own workload and professional identity. Concurrently, an alternative system of emailing that became an established and well utilised workaround was embedded within the organisation when PM fails to do its job.

4.1.6 Summary

Data suggests that five participants, namely, every social work participant apart from Adam, appeared to experience PM as a helpful tool in managing and monitoring their workload in some way. When describing this, participants' language is suggestive of, (and is indeed named as such by Susan), a level of dependency which orientates them in their work and directs them as to what to do next. This appeared to provide a sense of grounding, guidance and security but also created an uneasiness within me at times, particularly for Eleanor, who was unable to conceive of her role without PM supporting her in this regard. The contrasting side to this layer of ambivalence was present in Mary, Adam, Emma and Eleanor's narrative. They experienced the PM system as redundant in this task. Some replaced it with their own, uniquely designed tool that was able to support them better, others simply knew what to do next. Furthermore, six participants discussed a cross-organisational system of emailing that was designed for workload management and evidencing practice when the PM system is unable to conduct this task. Mary, Emma and Eleanor discussed experiencing both 'sides' of this ambivalence. In it's simplest sense, their narrative suggests that they found PM to be both helpful and unhelpful in managing and monitoring their workload. At times of heightened anxiety, this could lead to individual experiences of ambivalence. This is explored further in the discussion chapter.

4.2 Second layer of ambivalence; The anti-relational force

This layer of ambivalence explores participants experience of PM in relation to their work with children and families. Most participants experienced PM as a barrier to their work with children and families; this was keeping them away from family homes and on a computer. This same organisational force, however, was also pushing them out of the office and into family homes when their visits are due on the PM system. Furthermore, a type of practice dictation was identified that prescribed what social workers practice with families should look like. When these two forces collide, participants appeared to experience ambivalence in relation to PM and their connectedness with children and families.

4.2.1 The pull away from families

PM was described by David as an 'anti-relational force'. I found this an incredibly powerful description of his experience, such that I included this descriptor in the thesis title. In discussion of their work with children and families, all participants apart from Mary and Anna explicitly cited PM as a barrier to spending time with families. Whilst Mary and Anna did not state this, I sensed if I had asked them this question directly, they would have agreed with this view. Both reported that PM took up a large part of their time. Indeed, after completing the interviews, I was left with an overwhelming sense that completion of PM tasks took a lot of time, energy and resources from all participants. Adam describes below how performance managed tasks constitute the majority of his work. This is so much so, that he is shaping his direct work with families around PM, rather than this being a helpful contributor that supports his primary task of working with children and families:

"if somebody had have said this at the beginning, you're probably like seventy percent, eighty percent like paperwork and twenty percent actually hands, when you, when you, I would have thought 'nahhh, it's got to be other way round'

Me: yeah

but it isn't, and I think, you know, the kind of time you have with families you've got to like fit around everything else that's going got on

Me: Right

and you know, even direct work with the kids, I think you've always got to, like I always put it in my diary in advance so it's always there, cos I think, there's other times where if it weren't booked it in you'd just be side tracked by what else was going on

Me: Yeah

Or having to write, you know, this or that and, it's about that whole added just spinning

plates isn't it"

(Adam interview two)

Rachael discusses an interesting phenomenon she experiences in relation to this. She describes the task of meeting both the PM requirements and the work required with children and families as impossible to achieve, such that one or the other must be sacrificed. It was evident in her words, and the level of frustration that these were presented with, that this was an incredibly challenging choice to make.

"it's always, like any social workers I know, it's always a bit of a kind of, what do you give

up? Do you give up the organisation side of it, or do you give up the actual direct work side

of it that's potentially putting the risk on the children…Erm, I think I fee-, it can feel a lot

like, there's a lot of emphasis on, the more, well not maybe more emphasis, but sometimes I

feel like it's, you know, people do feel that it's, you know, 'well we know you've seen the child

but it's not on' and it's like 'well, yeah, I haven't got time', and that's already with you

working over. You're already, you know, that's, erm, that's already, with, cos we just do it

naturally, we work over but that would, to have everything on the system, you would have to

give something else up."

(Rachael interview one)

For these participants, therefore, PM tasks were experienced as a challenging force that disconnected them from children and families, preventing them from being able to provide the service families need. It also meant they had to shape their work with children and families to fit around the requirements of the PM system, such that this was presented as a secondary requirement in their role. Rachael's experience epitomises a challenging choice facing social workers experiencing these contrasting requirements of their role – what do they give up?

4.2.2 The push towards families
Despite this challenge, an important perceived benefit of receiving performance data was the prompt it provided for going out to see families where busyness and crisis situations may have taken precedence or been a distraction. Apart from Emma, Rachael and Anna all

participants describe PM as a tool that got them out of the office and into homes when other demands had taken over their ability to remember this for themselves.

"But yeah, like I say, I think that's really positive. And it gives you a kick up the backside to, to get out and get your visits done if you haven't done them, do you know what I mean"
(Eleanor interview one)

From a management perspective, David described PM as being a 'driver' for social workers in this regard.

"Well, I think it's a dr-, yeah, I mean, I do, and i-it's, it's a driver, a driver the data, is a driver for the social workers to ensure…a reminder that the visits are important and they have seen the children in timescales when they're, when they're so busy"
(David interview one)

David's repetition of this word was intriguing to me. I wondered what his own experiences of this 'drive' were, or if his team would agree with him. Social work was David's second career, having spent 20 years working in a factory in the print industry. He got 'sick and dismayed' by the factory mentality and left to pursue something he was interested in. To do so, he had to take a '300%' salary decrease, pushing his 'poor' wife back into fulltime work. His guilt fuelled him to work his way up the managerial structure as quickly as he could. He now sees data as 'imperative' to his management role. I wondered if David's description of the driver reminded him of his time in the factory, the need to get out of something causing him distress at the perceived expense of his loved ones, and the drive he felt to better himself at this time. I wondered, therefore, if this was an unconscious representation of his own experience being projected onto his team, or if his team would agree with David's depiction of their experience here.

Complexity is brought to this layer of ambivalence in participant descriptions of the impact of the PM system driving, prompting or reminding social workers to work with families. Observations of practice were not completed in this research project and therefore an assessment of the impact of this force on practice is difficult to assess. However, data in which participants described the PM system acting as this organisation force suggests that they subsequently experienced a lack of meaningful work or connection with a family when it is this force, and not that of family's needs, that are motivating them to visit families. When this is the case, work is described as lacking in meaning or purpose. This can be seen in

Susan, Mary and Adam's data, in how they describe how visits could be done quickly if they were running out of time on the PM system:

"you look at a visit and like I say 'aw me visits coming out so I'm going out', and then you know you sometimes have visits where you, you might not do any direct work and you think well, is that a meaningful visit?"
(Adam interview one)

In addition to this, Mary and Emma also describe a similar tension between reductionist and prescriptive processes dictating how social work should be conducted and the complex needs of a family. When processes did not 'fit' what the family needed, this was experienced as a source of anxiety due to this forcing social workers to act against their own value base and professional judgement. Mary discusses an example of this in relation to performance-managed care plans completed with the child:

"I've got a few now that are on the list and me manager's said, can we get these done in the next four weeks, erm, and you might just have a completely chaotic child who you can't sit down and do that
Me: Right
work with you know, and you might just be like, putting out fires all the time, and it might not be the right time to do that, so, and I'm sure if I approached her and said that to her, she would understand but I guess you then feel, you know, you've got to get that off that list so that it's not in the red and you not
Me: Mmmm
getting an email with the, you know, being questioned why you haven't done something."
(Mary interview two)

Rachael was aware of this practice but said she did not subscribe to this and was deeply concerned by it. She upheld the view that she was led explicitly by family's needs, albeit this was challenging against the force of the data and procedural requirements of the role. She was vocal about the danger involved in being led by the data, particularly for younger workers:

"and I feel like, I've been here long enough, that I, I, wont, put that f-, you know what I mean? And if my data's, you know, I try my hardest for it to be in, but if it's out, it's out, and if I need to spend more time with a family, that is what I'll do. But I think when you getting very young, impressionable social workers who don't maybe have that kind of thing to say, 'actually no, I need to spend that extra time with the family', I think it can be dangerous."

(Rachael interview two)

4.2.3 Summary

This layer of ambivalence has explored participant experience of PM in relation to work with children and families, a core task of the child and family social work role. It is recognised by six participants (Susan, Adam, David, Emma, Rachael and Elanor) that they experience PM as barrier to spending time with families, albeit there is suggestion by all participants that a substantial amount of their time is spent on PM tasks. Five participants (Susan, Mary, Adam, David and Eleanor) also position PM as a motivational force to go and see families. They find this particularly helpful when busyness takes over and they might forget or be too distracted by other work to visit them. Self-reported data suggests that these interactions can cause frustration, as visits described lack meaning and connection with families and are completed to serve the needs of the PM system. Furthermore, Mary and Emma experienced PM as an 'anti-relational force' when this dictated their work with families against their own judgement. These findings see the emergence of another form of organisational ambivalence experienced by this group of participants, that being the simultaneous pull away and push towards relational work with children and families. Data suggests that Susan, Mary, Adam, David and Eleanor experienced both forces simultaneously, thereby potentially holding an individual experience of ambivalence in this regard. When this layer of ambivalence is in operation and workers are pulled in two different directions simultaneously, they report being unable to provide the meaningful experience they want to for children and families and slip into patterns of following process over responding to family's needs, engaging in defensive practices such as shortening home visits or completing little meaningful work during these.

4.3 Third layer of ambivalence; The safeguarding role

This layer of ambivalence relates to how participants experienced PM in relation to their fundamental role in protecting children from harm. Whilst this was seen as integral by some, ambivalence was identified in the simultaneous recognition that the reality of the work

involved in safeguarding children is somewhat disconnected from PM and, furthermore, that the defects in the PM system mean that it is unable to provide this safeguarding role.

4.3.1 The safeguarding role

All participants apart from Emma and Eleanor discussed the view that PM played an integral role in the safeguarding of children. There were a number of reasons given for this and Susan, Adam, David, Rachael and Anna all discussed how recording of information supports them in assessing, reviewing, planning and decision-making in relation to children and families:

"if you're doing like a, an initial assessment, you know, that's obviously pulling everything together so in that sense when you're doing your visits and you're doing your analysis and you're doing your decision making

Me: Mmmm

you know, the performance is important for that because it shows that, you know, if you're only doing 1 visit or you're doing four visits, you, you know your likelihood is you're going to get more information from four than one. So you know, in terms of like your data and stuff and your performance that would reflect in that"

(Adam interview one)

Such tasks form a core body of the work and largely constitute the primary task of child and family social work. Recording of information to share with other professionals, such as a new social worker, the emergency out of hours team, or the family court judges, was cited by Susan and Adam as an important task. This helped develop an understanding as to what was happening in the child's life, and enabled them to respond appropriately:

"I think if somebody else takes over the case, you know, they'll have a better understanding of what's going on in the family or on their history or whatever"

(Susan interview one)

Thus, the recording of information on the PM system is seen as holding an important role in the task of keeping children safe. Writing down information about the child and family appears to be a helpful mechanism to support social workers and their colleagues to synthesise information, develop their understanding and analysis and make the right decision for the family. My intrigue in relation to this theme was the connections that participants

were making between the task of writing, arguably something that has always been a core part of the social work role, and the issue of PM. Participants discussed here were unconsciously associating writing, keeping files, analysis, decision making, planning and reviewing, with PM; how this work is measured by their organisation and government. Their language suggests they were not differentiating one from the other. This is an important observation, as it essentially positions PM as everything that they do in their social work role, particularly relating to their core task of keeping children safe.

This narrative was further exacerbated in both Mary and David's story. Both posed a view that the recording of home visits was, in and of itself, able to keep children safe. For David, an 'emotive' response was provoked for him when the data was not completed:

"if I turn me laptop on on a Monday morning and the datas not looking good…which is very rare to be fair to the team they're very good, but if there wasn't being a child seen within…statutory timescales…that is emotive for myself…ultimately…we're here to safeguard children…and if we're not seeing them, then how can…we safeguard them, so yes…the data extraction and reading them recordings is…emotive you know"

(David interview one)

This was said by David in direct response to a question about emotional responses to performance, which was perhaps a leading question for David and I wondered if, given his other views (including acknowledging that data is often incomplete due to information not being recorded in a timely manner), this was truly representative of his experience or something he felt I wanted to hear. Nevertheless, for Mary and David, there appeared to be a belief in the term 'if it's not on the system, it didn't happen', as discussed by Mary below:

"Sometimes it's a case of, we've been so busy and I've seen the children but just because it's not physically on the system, you know, they're raising that question, obviously, they say if it's not on the system, it hasn't happened, which is true, you know, we need to have some evidence that things are being done."

(Mary interview one)

One interpretation of Mary's assertion is that there is an unconscious entanglement starting to emerge in her understanding of reality, conflated by rhetoric of NPM and PM. Evidencing and being held accountable for practice is an important aspect of social work, this is a truism

of the role. However, when Mary shared this with me, I was left wondering who 'they' were, and why Mary was verifying 'their' position that essentially detached her from the reality of her practice.

4.3.2 PM provides emotional safety to children

Another narrative linked to this was present in some participant interviews. Whilst there was recognition that this was not it's only purpose, Susan, Anna and Eleanor, all reported that one purpose of recording performance tasks was for the child's life story in the event that they wanted to read their files as an adult. In this regard, it was important to reflect the child's life in detail in their recordings because they have a duty to tell the child's story as a way of supporting their development and providing them with emotional safety as they grow up:

"Me: So yeah, I mean, who do you think it helps, the recording? Who is it for?
Erm, I think it's for, I think, really strongly, it's always been in my mind from being a student
that that remember, it's the child, might read that file.
Me: yeah
So always for the child, that's probably the most important and obviously for
management as well"
(Susan interview two)

This vignette is shared here as another example of how powerful narratives can be adopted by practitioners and transcend through practice. This example is similar in format to that discussed above. It begins with a truism of the role; recording of information is important and great care should be taken when writing in children's files in the event they want to read them. What sparked my curiosity about these two extracts, however, is the unconscious association they make between these tasks and that of PM. PM is a managerial process that is designed to measure accountability and affordability of public services. Life story work with children is a fundamentally different issue, which requires great care and consideration in working directly with families. The adoption and unpicking of these narratives suggest, therefore, that PM is unconsciously positioned by participants as an all-encompassing creature that makes their role what it is, without which, there is no such thing as social work.

4.3.3 A system unable to safeguard

As much as participants discussed the importance of PM providing safety for children, contradictory narratives to this were also identified in the data. Indeed, whilst Rachael did identify PM as playing a role in the safeguarding of children, she also adopted a position that passionately argued against this. In relation to the recording of visits, Rachael says:

"at the end of the day, like what I've said is, they don't hold serious case reviews for data being out, do you know what I mean, they hold serious case reviews for kids not being seen"
(Rachael interview two)

Without prompting, Rachael also discusses the writing of case notes to children as 'patronising', stating she is unable to engage with this idea. Refusal to engage with this narrative appeared to be challenging and frustrating for Rachael at times, for example, at the end of her second interview she was profusely apologetic for being a 'right winge' and for her 'brutal honesty'. I sensed that her reluctance to talk the language of NPM and PM identified above was an extremely exhausting position for her to hold within an organisation so deeply shaped by this. Furthermore, two narratives were identified in the data that held oppositional views to PM being able to safeguard children, which are explored below. Firstly, the notable absence of any discussion of PM in the second interviews where participants were talking about their general experience of social work, work with families and their own motivations for entering the profession. Secondly, an acknowledgement that PM was unable to safeguard children due to a number of system defects.

4.3.4 The absence of PM in social work

When asked about their experience of social work in the second interviews, all participants discussed rich, skilful stories about the complex, relational work they were doing with children, families and colleagues. They discussed their own personal values and childhood experiences that had led them to social work. Many reflected on how their personal and professional selves interweave in their practice experiences. I enjoyed completing this section of the interviews the most, and heard some deeply emotional, troubling, joyous and traumatising experiences of practice. The formation of narrative surrounding practice experiences revealed a great deal to me about the unconscious associations participants were making in their stories, and in their experiences of PM. Some participant stories captured my interest intensively, the detail in which this was depicted transporting me at times to family's

kitchens, living rooms and bedrooms. One example of this was a nuanced discussion by Anna about a family she had worked with some 16 years previously. Anna was able to recite the exact date she met the young person she worked with and detail the trauma he experienced in the minutiae of detail. She described a vivid experience of vicarious trauma associated with this;

"I couldn't sleep, I used to sleep with my iPod on, my headphones on and play music to get us off to sleep because you were constantly processing things in interviews and that you'd heard, you know, you were visualising it, things actually came to life"
(Anna interview two)

The outcome for this young person positioned Anna as a hero, rescuing him from the depths of trauma and despair. I was left feeling incredibly proud of the work she had done, and of our profession, and I sensed this was a parallel experience for myself and Anna. Reflecting on this experience following the interview, I wondered if we were both engaging in an idealised phantasy about the 'good' social worker, who we always hoped we would be. Other participants felt much further away from their practice with families. David and Eleanor felt the furthest. Interestingly, David was the only participant where I was unable to find any contribution to the construction of the proforma, developed from themes seen across the data set, and I was baffled by this. Having completed analysis of the data, it took me much longer to understand David. Something appeared to be blocking me from seeing his true self, and I expect this is something to do with his relationship with PM.

My curiosity was sparked in interview two by the lack of discussion of PM when asking social workers directly about their practice, particularly given the all-encompassing nature of how PM had been described above. When asked directly about social work, most (six) participants did not mention PM management until I invited them to reflect on our discussion in the first interview, with the longest absence of PM being 38 minutes into the conversation. It appeared there was an unconscious separation in participants minds, therefore, between their task of working with children and families and PM, with no association being consciously made between the two phenomena when discussing the former. In Emma's words:

"I don't think I thought about that whilst offering the intervention"
(Emma interview two)

Furthermore, when discussing how PM impacted on a particular piece of practice, Susan, Mary, Emma, and Eleanor all stated this had no impact whatsoever. It appears from the data, therefore, that when discussing and practicing social work, there is a clear distinction in participants minds between relational work with children and families, and PM. They do not associate one with the other. When asked about PM, however, distinctions are convoluted, they merge into one another, rhetoric and reality become entangled, and PM is positioned as all-encompassing such that it becomes everything social work is.

4.3.5 System defects

Several narratives were also present in relation to the PM system being unable to safeguard children due to system defects. These were the failure of the system to record attempted but unsuccessful visits, being unable to record visits in time and the data being unable to represent the complexity of the work completed with families.

4.3.6 Unsuccessful visits

The first narrative present in this regard was in relation to how PM did not reflect the actual visiting of families. This Local Authority (as is common practice) does not extract data on the number of attempted visits to a family; the performance data on which workers are measured relates to how often the child has been seen. In scenarios where social workers attend the home, but the family are out, or the child does not want to see them, for example, data extracted for performance measures does not include these attempts. Susan, Mary, Adam and Eleanor appeared to experience a spectrum of responses to this, with Susan, Mary and Adam all presenting with a feeling of this being an unfair or unjust system of recording. Eleanor acknowledges this position, but gave limited opinion on the subject:

"half the time you probably have been out but you just haven't been able to get an answer at the door or, or something like that."

(Eleanor interview one)

Despite this sense of injustice, some participants appeared to experience feelings of failure or inadequacy when visits were not successful. This suggests that there was a disconnect between their unconscious feelings, and their stated feelings, about this phenomenon. Indeed, a code emerged in the analysis of the first interviews entitled 'taking personal responsibility for system demands'. Such data suggests that whilst social workers are aware that

responsibility does not lie with them for the functioning of the PM system, they can unconsciously adopt this as a personal failure, such that this can be experienced as a heavy weight that takes an emotional toll on them. Furthermore, where the child hadn't been seen, there was a perceived unjust questioning from management about why that appeared to feed into this emotional experience:

"it's like that child hasn't been seen but they might have had covid, or they might have been on holiday, and it's those kind of things sometimes where, it could be that they're poorly or whatever
Me: Right
and it's like well, you know, they haven't been seen for that reason but again, your data won't flag that, all it will show is that 'aw this child's not been seen, why"
(Adam interview two)

Anna was evidently aware of this and tried to take some of this weight off social workers, informing me that seeing an attempted visit on the system was enough to satisfy her that the social worker had been to visit and that an alternative plan needed to be explored which suited the child better:

"I know we've got two or three teenagers, hate the social workers going out, and they'll avoid like the plague so I know that their visits are often out and as long as I can see the recording of efforts made and all of that, then that's fine, I understand that. And then we'll use the supervision to look at well how are we going try and track that young person down or capture that and, you know, whether that's been a video call with them on WhatsApp, because they're more inclined to do that."
(Anna interview two)

4.3.7 Not recording completed visits in time
Another identified dysfunction of the PM system was that a visit may have been completed but not recorded in time due to high workloads. Susan, Mary and Rachael all appeared to experience measurement of their performance against only recorded and not actual visits as being unfair:

"I would say 98% of social workers have seen the children, have done the care teams, it's just they literally haven't had the time to write them on the system"

(Rachael interview one)

I sensed Rachael's frustration in her words when telling me this. There was acknowledgement from both managers of this misrepresentation of actual work completed:

"workers are actually covering more, so caseload, so sometimes data is affected by that so, you know, they're not just visiting their own children, their visiting colleagues as well within the team, so they may have double the visits to record, so we would expect that performance is going to dip, erm, that's not to say that they're not being seen, it's just the recording isn't going to evidence that"

(Anna interview one)

Organisationally, therefore, it appears there is acknowledgment of these system defects by management and attempts to mitigate these, however, participants discussed here were still appearing to take personal responsibility for this, such that this contributes to the anxiety experienced in their role. This suggests that, at least unconsciously, it is very challenging for social workers to question the power of the PM system, even when they know it holds such inaccuracies.

4.3.8 Performance data lacks complexity

A shared narrative was present in the data in relation to how accurately performance data was able to represent social work. All participants agreed that the performance data does not adequately represent the quality or complexity of the work being done with families, leading to apparent experiences of frustration, that so much emphasis was placed on this by management:

"Me: yeah, like does it represent your job?
No, absolutely not. You know, erm, it's just a list of, it doesn't, you know, you've got a few visits out of timescale, it doesn't mean that you're not doing work on it in other areas or wherever.
Me: yeah
So yeah, so but no, that, that box doesn't represent the work that we do at all."

(Susan interview two)

The most potent experience of this occurred towards the end of Mary's second interview, where she had identified a 'disconnect' between the performance data and her experience of working with children and families. After sharing this disconnect with me, Mary started to question her own thoughts and her own statement about this:

"I don't know whether that's maybe something that I've, put i-, that I've formed in my head, that disconnect, I don't know. I don't know whether it's difficult to like, look at, you've got a child and a family and then you kind of putting numbers and things next to them.
Me: Mmm-hmm. Doesn't, fit.
Yeah. Does that make sense? Like, like maybe, it, like that-that language or that, you know, there shouldn't be a number of days like, when you've last seen the child, I don't know, I don't know if I, it's something that I've, that I've made up…

I don't know if I've, if I've formed that in my head or not. But, then again, speaking to my team, I think everyone feels, feels the same about it. But then if it wasn't there, some people wouldn't like it, so, yeah.
Me: So what is it that you think you've made up in your head?
I just don't know if, just with, with us saying that, and I know that, like with us saying that there's a disconnect, I just don't know if it's because of that like, putting that number with, with the, with the child and the family."
(Mary interview two)

For a moment, there was a visibly uncomfortable shift in Mary's presentation, she seemed nervous and even fearful, as if she was unable to decipher her reality. I too experienced an emotional turn, immediately feeling too intrusive and wanting to change direction of the conversation. I felt I had unearthed something in Mary's unconscious that was quite unsettling for her, such that she needed to retreat from this position and revert to engaging with the illusion of the PM system, by questioning her own sense of reality and thought. I noticed after the interview that I checked in on how Mary was feeling more than with other participants, I felt a sense of responsibility towards her, and I walked back to her car with her.

4.3.9 Summary

This layer of ambivalence has explored two narratives identified within the data that situate PM as playing an integral role in the safeguarding of children. These were present in data for all participants apart from Emma. The first narrative suggests that PM keeps children safe, either in and of itself, or by helping with assessing, planning and decision-making. Secondly, that PM is for the benefit of the child, to provide them with information about their story and thus, emotional safety, as they grow up. The unconscious association between these narratives and their reflection on the reality of practice has been explored. On the other side of this ambivalence, the same participants appeared to experience significant defects in the PM system which meant it was unable to complete this task adequately. Namely, the PM system was unable to measure important information like attempted visits, it did not take account of the lack of time available to social workers to complete recordings and did not represent the complexity of the work they are doing. Despite recognition of these defects in the system, however, the sense of failure and inadequacy appeared to be experienced by the social worker. Furthermore, when asked to discuss their experience of social work, PM had very limited presence within the conversation and a total absence in most interviews until the conversation was re-directed towards the subject matter. This suggest that social workers have a clear separation in their mind between practice and PM, but when engaging in conversation about PM, their reality becomes skewed such that their role becomes shaped by the PM system.

4.4 Fourth layer of ambivalence; Organisational feedback

This layer of ambivalence refers to how social work participants experienced feedback about their work. Feedback from the PM system appeared to be often experienced as something negative or persecutory, whereas feedback from other sources (such as professionals and families) was experienced as positive and motivational. However, social workers often yearned for a greater connection with their organisation in the form of more accurate and developmental feedback and described a sense of being 'unseen' by their organisation when this was lacking.

4.4.1 'Feedback' from the PM system

In this local authority, like many others, the team's performance data is received by team managers from the performance team and then disseminated to the whole team by email. Performance data is emailed three times per week with performance-measured tasks highlighted in green, amber and red according to how inside or outside of timescale the

recording of the task is. Every team member receives the whole team's data. Many participants did not use the word 'feedback' to describe this, rather, they experienced a sense of 'being told' if they had done their recording work or not.

"I think with the data it's just like I say, 'oh, I'm not gunna get, I'm not in the shit this week"
(Rachael interview two)

Explorations of feelings related to the receiving of data unearthed a plethora of emotional responses about this data set landing in participant inboxes. Some emotional responses identified could be considered as positive, good, or indifferent, as described above. These feelings were largely associated with times that data was up to date, and all tasks had been completed. This seemed to produce a sense of achievement for some participants. Predominantly, however, performance data emails were met with a worrying set of emotional responses. These are described these below, as depicting a sense of shame, inadequacy, stress and guilt. Five participants (Eleanor, Susan, Mary, Rachael and Adam) all presented with these experiences, albeit in varying ways. Collectively, they used language including fear, hate, not very good, inadequate, feeling crap and stress to describe the experience of receiving this.

4.4.2 Shame

A shameful narrative about being 'in the red' when tasks are out of timescale was identified in the data. This is described by Eleanor below, with Susan and Mary also appearing to experience feelings of being shamed or exposed by performance data:

"you look at it and you think 'oh no, I'm in the red'. Like how does that make me feel against your colleagues? Because there's always certain people in the red and certain people not in the red… so I always thrive to try not to be in the red. So I think initially I used to think 'ee my god', like, other teammates must be thinking 'oh god, she's not very good at getting her visits done', or, or whatever. It's those kind of things, but, you've just got to, give a, I don't know, half the time you probably have been out but you just haven't been able to get an answer at the door or, or something like that. But it does put you in, I suppose in the rank of a naughty list doesn't it because you've got loads of people in the red, and then you can actually see how many days out they are, so"
(Eleanor interview one)

Eleanor was arguably the participant most driven by performance data. She continually describes the data as a positive aspect of her work and helpful to her role. She explicitly stated this did not cause her stress anymore, although it used to when she first qualified as a social worker. Her description here, however, suggests that feelings of shame, being ranked against her colleagues and exposed by the naughty list, were perhaps taking an emotional toll on Eleanor and driving her motivation stay out of the 'red'. This unconscious exposure of such experiences initiated a curiosity in me about her use of the word 'positive', and I questioned if this was operating as an important defence for Eleanor in denial of these feelings.

4.4.3 Inadequacy

Susan and Rachael appeared to share a dissimilar but equally negative response to performance data. Performance emails were experienced by them as though they were not good enough or 'inadequate'. This word stood out to me in Susan's first interview. She repeated it at least three times when discussing her feelings about PM.

"I've been there when…your names in red but you've been working…7 days a week and things like that and you, it makes you feel really inadequate and especially when if it's shared with the team, I think…it does make you feel inadequate, when it's…in red"
(Susan interview one)

"You can't be that social worker that gives everything and, erm, do the mountains of paperwork that they want you to do…so why do I feel so shit about being crap on my data? Like, it makes, it does make, she'll say [the manager] *that she knows it's not cos I'm lazy and she knows I'm really good and all that, and I'm like, well, that's nice that you saying that, but you've only said that on the back off the fact that you're telling us that I'm shit because (laughs) of, of me data."*
(Rachael interview two)

Susan and Rachael's presentation were entirely different to each other. Susan was quiet, calm and measured in her responses, whereas Rachael presented as angry, frustrated and agitated by PM. I had a sense, however, that they shared something important in this experience, both communicating their sense of inadequacy that was shrouded in sadness.

4.4.4 Stress

The final emotional response identified was stress or anxiety that appeared to rise in social workers on receipt of performance emails. A sense of panic is expressed below by Susan when waiting to see if she had been named on the 'naughty list':

"so we haven't had that list, the naughty list, come out this week. And I'm, I'm thinking 'christ!' I wonder if I've, because I've become dependent on it to be honest, I'm thinking

Me: Ah right

I'm thinking 'oh my god, I wonder if I've don't all my visits', like

Me: Ahhh

cos the naughty list hasn't come out. I don't know where it is, I'm like

Me: Where is it?

I don't know

Me: that's really interesting

my manager must be off, so I'm like 'oh no'. We've got a little Whatsapp group and everyone's like 'has the naughty list not come out?'"

(Susan interview two)

Adam also described the additional stress and pressure this put on him, on top of an already emotionally demanding role. This was so much so, that Adam questioned if he could sustain his role in child and family social work. He discussed exploring other roles including what he described as 'therapeutic social work', which involved more direct work with children and less performance-related work. This suggests that PM was a factor in his ability to maintain his social work role.

"I think it's difficult, I think, the time restraints anyway in social work is like hard enough, and I think that then, on top of that, to obviously, you know kind of your caseloads and you know, I think [redacted local authority name] in general is relatively stable, but you know, different Local Authorities you've got higher caseloads

Me: Mmmm

its then trying to manage all of that, it's kinda this data come through, like 'you've seen child alone or this and that'…

I think it can, it can add that extra stress on of course it does"

(Adam interview two)

4.4.5 Humour

Social workers colloquially named the circulated set of data 'the naughty list'. This was often discussed in humorous terms and generated a shared mechanism for humour amongst participants, acting as an unconscious mechanism to manage the emotional responses explored above.

"The naughty list is well known in our team, it's called the naughty list, 'OoooO, you're on the naughty list'…And although we sort of joke about it...it does, we do, or I do, feel like 'oh goodness me', it does put a little bit of fear in to us as well, as though you're not doing enough but I can explain why I haven't been able to do that or even put them on that system or whatever."

(Susan interview one)

Another associated finding was present in Anna's data. She described how managers previously created a playful 'game' in relation to performance data and set up a competitive cross-service contest in relation to this. There were balloons and biscuits for the winning team. Anna had reflected on this event and expressed some regret around this. She felt it added more stress to workers and so put a stop to this. This suggests, however, that both social workers and managers were attempting to find humourous and playful ways to manage the emotions identified in the data.

4.4.6 Feedback from practice

Feedback from other sources that was able to accurately reflect social workers practice appeared to be experienced differently to the system of feeding back from the PM system. This type of feedback was valued greatly by all social work participants, and was often unconsciously positioned in participant narratives as an oppositional or contradictory experience to the naughty list. This came from various sources including other professionals, families, managers and independent reviewing officers and operated in varying contexts including supervision, annual reviews, audits, emailing, and staff award ceremonies. Rachael shared a humorous story with me, in which it was clear she was reaping the rewards of her hard work with a family who had been subject to a very high level of intervention when she first met them:

"what I do like about it is when we do like sort of like case analysis and stuff. And somebody audits your case, and then they'll go and like ring the families and stuff. Erm, I had one of mine done last week, where the Mam said she thought I was right cunt when she first met us, but she really likes us now. I was 'well, see, talk about progress' (laughs)"

(Rachael interview two)

Whilst Rachael and I shared a laugh about this example of feedback, I sensed this statement meant a great deal to Rachael. It seemed to give her a huge amount of reward that she had effectively managed a difficult relationship with this mother such that she was able to develop a level of trust with the mother that was then shared with her manager. It seemed to speak to what social work meant to her, and what was keeping her in practice despite the upset, anger and frustration she was expressing.

Whilst there appeared to be a shared view that this feedback was deeply valued, however, participants had very different experiences of this. Adam and Emma felt that they received a lot of feedback and saw this as a benefit of working for this organisation. Emma, in particular, was very positive about her work and appeared to genuinely love her role. She discussed being nominated for an organisational award on three occasions and was very positive about the impact this had on her practice, motivation and development:

"it's always nice to hear positive things about your practice, and it's good to hear kind of what worked well, erm, it's also good to hear kind of what you could do better or how you could change things because then you take that into the next part of your, next family you work with, or you take that on your learning journey of kind of, who you are as a worker, but I think it's always kind of, definitely if it's positive, it's a, it's a boost…It gives you a nice feeling, and I think that, I've been lucky enough that in with families I've had that from families as well, and I suppose, and, and from managers, but it, it, it just sticks with you…erm, and again it gives you motivation to continue what you're doing, and kind of work hard at what you do"

(Emma interview one)

Emma's position in relation to this is interesting to explore. Emma was the only social work practitioner who did not appear to be experiencing persecutory anxiety in relation to receiving performance data. Rather, Emma liked the data and found it useful, albeit this is surplus to requirements for her work, as this is always on track. Emma still presented as

experiencing challenging emotions in relation to practice including stress and anxiety, however, this largely involved getting behind in her paperwork, specifically assessments. This did not appear to be experienced in a persecutory manner, however, in the same way as some of the internalised shame and incompetency identified above. Rather, this was described as a worry that the family would be delayed in receiving their assessment. Emma also stood out in other aspects of the data. She did not engage in the narrative explored above that PM was able to safeguard children. She prioritised the needs of children throughout her interviews and gave incredibly skilful examples of her practice.

Emma held a unique role in the participant sample, being an experienced social worker ten years post qualification and the only senior practitioner, meaning she both supervised staff and worked directly with children and families. It is possible, therefore, that the straddling of these two contexts enabled a greater level of integration and understanding of being both the sender and receiver of data. This might account for some of Emma's apparent ability to hold a more integrated, depressive position in relation to PM, as opposed to a splitting and associated persecution appearing in other participant narratives:

"I'm part of the, the person who sends that data out, and gathers information, w-has this visit, child been seen, why has it not been seen, erm, so that doesn't cause us stress".
(Emma interview two)

Susan, Mary and Eleanor had a more nuanced experience than this, however. Whilst they appeared to equally value the feedback they received, they wanted more of this. I was left with a sense in these narratives that constructive feedback was an important part of their professional development and identity. Fundamentally, they wanted to progress and learn and felt they were not given enough of this:

"we've just done a supervision agreement, and I've asked as part of what I want for my supervision is more feedback around my performance as well because it's, although it's touched on a little bit it's not something like you know you want that, well I want that constructive feedback as well, to say you know I need to to develop a bit more in this area, or I'm doing well in this area or not so well in this area and what can we do about it, so although we do get some sort of within supervision, for me, it's not sufficient enough."
(Susan interview one)

This yearning for more constructive feedback was described by these participants as if their organisation was unable to see the complexity of their work with children and families. This appeared to exacerbate feelings that they were not valued, or not good enough, in the eyes of their organisation. This led to them seeking more feedback and reassurance that enabled them to develop professionally. Within this narrative, I recognised my own countertransference in feelings of neglect and disconnect from organisations I have worked within. Analysis of Rachael's narrative in this regard unearthed a curious phenomenon in the data. Rachael's experience of being unseen, she stated, was directly caused by the organisational emphasis on PM. This was leading to feelings of being underappreciated and undervalued. I experienced a sense of sadness when Rachael described this to me. With a reductionist emphasis on data, the organisation is unable to see her work and the value she brings to families lives, something which I felt meant a great deal to her. I sensed that this could be unconsciously triggering a traumatic experience from her own childhood in being neglected or unseen. Rachael described her childhood as 'not the easiest' and having people around her that supported her in her late teens, who appeared to see her for who she was, enabling her to reach her potential. This sense of being unseen therefore, exacerbated in Rachael's narrative more than others, could be a form of transference that relates to her own experiences of being unseen as a child:

"probably's like now and again, someone will say 'Oh, that was a really good piece of work, that was like, you know', erm, but I feel it's very much played down, where when your data's out, that's a huge piece of work, 'oh my god, you know, I'm gonna have to now speak to senior management, this is gonna go this level because this hasn't been done"
(Rachael interview two)

4.4.7 Ambivalence in feedback

The ambivalence identified here is complicated by the notion that spending more time with families and thus prioritising relational and rewarding work inevitably increases the chances of persecution from the PM system when less time is spent inputting data. In this regard, social workers must make a difficult choice about how to balance their time along with their values and ethics. An example of this is below, where Rachael describes a complex piece of

work in which she is simultaneously rewarded by the progress made by the mother and punished by the PM system:

"I've got one Mam, for example, who, I've been working with for a year and half, but she's just started to say that erm, she knows she's got to quit drinking altogether. Erm, and she, it's been a long time because it's been a, it's been a long journey with her, of getting to that point where she's actually saying now 'actually, I, I, can't drink, I need to stop altogether' erm, and I dunno, no one sees your, really, your direct work, it's, it'll be something like well, 'where's the [care plan]? Where's your [care plans], are they on the system? Not 'oh my god, that's such good work, or look at that relationship you've got with that child'. Erm, I guess that's it, your data's analysed and they, it's, it's either good or bad, where, your work, it doesn't feel like it's a reflection of you necessarily, so if a case goes wrong, like, I don't think you kind of like, I dunno, maybes looked at in a way that it's like 'God, that, you know your commitment and dedication to that is re-, and your skills, and that you send us on all these training courses for, erm, that's really helped turn that family around'. I just don't think there's any real appreciation for...they know it, but it's like, but yeah, but that's what counts, cos that's were, you know, everyone wants to know about the data."

(Rachael interview two)

Such states of mind can be highly challenging to manage and position social workers in ethical dilemmas that could feel impossible to negotiate.

4.4.8 Summary

Feedback from the PM system was received as a binary 'telling' of whether a piece of work had been completed or not. The exposure of individual performance to the whole team created a number of emotional responses that were largely shameful and anxiety provoking, seeing the generation of a humorous response in the 'naughty list'. Feedback on practice was experienced in different ways, however, all views shared place importance on receiving this. This was highly regarded as an important part of progression, was valued deeply and was motivational, such that Susan, Mary, Rachael and Eleanor wanted a lot more of this, yearning for a deeper connection between their organisation and the family homes they practice in. The lack of this meant these participants felt unappreciated and importantly, unseen, by their organisation. For Rachael, this was a direct consequence of the organisational emphasis on PM and led to feelings of neglect.

Chapter Five

Findings; the

management role

This shorter findings chapter discusses the final two layers of ambivalence identified within the data that relate specifically to the management role; the social construction of the ultimate truth and exposing to and protecting from PM.

5.1 Fifth layer of ambivalence; The social construction of the ultimate truth

This layer of ambivalence relates specifically to David and Anna's experience of PM in relation to their role as a team manager. Whilst they describe PM as a helpful function that enabled them to do their job, simultaneously, they presented PM with significant limitations in providing meaning to them. It seemed this was only a small part of their understanding of what was happening with a family. However, they described a major part of their work being providing an understanding of performance data, without which it was described as 'meaningless'.

5.1.1 PM enhances the management role

A surface level analysis of David and Anna's experience of PM was that it provided a helpful resource in their day-to-day work. They told me they utilised PM to ensure social workers were seeing children on time, to support with case management and statutory processes, and to identify any unexpected gaps in case work that might require further attention. There was a substantial difference, however, in how David and Anna experienced PM. The initial scoring of how helpful they found PM was 0 for David (being most helpful) and 7 for Anna. David describes PM as being 'imperative' to his work and the foundation on which his management role is built:

"What do I think about performance measures?...I mean, I think it's...a fundamental part of...the social work process...and, although...receiving data performance...three times a week can feel like a little bit over the top at times...it's...very helpful for the managers. Very, very helpful for the managers to see if the children are getting seen within statutory timescales...so...it's imperative, you know?

(David interview one)

Anna had a different view to this, experiencing PM as helpful, but only marginally. The very first thing that Anna told me about performance was:

"the data that's provided to us as managers is, is far better than it ever was"

(Anna interview one)

She went on to recall times of not having computers in teams and this making it more difficult to manage performance issues. However, within the first minute of her interview, Anna introduced a nuance to this narrative which proceeded to be an important basis for her positioning in relation to PM:

"So it gives us I suppose, a, a, a benchmark to start trying to understand what's underneath but it, it, on its own, I don't think it has any meaning."

(Anna interview two)

This was a narrative that David was also keen to engage with. Both managers describe the performance data as if it exists on different organisational 'levels', with both using the terms qualitative and quantitative to describe this:

"that's more…the quantitative data…regards to performance measures…the qualitative data will come…in reflective supervisions that we have…with our staff"

(David interview one)

"it's doesn't tell you the quality, doesn't tell you the quality of those relationships. It's quantitative. It, it tells us how many children we've seen, but actually doesn't tell us how meaningful that is and erm, you know, and I think we can capture that in different, in different ways."

(Anna interview one)

I wondered if Anna and David's observations about the different organisational levels spoke to their role of sitting in between practice and the organisation. This narrative was consistently discussed in both their interviews, albeit in different ways. Whilst social workers describe a lack of meaning in performance data, there was limited observation of the organisational levels described here. This may be attributable to how one's organisational positioning shapes understanding of the same organisational phenomenon.

5.1.2 PM distorts the management role

At the same time as finding PM an enhancing experience to their role, both managers describe the task of providing the context, stories and meaning to the PM data as an important

part of their role due to its capacity to only tell a limited story. This might involve an initial analysis and sorting of the data upon receiving this, sending the data out to the team by email, chasing up social workers to provide an explanation as to any gaps or out of timescale tasks, having conversations in supervision about patterns they are observing and recording of those supervisions. When I asked Anna to put a figure on how much time she thinks she spends on this activity, she was unable to do so and struggled to answer the question, replying:

"you do it subconsciously"

This suggests Anna is aware of how her role is shaped by this task, such that she seems to complete this task 'without thinking', but chooses not to engage with any critical analysis, in this interview at least, in regards to whether this should be such a significant part of her role. Rather, she then goes on to describe the various tasks she engages in when doing this, and then says:

"I probably still haven't answered your question about how much time, erm, (pause) is, I'm, I'm (long pause) awww...it is probably quite a high figure"
(Anna interview two)

The prolonged pause and 'awww' expressed by Anna felt somewhat painful to hear. I wondered if I had asked a question she hadn't considered before, or one which she was uncomfortable engaging in. It might be that Anna was unconsciously engaging in a defence that looked something like avoidance or denial instead. When describing this role, Anna often used the terms 'behind' and 'underneath', (a word she uses some six times in her second interview), to describe 'where' she is providing this understanding. She discusses the need to tell the 'story' of the data to 'those above'. She also understood this as fundamental to her duty to the child, as without it, she would not be able to understand what was truly happening in the child's life, make the right decisions about them, and tell their story accurately in the event that the people 'above' were ever to read it. The importance of this story-telling role is illustrated in this example:

"I've got one in my team at the moment who probably goes missing once, twice a week, now, so that, they'll come up on the missing sheets and management will get that…But they're not placing themselves at risk. Often it's, they're not returning home because they're out with

their mates, they don't want to go in when they should be going in. So there's a context,

there's a story, there's some understanding behind that, which then sets up the work that the

safety planning around, you know, making sure that person has a phone, you know, that their

parents can contact them, if they're not missing, just keeping that communication link,

whereas I've had another young person who was missing every day, erm, every night, erm,

and, but would be found on the cliffs

Me: Mmm-hmm

erm, you know, and, and, threatening to jump, which en-, she ended up, bless her, going into

secure accommodation for a while and, so there's different, I suppose different extremes. So,

you know, you could have a, a, a child's pattern, patterns could look very similar, erm, but

the actual risks and the, the story underneath them are, are polls apart."

(Anna interview two)

This vignette illuminates the importance of this role for Anna. Given two identical patterns of data, she must spend time unpicking the story 'behind' that to satisfy herself and those 'above' her of what these patterns mean. The manager's role is described as one of deciphering this puzzle, exploring where all of the pieces fit together and completing the picture. This, in and of itself, was seen as an important skill and a helpful practice tool:

"I think you've got to have something underneath it to, to understand the story to understand

context as, as, and what it's telling us, and then that sets hypothesis for us to, to check out, as,

is our, you know, re-referrals because we're not doing what we should be doing. Are we

closing things down too early? Or actually is it new issues are arising?

(Anna interview two)

In hearing these descriptions, I was curious about what both Anna and David really felt and thought about this becoming the key task in their role. It appears, from both their narratives, that there is some acknowledgement that performance data provides an organisational illusion that without them, has little meaning. I sensed David was keen to engage in the illusion much more so than Anna, yet, neither manager appeared able to be open with me in relation to their feelings about this. My sense was that the cleaning of the data distorts the management task, such that the management role is less about supporting and managing staff and thus the children and families care plans, and more about cleaning and providing explanations for organisational PM data. The complexity of this narrative for both Anna and David was that

the cleaning of data had become part of the development of their understanding and involved engaging in skillful work, as if putting together a puzzle to develop their own understanding. It is perhaps this distortion that was difficult for Anna and David to detach themselves from, for fear of breaking this illusion functioning in the organisational unconsciousness.

5.1.3 Summary

Within this layer of ambivalence, I have discussed how Anna and David both describe PM as a helpful tool that enhances their role, albeit to quite different degrees. This helps them to understand what is happening with children and families, to manage workloads and ensure social workers are on track with performance managed work. At the same time, it is also redundant in this task, only providing a small segment of information about the family that is quantitative in nature. The management task then becomes one of cleaning data to provide explanations to 'those above' and in this sense distorts the managers' time they have available to provide support for staff. They both appeared, however, to engage with this illusion, or felt unable to share otherwise with me in the context of a research interview.

5.2 Sixth layer of ambivalence; Exposing to and protecting from PM

The final layer of ambivalence refers to how managers experienced ambivalence in relation how they shared performance data with their teams. Whilst David and Anna experienced this differently, they both experienced an ambivalence in relation to this and discussed various considerations as to how best to share performance data, seeing their role as simultaneously needing to expose social workers and protect them from the data. As discussed above, the administration and cleaning of the data formed a large part of their role and took a substantial amount of their time.

5.2.1 Exposure

Anna and David appeared to provide some interpretations of how social workers in their teams experienced receiving performance data. They seemed to interpret this as a helpful prompt or reminder to social workers to do their recording in the event they had forgotten, or hadn't had chance to do this:

"cos we do share that with the teams, because it, it can be good just for them to see, erm, you know, they might have thought they've recorded something and that haven't."

(Anna interview one)

"I send a, I cascade an email out to the team and tasks for the…child, whether, because sometimes they just don't add, they just sometimes haven't done the data recording…and they just need to add it."

(David interview one)

Furthermore, David told me he had asked workers in his team how they experience receiving performance emails, and they reportedly found it helpful. This is not consistent with the feelings identified in social work participants' narratives about this, albeit no data was collected in relation to whom Anna and David manage, or if their supervisees were participants in this study:

"I've had this conversation with them in supervisions, and how they've found, er, on the Monday morning when they, the, the staff read, you know, read the data after I've

Me: Mmm

after I've extracted that, and the data that's specific to my team, I'll ask them how they feel about that and generally, er, across the five of them, they've shared with me in supervisions and, and, and in, in structured supervisions and in the office, that they, er, they appreciate them having the data because it helps those who are not great with the time management and getting around the families and

Me: Mmm

So it's, it's helpful in that way"

(David interview one) I wondered, if I was able to speak to social workers in Anna and David's team, what they would say about this.

5.2.2 Protection

Despite both David and Anna holding the view that receiving the performance data was helpful for social workers, they also discussed with me a shared understanding that receiving performance data had the ability to cause harm. Both David and Anna positioned their role in a protective capacity in this regard, experiencing a need to safeguard social workers from performance data, and identified several actions taken in the exertion of this. This includes limiting the sending, changing their approach, careful construction of the language used in their communication, and being free to act outside of the processes prescribed by data.

5.2.3 Limiting the sending

Both Anna and David appeared to hold the view that three times a week was too much to send performance data to social workers. I was unsure if this was an organisational requirement. They both felt this would put too much pressure on social workers. Anna managed this by sending the data out twice a week, whilst David sent it twice a week and the senior practitioner in his team sent it out once a week.

"I personally think sending data out three times a week is, is, is over the top you know, er, and not in anybody's best interests so, er, we, I send that data out like twice a week and me senior practitioner sends the data out, on, on the Monday, I send it out on the Wednesday or a, or a Friday"

(David interview two)

5.2.4 Change in approach

Anna discussed how she had changed her approach to sending out the data following seeing the impact this had on workers. Anna described feelings of brutality in her previous approach to performance data, reporting feeling as though she was 'beating' social workers 'with sticks':

"we used to drive it, you know, there is no bones about it, we used to be sending the data out, 'this needs to improve blah-de-blah', you felt at times were beating them with sticks, which was awful, erm, because you could see how much pressure people were on.
Erm, and I think we've really sort of relaxed that a little bit. They want to do well and they're very keen to see the data, but I think we have sort of, we've changed our approach, and I know I have"

(Anna interview one)

The brutality of this metaphor could be interpreted in different ways. I wondered if Anna positioned herself as 'awful' where she too could have been experiencing an organisational 'beating' in relation to performance data being on time.

5.2.5 Careful language construction

David appeared to hold responsibility for cushioning how social workers received the data with the careful wording of emails and verbal conversations he was having. Without this additional support, David felt the sending of emails could cause anxiety:

"what I write, what I say, very careful not to cause them, er, any unnecessary an-anxieties over data performance. Er, I don't want them to be out on a, doing some fabulous work with a family and have fabulous feedback from the care team and the parents and th- and the children and then they go back to the office and look at their data stats and they see themselves at the top of the, the data stats with the worst, and they haven't bee-, they haven't seen a family for a long time, er. So, yeah, I'm very careful how I manage that."

(David interview two)

When discussing how he manages this process, David and I identified a kind of 'translation' process that occurs through his role. This was one of the few times I offered an interpretation with the interview, something which naturally occurred during this discussion. There was an unconscious positioning occurring in David's role that appeared to translate the data received into something that is manageable and can be digested and understood by workers before sending it on. David describes how other managers might email workers in bold red font and this is something he avoids doing in order to act protectively in this capacity; the construction of the email is a 'delicate' issue which must be approached 'carefully':

"So in the language I use to send the email, I'm very, very careful that I recognise, that they're performing, you know, doing what they should be doing social work but also, yeah, balancing that with, getting the, they're getting the visits on, on the system, er, and again I, transfer that into supervision, so I have supervisions every, every four, every four weeks, so its personable supervision but it's also like a reflective learning model, so as it should be, it should be a premise for learning and I'm hoping it is, er. So that's how I also manage, you know, manage them

Me: mmm

delicate issues, skillfully, or try to be skillful"

(David interview two)

Furthermore, David acknowledges the impact that taking a harsher approach to management would have on children and families:

"I'm very careful Rebecca, I, I, I speak and communicate with my social workers the way I, I would expect them to speak and communicate with, with the parents and then the parents with the children.

Me: Right

So, I'm very conscious if I, er, ball and shout, if I ball and shout, that, my social workers and they would replicate with the parents and then the parents with the children. So I try and replicate the way I would expect, or I would like them to form relationships with, with the families they work with"

(David interview two)

5.2.6 Being free

Another protective task Anna appeared to engage in was enabling workers to 'be free' from PM. Anna discussed this phenomenon throughout her interviews, reporting that social workers must have the opportunity to be 'free' of the data in order to respond to what the child and family, not the PM system, needs. To Anna, it was a key part of her role to ensure that she negotiated and managed the PM system, such that it was not dictating social workers' work:

"data is one thing and it allows us to do something but we've got to be also in some respects free of that data

Me: OK

to allow us sometimes to do things that is right for that child or young person. So sometimes, you know, we might say well, we need to be doing it this way, and we need to be doing it that because that's gonna tick this box, or it's going to tick that box. But actually what that young person needs is something a bit different… You know, that, yes, we have certain things that we need to do. But actually, if we can demonstrate this is the right thing for that person at that right time. Then that's okay, as well. Because we can evidence that, we can contextualise that, we can demonstrate why we've acted in the way that we've acted on this occasion."

(Anna interview two)

This stance against the dictatorial nature of PM allowed Anna and her supervisees to act in the best interests of the child. Holding this position requires a level of professional confidence and an organisational ability to allow this practice to occur and effectively stand

up against the external forces that PM brings. Furthermore, Anna recognises the negative impact that following procedures formulaically could have on children and young people:

"I'm talking about potentially older ones who have a number of people around them, who the social worker maybe is not the key person in their lives, they have somebody more significant and more meaningful for them and it's right for them that person, that that person invests in them that, you know, I'm not going to be saying to, and beating a social worker up to say, you know, you need to visiting this person because that's gunna make our data because actually, it's, it's it can be intrusive"

(Anna interview two)

Both managers are, therefore, actively considering the experience of children in the way that they manage performance data and the extent to which they expose their team to this or allow it to dictate their work. Some of these experiences were fully engaged with and considered an integral part of the management role. Some appeared to be more subtle, or remain in the unconscious experience. David appeared to clearly recognise the anxiety that performance data can cause and, thus, he adjusts his management style accordingly, such that he models how he wants social workers to speak to children and families. For Anna, there is a sense of her negotiating the system and providing a context around her decision-making such that social workers can act outside of its restrictions and do what is right for children and families. In these examples, Anna and David are conceptualising their role as a protective figure in the child's life that must safeguard them from the harm that PM can cause. Whilst PM systems were initially intended to improve service for children, there is direct acknowledgement within this data that they can in fact do the opposite.

5.2.7 Summary

This layer of ambivalence has discussed how Anna and David experience ambivalence in relation to how they share performance data with their team. On the one hand, this is a helpful process which supports social workers to stay on track with their performance-managed work. However, there is extensive recognition within the data of the harm that sharing PM can have on social workers and on the children and families with whom they work. This is manifested in the recognition of anxiety that is caused to social workers or the dictation of practice that might not respond to children and family's needs. In recognition of

this harm, Anna and David position themselves as the protector, providing a safeguarding role to both their social workers and children and families with whom they work.

Chapter Six

Discussion

This discussion chapter is divided into three sections that collectively develop a critical analysis of the thesis, synthesising findings, theory, literature and philosophical underpinnings. I, firstly, return to the research questions asked. . As findings were developed inductively from the data, some research questions were more comprehensively answered than others, and I explore critically how the findings answer the original questions posed and any limitations presented by taking an inductive approach. The purpose of this section is to provide a summary of the findings discussed in the thesis, as opposed to a separate analysis of findings structured around the research questions. I then consider further the emergence of incoherence, contradictions and unconscious processes that were identified in the findings and apply psychoanalytic, complexity and trauma theory and research literature to develop a critical discussion of the findings.

The structure of this thesis is perhaps unconventional, therefore, in that this analysis and application of theory generates new interpretations of organisational life that constitute a set of unconscious processes and interactions occurring beneath the surface of the organisation. This could be considered to constitute new findings or, in the least, interpretations of those findings. Applying psychoanalytic theory to the findings was an iterative process that developed throughout the duration of the study and the final interpretation is presented within this discussion chapter. The final section of this chapter considers further the impact of anxiety on the ambivalence identified, both in terms of the individual and organisational harm that this can cause, as well as participants ability to tolerate and navigate this mental state.

6.1 Answering the research questions

This study sought to answer the research question:

How do social workers and managers in a statutory children's services department experience performance management?

Sub-research questions posed were developed as follows:

What does performance mean to child protection social workers and managers?

How is individual performance shared with social workers and how do they respond to this?

What kind of emotions do performance measures evoke in child and family social workers and managers?

What do social workers and managers think about performance measures?

What happens to social workers practice with children and families in response to performance measures?

Research question: How do social workers and managers in a statutory children's services department experience performance management?

The central organising concept that is used to represent participants' experience of PM is ambivalence. Ambivalence was identified in the data during the data analysis process through the extrapolation of individual narratives which, when segmented into themes and reconstructed in relation to phenomena seen across the data, posed a narrative that was greater than the sum of its parts (Byrne and Callaghan, 2014). The holding of contradictory feelings was acknowledged as a conscious experience by two participants, Emma and Susan.

"I suppose the, the performance kind of (pause) probably contradicting myself, but it keeps you kind of on track, you know what your expectations are, you know what you need to be doing, doesn't change how I work with the family, but it keeps your performance right, and them procedures, the timescales, so you're always working to something"

(Emma interview one)

"where before you were…I'll be thinking…these visits are due…but now although its good because you can see…what needs to be done…but on the other hand, I think you become a little bit dependent and not sort of fore-planning for visits as well, so it's, it's got its good points and bad points as well."

(Susan interview one)

Aside from these two mentions of contrasting experiences, ambivalence identified through data analysis appeared to be largely unnoticed or an unconscious process in the individual or group of participants. As outlined in the methodology chapter, the unconscious was assessed and analysed through multiple forms of data analysis. Findings suggest that ambivalence was experienced in six different forms that emerged as layers in the organisational experience of these participants. Whilst some participants experienced ambivalence in relation to their individual experience of specific phenomena, ambivalence also appeared in the group experience of participants in the study, meaning that some participants appeared to be holding an opposing or contradictory experience to their counterpart participants in relation to the same object.

Sub-question: What does performance mean to child protection social workers and managers?

The question of the meaning of PM to participants is challenging to answer from the data, as this was presented as a nuanced and complex experience for participants. Findings suggests that PM has multiple meanings for the participants. Some participants placed emphasis on a belief that PM is necessary to evidence practice to managers and Ofsted, such that social workers practice could be monitored and audited. Other meanings identified in the data include an ambivalent relationship with PM as both the primary task of social work and also inconsequential to this. PM was also named as a plethora of social work tasks that are performance managed including assessments, care plans, court statements, supervision and direct work with children.

There was very little acknowledgement that PM might serve to improve practice. In this regard, performance data was largely considered useless to practitioners and only served the needs of 'those above' with experiences of this at a practitioner level being largely negative, shameful and persecutory in form. However, data also suggests that PM could be helpful to participants in task and workload management, in prompting home visits and in providing a form of security or safety to children through various means including information recording and sharing.

Rachael was the only participant to acknowledge the intention of PM being improving services, however, in her experience this did not see fruition due to the crises in public services funding:

"I mean I get, it's to prove, I suppose, th-, i-, you know, they'll be a monetary value on it, like how many families you're working with, what, you know, kind of funding they need, erm, and I know data's obviously collected to see what services we're using. Erm, and then obviously, hopefully, that will help you identify where there's more services needed. Erm, but, I mean, it's also it's like, y-you know, I know all of that, but, we know there's no mental health services, they're absolutely in the toilet, we know, drug and alcohol will only work with chronic cases, which a lot of ours, they're bad, they do affect the parenting, but they don't meet the criteria, erm, so instead of just analysing the data, do something (laughs) like, erm, it's like in, in, I mean covid's just been ridiculous, everybody scattered, you know, mental health, domestic violence, everybody just scattered and it was left it was like, god"

(Rachael interview two)

Sub-question: How is individual performance shared with social workers and how do they respond to this?

Individual performance was shared with participants in this study two to three times per week by email. Performance data is sent by the performance team to each team manager on a large spreadsheet. It is then sorted and disseminated to the whole team by the team manager, meaning the whole team receives each team member's individual performance data. A number of responses were identified in the data in relation to receiving this data. Whilst there was some mention of positive feelings when timescales are met, as well as some level of apathy about this, on the whole, this provoked anxiety in social workers that was often persecutory in nature, leading them to feeling ashamed, inadequate and stressed. Responses also included panic and acting quickly to conduct visits, which, at times, meant that minimal meaningful work could be conducted on the visit.

Sub-question: What kind of emotions do performance measures evoke in child and family social workers and managers?

Emotions discussed in the findings largely emerged from social workers' experience of receiving the performance data by email, as discussed above. Emotions were identified in the data both from these being self-reported and through data analysis processes outlined. Emotional responses expressed and identified through data analysis are threaded throughout the research findings. Inductive analysis of the data and the structure of the findings that subsequently developed from this meant this research question is difficult to extract data from in and of itself without another deductive analysis of the findings. However, a review of the findings in each layer of ambivalence identifies the following emotions, other than those discussed above:

- Both worried and grateful feelings related to dependency on the PM system to support participants in managing their workload and in the protection PM affords workers from professional harm.
- Anxiety when workers are unable to complete their work meaningfully with families due to performance requirements.
- Feelings of injustice or unfairness, failure and inadequacy when the system was not adequately capturing or measuring the work put into working with children and families, such as unsuccessful visits.
- Feelings of neglect or invisibility when the performance data was organisationally prioritised over and above work with children and families.
- Managers feeling protective over workers due to the anxiety that receiving performance data can provoke.

- Positive feelings of accomplishment when timescales are met.
- Motivational feelings to complete direct work with families when this had been forgotten.

Sub-question: What do social workers and managers think about performance measures?

This research question was most difficult to answer by the findings produced due to its close connection with other research questions including '*What does performance mean to child protection social workers and managers?',* something which I will be more mindful of in any future research work. Notably, there is a question as to whether ambivalence is a cognitive state such that participants were 'thinking' ambivalently. What was apparent, however, was that there was very little verbalised critique of the system but rather a general acceptance that PM is a force that cannot be challenged or changed, a position that is arguably necessary to negotiate working in such a heavily performance-managed context:

"I think I just roll with it because I didn't really have any expectations as such coming in, erm, and I just see it as part of me, me job now I suppose"
(Adam interview two)

Rachael was the only participant who attempted to explicitly challenge PM and felt change was desperately needed in the profession.

Sub-question: What happens to social workers practice with children and families in response to performance measures?

This question relies on self-reported data in relation to practice, as no observations of practice were completed in the study. This is a limitation in the study design and makes answering of this research question a challenge. Findings suggests that PM remains a barrier to working relationally with children and families due to the physical removal of social workers from the community and onto a computer. This also reportedly led to practice that lacked meaning or was not responsive to children and family's needs when processes were required to be followed that did not match this and social workers were consumed by administrative tasks. It was identified that PM provided a motivational force for direct work when this had been forgotten. Due to the lack of observations of practice completed in this study, it is impossible to know if all interactions with children that were prompted by the PM system were lacking in meaning and quality. Although it was only described as a limitation to the practice output

in these instances by participants who discussed this, without observation of these instances, this is not possible to understand from this study.

Having said this, and despite recognition that it often did not or was unable to safeguard children, PM did enhance practice for some participants where this was considered to play a role in safeguarding children, with PM processes supporting the recording and sharing of information, as well as the processing and analysis of information, such as in an assessment.

6.2 Discussion and analysis of study findings

This section considers the study findings in greater depth, synthesising these with the research literature and theoretical underpinnings of the study in order to generate a critical analysis of the findings.

6.2.1 The primary task

Whilst identifying the primary task of child and family social work is a necessary basis for analysis in this study, both the literature reviewed and data collected has highlighted the complexity of defining this in the modern welfare context (Roberts, 2019). The relationship with children and families (Ruch, Turney and Ward, 2018), visiting homes (Ferguson, 2018b), supporting families and providing safety for children (O'Sullivan, 2018) were all identified as constituent of the primary task by participants. Furthermore, what has become evident is that child and family social workers are consistently exposed to trauma and adverse, emotional challenges as an inherent part of their role (Ferguson, *et al.*, 2021; Singer *et al.*, 2020). Findings suggest, however, that the primary task could not be elicited from the context in which this occurs and the challenge of navigating the post-covid social context was a thread running throughout participant narratives. Increases in child poverty (Child Poverty Action Group, 2023), dramatic cuts to services during the austerity period (Hernandez, 2021), increases in staff burnout, service demand, staff shortages, greater complexity of cases and higher emotional impact of the work (Beer and Asthana, 2016; Ravalier *et al.*, 2021; McFadden, Campbell and Taylor, 2015; McFadden *et al.*, 2023) were all issues identified in the data. Thus, whilst relational work with vulnerable families was largely considered by participants to constitute the primary task, organisational demand intrinsically shaped participants experience of this task, their role in relation to it, and the organisation in their mind (McFadden *et al.*, 2023; Armstrong, 2019). Furthermore, there were heterogenous views as to whether PM is social work and thereby is part of the primary task. Whilst some participants held a strong line that it was not, others believed it should be.

Adding further complexity to this analysis, data identified a lack of agreement in defining what 'performance' means, there were views held by all participants that performance data did not represent their work, and an illusionary belief that PM is the primary task of social work also appeared within the data (Hoggett, 2010). Defining the primary task is therefore a challenging question to answer in this study and is contingent on individual and organisational contexts and beliefs.

The Children's Social Care National Framework attempts to define the primary task of child and family social work by outlining the expectations of the social work role and "how practitioners listen, communicate with and support families" (Department for Education, 2023a, p.6) with four outcomes identifying its core purpose. This policy document, it states, should be considered alongside the new social care dashboard that uses data to understand how the social care system is achieving the outcomes set. Whilst this is based on a set of indicators, the intention stated is for this to be a learning tool for local authorities to reflect on their practice.

The National Framework document states Local Authority leaders should reduce unnecessary bureaucracy, and practitioners should provide contextual information to help leaders understand data (Department for Education, 2023a). There is little to no mention of PM explicitly, however, and the social work task is described as one involving caring relationships with children and families that involve strength-based, creative approaches, curiosity and reflection skills, analysis, decision making, and supportive and sensitive direct work with an emphasis on care, stability, safety and love. This largely negates both the time that social workers are spending on recording information for PM work (British Association of Social Workers, 2021) and how PM is actively shaping the work that social workers are completing with families such that, at times, they are unable to provide the care that children and families need. There is, therefore, a substantial gap between the policy documentation and how social workers in this, and many other studies, are experiencing their role. Such political rhetoric relies heavily on denial (Halton, 2019), with a stated belief that social workers can achieve their primary task of working with families in all the ways outlined above within the current context they are working in.

6.2.2 Projective identification and the phantasy 'containing' parent

The above context involves a depletion in resources both for children and families and the social workers who are attempting to support them. Supporting families experiencing adversity, however, requires capacity to emotionally attune to families' experiences, to

understand and process them, and not retaliate when they are angry or upset (Ferguson, 2021). With such limited time, thinking and feeling space available for social workers, providing this emotional processing, something akin to emotional containment, is incredibly difficult (O'Sullivan, 2018). Such a context gives rise to defence mechanisms which, when unprocessed by the individual, can become part of the organisational functioning (e.g. Menzies Lyth, 1960; Segal, 2019; Bloom, 2011).

Data suggests projective processes could be occurring in participants' experience of PM in supporting, helping and guiding them through their role. Language used is suggestive of a dependable parental figure that can lead and guide them. The notion of dependence on performance data is a finding not unknown in social work research and is consistent with findings in the Munro review (2011) and numerous studies discussed in the literature review (e.g. Broadhurst *et al.*, 2010; Forrester *et al.*, 2018). Initial analysis of findings suggest a sense of security and guidance when participants are in this state of dependence. Similar experiences have been identified in a minority of 39 studies in a systematic synthesis of social workers experiences of bureaucracy where it is described as "something akin to peace of mind" (Pascoe, Waterhouse-Bradley, McGinn, 2023, p.529).

These attributes are composites of a containing parental figure that can take in the 'beta elements', not be overwhelmed by them, and hand them back in a way that can be managed and integrated (Bion, 1962; Waddell, 2019). In Anna's words, PM is able to 'lead' them. When considering the complex nature of the primary task of social work and trauma-saturated organisations in which this occurs, the seeking of dependence and security in external sources can be seen as a logical, adaptive response (Bloom, 2011). Thus, this defence could be experienced as a helpful, protective parent by providing structure and security in the face of overwhelming complexity, a finding that resonated strongly with my own experience of practice. This suggests PM acts as an organisational defence against the primary task, something which is observed sector-wide (Lees, Meyer and Rafferty, 2013). In this instance, it has the capacity to provide, at least temporarily, some sense of security and feelings of containment.

Simultaneously, the study identified participants not needing or wanting to use PM to manage workload and a rejection of this system in replace of their own workload management tool to do so. There was also an established alternative way to record workflow in a service-wide emailing system and further, a sense of 'knowing' the workflow described by some participants. In these instances, language used by participants was suggestive of a rejection of the PM system, this being minimised to an 'additional tool' for Emma and being unnecessary

or redundant in the task of workload management for others. Thus, whilst dependency can provide feelings of stability and containment, participant behaviours suggest this may also compromise freedom of thought and integrity, a sense of knowing and understanding who they are and their ability to independently manage their role. One theoretical interpretation of this is that their parental figure becomes unnecessary to them, and they reject this in replace of independently managing themselves.

Furthermore, the 'container' figure exists in phantasy, that being an unconscious process that forms a defence against the primary task, and it was not present in the conscious awareness of participant narratives (Issacs, 1952). In Bion's original concept of the container-contained process, however, an emotional response must be returned or introjected back to the contained (Bion, 1962; Riesenberg-Malcolm, 2001). There is recognition by Anna that a PM system is unable to provide the security being sought in it, thus, she steps in to do so when she notices an over-dependence creeping in. Thus, whilst the PM system appears to be acting as a defence against primary task anxiety and experienced as providing some sense of security in this, like any defence against anxiety, this is temporary, unable to provide full containment or alleviate primary anxiety that is being sought (Menzies Lyth, 1960). In this instance, the introjection process is absent.

Thus, ambivalence is experienced in phantasy. PM appears to be experienced as both a helpful form of security and guidance by acting as a defence against the primary task and, when it is unable to provide the containment that participants need, is simultaneously experienced as incapable and rejected in favour of a better model. This could be understood as an example of projective identification emerging in the unconscious of the organisation. Experiences described here are similar in nature to those experienced by the children and families with whom social workers work (Holmes, 2018; Cooper, 2019). Many children they regularly encounter are not experiencing a consistently containing parent figure either. Furthermore, it has been widely acknowledged in this study that parents are not receiving consistent care from the services that are there to support them. They may not have received consistent care in their own childhood either. Such experiences can be projected onto workers, with little space for this to be emotionally processed in the current organisational context (Cooper, 2019; Wilkins, Forrester and Grant, 2017; O'Sullivan, 2018). This leaves a question as to what happens to this anxiety. One interpretation of this is that participants in this study appear to engage in a process of projecting this into the PM system in phantasy. This process may be contributing to their experience of ambivalence about the capacity of the

system to support and guide them through their work, such that this becomes part of their organisation in the mind (Armstrong, 2019).

6.2.3 Incohesion: Aggregation/Massification

Defences against the primary task are further identified in layer two, the anti-relational force. Six participants were discussed in the findings who related their experience of PM with a barrier to spending time with families. Conversely, five participants described this as a motivational force to see them. Furthermore, two participants appeared to experience PM as an 'anti-relational force' and source of frustration when PM processes and systems dictated their work with families against their own judgement. Five participant narratives suggested they were experiencing both these forces simultaneously, potentially triggering experiences of ambivalence about their work with children and families. PM, thus, is found to incite two organisational forces that simultaneously pull workers away from families, as well as their creativity and skills in working with them, whilst also pushing them towards families at the same time.

It has been found in this study that relationships with children and families remain integral to the primary task of child and family social work, and it is in the home environment where the relationship is formed, maintained and managed (Ruch, Turney and Ward, 2018; Ferguson, 2018b). For participants experiencing this 'anti-relational force', however, data suggests that when their time and energy is required by the PM system and their attention is diverted towards bureaucratic tasks, the home visit for some families would be forgotten or avoided. In these instances, the PM system can act as a reminder for them to complete the visit, with language used to describe such a mechanism being 'driving', 'kicking', or 'pressuring' social workers to visit families. Whilst this appeared to be perceived as a helpful mechanism by five participants, such language suggests a force that is so powerful, it is almost against their will. Data in interview two, however, contradicts this view. Whilst there were varying experiences and levels of connectedness to practice identified, participants discussed meaningful connections to their practice, how their values motivate them to support vulnerable families skilfully, and the importance of their role being underpinned by principles of social justice (International Federation of Social Workers, 2024).

Nevertheless, examples of defensive practice and a compromise in the quality of social work provided to families were discussed by participants in response to this force. This included shortening visits or not engaging in meaningful work during them, actions that are largely consistent with previous research findings (Broadhurst, 2010; Ferguson, 2017). Anxiety,

tension and stress appeared in participant narratives, such that for some, this was driving them to consider leaving their role. The struggle to conduct the work that families need, that which upholds their own motivation, values and ethics, creates a potentially morally injurious event for these participants (Haight *et al.*, 2016; Williamson *et al.*, 2022). Furthermore, whilst reform to practice has been heavily invested in by the Department for Education (Department for Education, 2022) the replication of this finding from research prior to such reform suggests that without change to the PM system governed by statutory returns to the department, social workers will continue to be pulled away from practice, these defensive practices will continue to occur, and they could continue to experience moral injury as an intrinsic part of their work.

6.2.4 Incohesion

The above analysis has explored how PM appears to create an ambivalent experience in relation to participants connection to their practice with children and families by initiating an organisational force that pulls them away from and pushes them towards their practice simultaneously. The painful and contradictory nature of this experience requires further analysis to understand *why* this phenomenon may have occurred within this organisation. One way of understanding this is Hopper's (2018) theory of Incohesion: Aggregation/Massification, discussed within the literature review. Application of this theory to the phenomenon identified in the data provides a useful interpretation of this. When being pulled away from families, PM can be experienced as something akin to an aggregate in that it creates a disconnect from complex, messy and trauma-saturated relationships that are inherent in child and family social work (Ferguson, *et al.*, 2021; Singer *et al.*, 2020; Treisman, 2021). Language used by participants, particularly the metaphor of 'drowning' in paperwork suggests a submersion into a fragmented, emotionless world that exists in a virtual reality, and shuts them off from relational work with families. As discussed above, projection onto the PM system can occur when workers are unable to contain the anxiety they experience in their real-world interactions with families experiencing trauma, thus, this 'drowning' experience in aggregate, whilst overwhelming at its height, may provide an organisational defence from the primary task of working with children and families (Lees, Meyer and Rafferty, 2013) by providing a physical barrier to being in their presence. Thus, the aggregate form in this organisation could play an unconscious role in keeping workers safe from projections that can at times feel unbearable.

When workers are fully submerged in aggregate, they can forget or avoid their purpose in the outside world that exists in a family home. This process relies heavily on the defence of denial, that being "pushing certain thoughts, feelings and experiences out of conscious awareness because they have become too anxiety-provoking" (Halton, 2019, p.12). When this happens, the PM system appears to pull them away from this defence by the creation of incohesion in the system and forcing them into massification by the following of homogenous practice procedures with a shared sense of conformity that is characteristic of a mass. This type of practice was described as lacking in meaning, its only purpose being to tick a box to say the child has been 'seen', creating the illusion that they have done their work (Cooper and Lousada, 2005; Hoggett, 2010). However, the lack of meaningful engagement that is only possible in these circumstances appears to create feelings of helplessness, failure and anxiety that are typical of a traumatised organisation and moral injury (Bloom and Farragher, 2011; Williamson *et al*., 2022). When this becomes unmanageable, incohesion in the movement from aggregation to massification could take place in the form of forced separation from and forced connection with children and families at the same time, and by the same force. Such forces provide important defences for workers when they are unable to manage anxiety present in their primary task yet simultaneously can provide a second layer of anxiety when they experience this painful ambivalent defence. Thus, emerges a secondary defence system, where anxiety appears in relation to the very defences that have been created to alleviate those present in the primary task (Menzies Lyth, 1960).

6.2.5 The secondary defence system

Thus far, analysis has provided theoretical interpretation of a process of projective identification occurring whereby families' experiences of trauma are projected onto social workers and, when these become overwhelming, they are, in turn, projected onto the PM system such that this acts as a defence against primary task anxiety. This emerges in PM's ability to provide some sense of security in the management of workload, whilst also being unable to provide the containment sought and, thus, is positioned in phantasy as both a containing and unreliable parent. Furthermore, a process of incohesion has been discussed that appears in the movement from aggregate to mass experienced in the forceful pull away from family homes that defends against primary task anxieties and the push towards family homes which creates a potentially morally injurious event, the emergence of which appears to formulate secondary anxiety in the system (Menzies Lyth, 1960). This section considers further findings in relation to the third layer of ambivalence; participants experience of PM

providing a safeguarding role to children. This layer of ambivalence identified two powerful but contradictory narratives in the data about the ability of PM to safeguard children, experienced by seven participants. PM is considered as playing an important role in keeping children safe through several different means, whilst also being both unrelated and unable to complete this task due to defaults in its functionality.

6.2.6 Safeguarding children from harm

Findings in this study suggest that recording information helps social workers develop their understanding and analysis of a family situation, helps them make the right decisions, and that sharing information between professionals and agencies is important to safeguarding. Furthermore, PM was seen as important to a child's right to hear their own story as they grow up, with seven participants collectively sharing these experiences.

Whilst the political narrative around information sharing and data management systems has changed over time, failings in sharing information and expertise has been a repeated finding in child death enquiries since the Maria Colwell enquiry in 1973 through to the present day, highlighting the importance of this mechanism in safeguarding children from harm (Parton, 2004; Child Safeguarding Practice Review Panel, 2022). What is often missing from these enquiries, however, is an acknowledgment and understanding of the emotional complexity of the social work role (Cooper, 2005; Ferguson, 2022), with an overdependence on techno-bureaucratic solutions to protect children from harm (e.g. Cooper, Hetherington and Katz, 2003; Munro, 2004; 2011). Furthermore, record keeping in children's social care is largely dependent on human observation and interpretation; what is 'seen' on a home visit depends on the social workers state of mind on entering the visit (Ferguson, 2017). Interpretations of these observations are largely shaped by one's own experiences and often require unpicking reflectively in order to be understood (Miller *et al.*, 1989; Parkinson, C., Allain, L, and Hingley-Jones, 2017). Whilst PM has a role in safeguarding children, therefore, an overreliance on this view denies the emotionally charged, trauma-saturated, and at times painful reality of the role and further adds to the illusion the PM is the primary task (Cooper and Lousada, 2005; Halton, 2019; Hoggett, 2010).

Moreover, the current context in which social workers conduct their work poses a significant threat to the professional self. This is a reality faced by social workers who have seen continual blame and volatility towards them in the media and illegal public sackings of the workforce (Pithouse, 2012; Shoesmith, 2016). Persecutory anxiety experienced by social workers in this context inevitably leads to a need for protection of the professional self, as

well as the protection of children that constitutes their primary task (Cooper, 2019). As such, PM provides social workers, managers, and their organisations with a very real need for protection from professional harm within the current sociopolitical context.

The study has identified several experiences of participants that appear to lean towards protection of the professional self. Adoption of seemingly illogical narratives such as 'if it's not on the system it didn't happen', forgetting to complete home visits, an acknowledged lack of engagement with children, as well as the security and guidance provided by PM, corroborates this view. These experiences can create a distortion of the primary task of child and family social work, moving this from protecting children to protecting professionals. This can appear as though social workers are prioritising PM work over and above relational work with children and families (Munro, 2011). Data suggests, however, this position is not of their choosing but, rather, imposed on participants against their will. Experiences that contradict this include the lack of association participants make between practice and PM when discussing practice, their frustration and anxiety presented in not being responsive to children and family's needs and the stress and anxiety experienced when their management appear to prioritise data input above their practice.

Language and behaviour that appears to protect the professional over and above the family, therefore, can be explained by a closer look at contradictory experiences found in the data. Language used appears to be an unconscious engagement in the rhetoric adopted by NPM and PM that has infiltrated frontline child and family social work (Broadhurst, 2010; Munro, 2011; Smith, 2019). Furthermore, previous studies have shown that detachment from practice experiences must be understood in the context of the, often unbearable, complexity that social workers are holding (Ferguson, 2017; Ferguson, 2018a). They are also necessary to protect social workers from professional harm and their professional survival (Cooper, 2019). Such experiences inevitably, therefore, start to organise social workers' thinking and feeling states, such that they become enshrined in their own experience of their organisation in the mind (Armstrong, 2019). Such analysis demonstrates the need to adopt a critical realist stance in social work research alongside methodologies that are able to reach the depths of unconscious layers acting in individual and organisational behaviour (Bhaskar, 2008; Clarke and Hoggett, 2009; Cooper, 2009; Craig and Bigby, 2015; Hollway and Jefferson, 2013).). Furthermore, when such defensive actions that exist to protect the professional self become built into the fabric of the organisation, these create a secondary layer of anxiety in relation to the completion of performance indicators. This practice is named by Cooper (2019) as 'performance and audit anxiety' and could be seen in several participant experiences in this

study including in the shame and panic of being placed on the 'naughty list', and in internalised persecution found in circumstances that were entirely beyond the control of the participant including new work being allocated already outside of timescale.

Whilst PM has a place in contributing to the safeguarding of children, therefore, this only tells a partial story. Further analysis of the data has found both performance and audit, and survival anxiety, to be present in participants' experience of PM (Cooper, 2019). These secondary, persecutory types of anxiety appear to form an unconscious defence that protects the professional self and organisation from harm (Munro, 2011; Cooper, 2019). Reflexive spaces are therefore needed for social workers to unpick feelings of safety and consider to whom they belong, something which could be overlooked at busy times when supervision was experienced as procedure-following (O'Sullivan, 2018; Smith, 2019). Furthermore, the prevalence of such anxiety denies the purpose of PM being to generate economic efficiency and accountancy in services, furthering the illusion that PM is the primary task of social work by centring process-following and recording as key to safeguarding children (Hoggett, 2010).

6.2.7 Ambivalence in the safeguarding role; the real and the imaginary

Whilst data appearing to position PM as helpful to safeguarding children was found in seven participant interviews, the same participants also discussed significant defects in the PM system that suggested PM is unable to safeguard children. Data identified the inability of PM to measure important information like attempted visits, not allowing enough time for social workers to record their work, and not representing the complexity of the work they do. Despite these defects being identified in relation to the system, however, when errors do occur, an internal sense of failure and inadequacy appears to be experienced by the social worker which fuels anxiety. Ambivalence may, therefore, be experienced in relation to the belief that PM can safeguard children, with participants experiencing this as both real and imaginary at the same time.

This was most potently experienced by Mary in her questioning of her own thought process following her identification of the disconnect between the data and her work with families. The mental state presented here can be understood as something akin to Bion's psychotic personality, understood in different terms to a psychotic diagnosis, as a type of mental functioning belonging to every individual that for a moment becomes dominant, giving rise to painful intolerances that present as hostile to internal and external reality (Grinberg, Sor and De Bianchedi, 1974). The ambivalent movement between the real and imaginary is a

particular source of anxiety presented here and one which, I suggest, is fuelled by the unique, complex context which Mary is trying to navigate. The ambivalence appearing 'in action' could demonstrate that whilst Mary identifies the illusion of PM providing safeguarding for children, when the fear of breaking through the illusion becomes too terrifying (such that she must hold onto risk to children by herself), she experiences a 'regressive pull' that enables her to avoid development (Armstrong, 2019). She retreats to questioning her own thought process and sense of reality, such that the phantasy belief is restored. Within the confines of a research interview, the illusion is too difficult to let go and evidently safer to leave it where it was.

6.2.8 Organisational feedback

In this layer of ambivalence, I discussed two very different ways that social workers experience feedback on their work from their organisation. On the one hand, feedback from the PM system appeared to be experienced by all social workers apart from Emma as fearful, shameful and anxiety-provoking. On the other hand, workers presented with a deep value for the rich feedback that they were able to obtain from other sources that accurately represented their practice, such as that from families and from professionals. Four out of six social work participants were seeking a lot more of this. This feedback appeared to be experienced as positive, keeping participants motivated and helping them learn and progress. Ambivalence was presented in the data in relation to this experience, whereby participants were stuck in a situation of equally unwelcome outcomes; either they are punished for not completing their PM tasks, or they sacrifice the rewards they receive from their relational practice with children and families. Such experiences can feel impossible to negotiate, adding further weight to incredibly painful intolerances that social workers are holding in mind (Armstrong, 2019; Ferguson, 2017; Grinberg, Sor and De Bianchedi, 1974) Furthermore, the lack of positive feedback for some participants meant they often felt unseen and undervalued by their organisation, as if their work outside of the PM system had become invisible. This section explores two concepts fundamental to understanding this experience of ambivalence. Firstly, the use of humour as a means of processing experiences of shame and anxiety and secondly, the concept of invisibility in social work practice.

6.2.9 Humour

The practices of team-wide emailing of performance data and competitive data games gives some insight into the level of 'external surveillance' within the organisation that is typical of modern-day welfare services (Cooper and Lousada, 2005). This can create feelings of being

constantly watched and measured, leading to performance and audit anxiety found in the data (Cooper, 2019). The colloquial, humorous narrative of the 'naughty list' was used by several participants and reportedly by social workers across the service to describe the list of performance data circulated to the teams. In this respect, both humorous, pleasurable game-playing and the social activity of naming 'the naughty list' could act as important collective expression of unconscious intolerable experiences of shame and anxiety that is generated from the PM system (Newirth, 2006; Cristini, Camporese and Forabosco, 2017). The social and sociable aspects of this generation of humour are seen in the collective understanding of this joke, both within this participant group and, reportedly, across the service. This can be understood as a more advanced form of dealing with the anxiety that is generated, rather than repressing this to a state of denial, as can be seen in other responses (Bahun, 2017; Cristini, Camporese and Forabosco, 2017).

Competition between public sector departments is undoubtedly a feature of NPM, based on a belief that rivalry is key to lower costs and better standards (Hood, 1991). The use of audit and performance indicators to measure individual performance has been a significant part of this movement (Munro, 2004; 2011). Competitive games are therefore perhaps endemic of the context in which PM is operating, generated by a belief that competition betters results. The anxiety that this masked, however, was recognised as deeply harmful by Anna, who had adjusted her practice in response to this, as described in her brutal metaphor of previously 'beating' social workers 'with sticks'. Thus, whilst the joke work of the naughty list appeared to act as a creative, unconscious expression of adversity and anxiety (Cristini, Camporese and Forabosco, 2017), the intended humour and playfulness in the team games had unveiled a darker side to PM which served only to increase participants experience of performance anxiety.

6.2.10 A mirroring of invisibility

An interesting phenomenon was discussed by three social workers who were seeking more feedback on their practice. Feelings of being unseen, becoming invisible to their organisation, were discussed. For Rachael, this experience appeared to be directly caused by the organisational visibility being placed on performance data. When workers do receive positive and rewarding feedback, however, they appear to experience a depressive position and are more able to integrate and process persecutory feelings from the PM system, making this experience manageable (Klein, 1935). This is demonstrated by Emma's experience, who gave numerous examples of positive and rewarding feedback she had received, how she had

utilised this to improve her practice, and she was the only participant who did not present with persecutory experiences of anxiety in relation to PM. As discussed in the findings chapter, this could relate to Emma's role crossing the boundary between sending performance data and receiving it.

For others, however, the experience of performance data as extremely 'bad' and of feedback from other sources as extremely 'good' represents a splitting of their experience and a regression to the paranoid-schizoid position at times of heightened anxiety (Waddell, 2019). Ambivalence appears to be painfully experienced by participants, and mostly by Rachael, when their work is very exposed by the PM system through the sharing of performance data, whilst simultaneously, their experience of practice with children and families is blinded by this organisational force and their organisation is unable to 'see' their practice, as if it has become invisible.

This contradictory experience invites consideration of the concept of invisibility in social work. Such an experience is almost identical to that described above, where participants felt unable to 'see' the children they were visiting when it is the PM system that is driving them into their home. When workers become 'bureaucratically pre-occupied' and are 'drowning' in aggregate, their experience is described in the same way as those observed in previous ethnographic research, where social workers were unable to 'see' children even when in their presence (Ferguson, 2017).

Psychoanalytic analysis of this finding and considering the data cross-thematically, identifies a potential intergenerational organisational phenomenon caused directly by the PM system; the annihilate of the organisations ability to 'see' that transcends organisational layers. Children, families and social workers all appear to be experiencing feelings of being 'unseen' due to the PM system. This phenomenon, repeated at the 'next' layer of the organisation in this study, can therefore be understood as an organisational mirroring of social workers' relationships with children and families during these times and an experience of projective identification within the organisation (Cooper, 2019; Treisman, 2021).

This study has found, therefore, that when workers experience being valued and 'seen' by their organisation, they are able to hold a healthier position of ambivalence in relation to PM and use this in a way that compliments their practice. When persecutory anxiety is present, however, which has more often been the case in this study, they may move from a depressive to a paranoid-schizoid position (Klein, 1935; Waddell, 2019). Anxiety is repressed and defensive practices occur, both in relation to their own practice and in those embedded in their organisation (e.g. Halton, 2019; Menzies Lyth, 1960; Munro, 2011; Cooper, 2019). This

appears to exacerbate social workers anxiety by adding to the secondary layer of anxiety in the organisation – anxiety about the defence itself. Their organisation is literally unable to see them.

6.2.11 The management role

In this section, I further develop the organisational analysis discussed above and apply theory to understand managers' experience of PM. Ambivalence appears in the findings in relation to how helpful PM is to the management role, with managers appearing to find this both fundamental to their role but also entirely lacking in meaning. Much of Anna and David's time is spent cleaning data, which looks to fill voids, find explanations and develop understandings that can be presented as something meaningful to senior management. I explore theoretical concepts here to understand how this function is operating within the organisation and why this phenomenon may have occurred. Furthermore, I explore further how intergenerational process could be occurring not only within the families with whom social workers work, but also within this organisational context.

6.2.12 Social constructions, ultimate truths

Analysis above has explored the deeply emotional, relational aspects of child and family social work that, along with our own life experiences, shape the way in which social workers think, feel, experience and write about their work (Ferguson, 2017; Miller *et al.*, 1989; Parkinson, C., Allain, L, and Hingley-Jones, 2017). When creating a case record, therefore, social workers are capturing an intimate moment that is socially constructed by their experience of reality (Ferguson, 2011; Burr, 2015). Within the narrative presented by managers in this study, however, performance data is presented as an unquestionable truth and is positioned as being hierarchically 'above' any other form of knowledge within the organisation. This appears alongside a contradictory acknowledgement that performance data is full of inaccuracies and not representative of social work. The organisation is, thus, holding a positivist position towards performance data; it is an observable, single truth, an identifiable reality that provides a certain, predictable logic (Park, Konge and Artino, 2020). The manager's role is presented as one that provides the meaning that exists 'beneath' the data, to ensure that the positivist 'truth' is upheld. As such, the management role appears to be shaped by PM, and explaining data appears to becoming the primary task of a manager (Roberts, 2019). Ambivalence appears in the simultaneous positioning of this role as both socially constructed and objectively true (Burr, 2015; Park, Konge and Artino, 2020).

The way in which managers appear to navigate this task is by engagement in highly skilful, complex work that takes place in multiple contexts including supervision, audits, speaking with families, practice reviews, observing practice and attending meetings, as well as reviewing files. Knowledge of family situations are viewed as entirely contextual, situated in a fluid social, cultural and historical context. Thus, managers appear to be navigating their way through this ambivalence by shaping their work around performance data, such that the creative aspects of their work are preserved in this context.

Previous literature and research has explored the inherent tensions in social work management roles, suggesting that the PM agenda is enforced on managers such that the negotiation of this becomes embedded in their role (Ruch, 2012; Tham and Strömberg, 2020). Experiences of ambivalence could be a new way of understanding this. The experiences identified here rely heavily on psychoanalytic interpretation. Much the same organisational defences identified in the social work role appear to be creating the illusion that PM is the primary task of social work management, which in turn engages denial of this reality (Halton, 2019; Hoggett, 2010). It is also an important, unconscious act of resistance, however, such that managers' work is not entirely dictated by PM and that the relational, skilful and creative aspects of their work survive in some form, albeit shaped to fit around a task that appears to be fuelled by protection of the organisation and survival anxiety (Cooper, 2018; Cooper, 2019).

6.2.13 Intergenerational trauma defences

Such replication in the distortion of the primary task at the next level of the organisational hierarchy appears to reinforce the illusionary belief that PM is the primary task of child and family social work. This could therefore be understood to create an organisational mirroring and establishment of a system of phantasy, illusionary beliefs within the organisation (Hoggett, 2010; Treisman, 2021). This defensive function appears to be carried through organisational generations in much the same way as the feelings of being unseen are described above. Similarly to how intergenerational trauma is embedded in family structures, this presents as a second example of mirroring of such experiences in the embedded nature of organisational trauma across 'generations' or hierarchies (Bloom, 2011; Treisman, 2017; 2021).

Acknowledgment of such generational behaviours occurring across the organisational structure is captured in the data by David and Anna's ambivalence in the need to both expose and protect social workers from performance data. There is explicit recognition of this

movement of performance and audit anxiety (and the harm that can be caused by this) travelling from system to manager, to social worker, to parent and then to the child (Cooper, 2019).

Protective behaviours are engaged in by Anna and David to prevent harm being caused by such anxiety including limiting the sending, changing their approach and careful language construction. In this sense, David and Anna appear to position themselves as a quasi-alpha function in that they attempt to contain and process destructive beta elements and then hand them over to social workers in a form that they are able to manage (Bion, 1962; Riesenberg-Malcolm, 2001). Emotional containment is an important part of the management role where supervision space is used to contain, process and return anxiety, (as originally theorised by Bion in relation to the parent and the infant), such that managers could become 'containers' of anxiety in this space (Bion, 1962; Harvey and Henderson, 2014; Smith, 2010). What makes this process different, however, is that the anxiety presented does not originate in the primary task but from the PM system. Whilst the original intention of this was to improve public services, PM has been found in this study, as well as many others, to generate a new set of anxieties (Cooper, 2019; Curristine, 2006). This places managers in the position of an intervener to anxiety through the system such that, as outlined by David, this has less opportunity to negatively impact the child's experience of their social worker. Managers intervention here could be seen to mirror the function of the child protection system at this level of the organisation, in the protection and safeguarding of social workers from harm (Treisman, 2021). The dysfunctional nature of this phenomenon, however, is that it is the very organisation that is designed to provide safety that is now the instigator of harm.

6.2.14 Organisational trauma and anxiety

The above analysis depicts an organisation that, like many social work organisations, has experienced chronic, toxic stress and anxiety from years of adversity and austerity the profession has faced. Both the psychoanalytic and trauma literature invites us to consider what happens to an organisation when it is dealing with vast amounts of anxiety and trauma. From a psychoanalytic perspective, defence mechanisms arise that are similar to those found in individual mental states (e.g. Armstrong, 2019; Halton, 2019). From a trauma perspective, the organisation starts to become organised around the trauma and respond to this in maladaptive ways including defence mechanisms, but also in other trauma responses such as hyperarousal or detachment that can be seen in individuals (Bloom, 2011; Treisman, 2021). Both theoretical positions have been utilised within this study, the application of which has

identified a set of anxiety defences and organisational trauma responses that have become an embedded part of organisation life. These are outlined below.

6.2.15 Phantasy beliefs

A phantasy belief system operates amongst both managers and social workers that situates PM as their primary task. This pertains to several experiences including social workers trying to find containment from PM, the belief that PM can in and of itself keep children safe, and the belief that sorting out and providing explanations for performance data is the primary task of management. This phantasy belief system is fed by several powerful political narratives and a distortion in the primary task. It was engaged with ambivalently in that it was experienced as both real and not real.

6.2.16 Projective identification, parallel processes, mirroring

Several examples of projective identification, parallel processes and mirroring were identified when the organisation was found to be behaving in ways that mirrored experiences of children and families. This was found in how social workers positioned PM as both a containing and absent parent, social workers experiences of being unable to 'see' children meaningfully being mirrored in their own experiences of being 'unseen' by their organisation, the distortion of the primary task being mirrored between the social worker and managerial level of the organisation, managers role in protecting children from harm being enacted in their role of protecting social workers from the harm caused by the PM system.

6.2.17 Defensive practice and moral distress

Defensive practice and process-following was identified when the PM system both pulls social workers away from and pushes them towards relational practice at the same time. This could be seen in the completion of tick box visits where little meaningful work was completed and the following of process over responding to family's needs. This caused a potentially morally injurious event and led to moral distress when social workers were unable to respond to what the family needed.

6.2.18 Humour as a defence

Engaging in humour is found in the naming of the naughty list and competitive games that defend against shame and anxiety that the PM system brings. This provided a sociable, humorous psychic mechanism that was embedded in the organisational and individual experience of PM and enabled social workers to respond (in a more advanced way) to their shame and anxiety in relation to receiving the performance data.

6.2.19 Denial

Many of the above responses depend on denial to survive. For example, the role of PM in providing protection both from anxiety generated from the primary task (harm to children) and persecutory anxiety (harm to professionals) was largely denied by participants, enabling the phantasy belief system to be upheld.

6.3 Ambivalence, progression and acts of resistance

The organisational anxiety defences and trauma responses identified in this study were found to emerge from participants' experience of group and individual ambivalence. Adopting a complexity theory lens alongside psychoanalytic and trauma theory has enabled the discovery of unintended consequences that have emerged as a result of taking a techno-bureaucratic approach to an emotionally complex issue (Cooper and Wren, 2012; Smith, 2019). Ambivalence refers to the deepest sources of intrapsychic conflict, the ability to realise and hold a state of ambivalence represents a progression in human development and an acknowledgment of the loss of the idealised, good object (Klein, 1935; Segal, 2019). This movement from a paranoid-schizoid position to a depressive state of mind enables greater trust in reality, as well as internalised objects (Waddell, 2019). Recognition of this integration enables fearful and hateful experiences to be tolerated (Segal, 2019). If experience of such loss is not tolerated, this can lead to a psychotic state of mind, or regression to harmful defence mechanisms identified in this study (Britton, 1992). An 'unresolved ambivalence' can be seen when regressing to mechanisms such as denial, splitting and projection (Segal, 2019) seen in paranoid-schizoid states of mind (Waddell, 2019).

It should be noted, however, that not all participants experienced persecutory anxiety and there were numerous acts of resistance and progression from more anxiety-driven times identified in the study. In particular, Anna and Emma experienced far less anxiety than other participants in the study. This meant that they were able to utilise their ambivalence to their own benefit more than other participants by taking aspects of this that were useful to their work, and confidentially discarding others. In this regard, ambivalence could be tolerated when it was realised and managed.

Furthermore, as Cooper (2018) notes, whilst PM is incredibly powerful, it does not automatically follow that it dictates practice entirely. This is evident in this study, that has found a number of acts of resistance to the PM system and incredibly skilful ways of manoeuvring around this. Both on an individual and organisational level, alternative means of managing and negotiating the PM system were identified. This included an organisation-wide

system of emailing to inform managers if children had been seen where the PM system was unable to do so, the acting outside of the demands of the PM system both by social workers own resourcefulness and managers ensuring they were free from the PM system so they could respond to family's needs. There were acts of protection towards social workers demonstrated by both managers who acknowledged the harm that performance data can cause and recognition that they had softened their approach to this in recent years.

Furthermore, as this study has focused on participants experiences of PM, there is a risk that participants are presented as being deskilled, the profession is presented as a static entity, and social workers are presented as frustrated with bureaucracy with managers restricting practice (Ferguson, 2011). Whilst this study has found a misplacement of social workers and managers skills towards the PM system, this has not always held omnipotence over practice. In the second interviews, PM was not mentioned in relation to social work practice despite this taking up most of participants' time. The findings of the Munro review (2011) that social workers were motivated by PM, whilst present, did not appear to be as dominant in this study and managers had taken active steps to move away from this time. This suggests that whilst PM has substantial power, participants are finding ways to negotiate this such that this does not dictate their practice entirely and that they are attempting to move forwards with more relational approaches (Hingley-Jones and Ruch, 2016; Ruch *et al.* 2017).

What is evident in this study is that the organisation studied, like many social work organisations, has experienced chronic, toxic stress and anxiety from years of adversity and austerity the profession has faced such that this has become 'trauma organised' around maladaptive practices that are contrary to the purpose of the organisation (Bloom, 2011; Bloom and Farragher, 2011; Treisman, 2021). There were numerous different forms of anxiety identified that emerged not only from the primary task of working with children and families experiencing trauma, but also from external sources including resource anxiety, performance and audit anxiety and, crucially, a survival anxiety that is persecutory in nature that forms embedded practices and secondary forms of anxiety within the organisation (Bloom, 2011; Cooper, 2019; Menzies Lyth, 1960; Treisman, 2021). Whilst ambivalence could be tolerated at times, and acts of resistance and progression were found, therefore, the anxiety embedded in organisational life meant this was more often a struggle and participants and the organisation were predominantly found to be in a state of regression and denial, giving rise to the maladaptive organisational defence mechanisms and trauma responses identified (Segal, 2019; Treisman, 2021).

Chapter Seven

Conclusion

This final concluding chapter identifies three contributions to knowledge rendered in this study. I explore the study limitations and consider these in light of the findings to identify implications for practice on a national and policy scale, as well as those found in the organisational and practice context. Finally, I make a series of recommendations based on this.

7.1 Contributions to knowledge

The literature review in this thesis provided an exploration of four areas of literature that are pertinent to the study of PM in child and family social work in England. This includes application and impact of PM in child and family social work, social workers' wellbeing, utilised theoretical constructs and the social work research that has applied this, and some of the literature exploring the potential to reduce or manage stress and anxiety in social work. Whilst a number of important findings were derived from this analysis of literature, two significant gaps were identified in relation to this. Alongside pluralist application of theory, this study contributes to knowledge in these areas, as outlined below.

7.1.1 Contribution to knowledge; Ambivalence and PM

This thesis has found that the concept of ambivalence is fundamental to understanding social workers' and managers' experience of PM in child and family social work in England. I initially discussed the concept of ambivalence in a very early supervision, considering how it related to individual participant experience. The concept has developed significantly since this time, both to provide a theoretical construct to structure the findings, and in its application to the organisational functioning and experience in the form of organisational ambivalence.

Whilst anxiety, defences, and trauma responses were all identified within the literature in relation to PM, no other study has identified or given voice to the social work, management and organisational experience of ambivalence in relation to PM as this study has. Furthermore, such experiences are challenging to extrapolate from data without use of the methodological, philosophical, and theoretical underpinnings that this study has employed. These were labour intensive and required multiple forms of analysis of the data with particular attention paid to tensions, contradictions and unconscious processes occurring in the participant narrative. Construction of themes around phenomenon where ambivalence was present, as opposed to where data was thematically aligned, was an organic and inductive process that has enabled such experiences to surface. My role as a researcher, thus, became one of accurately and ethically analysing and spotlighting these experiences of ambivalence

within the data which has ultimately centred ambivalence as fundamental to social workers' and managers' experiences of PM.

Ambivalence is found to be a deeply embodied experience, both within the individual and organisational domain, occurring in the conscious and unconscious layers of organisational life. The study identified ambivalence to be prevalent in six different phenomena within the data. These related to experiences of workload management, relationships with children and families, safeguarding of children, organisational feedback, managers' knowledge building around data, and managers' experience of sharing performance data with their team. Ambivalence was found, at times when anxiety is manageable, to be a potentially useful experience that enabled social workers and managers to exploit helpful aspects of the PM system and to work around this when it is disruptive. However, like many social work organisations, this organisation is considered trauma-organised within the current socio-political context and thus consistently fueled by anxiety, making ambivalence difficult to realise. Repression of anxiety thereby occurs, giving rise to more painful experiences of ambivalence, such that this becomes too difficult to hold in mind, leading to a series of maladaptive defence mechanisms and trauma responses. This includes a phantasy belief system, projective identification, parallel processes, mirroring, humour, defensive practice, moral distress and denial.

In order to fully understand social workers' and team managers' experience of PM in child and family social work in England, therefore, attention must be given to conscious and unconscious experiences of ambivalence. Whilst the current literature in the anxiety defence domain goes some way to identify and explore how defence mechanisms operate within child and family social work, the unique qualities of ambivalence add to this body of literature in spotlighting these often unnoticed, painful tensions. Without acknowledgement of such an experience within the policy, organisational and practice domains, there is continued risk of sustaining a system that is unable to move forward and progress towards governmental recommendations to reduce bureaucracy in the system (Department for Education, 2022; 2023). This is discussed in greater detail within recommendations for practice.

7.1.2 Contribution to knowledge; the sending and receiving of performance data

Whilst the literature review identified some of the harm, anxiety and stress caused by bureaucracy and PM in child and family social work, no other study has focused explicitly on the experience of receiving and sending performance data by social workers and managers. This is a relatively recent phenomenon that has seen the injection of performance data into

frontline social work teams. This study has found that the receiving of performance data significantly impacts on social workers emotionally and is described as detrimental to their practice with children and families. Whilst at times experienced as irrelevant or even positive when work was complete, the receiving of data was largely a persecutory experience, with feelings of shame, inadequacy, fear, hate, stress and anxiety all found to be present in five out of six social work participant experiences. Such experiences occurred even where the completion of work was outside of their control, such as work being allocated already outside of timescale, or having an impossible timescale to meet.

Furthermore, when receiving the data and finding work out of timescale, this creates an organisational force that pushes social workers into family homes will little time to plan or process the work they are undertaking. This, alongside the prescriptive processes that PM can dictate to practice, found that six out of eight participants experienced PM as a force that shaped their practice in a way that went against their own professional judgement and expertise, creating a potentially morally injurious event.

A new finding in relation to team managers' experiences of sending performance data to their team has also been found. Ambivalence in the simultaneous need to both protect and expose social workers to performance data has been identified in this study. This is a contribution to knowledge that is fundamental to understanding the management experience of PM and adds to research previously exploring and identifying these tensions in the management role. Therefore, this study contributes to knowledge in relation to social workers' and managers' experiences of sharing of performance data with frontline social workers. This experience both motivates and provokes persecutory anxiety in social workers, has a potentially detrimental impact on practice, and is carefully considered and experienced ambivalently by team managers who share this.

7.1.3 Contribution to knowledge; pluralistic application of psychoanalytic, trauma and complexity theory

The final contribution to knowledge is derived from the pluralistic application of theory utilised in this study. Whilst a number of studies were identified that applied these theories individually to child and family social work, no studies were found that applied all three. The application of such theories has enabled a synthesis of knowledge that has provided new theoretical insights into child and family social work. The focus on emergence in complexity theory, on anxiety and ambivalence in psychoanalytic theory and on organisational trauma in trauma theory has provided a unique insight into a child and family social work organisation.

This has enabled identification of a system of embodied and embedded intergenerational trauma responses and anxiety defences that pose a useful understanding of contemporary child and family social work.

7.2 Limitations of the study

As with any research study, it is important to explore the study limitations in the interests of transparency, researcher reflexivity and understanding of the topic. Whilst new insights into this field have been found in the study findings, there are some limitations pertinent to this study.

The sample size used in the study is small, focusing on the depth of individual narratives within one organisation. This was an important part of the research design, such that two interviews could be conducted with participants and a deeper analysis of the participant experience could be gleaned in the data. Such a small sample makes generalisability of the research more challenging to entire populations of social workers and managers, however. Furthermore, the geographic context in which the study was conducted meant that I was unable to recruit black and minority ethnic social workers in the study. This limits generalisability of the findings to black social workers' experiences and meant the study was unable to amplify black voices in research. The literature considered in relation to race in the sampling strategy highlighted the racism experienced by black social workers in relation to performance issues. The study is, regrettably, unable to add to this body of literature. Considering this sample and the depth of narrative explored, replication of the study with different participants in a different organisation may produce different results. Having said this, many of the findings replicated or mirrored findings in previous research studies and, considering the literature in this area together, the anxiety defences and trauma responses identified are similar in nature to those found in other studies that have occurred with larger sample sizes (e.g. Broadhurst, 2010; Ferguson, 2017; Lees, 2017; Munro, 2011; Whittaker, 2011). This highlights the need for further research in this area, focusing specifically on experiences of ambivalence, with a larger sample size and across multiple social work organisations in different geographical locations in the UK. This could also include managers' experiences at different levels of the organisational hierarchy, something that was beyond the scope of this study, but would contribute to a richer understanding of experiences of ambivalence across social work organisations.

The use of free association in a research context is matter of academic debate in social work research (Archard, 2020; Wetherell, 2005). Whilst aspects of this methodology were useful,

this study deviated from this methodology in both the approach to interviewing and in data analysis. The approach to interviewing using free association felt ethically uncomfortable at times and was something I decided to amend to ensure participants were comfortable in the interview. Furthermore, data analysis required a more thematic approach for data that did not appear to speak to participants' experiences in any detail. Whilst the study is informed by a FANI methodology, therefore, this could not be applied in its full form within the study. As such, taking a purist FANI lens to the study could open this to critique in application of the methodology. Choices I made, however, were both in the best interest of the participant experience and in the need to achieve the research aims and answer the research questions. Whilst some deviation from the methodology has been present, taking an inductive approach to the findings and re-analysing the data numerous times has enabled an analysis to develop that has seen ambivalence emerge within the data. It is therefore only by taking this approach, and deviating from the methodology at times, that such findings and contributions to knowledge have been possible.

Finally, whilst the study intended to include some observations of social workers, this was not possible within the study. Such psychoanalytic observations could have complimented the data set and ensured that less of the findings were reliant on self-reported information from social workers, with more data available on their experience of PM in behavioural observations being made.

7.3 Implications for practice

Whilst a positivist world view might question generalisability of findings in this study to the entire child and family social work workforce, this practice-near research underpinned by a critical realist approach has enabled discovery of 'complex particulars' in the data, namely, experiences of ambivalence, that may hold wider significance than solely to these participants (Cooper, 2009).

In conducting the research, I have at times received some helpful challenge from supervisors about my views around PM and whether this is likely to change. I do not claim to know the answer to this. Furthermore, I appreciate the important role that PM can provide in the child protection system, both in terms of the protection it affords to social workers from professional harm and the accountability for service provision. I do not think this research is likely to lead to a complete overhaul of the child protection system, and neither do I think it should. My hope is that this research has provided some form of amplification of social workers and managers experiences and the skilful ways in which they manage the incredibly

complex dynamics that PM brings. I therefore conclude with some thoughts around how PM could be utilised in more helpful ways to the profession and how social work organisations could support social workers to engage more meaningfully with their practice experiences. I do not think I could ethically conclude the research without doing so. I also want to hold onto hope and belief, both my own and that heard in so many participant voices, that change is possible.

7.3.1 Acknowledgement and understanding of ambivalence

The study has found that ambivalence is fundamental to understanding social workers', managers' and organisations' experience of PM. This contributes to academic thought about why PM continues to go unchallenged in social work despite the acknowledged detrimental impact that this has on both the workforce and children and families (Hingley-Jones and Ruch, 2016; Munro, 2004; 2011; Whittaker, 2011), as well as there being little evidence of PM improving public services (Van Dooren, Bouckaert and Halligan, 2015). Furthermore, this supports the findings of previous research that in order to change the PM system in children's social care, we must acknowledge the role that anxiety plays in its functioning and continuation, as well the careful consideration to any reduction in this (Cooper, 2019; Hingley-Jones and Ruch, 2016; Munro, 2011; Whittaker, 2011).

The concept of ambivalence provides a new framework for understanding these experiences. As with any position of ambivalence, this must be realised in conscious thought for mental and emotional progression to occur. Recognition of ambivalence, however, has been found to be an extremely painful experience shrouded in loss and grief, albeit a necessary one to avoid maladaptive defences arising (Klein, 1935; Segal, 2019). Recognition of ambivalence in the social work context would, therefore, require engagement with the idea that a change or reduction in PM would likely lead to feelings of loss for social workers and managers, as well as relief, positivity and perhaps even joy for some. Given the substantial efforts put into maintaining its status, I suggest this loss would be significant and would include all aspects of the 'good' ways that PM is acknowledged, idealised and phantasised within this study. There would be loss of orientation and grounding to the social work role, loss of professional identity, loss of direction and course of action, and perhaps most importantly, the feeling of loss of protection from professional harm. It is perhaps unsurprising, therefore, that participants in this study and the wider workforce continue to engage with the system despite knowing the harm it causes, as the alternative is to face a form of organisational and professional grief that could be terrifying. Furthermore, PM was found to hold powerful

organisational force and provide important professional protection for social workers, such that they appeared to experience little choice about this engagement, at times being forced into a scenario of compromising their own values or considering leaving the profession because of this.

In order to change the PM system such that it is more useful to its workforce and children and families, therefore, there must be acknowledgment throughout policy and organisational contexts of both the need to do this, and the need to do this gradually and with sensitivity to the ambivalence present within the system. There would need to be acknowledgement that this would create substantial amounts of loss, even where this might be loss of an idealised phantasy. It is only through this acknowledgement that ambivalence would no longer be denied and become a safe position to hold in mind, such that defence mechanisms can be reduced and participants and the children and families with whom they work are not so detrimentally impacted by its power.

Furthermore, a thorough understanding and acknowledgement of the aspects of loss that are likely to be experienced, many of which have been identified in this study, could inform a more accurate awareness of voids that need to be filled. Such voids would need to be replaced by relational, value-based, emotionally containing practice, such that social workers feel safe enough to move away from defences that are harmful.

7.3.2 Repositioning of PM

Having completed a research project focusing on experiences of PM, I could not help concluding the research with some thoughts around the deeply unethical practice of statutory returns to the Department for Education that are fed upwards from social workers practice with very little feedback or transparency of its use and purpose, something that was also noted in the children's social care data and digital strategy (Department for Education, 2023c), as well as being articulated by participants in this study. Such lack of transparency has led, certainly in this organisation and possibly others, to a convoluted understanding of what PM is and the purpose of its use.

On this basis, there is potential to develop reform to the PM agenda in children's social care, such that this is useful to both social workers and children and families. The social work dashboard provides an attempt to use data more effectively as a learning tool. However, the establishment of this is too early to assess its usefulness, understand any additional burden this could pose to local authorities in submitting more data, or if this tool can filter change to social work experiences on the frontline of practice. Furthermore, such reform would need to

involve an effective system of reduction of the power of PM and the accompanied levels of bureaucracy attached to this, alongside replacement of this with greater levels of reflective supervision, support for staff, and movement from the public vilification of social workers towards more balanced reporting in both child death enquiries and the media.

Greater transparency and clarity about the purpose of PM was also identified as a need in this study. This could be found in the co-production of an organisational position statement on what PM means to the organisation, such that social workers are more aware of how management utilise this to make decisions, or are in the least, receiving some useful feedback from the system that they can implement in their practice. This study has found that workers can experience feelings of invisibility in relation to their practice, with the PM system directly contributing to this. One aspect of future consideration for management might, therefore, be the further amplification of social work practice outside of performance data, such that social workers feel more valued and contained by their organisational context.

7.4 Recommendations

- Training in relation to organisational trauma and organisational anxiety defences to be implemented for policy makers, Local Authority leaders and all operational staff in child and family social work. This should include developing an understanding of the impact of PM and bureaucracy on staff wellbeing, retention and practice with children and families. Specifically, training should be psychoanalytically informed and include reflexive spaces or work discussion groups, such that experiences of ambivalence in the self are able to be identified and understood in a supportive and nurturing environment.

- The Department for Education to fund a Local Authority based role to lead on both the reduction of bureaucracy and the repositioning of PM within the organisational context. This role should work across the policy and organisational context and work towards bridging the ongoing gap between policy and practice, as well as raising awareness of the impact of PM on the child and family social work workforce and children and families within policy.

- Local Authority organisations to codevelop an organisational position in relation to PM developed by staff representatives of all levels of the organisation. This should include what PM is, what it is used for, how PM could be helpful, ways that it might become unhelpful and actions to be taken when this occurs.

- Local Authority leaders to implement more strategies to increase reflexive supervision spaces, both individually and in small group spaces, to support social workers to nurture, engage with and process the emotions that arise in practice experiences. This should include space to reflect on feelings of exposure to professional harm or loss of direction in potential reduction of bureaucracy and ambivalent experiences that might arise in relation to this.

- The management task of sharing performance data with whole teams is reconsidered in this organisation and nationally with support from the Department for Education.

- More active recognition and amplification throughout social work organisations, particularly by management, of the skillful, relational practice experiences that social workers are engaged in and greater organisation-wide affirmations of this practice.

- Further research into how social workers experience ambivalence in relation to PM with particular attention paid to managers at all levels of the organisation including observations of practice.

- Further research conducted in a more diverse geographical location to include a more diverse sample of participants, with particular focus on black and minority ethic social workers' experience of PM.

- Evaluations encompassing quantitative, qualitative and practice-near methodologies of projects that look to reduce bureaucracy in statutory child and family social work, such that the impact of this on practice can be accurately captured.

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9. Appendices

Appendix 1 – Ethical approval application

The Tavistock and Portman **NHS**
NHS Foundation Trust

Tavistock and Portman Trust Research Ethics Committee (TREC)
APPLICATION FOR ETHICAL REVIEW OF STUDENT RESEARCH PROJECTS

This application should be submitted alongside copies of any supporting documentation which will be handed to participants, including a participant information sheet, consent form, self-completion survey or questionnaire.

Where a form is submitted and sections are incomplete, the form will not be considered by TREC and will be returned to the applicant for completion.

For further guidance please contact Paru Jeram (academicquality@tavi-port.nhs.uk)

FOR ALL APPLICANTS

If you already have ethical approval from another body (including HRA/IRAS) please submit the application form and outcome letters. You need only complete sections of the TREC form which are NOT covered in your existing approval

Is your project considered as 'research' according to the HRA tool? (http://www.hra-decisiontools.org.uk/research/index.html)	Yes
Will your project involve participants who are under 18 or who are classed as vulnerable? (see section 7)	No
Will your project include data collection outside of the UK?	No

section a: Project Details

Project title	Performance on show? A psychosocial study case study of how performance is experienced and managed in a child protection organisation		
Proposed project start date	October 2021	**Anticipated project end date**	July 2023

Principle Investigator (normally your Research Supervisor): Professor Andrew Cooper
Please note: TREC approval will only be given for the length of the project as stated above up to a maximum of 6 years. Projects exceeding these timeframes will need additional ethical approval

Has NHS or other approval been sought for this research including through submission via Research Application System (IRAS) or to the Health Research Authority (HRA)?	YES (NRES approval)	☐
	YES (HRA approval)	☐
	Other	☐
	NO	☒

If you already have ethical approval from another body (including HRA/IRAS) please submit the application form and outcome letters.

section b: Applicant Details

Name of Researcher	Rebecca Booth
Programme of Study and Target Award	Professional Doctorate in advanced practice and research; social work and social care
Email address	[redacted]
Contact telephone number	[redacted]

section c: CONFLICTS OF INTEREST

Will any of the researchers or their institutions receive any other benefits or incentives for taking part in this research over and above their normal salary package or the costs of undertaking the research? YES ☐   NO ☒ If YES, please detail below:
Is there any further possibility for conflict of interest? YES ☐   NO ☒
Are you proposing to conduct this work in a location where you work or have a placement? YES ☐   NO ☒ If YES, please detail below outline how you will avoid issues arising around colleagues being involved in this project:

Is your project being commissioned by and/or carried out on behalf of a body external to the Trust? (for example; commissioned by a local authority, school, care home, other NHS Trust or other organisation). *Please note that 'external' is defined as an organisation which is external to the Tavistock and Portman NHS Foundation Trust (Trust)	YES ☐ NO ☒
If **YES**, please add details here:	
Will you be required to get further ethical approval after receiving TREC approval? If **YES**, please supply details of the ethical approval bodies below AND include any letters of approval from the ethical approval bodies (letters received after receiving TREC approval should be submitted to complete your record):	YES ☒ NO ☐
[redacted] have provided verbal approval of the research being conducted within their Local Authority. I will require ethical approval from the Local Authority following TREC approval – I have been informed this is a standard process and is agreed by the Principal Social Worker, whom has provided approval verbally.	
If your project is being undertaken with one or more clinical services or organisations external to the Trust, please provide details of these:	
[redacted]	
If you still need to agree these arrangements or if you can only approach organisations after you have ethical approval, please identify the types of organisations (eg. schools or clinical services) you wish to approach:	
Local Authority Children's Services departments.	
Do you have approval from the organisations detailed above? (this includes R&D approval where relevant) Please attach approval letters to this application. Any approval letters received after TREC approval has been granted MUST be submitted to be appended to your record	YES ☒ NO ☐ NA ☐ Approval will be given following TREC approval.

SECTION D: SIGNATURES AND DECLARATIONS

APPLICANT DECLARATION

176

I confirm that:

- The information contained in this application is, to the best of my knowledge, correct and up to date.
- I have attempted to identify all risks related to the research.
- I acknowledge my obligations and commitment to upholding ethical principles and to keep my supervisor updated with the progress of my research
- I am aware that for cases of proven misconduct, it may result in formal disciplinary proceedings and/or the cancellation of the proposed research.
- I understand that if my project design, methodology or method of data collection changes I must seek an amendment to my ethical approvals as failure to do so, may result in a report of academic and/or research misconduct.

Applicant (print name)	Rebecca Booth
Signed	
Date	12/09/2021

FOR RESEARCH DEGREE STUDENT APPLICANTS ONLY

Name of Supervisor/Principal Investigator	Professor Andrew Cooper

Supervisor –

- Does the student have the necessary skills to carry out the research?

YES ☐   NO ☐

- Is the participant information sheet, consent form and any other documentation appropriate?

YES ☐   NO ☐

- Are the procedures for recruitment of participants and obtaining informed consent suitable and sufficient?

YES ☐   NO ☐

- Where required, does the researcher have current Disclosure and Barring Service (DBS) clearance?

YES ☐   NO ☐

Signed	
Date	

COURSE LEAD/RESEARCH LEAD

Does the proposed research as detailed herein have your support to proceed?   YES ☐   NO ☐

Signed	
Date	

SECTION E: Details of the proposed research

1. **Provide a brief description of the proposed research, including the requirements of participants. This must be in lay terms and free from technical or discipline specific terminology or jargon. If such terms are required, please ensure they are adequately explained (Do not exceed 500 words)**

This research project will explore social workers and social work manager's experience of performance measures in children's services social work. By performance measures, I am referring to organisational bureaucratic procedures that social workers follow in their day-to-day work and which their practice is measured against. This includes the recoding of home visits, the timescales in which they complete social work assessments, and the recording of multi-agency meetings – all of which are electronically recorded on a centralised IT system.

Specifically, I am interested in the ways in which social workers receive feedback on the measurement of their performance from their manager and / or service, how and why these decisions are made, and what the impact is. Within my practice experience, this has differed significantly depending on the Local Authority and the ways in which this is managed at different levels of the organisation. It is now often common-place for group emails to be distributed to the social work team or the whole service that highlights everyone's individual 'performance' and is shared amongst the whole staff team. This can often be represented by a statistical table, or in graph format and highlight certain aspects of their performance in particular colours, for example, green where visits are in timescale and red where this has not been completed on time. Fundamentally, I am interested in how social workers and social work managers experience this and what happens to practice in response to this.

The current research question is:

How do social workers and managers in a statutory children's services department experience measures of performance?

The sub questions I have developed to support me to answer this are as follows:
What does performance mean to child protection social workers and managers?
How does individual performance get shared with social workers and how do they respond to this?
What kind of emotions do performance measures evoke in child protection social workers and managers?
What do social workers and managers think about performance measures?
What happens to social workers practice with children and families in response to performance measures?

I intend to interview a maximum of 5-6 children's social workers and 2-3 managers who hold different roles in the Local Authority, for example, Team Manager, Service Manager, Director of Children's Services. Covid-19 and ethical approval permitting, I also intend to complete a series of psychoanalytic observations within the Local Authority. The

nature of the observations will be determined in collaboration with the Local Authority and what would be helpful for them and the research to be observed. This could include observation of a duty desk, a performance management meeting or managers meeting.

2. **Provide a statement on the aims and significance of the proposed research, including potential impact to knowledge and understanding in the field (where appropriate, indicate the associated hypothesis which will be tested). This should be a clear justification of the proposed research, why it should proceed and a statement on any anticipated benefits to the community. (Do not exceed 700 words)**

The aims of the research are:

- To construct an understanding about how child protection social workers and managers experience measures of performance.
- To understand how and why performance measures are shared with social workers.
- To understand what the impact of sharing performance is on social workers (cognitively and emotionally) and what happens to their practice in response to this.

It is widely accepted within child protection social work that bureaucratic processes impede relational practice in a number of ways. This was brought to light within the government-commissioned Munro review (2011) that provided a national systemic analysis of the social care system. This found that the policy and organisational emphasis on performance and bureaucracy had created a skew in practice which meant that social workers and organisations were now more motivated by this, as opposed to relational work with children and families. In a recent review of the literature on performance in child and family social work, I found that four themes emerged. These were; Social work is emotional and creative, performance inhibits this; Performance systems generate organisational anxiety defences; Performance is complex to measure and often conflicting measurements are in place; Performance-related bureaucracy is the biggest contributor towards stress and burnout.

Whilst these important themes emerged from the in-depth review of the literature, none of the studies focused explicitly on how social workers experience measures of their performance being shared. A focus on the different mechanisms that are used to share performance, why this is a chosen method and the impact of this is an area largely missing from research. The research will therefore consider responses to feedback on performance measures as distinct from general anxiety in relation to performance in practice. I hope to extract this distinction by utilising the final two follow up questions in the interview schedule. If I find I am unable to reach such a distinction within the first interview, I will analyse the data, looking for signs that might to the distinction, and return to this point within the second interview. Should there continue to be no distinction made by participants at this point, I will ensure that this response is integrated in to the findings and consider reflexively why I chose to make this distinction within the research project and what assumptions I may have made about practitioners.

From my own practice experience, and the research available in this field, it is evident that this has a substantial impact on social workers health and wellbeing as well as their practice with children and families. However, ten years after the Munro review, no research has focused specifically on how social workers are told about their performance, why and what happens when social workers become 'motivated' by performance, or when they are not.

This is a small-scale study that will include a sample of participants within one Local Authority. However, my aim is to contribute to the field of research in this particular area and to create new findings in relation to how social workers and social work managers experience measures of performance.

Justification and benefits

Whilst there has been substantial improvements social work practice made within the last ten years, the system continues to operate in a technical-rational state and social workers continue to be occupied predominantly with bureaucratic tasks that move the focus of practice away from relational work with children and families. There have been a number of 'practice models' that have been implemented in to Local Authorities in an attempt to restore practice back to its relational routes. These have been financially supported largely by The Children's Social Care Innovation Programme, which was launched in 2014. Whilst the drive towards an improvement in practice has seen better outcomes for children and families in some areas, a strategic reading of the evaluation reports finds that each relational model (no matter how it is designed) faces challenges in its implementation and maintenance due to the continued bureaucratic demand on social workers time and energy, something which has seen little reduction in line with such models of practice. The recent 'case for change' document published in 2021, found that the system continues to be bureaucratic and risk averse, with social workers spending less than a third of their time with children and families and child protection investigations increasing by 129% from 2009-2019 (Department for Education, 2021). It is clear, therefore, that primary research continues to be necessary in this area in order to move towards the necessary change to better support children and families and retain quality social workers within the workforce.

3. **Provide an outline of the methodology for the proposed research, including proposed method of data collection, tasks assigned to participants of the research and the proposed method and duration of data analysis. If the proposed research makes use of pre-established and generally accepted techniques, please make this clear. (Do not exceed 500 words)**

The study utilises a mixed-methods methodology that encompasses Free Association Narrative Interviewing (FANI) and Psychoanalytic Observations. I have chosen these two methodologies in order to be able to capture some of the potential anxiety defences that might be present in relation to performance measures in social work. By combining research methods, I hope to be able to create depth in the data and provide new understandings of how performance functions in child protection social work. I expect these two methodologies to compliment each other in several ways. Firstly, what can often be found in a one-to-one interview with a participant will miss a number of nuances in relation to their everyday practice and interaction with others that can be captured within an observation. Within observation, there are limitations in relation to focusing on the specifics of the subject matter and the participants thoughts and feelings in relation to this. Whilst a response to performance measures may occur within an observation, a participant may not share at that time what their thoughts and feelings are in relation to this as they could in an interview. Furthermore, emotional responses will often be deeply complex and unconscious or as yet unprocessed. I therefore hope that by combining the two methodologies, they will compliment each other in relation to the data I am able to gather from them. In order to solidify this further and bring these two methodologies together, I hope to be able to share some of my findings with the research participants in a group and invite reflections on these, should they wish to engage with this. This will enable further thoughts and feelings to emerge in relation to data and support a more co-constructed development of the findings.

FANI is a methodology developed by Hollway and Jefferson (2008; 2013) in which participants are interviewed by a researcher. The approach developed from traditional narrative analysis, however, within this approach, there is an assumption that participants are 'telling it like it is'. FANI utilises psychosocial theory in order to incorporate the concept of the 'defended subject' within the research. This assumes that participants – and researchers - are invested in discourses that protect the self from anxiety that they may not be aware of. The psychoanalytic concept of free association means that researchers focus their attentions on the unconscious connections that are made when people are free to construct their own narratives. Key to understanding this, is the participants 'gestalt', which is the unconscious structures that that lie beneath the narrative told – this may become a more significant focus and provide more data than the content of the narrative itself.

I intend to conduct 6-8 FANI interviews. At least 4 of these interviews will be conducted with frontline social work staff, with a further 2-4 interviews being conducted with managers at varying levels within the Local Authority. Research participants will be invited to attend two interviews with the interviewer. The first interview will consist of a handful of open questions related to participants experience of performance and anxiety in the workplace. The second interview will take place a week after the first interview and will consist of further developing the unconscious aspects of the narrative, by focusing on areas of confusion, conflict or contradiction in order to best explore anxiety defences in the participants narrative.

Psychoanalytic observation is a methodology that is utilised in many research studies conducted at the Tavistock, as well as being an established part of its training programmes. This involves observing particular interactions, or organisations and ensuring that there is as limited as possible interaction with those being observed. The observer should pay attention to the events occurring within the interaction, as well as their own emotional and cognitive response, which equally provide a significant amount of data to the research. Psychoanalytic observations are unique in paying close attention to the emotional and unconscious life that is presented to the observer.

I intend to construct an understanding of what would be useful to observe with the Local Authority once my research commences. This could involve observations of team meetings, management meetings, or performance meetings. I will conduct no more than 6 observations that are no more than 3 hours in length. Participants will consent to being observed in their daily practice and will be encouraged to practice and behave as they ordinarily would in this environment.

In terms of data analysis, this will be heavily influenced by psychosocial theory. FANI holds a position that 'the whole is bigger than the sum of its parts', therefore the data will be approached as a whole, and will combine a more detailed thematical analysis with an integrative psychosocially informed approach. Pen picture summaries of the participants will be utilised in the data for the FANI interviews. Analysis will incorporate psychoanalytic theory, taking in to account unconscious elements within the narrative / observation and focusing on areas such as countertransference, splitting and other anxiety defences. It may also draw on systemic elements, such social constructionism and reflexivity. This will enable me to construct a meaning to the data which both the participant and myself may not have been aware initially, but that that utilises evidence, theory and interpretation in order to understand the potential defences within the story.

SECTION F: Participant details

4. **Provide an explanation detailing how you will identify, approach and recruit the participants for the proposed research, including clarification on sample size and location. Please provide justification for the exclusion/inclusion criteria for this study**

(i.e. who will be allowed to / not allowed to participate) and explain briefly, in lay terms, why these criteria are in place. (Do not exceed 500 words)

For the FANI interviews, the inclusion criteria is:

- Social workers who work in a safeguarding team in [redacted].
- Managers employed in the role of Deputy Team Manager, Team Manager, Service Manager or director of Children's Services.

Exclusion criteria:
- Staff who work in Children's Services but are not social work qualified.

Access to the participant sample will be sought via the Principal Social Worker who is in regular contact with the service. An email invitation will be shared by myself to potential participants via the Principal Social Worker, along with the information and consent forms for the participants to read. I will then select the responses that best fit my sample criteria.

The sample will look to include social workers from a range of backgrounds and diversity will be sought in terms of participants race, ethnicity, cultural background, class background, gender, sexuality. Having said this, the Local Authority workforce is predominantly white British and therefore the diversity within the sample size might be limited by this, which will need to be taken account of within the analysis. Moreover, the primary research aim in relation to participants is to include participants who are experiencing measures of their performance within child protection social work, therefore this will be the primary focus for inclusion in the study.

In terms of observations, the inclusion criteria is any member of staff who works in a performance-related role within the Local Authority. This might include, for example, employees who manage the performance data for the Local Authority and hold performance meetings with staff.

Access to participants will be sought via the Local Authority's Principal Social Worker, who is supporting the project from a management perspective. Recruitment for the FANI interviews will use a purposive, semi-targeted sampling strategy as the participants will be targeted due to their role within the Local Authority. Using a non-random technique will mean that there is a level of bias within the sample and this will limit the generalisability of the research findings.

The participants are very unlikely to be known to me as I have had minimal involvement in the Local Authority in which I am conducting the research.

5.	**Please state the location(s) of the proposed research including the location of any interviews. Please provide a Risk Assessment if required. Consideration should be given to lone working, visiting private residences, conducting research outside working hours or any other non-standard arrangements.**

If any data collection is to be done online, please identify the platforms to be used.

Interviews will preferably take place in [redacted]. This is a building I have worked in previously and am familiar with. Participants will have access to booking confidential meeting rooms in which the interviews will take place. I will follow the Local Authorities Covid policy and any restrictions in place, such as wearing PPE and social distancing.

Should participants prefer to meet online, then this option will be offered although is not preferably due to the impact this could have on findings and the emotional safety of the participant being in their own home.

Observations will either take place in [redacted] or online.

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6.   Will the participants be from any of the following groups?*(Tick as appropriate)*

☐ Students or Staff of the Trust or Partner delivering your programme.

☒ Adults (over the age of 18 years with mental capacity to give consent to participate in the research).

☐ Children or legal minors (anyone under the age of 16 years)[1]

☐ Adults who are unconscious, severely ill or have a terminal illness.

☐ Adults who may lose mental capacity to consent during the course of the research.

☐ Adults in emergency situations.

☐ Adults[2] with mental illness - particularly those detained under the Mental Health Act (1983 & 2007).

☐ Participants who may lack capacity to consent to participate in the research under the research requirements of the Mental Capacity Act (2005).

☐ Prisoners, where ethical approval may be required from the National Offender Management Service (NOMS).

☐ Young Offenders, where ethical approval may be required from the National Offender Management Service (NOMS).

☐ Healthy volunteers (in high risk intervention studies).

☐ Participants who may be considered to have a pre-existing and potentially dependent[3] relationship with the investigator (e.g. those in care homes, students, colleagues, service-users, patients).

☐ Other vulnerable groups (see Question 6).

☐ Adults who are in custody, custodial care, or for whom a court has assumed responsibility.

☐ Participants who are members of the Armed Forces.

[1]*If the proposed research involves children or adults who meet the Police Act (1997) definition of vulnerability[3], any researchers who will have contact with participants must have current Disclosure and Barring Service (DBS) clearance.*

[2] *'Adults with a learning or physical disability, a physical or mental illness, or a reduction in physical or mental capacity, and living in a care home or home for people with learning difficulties or receiving care in their own home, or receiving hospital or social care services.' (Police Act, 1997)*

[3] *Proposed research involving participants with whom the investigator or researcher(s) shares a dependent or unequal relationships (e.g. teacher/student, clinical therapist/service-user) may compromise the ability to give informed consent which is free from any form of pressure (real or implied) arising from this relationship. TREC recommends that, wherever practicable, investigators choose participants with whom they have no dependent relationship. Following due scrutiny, if the investigator is confident that the research involving participants in dependent relationships is vital and defensible, TREC will require additional information setting out the case and detailing how risks inherent in the dependent relationship will be managed. TREC will also need to be reassured that refusal to participate will not result in any discrimination or penalty.*

7. Will the study involve participants who are vulnerable? YES ☐ NO ☒

For the purposes of research, 'vulnerable' participants may be adults whose ability to protect their own interests are impaired or reduced in comparison to that of the broader population. Vulnerability may arise from:

- the participant's personal characteristics (e.g. mental or physical impairment)
- their social environment, context and/or disadvantage (e.g. socio-economic mobility, educational attainment, resources, substance dependence, displacement or homelessness).
- where prospective participants are at high risk of consenting under duress, or as a result of manipulation or coercion, they must also be considered as vulnerable
- children are automatically presumed to be vulnerable.

7.1. If YES, what special arrangements are in place to protect vulnerable participants' interests?

If YES, a Disclosure and Barring Service (DBS) check **within the last three years** is required.

Please provide details of the "clear disclosure":

Date of disclosure:	
Type of disclosure:	
Organisation that requested disclosure:	
DBS certificate number:	

(NOTE: information concerning activities which require DBS checks can be found via https://www.gov.uk/government/publications/dbs-check-eligible-positions-guidance*). Please **do not** include a copy of your DBS certificate with your application*

8. Do you propose to make any form of payment or incentive available to participants of the research? YES ☐ NO ☒

If **YES**, please provide details taking into account that any payment or incentive should be representative of reasonable remuneration for participation and may not be of a value that could be coercive or exerting undue influence on potential participants' decision to take part in the research. Wherever possible, remuneration in a monetary form should be avoided and substituted with vouchers, coupons or equivalent. Any payment made to research participants may have benefit or HMRC implications and participants should be alerted to this in the participant information sheet as they may wish to choose to decline payment.

9. What special arrangements are in place for eliciting informed consent from participants who may not adequately understand verbal explanations or written information provided in English; where participants have special communication needs; where participants have limited literacy; or where children are involved in the research? (Do not exceed 200 words)

This is not applicable to the research, all participants will be qualified social workers and as such will have the necessary understanding to consent to the research.

SECTION F: RISK ASSESSMENT AND RISK MANAGEMENT

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10. Does the proposed research involve any of the following? *(Tick as appropriate)*

☐ use of a questionnaire, self-completion survey or data-collection instrument (attach copy)

☒ use of emails or the internet as a means of data collection

☐ use of written or computerised tests

☒ interviews (attach interview questions)

☐ diaries (attach diary record form)

☒ participant observation

☐ participant observation (in a non-public place) without their knowledge / covert research

☒ audio-recording interviewees or events

☐ video-recording interviewees or events

☐ access to personal and/or sensitive data (i.e. student, patient, client or service-user data) without the participant's informed consent for use of these data for research purposes

☐ administration of any questions, tasks, investigations, procedures or stimuli which may be experienced by participants as physically or mentally painful, stressful or unpleasant during or after the research process

☐ performance of any acts which might diminish the self-esteem of participants or cause them to experience discomfiture, regret or any other adverse emotional or psychological reaction

☐ Themes around extremism or radicalisation

☐ investigation of participants involved in illegal or illicit activities (e.g. use of illegal drugs)

☐ procedures that involve the deception of participants

☐ administration of any substance or agent

☐ use of non-treatment of placebo control conditions

☐ participation in a clinical trial

☐ research undertaken at an off-campus location (<u>risk assessment attached</u>)

☐ research overseas (<u>please ensure Section G is complete</u>

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11. Does the proposed research involve any specific or anticipated risks (e.g. physical, psychological, social, legal or economic) to participants that are greater than those encountered in everyday life?

YES ☐   **NO** ☒

If **YES**, please describe below including details of precautionary measures.

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12. Where the procedures involve potential hazards and/or discomfort or distress for participants, please state what previous experience the investigator or researcher(s) have had in conducting this type of research.

It is possible that the nature of the research subject could provoke some distress for participants. Burnout is high amongst Children's social workers and one of the main factors in this is the substantial amount of bureaucracy and performance data required of them. Some participants, however, may experience positive emotions such as relief and feeling cared for and listened to by taking part in the research. Whilst I do not have experience of managing distress in a researcher role, I

have a substantial amount of experience of supporting people in distress within my role as a social worker and more recently a therapeutic social worker. This involves regularly discussing individual past trauma with individuals and supporting them to manage this, a role I have undertaken for the past 12 years.

In observations, this may provoke feelings of being observed or 'under surveillance' – this is an area I have a substantial amount of experience in managing in a professional setting, having completed both a child observation and organisational observation at the Tavistock previously and having observed parents who are perceived to pose a risk to their children within my social work role.

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13. **Provide an explanation of any potential benefits to participants. Please ensure this is framed within the overall contribution of the proposed research to knowledge or practice. (Do not exceed 400 words)**

NOTE: Where the proposed research involves students , they should be assured that accepting the offer to participate or choosing to decline will have no impact on their assessments or learning experience. Similarly, it should be made clear to participants who are patients, service-users and/or receiving any form of treatment or medication that they are not invited to participate in the belief that participation in the research will result in some relief or improvement in their condition.

- Enable social workers and managers to feel that their views are important and that they feel heard, listened to and cared for.
- Relieve stress that has developed as a result of having to manage performance measures by talking this through with an objective researcher.
- Enable social work practitioners to contribute to the development of new ideas about how performance is managed.
- The opportunity to contribute to the research field in this important area – supporting career development and value to the role.
- The possibility of developing an action-research element to the research, by facilitating a reflective / focus group which shares provisional findings and allows reflecion on these. This supports reflexivity and develops practice.

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14. **Provide an outline of any measures you have in place in the event of adverse or unexpected outcomes and the potential impact this may have on participants involved in the proposed research. (Do not exceed 300 words)**

In the event of adverse outcomes, I would initially discuss this with the participant/s and/or employee who wishes to discuss this with me. If this is something that can be resolved by referring back to the information and consent forms, I will go back through this information with the participant and / or employee and see if an agreement can be reached. In the event that I am unable to resolve this at this stage, I would then seek advice from my supervisor about the best way forward. I would report any adverse outcomes to a manager within the Local Authority in order to ensure full transparency within the research project.

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15. **Provide an outline of your debriefing, support and feedback protocol for participants involved in the proposed research. This should include, for example, where participants may feel the need to discuss thoughts or feelings brought about following their participation in the research. This may involve referral to an external support or counseling service, where participation in the research has caused specific issues for participants.**

In the event that a participant becomes distressed in the interview, I will initially pause the interview and ask the participant if they want to take a break. I will ensure that participants want to continue with the interview and continue to ask for informed consent should this occur. Should the participant need further support following this, I will offer them information in relation to local talking therapies where they can access any further support they might need to discuss any distress that has occurred.

16. **Please provide the names and nature of any external support or counselling organisations that will be suggested to participants if participation in the research has potential to raise specific issues for participants.**

For participants that live within the [redacted] area, I would refer them to the local Talking Therapies services:

[redacted]

For participants that live outside of the local authority, I will refer them to IAPTS in order for them to be able to access support within their area:

https://www.nhs.uk/service-search/find-a-psychological-therapies-service/

For participants who would like support to free, confidential psychological support services for frontline workers, I will refer them to Frontline19:

https://www.frontline19.com/

In the event that social workers become significantly distressed, I will advise them to seek support from their occupational health department and discuss with my supervisor if I would need to inform their manager of this.

17. **Where medical aftercare may be necessary, this should include details of the treatment available to participants. Debriefing may involve the disclosure of further information on the aims of the research, the participant's performance and/or the results of the research. (Do not exceed 500 words)**

This is not required.

For Research undertaken outside the uk

18. Does the proposed research involve travel outside of the UK? ☐ YES ☐ NO

If YES, please confirm:

☐ I have consulted the Foreign and Commonwealth Office website for guidance/travel advice?
http://www.fco.gov.uk/en/travel-and-living-abroad/

☐ I have completed ta RISK Assessment covering all aspects of the project including consideration of the location of the data collection and risks to participants.

All overseas project data collection will need approval from the Deputy Director of Education and Training or their nominee. Normally this will be done based on the information provided in this form. All projects approved through the TREC process will be indemnified by the Trust against claims made by third parties.

If you have any queries regarding research outside the UK, please contact academicquality@tavi-port.nhs.uk:

Students are required to arrange their own travel and medical insurance to cover project work outside of the UK. Please indicate what insurance cover you have or will have in place.

19. Please evidence how compliance with all local research ethics and research governance requirements have been assessed for the country(ies) in which the research is taking place. Please also clarify how the requirements will be met:

SECTION G: PARTICIPANT CONSENT AND WITHDRAWAL

20. Have you attached a copy of your participant information sheet (this should be in *plain English*)? Where the research involves non-English speaking participants, please include translated materials.

YES ☒   NO ☐

If **NO**, please indicate what alternative arrangements are in place below:

21. Have you attached a copy of your participant consent form (this should be in *plain English*)? Where the research involves non-English speaking participants, please include translated materials.

YES ☒   NO ☐

If **NO**, please indicate what alternative arrangements are in place below:

22. The following is a <u>participant information sheet</u> checklist covering the various points that should be included in this document.

☒ Clear identification of the Trust as the sponsor for the research, the project title, the Researcher and Principal Investigator (your Research Supervisor) and other researchers along with relevant contact details.

☒ Details of what involvement in the proposed research will require (e.g., participation in interviews, completion of questionnaire, audio/video-recording of events), estimated time commitment and any risks involved.

☒ A statement confirming that the research has received formal approval from TREC or other ethics body.

☒ If the sample size is small, advice to participants that this may have implications for confidentiality / anonymity.

☒ A clear statement that where participants are in a dependent relationship with any of the researchers that participation in the research will have no impact on assessment / treatment / service-use or support.

☒ Assurance that involvement in the project is voluntary and that participants are free to withdraw consent at any time, and to withdraw any unprocessed data previously supplied.

☒ Advice as to arrangements to be made to protect confidentiality of data, including that confidentiality of information provided is subject to legal limitations.

☒ A statement that the data generated in the course of the research will be retained in accordance with the <u>Trusts 's Data Protection and handling Policies.</u>: https://tavistockandportman.nhs.uk/about-us/governance/policies-and-procedures/

☒ Advice that if participants have any concerns about the conduct of the investigator, researcher(s) or any other aspect of this research project, they should contact Simon Carrington, Head of Academic Governance and Quality Assurance (academicquality@tavi-port.nhs.uk)

☒ Confirmation on any limitations in confidentiality where disclosure of imminent harm to self and/or others may occur.

23. The following is a <u>consent form</u> checklist covering the various points that should be included in this document.

☒ Trust letterhead or logo.

☒ Title of the project (with research degree projects this need not necessarily be the title of the thesis) and names of investigators.

☒ Confirmation that the research project is part of a degree

☒ Confirmation that involvement in the project is voluntary and that participants are free to withdraw at any time, or to withdraw any unprocessed data previously supplied.

☒ Confirmation of particular requirements of participants, including for example whether interviews are to be audio-/video-recorded, whether anonymised quotes will be used in publications advice of legal limitations to data confidentiality.

☒ If the sample size is small, confirmation that this may have implications for anonymity any other relevant information.

☒ The proposed method of publication or dissemination of the research findings.

☒ Details of any external contractors or partner institutions involved in the research.

☒ Details of any funding bodies or research councils supporting the research.

☒ Confirmation on any limitations in confidentiality where disclosure of imminent harm to self and/or others may occur.

SECTION H: CONFIDENTIALITY AND ANONYMITY

24. Below is a checklist covering key points relating to the confidentiality and anonymity of participants. Please indicate where relevant to the proposed research.

☐ Participants will be completely anonymised and their identity will not be known by the investigator or researcher(s) (i.e. the participants are part of an anonymous randomised sample and return responses with no form of personal identification)?

☐ The responses are anonymised or are an anonymised sample (i.e. a permanent process of coding has been carried out whereby direct and indirect identifiers have been removed from data and replaced by a code, with <u>no</u> record retained of how the code relates to the identifiers).

☒ The samples and data are de-identified (i.e. direct and indirect identifiers have been removed and replaced by a code. The investigator or researchers <u>are</u> able to link the code to the original identifiers and isolate the participant to whom the sample or data relates).

☐ Participants have the option of being identified in a publication that will arise from the research.

☒ Participants will be pseudo-anonymised in a publication that will arise from the research. (I.e. the researcher will endeavour to remove or alter details that would identify the participant.)

☐ The proposed research will make use of personal sensitive data.

☒ Participants consent to be identified in the study and subsequent dissemination of research findings and/or publication.

25. Participants must be made aware that the confidentiality of the information they provide is subject to legal limitations in data confidentiality (i.e. the data may be subject to a subpoena, a freedom of information request or mandated reporting by some professions). This only applies to named or de-identified data. If your participants are named or de-identified, please confirm that you will specifically state these limitations.

YES ☒   **NO** ☐

If **NO**, please indicate why this is the case below:

NOTE: WHERE THE PROPOSED RESEARCH INVOLVES A SMALL SAMPLE OR FOCUS GROUP, PARTICIPANTS SHOULD BE ADVISED THAT THERE WILL BE DISTINCT LIMITATIONS IN THE LEVEL OF ANONYMITY THEY CAN BE AFFORDED.

SECTION I: DATA ACCESS, SECURITY AND MANAGEMENT

26. Will the Researcher/Principal Investigator be responsible for the security of all data collected in connection with the proposed research? YES ☒ NO ☐

If **NO**, please indicate what alternative arrangements are in place below:

27. In line with the 5th principle of the Data Protection Act (1998), which states that personal data shall not be kept for longer than is necessary for that purpose or those purposes for which it was collected; please state how long data will be retained for.

☐ 1-2 years ☐ 3-5 years ☒ 6-10 years ☐ 10> years

NOTE: In line with Research Councils UK (RCUK) guidance, doctoral project data should normally be stored for 10 years and Masters level data for up to 2 years

28. **Below is a checklist which relates to the management, storage and secure destruction of data for the purposes of the proposed research. Please indicate where relevant to your proposed arrangements.**

☒ Research data, codes and all identifying information to be kept in separate locked filing cabinets.

☒ Research data will only be stored in the University of Essex OneDrive system and no other cloud storage location.

☒ Access to computer files to be available to research team by password only.

☐ Access to computer files to be available to individuals outside the research team by password only (See **23.1**).

☒ Research data will be encrypted and transferred electronically within the UK.

☐ Research data will be encrypted and transferred electronically outside of the UK.

NOTE: Transfer of research data via third party commercial file sharing services, such as Google Docs and YouSendIt are not necessarily secure or permanent. These systems may also be located overseas and not covered by UK law. If the system is located outside the European Economic Area (EEA) or territories deemed to have sufficient standards of data protection, transfer may also breach the Data Protection Act (1998).

Essex students also have access the 'Box' service for file transfer: https://www.essex.ac.uk/student/it-services/box

☐ Use of personal addresses, postcodes, faxes, e-mails or telephone numbers.

☒ Collection and storage of personal sensitive data (e.g. racial or ethnic origin, political or religious beliefs or physical or mental health or condition).

☒ Use of personal data in the form of audio or video recordings.

☒ Primary data gathered on encrypted mobile devices (i.e. laptops).

NOTE: This should be transferred to secure University of Essex OneDrive at the first opportunity.

☒ All electronic data will undergo secure disposal.

NOTE: For hard drives and magnetic storage devices (HDD or SSD), deleting files does not permanently erase the data on most systems, but only deletes the reference to the file. Files can be restored when deleted in this way. Research files must be overwritten to ensure they are completely irretrievable. Software is available for the secure erasing of files from hard drives which meet recognised standards to securely scramble sensitive data. Examples of this software are BC Wipe, Wipe File, DeleteOnClick and Eraser for Windows platforms. Mac users can use the standard 'secure empty trash' option; an alternative is Permanent eraser software.

☒ All hardcopy data will undergo secure disposal.

NOTE: For shredding research data stored in hardcopy (i.e. paper), adopting DIN 3 ensures files are cut into 2mm strips or confetti like cross-cut particles of 4x40mm. The UK government requires a minimum standard of DIN 4 for its material, which ensures cross cut particles of at least 2x15mm.

29. **Please provide details of individuals outside the research team who will be given password protected access to encrypted data for the proposed research.**

n/a

30. Please provide details on the regions and territories where research data will be electronically transferred that are external to the UK:

n/a

SECTION J: Publication and dissemination of research FINDINGS

30. How will the results of the research be reported and disseminated? *(Select all that apply)*

☒ Peer reviewed journal
☒ Non-peer reviewed journal
☒ Peer reviewed books
☒ Publication in media, social media or website (including Podcasts and online videos)
☒ Conference presentation
☒ Internal report
☒ Promotional report and materials
☐ Reports compiled for or on behalf of external organisations
☒ Dissertation/Thesis
☐ Other publication
☒ Written feedback to research participants
☒ Presentation to participants or relevant community groups
☐ Other (Please specify below)

SECTION K: Other ethical issues

31. Are there any other ethical issues that have not been addressed which you would wish to bring to the attention of Tavistock Research Ethics Committee (TREC)?

SECTION L: CHECKLIST FOR ATTACHED DOCUMENTS

32. Please check that the following documents are attached to your application.

☐ Letters of approval from any external ethical approval bodies (where relevant)

☐ Recruitment advertisement

☒ Participant information sheets (including easy-read where relevant)

☒ Consent forms (including easy-read where relevant)

☐ Assent form for children (where relevant)

☐ Letters of approval from locations for data collection

☐ Questionnaire

☒ Interview Schedule or topic guide

☒ Risk Assessment (where applicable)

☐ Overseas travel approval (where applicable)

34. Where it is not possible to attach the above materials, please provide an explanation below.

I have not yet been able to complete a risk assessment. I have requested a template for this and am awaiting receiving this from academic quality.

Appendix 2 – Ethical approval

The Tavistock and Portman NHS
NHS Foundation Trust

<div align="right">

Quality Assurance & Enhancement

Directorate of Education & Training

Tavistock Centre

120 Belsize Lane

London

NW3 5BA

Tel: 020 8938 2699

Fax: 020 7447 3837

</div>

Rebecca Booth

By Email

04 January 2022

Dear Rebecca,

Re: Trust Research Ethics Application

Title: Performance on show? A psychosocial study case study of how performance is experienced and managed in a child protection organisation

I am pleased to inform you that subject to formal ratification by the Trust Research Ethics Committee your application has been approved. This means you can proceed with your research.

Please note that any changes to the project design including changes to methodology/data collection etc, must be referred to TREC as failure to do so, may result in a report of academic and/or research misconduct.

If you have any further questions or require any clarification do not hesitate to contact me.

I am copying this communication to your supervisor.

May I take this opportunity of wishing you every success with your research.

Yours sincerely,

Paru Jeram
Secretary to the Trust Research Degrees Subcommittee
T: 020 938 2699
E: academicquality@tavi-port.nhs.uk

cc.   Course Lead, Supervisor, Course Administrator

Appendix 3 – Information form

Information form for research participants

My name is Rebecca Booth and I am a Professional Doctorate student at the Tavistock NHS Foundation Trust and University of Essex. I am currently completing research that will focus on how 'performance' is managed and experienced in child and family social work. I am particularly interested in how social workers receive feedback about their performance, how these decisions are made, and the responses to this.

The title of the research is:

Performance on show? A psychosocial case study of how performance is experienced and managed in a child protection organisation.

The main research question that I will answer is:

> *How do social workers and managers in a statutory children's services department experience measures of performance?*

I am hoping to interview 6-8 social workers and social work managers and complete a series of observations of day-to-day practice for a maximum of 3 hours each.

What do you need to do?
The research is using two methods; interviews and observations.
If you would like to take part in the interviews, you would need to agree to take part in two interviews with me that should be around a week apart. These can be any length of time, depending on how much information you want to share with me and will involve just a handful of broad, open questions.
If you would like to take part in the observations, you would need to agree for me to observe you in your day-to-day practice within your office environment or online, depending on where this takes place.

What will I do with your information?

All interviews will be recorded and stored within the University of Essex of Onedrive as soon as possible following the recording. This is a secure, password-protected storage facility and the only people who will have access to the data are myself and my two research supervisors. Interviews will be transcribed using a pseudonym instead of your real name, in order to protect your anonymity and stored within the University Onedrive.

Hand written notes from observations will be written up as soon as possible following the observation and the original notes will be destroyed confidentially. All notes will use pseudonyms instead of your real name in order to protect your anonymity. If there is a gap between taking the notes and transcription, notes will be kept in a secure location within my home. Any electronic recordings will be deleted as soon as they have been transcribed.

Occasionally, I will attend seminars with fellow-researchers where data will be discussed confidentially in order to support the development of the research. I will not share any personal information within these forums and pseudonyms will be used instead of your real name.

The only reasons why confidentiality will ever be breached if there is a disclosure of imminent harm to yourself or others.

The research data will be kept for a maximum of 10 years following collection in accordance with the Trusts Data Protection Policies which you can find here: Trusts 's Data Protection and handling Policies.

How do you withdraw from the research?

You can choose to withdraw from the research at any time. You can send me an email in order to do this on: [redacted]. You do not need to give a reason. If you choose to withdraw, all data I hold in relation to your involvement in the research will be deleted confidentially as soon as possible.

How will the research be disseminated?

If you would like a written summary of the findings, this can be provided upon request once data collection is complete. The research will be written up in a thesis, will be made public on the British Library website. It is possible that articles might be published in social work journals, or other publications, using the findings from the research. Your anonymity will be protected within this through the use of pseudonyms. Any other identifiable information will be omitted, such as geographical locations.

Who is supervising me?

Professor Andrew Cooper from the Tavistock and Portman NHS Foundation trust is my first supervisor. Professor Cooper can be contacted on: [redacted]

Dr Amina Adan is my second supervisor, also from the Tavistock. Dr Adan can be contacted on: [redacted]

What if you experience some upset or distress as part of the research?

If at any point during the research taking place you do not feel comfortable, you can tell me, or if I notice this myself, I will ask if you want to continue with the interview or observation. If you do not want to continue, the interview or observation will be terminated at that point. I will ensure that you have enough time to answer the questions comfortably and you can take breaks whenever you need to.

If you feel you need any additional support following the research, you can contact the therapeutic support services below:

For participants that live within the [redacted] area, you can contact your local talking therapies services:

[redacted]

For participants that live outside of the [redacted] area, you can find talking therapy services available in your area here:

[redacted]

You can also contact Frontline19, who offer free, confidential psychological support services for frontline social workers:

https://www.frontline19.com/

Ethics

The research has received ethical approval from the Tavistock Research Ethics Committee and permission from [redacted]. If you have any concerns about the conduct of the researcher or any other aspect of this research project, you can contact Simon Carrington, Head of Academic Governance and Quality Assurance (academicquality@tavi-port.nhs.uk)

Appendix 4 – Consent form

The Tavistock and Portman **NHS**

NHS Foundation Trust

Consent form to take part in research project

Name of Researcher: Rebecca Booth

Title of Project: Performance on show? A psychosocial case study of how performance is experienced and managed in a child protection organisation.

Please tick appropriate boxes:

☐ I agree to take part two interviews.

☐ I agree to take part in an observation.

☐ I have read the information sheet for the study and I understand the contents of this.

☐ I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.

☐ I understand that my participation is voluntary and that I am free to withdraw my consent at any time.

☐ I agree that research interviews can be recorded.

☐ I agree for the researcher to take notes during observations.

☐ I understand that any information given by me may be used in future reports, publications, or presentations by the researcher.

☐ I understand that my name will not appear in any reports, publications, or presentations.

_____   _____   _____

Name of Participant   Date   Signature

_____   _____   _____

Name of Researcher   Date   Signature

Appendix 5 – Data analysis development journal and notes from interview 1

Following the coding process of all first interviews and the development of 137 codes, I printed and cut out each of the codes to create a coding map.
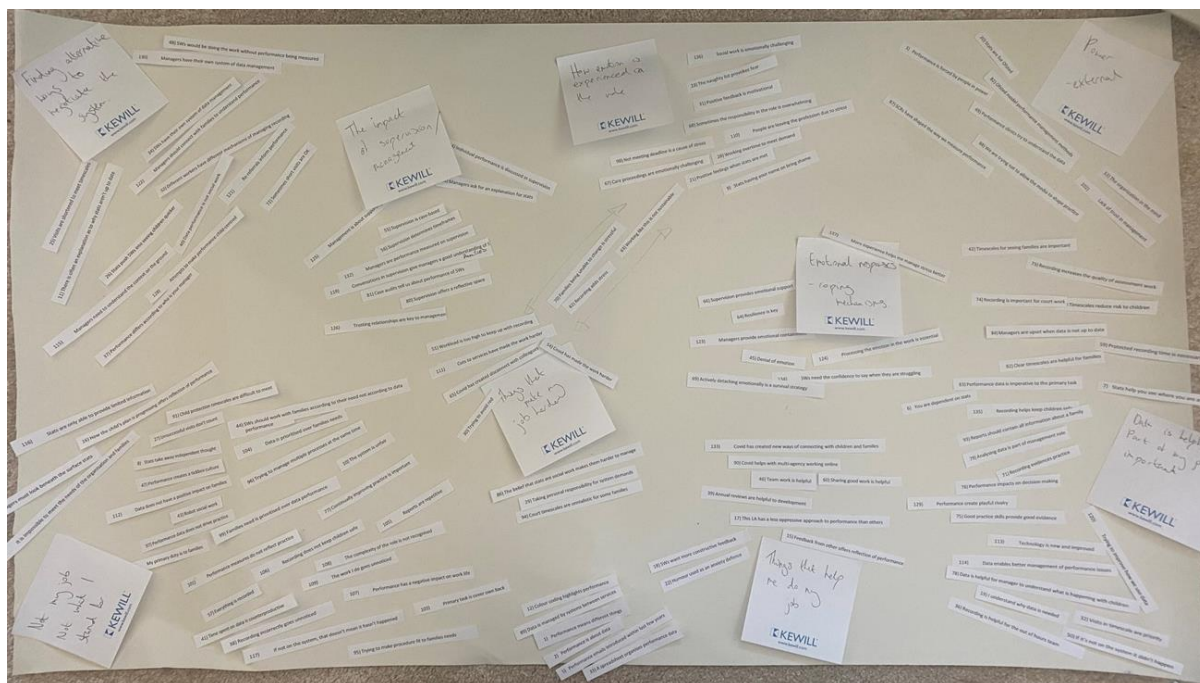
Themes were developed inductively, by looking for shared meanings in the codes which answered my research question.

9 themes were initially developed. These were written on a post it notes and added to the wallpaper map, with the relevant codes surrounding them.

Initial themes that were developed were:

- Finding alternative ways to navigate the system

- Not my job / not what I stand for

- The impact of supervision / management

- How emotion is experienced in the role

- Things that make my job harder

- Emotional responses – coping mechanisms

- Things that help me do my job

- Power – external

- Data is helpful, part of job, important.

Several codes were discounted at this point. Although they highlighted important aspects of the data, they did not provide any meaning to what was being shared but rather highlighted a particular practice or behaviour. Providing an interpretation or meaning to the codes is an important part of reflexive TA.

The following codes were discounted:

- 12) Colour coding highlights performance

- 89) Data is managed by systems between services

- 1) Performance means different things

- 2) Performance is about data

- 5) Performance emails introduced within last few years

- 33) A spreadsheet organises performance data

- 127) Performance issues are process-managed

- 4) Regular emails received with performance data

- 61) Increase in complex caseload = success in ASYE

- 35) Myplans is direct work that is performance managed

Two codes do not fit with the initial mapping:

- 85) Tension in the primary task

- 24) Stats are both good and bad

Stage 4 – refining the themes

Upon reviewing the themes, the theme of 'Finding alternative ways to negotiate the system' appeared to be most clear and easy to define.

The code 'How emotion is experienced in the role' is presenting as most problematic, and most like a 'topic summary'.

The fundamental problem with the themes at the moment appears to be the binary analysis of 'Not my job / not what I stand for' and 'Data is helpful, part of my job, important'. Creating such a binary does not represent the complexity in the data for each of these areas. Moreover, the above two codes do not 'fit' in the themes, yet are seen throughout the data set. This needs to be reviewed.

Code 108 is 'The complexity of the role is not recognised'. It seems that this code is representative of this experience and therefore themes need to be reorganised in order that this is recognised.

Codes:

57) 'everything is recorded' is discounted at this stage – objective / factual

38) 'recording incorrectly goes unnoticed' is discounted at this stage – this was not seen throughout the data set

Review of themes

The theme:

- Finding alternative ways to navigate the system

Is remaining the same in this review

The theme:

- Not my job / not what I stand for

Is replaced with a new theme:

- Performance data is ineffective and problematic

With 3 subthemes

- Performance data does not represent social workers work

- Performance data is too difficult for social workers to manage consistently

- Performance data has a negative impact on families

The theme:

- The impact of supervision / management

This is staying the same

The theme:

- How emotion is experienced in the role

This theme is problematic. It is presenting more of a topic summary and a direct answer to one of the interview questions. I have replaced it with:

- Stress and anxiety is rife, how to manage it

The theme:

- Things that make my job harder

Has been replaced with a new theme:

- Other major factors that impact on my role

The theme:

- Emotional responses – coping mechanisms

Has merged with the new theme:

- Stress and anxiety is rife, how to manage it

The theme:

- Things that help me do my job

Has been merged with the new theme

- Other major factors that impact on my role

Themes:

- Power – external

- Data is helpful, part of job, important.

Are remaining the same.

Therefore, following review, the new themes that have emerged are:

- Finding alternative ways to navigate the system

- Performance data is ineffective and problematic

With 3 subthemes

- Performance data does not represent social workers work

- Performance data is too difficult for social workers to manage consistently

- Performance data has a negative impact on families

- The impact of supervision / management

- Stress and anxiety is rife, how to manage it

- Other major factors that impact on my role

- Power – external

- Data is helpful, part of job, important.

- Finding alternative ways to navigate the system

This theme refers to how social workers and managers navigate a data system that does not work for them. Many creative ways of alternatively recording, or finding ways around the system were identified within the data from both social workers and managers. Sometimes, this system had a positive impact, such as social workers feeling more in control and on top of their workload. Sometimes this had a negative impact, such as only doing a very short visit to meet timescales as opposed to doing meaningful work with the family.

- Performance data is ineffective and problematic

With 3 subthemes

- Performance data does not represent social workers work

This subtheme can be seen throughout the data set, in that it was widely accepted that what was seen on the system is only a small segment of what social workers do and does not represent the complexity involved in the work. There was concern from some practitioners that the families were being pigeon-holed into segments of the system in order to meet the organisational requirements. Furthermore, that what was on the system was often wildly different to work being done on the ground with no resolution to rectifying this, for example, the number of attempted visits is not recorded or rewarded in the same way as a recorded visit, despite this often being outside of the socials workers control.

- Performance data is too difficult for social workers to manage consistently

This subtheme found that, in connection with the above, social workers are trying to manage a system which is almost impossible to manage at times. This involves repetition of recording

information for no logical reason, counterproductive use of social workers time, and trying to manage timescales that are too difficult to meet.

- Performance data has a negative impact on families

This subtheme held only 5 codes and therefore has the least amount of codes in the subtheme. Some social workers identified that data performance does not have a positive impact on families. There was a push for family's needs, rather than performance data, to be the driver of practice whilst at the same time recognising that data is often prioritised over needs unfairly.

- The impact of supervision / management

This theme was seen throughout the data set and refers to the impact that social workers relationship with their manager, experience of different styles of management and experience of supervision has on performance. Often supervision was seen as a supportive space but there was also a dominant view that this was a case-management tool which was largely used to set timescales and monitor them. Many participants wanted most feedback on their practice and the absence of this sometimes felt like their work was unnoticed, or that they did not know how they were performing. The new annual review was largely discussed in positive terms.

- Stress and anxiety is rife, how to manage it

Stress and anxiety, or defences developed as a result of this were present throughout the data. There was a significant view that recording of information add more stress and anxiety to the social work role. Some practitioners had developed strong emotional defences from this, working hard to avoid 'being in the red' but trying to deny any emotional response when they were. Most felt overwhelmed by the amount of paperwork that had to be completed at some point. There was a general sense that the 'naughty' list meant you were not performing, even where there was a logical response for being so that is not recognised by the 'system', such as the family not being home when visiting. There were other examples of humour and team work that supported social workers to manage this better. There were a few examples where

the relationship with the family and working with trauma and abuse were acknowledged as stressful aspects of the role.

- Other major factors that impact on my role

This theme captures other major factors apart from performance that impact on social workers and managers role. Covid was discussed by most participants as having an impact on the social work tasks and ways of working. Cuts to services were also mentioned by one participant.

Following review, this theme might need further review, as it appears there is less substance to this theme.

- Power – external

This theme emerged from codes around the 'organisation in the mind' and what might be a 'higher' perceived power that was heavily influencing social workers day-to-day work. This was often referred to as Ofsted, but also includes the media and performance clinics that are held by senior management in the Local Authority. Many social workers acknowledged that these clinics put pressure on managers to explain their teams data performance.

- Data is helpful, part of job, important.

Many participants talked about the benefits that performance has on their role. This theme largely depicts performance as data as a helpful tool to keep social workers and managers on track of their caseload, ensure children were seen in statutory timescales, keeping children safe from harm by sharing information and ensuring files were up-to-date with information for other teams. There was some discussion around clarity of timescales being helpful for families and disallowing drift, as well as recording providing evidence of good practice. The code 'I understand why data is needed' is included in this theme, however, this was often followed by a 'but…' and therefore this needs to be taken account of in the analysis.

Here is a picture of the coding map following review:
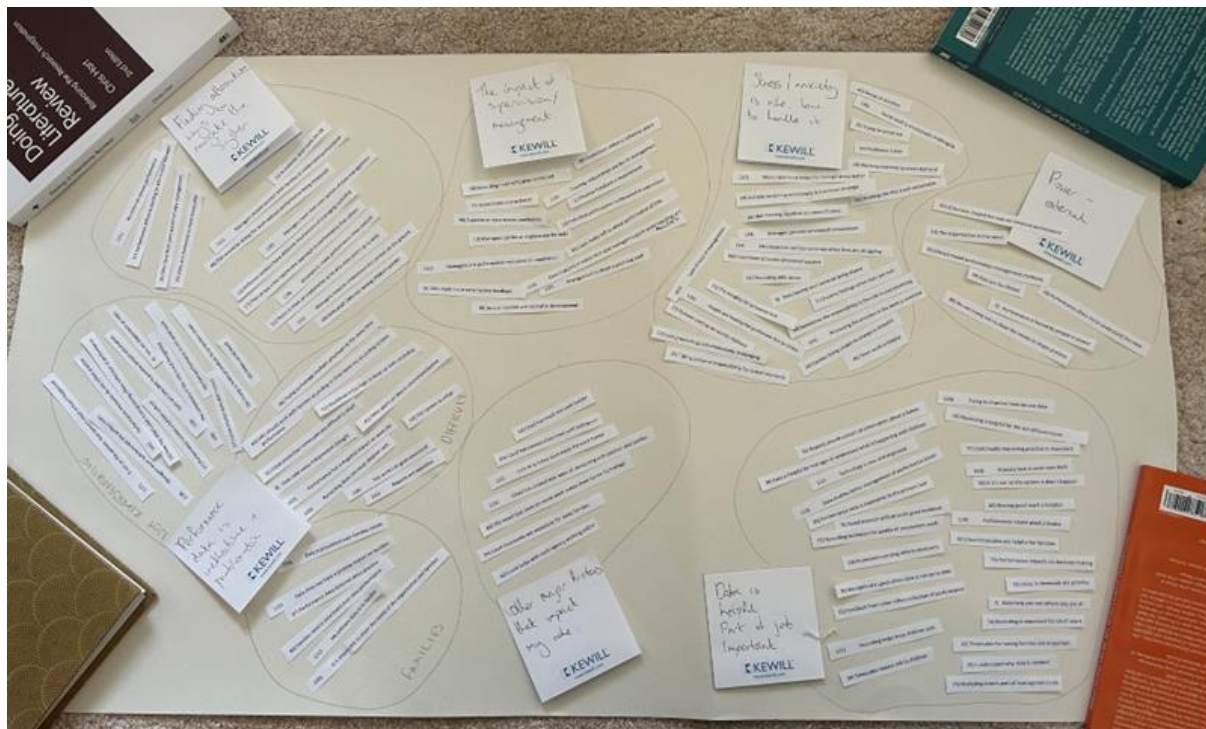
Following this review of themes, there are two areas that I am still not confident in. The theme 'other major factors that impact my role' appears to be less significant and only has 7 codes. There are still two significant codes that do not fit with the current themes which are 'stats are both good and bad' and 'tension in the primary task'.

Naming the themes

- Finding alternative ways to navigate the system – Navigating the system

- Performance data is ineffective and problematic – Performance is problematic

With 3 subthemes

- Performance data does not represent social workers work – Performance is not social work

- Performance data is too difficult for social workers to manage consistently – Managing data is an impossible task

- Performance data has a negative impact on families – Families not data

- The impact of supervision / management – Supervision has a big impact

- Stress and anxiety is rife, how to manage it – Managing organisational and vicarious trauma

- Other major factors that impact on my role – It's not all about performance

- Power – external – The impact of externals forces

- Data is helpful, part of job, important. – Performance is an important part of social work

Revised theme names:

- Navigating the system

- Performance is problematic

3 subthemes

-Performance is not social work

-Managing data is an impossible task

-Families not data

- Supervision has a big impact

- Managing organisational and vicarious trauma

- It's not all about performance

- The impact of externals forces

- Performance is an important part of social work

Following the development of themes, the data was reviewed again to extract some of the most prominent data extracts where the theme was most apparent.

<u>Navigating the system</u>

This theme refers to how social workers and managers navigate a data system that does not work for them. Many creative ways of alternatively recording, or finding ways around the system, were identified within the data from both social workers and managers. Sometimes, this system had a positive impact, such as social workers feeling more in control and on top of their workload. Sometimes this had a negative impact, such as only doing a very short visit to meet timescales as opposed to doing meaningful work with the family.

Codes (13):

11. There is often an explanation as to why stats aren't up to date

17. This LA has a less oppressive approach to performance than others

25. Visits are shortened to meet timescales

26. Stats push SWs into seeing children quicker

34) SWs have their own system of data management

37. Performance differs according to who is your manager

48. SWs would be doing the work without performance being measured

52. Different workers have different mechanisms of managing recording

72. Sometimes short visits are OK

115) Managers need to understand the context on the ground

121)Re-referrals inform performance

128) Attempts to make performance child-centred

130) Managers have their own system of data management

<u>Performance is problematic</u>

3 subthemes

Performance is not social work

This subtheme can be seen throughout the data set, in that it was widely accepted that what was seen on the system is only a small segment of what social workers do and does not represent the complexity involved in the work. There was concern from some practitioners that the families were being pigeon-holed into segments of the system in order to meet the organisational requirements. Furthermore, that what was on the system was often wildly different to work being done on the ground with no resolution to rectifying this, for example, the number of attempted visits is not recorded or rewarded in the same way as a recorded visit, despite this often being outside of the socials workers control.

Codes (13):

6.   You are dependent on stats

16. How the child's plan is progressing offers reflection of performance

27. Unsuccessful visits don't count

40) Data performance is not social work

43. Robot social work

47) Performance creates a tickbox culture

95. Trying to make procedure fit to families needs

101.   Performance measures do not reflect practice

108.   The complexity of the role is not recognised

116.   Stats are only able to provide limited information

117.   If not on the system, that doesn't mean it hasn't happened

118.   Managers must look beneath the surface stats

122.   Managers should connect with families to understand performance

Managing data is an impossible task

This subtheme found that, in connection with the above, social workers are trying to manage a system which is almost impossible to manage at times. This involves repetition of recording

information for no logical reason, counterproductive use of social workers time, and trying to manage timescales that are too difficult to meet.

Codes (11):

8. Performance creates a tickbox culture

10)The system is unfair

41. Time spent on data is counterproductive

44) SWs should work with families according to their need not according to data performance

51) Workload is too high to keep up with recording

91) Child protection timescales are difficult to meet

96) Trying to manage multiple processes at the same time

105. Reports are repetitive

106. Recording does not keep children safe

107. Performance has a negative impact on work life

109. The work I do goes unnoticed

Families not data

This subtheme held only 6 codes and therefore has the least amount of codes in the subtheme. Some social workers identified that data performance does not have a positive impact on families. There was a push for family's needs, rather than performance data, to be the driver of practice whilst at the same time recognising that data is often prioritised over needs unfairly.

Codes (6):

97. Performance data does not drive practice

99. Families need is prioritised over data performance

100.   It is impossible to meet the needs of the organisation and families

104.   Data is prioritised over families needs

112) Data does not have a positive impact on families

131) My primary duty is to families

Supervision has a big impact

This theme was seen throughout the data set and refers to the impact that social workers relationship with their manager, experience of different styles of management and experience of supervision has on performance. Often supervision was seen as a supportive space but there was also a dominant view that this was a case-management tool which was largely used to set timescales and monitor them. Many participants wanted most feedback on their practice and the absence of this sometimes felt like their work was unnoticed, or that they did not know how they were performing. The new annual review was largely discussed in positive terms.

Codes: (16)

13) Managers ask for an explanation for stats

14. Individual performance is discussed in supervision

18) SWs want more constructive feedback

31) Positive feedback is motivational

38. Recording incorrectly goes unnoticed

39. Annual reviews are helpful to development

55. Supervision is case-based

56. Supervision determines timeframes

67) Care proceedings are emotionally challenging

80. Supervision offers a reflective space

81. Case audits tell us about performance of SWs

102) Lack of trust in management

119.   Conversations in supervision give managers a good understanding of families

125.   Management is about supporting staff

126) Trusting relationships are key to management

132.   Managers are performance measured on supervision

Managing organisational and vicarious trauma

Stress and anxiety, or defences developed as a result of this were present throughout the data. There was a significant view that recording of information add more stress and anxiety to the social work role. Some practitioners had developed strong emotional defences from this, working hard to avoid 'being in the red' but trying to deny any emotional response when they were. Most felt overwhelmed by the amount of paperwork that had to be completed at some point. There was a general sense that the 'naughty' list meant you were not performing, even where there was a logical response for being so that is not recognised by the 'system', such as the family not being home when visiting. There were other examples of humour and team work that supported social workers to manage this better. There were a few examples where the relationship with the family and working with trauma and abuse were acknowledged as stressful aspects of the role.

Codes (21):

9.   Stats having your name on bring shame

21) Positive feelings when stats are met

22. Humour used as an anxiety defence

28. Working overtime to meet demand

29)Taking personal responsibility for system demands

30. Trying to avoid red

45)Denial of emotion

46) Team work is helpful

62) Recording adds stress

63)Working like this is not sustainable

64)Resilience is key

66) Supervision provides emotional support

68)Sometimes the responsibility in the role is overwhelming

69)Actively detaching emotionally is a survival strategy

98) Not meeting deadline is a cause of stress

110) People are leaving the profession due to stress

123) Managers provide emotional containment

124)Processing the emotion in the work is essential

134) SWs need the confidence to say when they are struggling

136)Social work is emotionally challenging

137)More experience helps me manage stress better

It's not all about performance

This theme captures other major factors apart from performance that impact on social workers and managers role. Covid was discussed by most participants as having an impact on the social work tasks and ways of working. Cuts to services were also mentioned by one participant.

Following review, this theme might need further review, as it appears there is less substance to this theme.

Codes (7):

54)Covid has made the work harder

65)Covid has created disconnect with colleagues

86)The belief that stats are social work makes them harder to manage

90)Covid helps with multi-agency working online

94)Court timescales are unrealistic for some families

111)Cuts to services have made the work harder

133)Covid has created new ways of connecting with children and families

The impact of externals forces

This theme emerged from codes around the 'organisation in the mind' and what might be a 'higher' perceived power that was heavily influencing social workers day-to-day work. This was often referred to as Ofsted, but also includes the media and performance clinics that are held by senior management in the Local Authority. Many social workers acknowledged that these clinics put pressure on managers to explain their teams data performance.

Codes (7):

3. Performance is forced by people in power

20. Stats are for Ofsted

49)Performance clinics try to understand the data

53)The organization in the mind

82)Ofsted model performance management methods

87)SCRs have shaped the way we measure performance

88. We are trying not to allow the media to shape practice

Performance is an important part of social work

Many participants talked about the benefits that performance has on their role. This theme largely depicts performance as data as a helpful tool to keep social workers and managers on track of their caseload, ensure children were seen in statutory timescales, keeping children

safe from harm by sharing information and ensuring files were up-to-date with information for other teams. There was some discussion around clarity of timescales being helpful for families and disallowing drift, as well as recording providing evidence of good practice. The code 'I understand why data is needed' is included in this theme, however, this was often followed by a 'but…' and therefore this needs to be taken account of in the analysis.

Codes (26):

7)Stats help you see where you are at

15)Feedback from other offers reflection of performance

19)I understand why data is needed

32) Visits in timescale are priority

36)Recording is helpful for the out of hours team

42)Timescales for seeing families are important

50)If it's not on the system it didn't happen

58)Timescales reduce risk to children

59)Protected recording time is necessary

60)Sharing good work is helpful

73) Recording increases the quality of assessment work

74) Recording is important for court work

75) Good practice skills provide good evidence

76) Performance impacts on decision making

77)Continually improving practice is important

78)Data is helpful for manager to understand what is happening with children

79)Analysing data is part of management role

83)Performance data is imperative to the primary task

84)Managers are upset when data is not up to date

92)Clear timescales are helpful for families

93)Reports should contain all information about a family

103)Primary task is cover own back

113)Technology is new and improved

114)Data enables better management of performance issues

120)Trying to improve how we use data

129)Performance create playful rivalry

135)Recording helps keep children safe

At a research seminar on 09.02.2023, I discussed the themes developed with the group. Specifically, I shared my struggles with understanding the theme 'it's not all about performance', as it felt there was little substance to this but that it was an important aspect of the data. A member of the seminar suggested that this was more to do with the socio-political context in which social workers operate. Having not considered this theme in this light, this was a helpful contribution and following discussion I decided to merge this theme with the theme 'The impact of external forces', which largely draws on similar ideas.

The newly merged theme therefore looks like this:

The impact of externals forces

This theme emerged from considerations of the socio-political context in which social workers are practicing. At times, this might be a 'higher' perceived power, or the 'organization in the mind' that was heavily influencing social workers day-to-day work. This was often referred to as Ofsted, but also includes the media and performance clinics that are held by senior management in the Local Authority. Major social factors that impact on social workers and managers roles are included. Covid was discussed by most participants as having an impact on the social work tasks and ways of working and cuts to services were also mentioned by one participant.

Codes (14):

4. Performance is forced by people in power

21. Stats are for Ofsted

49) Performance clinics try to understand the data

53) The organization in the mind

54) Covid has made the work harder

65) Covid has created disconnect with colleagues

82) Ofsted model performance management methods

86) The belief that stats are social work makes them harder to manage

87) SCRs have shaped the way we measure performance

89. We are trying not to allow the media to shape practice

90) Covid helps with multi-agency working online

94) Court timescales are unrealistic for some families

111) Cuts to services have made the work harder

133) Covid has created new ways of connecting with children and families

We also discussed the dichotomous relationship most participants felt in relation to the issue of performance, with this often acting as both a helpful security and also a hindrance to good practice. There remain two important codes that do not 'fit' in the 'split' themes developed here, as these place performance as <u>either</u> helpful or not and thus do not currently speak to this complexity well enough. This will therefore be discussed within the analysis, including a graph plotting where each social worker 'sits' on the axis.

Appendix 6 – Initial core tensions identified in the data with scoring of participants experience

- Where the participant is feels performance is most helpful in their work is scored at 0 and is least helpful to their work is scored at 10, where does this participant score?

- Where the participant feels performance provides the most meaning to their work is scored at 0 and is meaningless to their work is scored at 10, where does this participant score?

- Where the participant is feels performance makes their work with families entirely visible is scored 0 and entirely invisible is scored at 10, where does this participant score?

- Where the participant is feels they need to expose social workers to performance data is scored at 0 and they need to protect social workers from performance data is scored at 10, where does this participant score?

The participants scored the following using these scales:

	Susan	Mary	Adam	David	Emma	Rachael	Anna	Eleanor
Most helpful (0) least helpful (10)	8	8	6/7	0	3	10	7	2
Most meaning (0)	7	8	8	1	9	10	8	3

meaningless (10)								
Entirely visible (0) entirely invisible (10)	4	5	6	n/a	5	10	n/a	2
Expose (0) protect (10)	n/a	n/a	n/a	5	n/a	n/a	7	n/a