POWER, DISCOURSE AND PRIVILEGE:

POWER RELATIONS IN THE FIELD OF CHILD PROTECTION.

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ABSTRACT

The aim of this project is to consider Michel Foucault's concept of disciplinary power and his idea of knowledge-power in a specific site of power relations. The site selected, the field of child protection, affords a study of various forms of power operating at different levels and within different institutionalised contexts, against a contemporary background of cultural change and discontinuities. The discourses and discursive practices of privileged agents in the human sciences, and the privileging effects of institutionalised rules, are analysed and discussed. It is argued that the market-driven discourse of resource management is privileged over the discourses of the human sciences; that the privileged knowledge/truths of the human sciences are increasingly being challenged and opposed, through the ubiquitous discourses of the media, by organized alliances of subjects, and by a population generally less compliant than in previous generations; and that the exercise of disciplinary power by expert agents is being increasingly regulated by the State through the privileged rules of the law. The conclusion reached is that privilege and resources are significant factors in power relations and that specialised knowledge is only one of a range of privileging resources that are always in play in a complex field of force relations.

The methodology used draws on research into theories of power, on analyses of power relations and discursive practices, and case studies. It incorporates theory with an experiential perspective derived from 18 years employment in local authority social work and management. The discourses and discursive practices of social work intersect with theoretical discourses; and first-person narratives from the author's work experience are used as illustrations.

In chapter 1, Foucault's theories of discourse, disciplinary power and knowledge-power are introduced and critically reviewed. Theories of organizational power and the notion of agency are considered in chapter 2. Chapter 3 reviews Foucault's idea of bio-power, the historical intervention of the State and its agents in the family, and the changing concept of childhood. Changes in the family, and professional, legal and managerial discourses intersecting in the field of child protection, are discussed in chapter 4.

A case study is used in chapter 5 to illustrate and analyse power operating in the field of child protection in 1987, prior to the Children Act 1989. The privileging effects of specialised knowledge and other factors affecting power relations are identified. In chapter 6, sections of the text of the Children Act 1989 are analysed to identify the ways in which the discourse of the law now seeks to adress the power imbalances between parents, children and the professional agents. The ambiguities of its language and the way it privileges the agents with the right to exercise discretion in their practices are discussed. The power of the agents, the politics of child protection, and media power are considered in chapter 7. The discourses of social work and its historical development as part of the state apparatus of discipline and control are discussed in chapter 8. A case study is used to illustrate power relations among social workers and other professional agents in the field of child protection, and to identify key privileging factors in the operation of power, among them the organizational mechanisms and statutory instruments that empower the agents.

Chapter 9 summarises the main points in the preceding chapters and discusses the ways in which privileged knowledge-power is regulated and increasingly resisted in contemporary society.

CONTENTS

PREFACE

This thesis explores the concept of power and the ways in which it operates; and it provides a detailed analysis of power relations operating in a specific site. It cross-references the disciplines of social work and cultural studies, using a methodology derived from the ideas of the French philosopher Michel Foucault. His theoretical concepts are applied to an analysis of the power relations, the discourses and discursive practices of professional social work and related disciplines. While it is focussed on the field of child protection and social work in the public sector, the methodology could be applied to other sites and other professional disciplines, throwing new light on to their practices. My demonstration of the practical application of the theoretical concepts could be of interest also to students of cultural studies.

Coming from two decades of local authority social work to the discipline of cultural studies and particularly to the work of Michel Foucault, opened up for me a new way of thinking about the practices of social workers and the complex networks of power relations within which they become enmeshed. Foucault's ideas on power relations provided me with the conceptual tools with which to undertake a critical analysis of the ways in which power, in its various forms, operates in specific sites of social work practice. I found Foucault's notions of 'knowledge-power,' 'disciplinary power' and 'bio-power' and his concept of specialised discourse immediately applicable to an analysis of social work practices, social work language, and the currently shifting power-base of local authority social work.

While it is inescapable that social workers must be generally aware of power issues in the environments within which they work and in their interactions with clients, it has not traditionally been part of social work practice to analyse these power relations and power networks and to apply the lessons of such analysis to the practices. In the rapidly changing "post-modern" world of fragmentation and discontinuities and the shrinking of welfare provision into the dominant market culture, it is of particular importance that social workers should be aware of how they are positioned in the various power-games within which they, and those who use or wish to use their services, are being enrolled.

Key concepts and selected extracts from the work of Michel Foucault provided the starting point for my thesis, as I recognised their relevance to my own experiences in local authority social work and management. It was readily clear that Foucault's ideas could be directly applied in the context of a professional/client social work relationship. I would explore whether they might be usefully applied to an in-depth study of more complex inter-personal and inter-disciplinary power relations.

It seemed questionable, however, whether the Foucauldian approach would provide the whole answer to understanding power relations. There was no reason why it should nor did Foucault assert that he had written the last word on the subject. It is, in fact, evident from his writings and the transcripts of lectures and interviews that his

ideas on the difficult and elusive concept of power were continually in process.

It proved useful to research into other theories of power and set them alongside those of Foucault. Given the organizational context of local authority social work, linking organizational theories of power with Foucault's theories was a productive next step. I had already some knowledge of organizational theories from management-training and I could again draw on my direct experience of the culture and structures of management and the complex power relations encompassing the social worker as manager and local government officer. Adding this other dimension to the conceptual framework usefully supplemented the ideas of Michel Foucault, which continued to be the principal tools for my exploration into the operation of power.

Since the focus of my thesis was to be on the site of child protection, the move from theory to its application led first to a consideration of Foucault's notion of 'bio-power,' the intervention of the state, through its agencies, in the family and in the upbringing and care of children; and a discussion of the historical and contemporary changes in the concept of family and childhood. Against this background, with the Cleveland child abuse Inquiry still fresh in mind and with the implementation of the Children Act 1989 pending, I developed the structure and developmental sequence of my thesis. I would use the

Report of the Cleveland Inquiry as a case study of power relations and follow this with an analysis of sections of the Children Act 1989, recognising this as a direct outcome of the Cleveland affair. This would lead me to a discussion of the power of the professional agents within the context of changing cultural norms and the emergence of the sexual abuse of children as a widespread social phenomenon. I would then call on my personal experiences as a local authority social worker to analyse power relations from the "inside," using the theoretical concepts I had applied to my other analyses and case studies.

Identifying and analysing the discourses and discursive practices subsumed in the official report of the Inquiry into Child abuse in Cleveland in 1987 revealed it to be riddled with a multiplicity of power issues that needed to be recognised and addressed; not least in the light of emerging evidence that the lessons of the Cleveland affair, as those of earlier child abuse inquiries, had not been learned. The theoretical concepts applied to this analysis opened up a new way of understanding the forms of power and privilege operating in this site of complex and shifting power relations.

Following this, a critical overview of sections of the text of the Children Act 1989 revealed ambiguities in its language which have unresolved implications for power relations among the statutory agents as well as between the agents as providers of services and the potential recipients of services.

From this I proceeded to an analysis of the forms of power of the professional agents; those authorised by their specialised qualifications and knowledge to exercise disciplinary power over others, and those authorised also by statute with the enforceable right to exercise power – social workers employed in the public sector, with their ambiguous complex identity as agents of the local authority and of the law.

This brought me to a detailed exploration of the forms of power and the power struggles in which local authority social workers are enmeshed; through an analysis of their discourses and discursive practices and the institutionalised rules and systems that regulate the practices, and then through a detailed case study of a child abuse case conference. This model was chosen because the case conference arena is a frequent site of power struggles between professional agents as well as between professional agents and clients; because it is recognisable as an apparatus for the exercise of power and as a mechanism of control; and because it encompasses a multiplicity of power processes at work. This was also a personal exploration that I needed to pursue, from which I have learned much and which may be of use to other social workers and their professional colleagues. Applying the theoretical concepts enabled me to undertake a new kind of analysis that provided a greater understanding of the multiple forces at work in this complex field of power relations.

My study has demonstrated how, within the context of rapid political, ideological and cultural changes, professional agents, among them

social workers, are not only increasingly dominated by the resource managers but are also faced with oppositional forces resisting their professional discourses and their 'knowledge-power.' Gender issues have inevitably been recurring themes throughout my thesis as they are inescapably central to many of the power struggles in contemporary society and, specifically, in relation to child sexual abuse; and they are a significant issue for many of us in social work, with its disproportionate number of male managers, particularly at the most senior levels, in what is a predominantly female workforce.

My thesis has been not only an exploration of the concept of power but also a productive way of applying theoretical concepts, notably those of Michel Foucault, to a better understanding of power relations in a specific site in the "real world" of social work.

1. INTRODUCTION.

MICHEL FOUCAULT'S CONCEPT OF DISCOURSE. KNOWLEDGE/POWER.

'The word *power* is apt to lead to a number of
misunderstandings - misunderstandings with respect to
its nature, its form, and its unity.' (Foucault 1979, p.92).

The French philosopher Michel Foucault has afforded us new insights into understanding power. He has provided us with a language, the language of discourse, with which to think and speak about power and analyse the ways in which it operates. From his historical study of power and how it has changed over the centuries, he has argued that the old received ideas are no longer relevant in the context of Western societies in the late 20th century. He conceptualises power as a 'multiple and mobile field of force relations' in which we are all enmeshed, both the 'vehicles' of power and its objects.

There is no single unitary definition of power. As a concept it is complex, elusive and transitory, over-determined by historical and locational contexts and contemporary truths. It has connotations of sovereignty, authority, legitimacy, influence. It operates at many and diverse levels within the social fabric of societies. Many theorists at different historical periods have attempted to analyse or define power - 'this most "contested" of concepts.' (Clegg 1989, p.xv).

Stewart R. Clegg posits that a 'modernist' view of power has its roots in Hobbes' 17th century ideas of sovereignty, a unitary conception of power, the supreme power of the sovereign and the identification of each subject with the sovereign; while 'post-modern' analyses of

power are closer to Machiavelli's 16th century emphasis on strategies and organization, on alliances, negotiations and expedient game-playing; power not perceived as a generalizing concept but embodied in many diverse forms of practice. (ibid pp.3-7; 21-38). He perceives Machiavelli's interpretation of power deriving from the political world in which he lived and studied 'a world of flux, discontinuity, intrigue and illusion ... ' (ibid p.32), a description that resonates in the post-modern world of national and international fragmentation and discontinuities, new alliances, myths and intrigues; the world within which Foucault has posited his theory of power relations.

Foucault argues that the new methods of power operate not through a central locus of 'sovereignty' but through strategies and techniques of control and normalization, through what he calls 'bio-power,' mechanisms of surveillance and control embodied in the state apparatuses and in the formulations of the law. This form of power, 'disciplinary power,' is directed to the disciplining of the body and the "body" of the population and the construction of a new kind of subjectivity. He posits that power must be understood in the first instance as a multiplicity of force relations. (Foucault 1979, p.92). He argues that power is everywhere, it comes from everywhere; 'it is the name that one attributes to a complex strategical situation in a particular society ... ' (ibid pp.93). He proposes 'a conception of power which replaces the privilege of the law ... the privilege of sovereignty with the analysis of a multiple and mobile field of force relations ... The strategical model, rather than the model based on law.' (ibid p.102).

Foucault is not concerned with the essence of power, what it "is," but about how it operates and about the effects of power relations. He argues that in any society there are multiple relations of power which 'permeate, characterise and constitute the social body.' These relations of power become established through the production of certain 'discourses of truth,' notably the specialised discourses of the human sciences. He argues against the notion of a legitimate right of sovereign power, the right of the king; and he proposes instead the 'right' of subjects in their mutual relations. But he finds that a theory of sovereignty persists which is irrelevant in the context of contemporary Western society: that 'the representation of power has remained under the spell of monarchy. ... we still have not cut off the head of the king.' (ibid pp.88/89).

Foucault argues that we must base our analysis of power on the study and tactics of domination. In order to understand power in the West we must free ourselves from perceiving power in terms of the obedience of the subject to the sovereign. Power operates in and through specialised discourses, the rules that govern and regulate them, and the discursive practices through which a new order of disciplinary power and subjectivity has replaced sovereign power and the sovereign/subject relationship. Power, he says, is not the possession of one individual or one group, not a possession that the one has and the other lacks. Power is everywhere, multi-directional, coming from everywhere.

I will argue that, allowing this, allowing that power is inextricably interwoven into the complex fabric of the social formation, "it" can nevertheless, in certain circumstances, be ascribed or acquired and

made use of, even if not possessed in the sense of being totally "owned."

For Foucault power is the effect of social relations. It has no essence, 'it exists only when it is put into action, ... a mode of action which does not act directly and immediately on others. Instead, it acts upon their actions.' (Foucault 1982, pp.219/220). Power is not 'in' individuals but is within the social structure, it is '"always already there,"' one is never '"outside"' it. (Foucault 1980 (iii), p.141). Power as such does not exist. It is an effect of the operation of social relationships between groups and between individuals; and there are as many forms of power as there are types of relationships.

It is arguable that power does exist, in its many forms, as a "capacity" which is always in action since it is everywhere within the social structure, thus always in a relation with all of us as subjects. It is perhaps more accurate to say that it can only be *seen* to exist when it is operating within a specific environment and context, in a specific "site."

Foucault is concerned with the privileging effects of specialised knowledge, finding power and knowledge inter-connected in a mutually generative fashion. He argues that 'power produces knowledge ... that power and knowledge directly imply one another; that there is no power relation without the correlative constitution of a field of knowledge, nor any knowledge that does not presuppose and constitute at the same time power relations.' (Foucault 1977, p.27). He finds power operating through relations of domination and subjugation - 'multiple forms of subjugation that have a place and

function within the social organism' constituting the subjectivity of subjects (Foucault 1986, pp.231/232); domination operating through techniques and instruments of control and through a whole complex of apparatuses, institutions and regulations. He examines the ways in which language is used in the production of serious 'statements,' 'true' discourses, (Foucault 1979; 1980(ii)), the expert utterances of professionals. Statements gain their authority from the rules that govern them, from the contexts within which they operate, and from the qualifications that authorise their expert speakers – those who are authorised through their specialised disciplines to speak the language of serious meaning. Statements are 'constituted as serious by the current rules of a specific truth game ... ' (Dreyfus and Rabinow 1982, p.54); rules through which 'disciplinary power' is exercised, truth games which are constituted and determined within the specialised discourses of expert speakers.

Foucault uses the term 'discipline' both in the sense of "to discipline" and "the" disciplines; and the 'domain' of the disciplines are the human sciences, the 'dubious' social sciences with, for Foucault, their questionable status as sciences. Through the discourses and discursive practices of these specialised disciplines and their 'technologies of normalization,' truth comes to be attributed to certain concepts and theories, constructions of particular epochs. There are different truths at different historical times, linked with systems of power which produce and 'extend' them.

By critically examining the truths attributed by the discourses of medicine and psychiatry to the concept of madness, Foucault has demonstrated how the language and the practices of an earlier age

have subsequently been regarded and treated as meaningless or untrue; and we can see how the "truth" of madness and the meaning attributed to certain behaviours have changed significantly even in the last decade. The serious statements of professional experts and the rules that formerly led to the labelling and incarceration of the "mad" have changed. A new discursive strategy scatters the "mentally ill" to the winds of "community care," those who would formerly have been designated and disciplined as mad.

It is arguable that the changes in this field owe as much to the discourse of common sense (questioning the inappropriate detention of so many not-mad people in psychiatric hospitals) and the dominant ideology of market forces (the economic benefits of closing down the large old psychiatric hospitals), as to the specialised discourses of the expert speakers. Changes in the operation of power in this context owe much also to extra-discursive factors such as the development of media technology through which such social issues are brought into the public arena. And these changes owe much also to the institutionalised privilege of the media and their campaigning discourses on social issues, informing and educating "public opinion" – on the abuse and degradation of people living in the old workhouse/institution-type hospitals, on miscarriages of justice etc. Power operates also through the missionary "drive" of individual campaigners for change and through the alliance-power of pressure groups. This is not to deny the knowledge-power of expert professional discourses but to suggest that other discourses, non-discursive factors and the motivations and missionary drive of autonomous subjects all play a part in power relations.

Foucault's theory of the operation of power has been criticised for its lack of any reference to drives and the potential for resistance by the autonomous subject. (Dews 1984, pp.90/92; Merquior 1985, p.116). Foucault posits that 'points of resistance are present everywhere in the power network' (Foucault 1979, p.95); 'there are no relations of power without resistances.' (Foucault 1980 (iii), p.142); and that power 'is exercised only over free subjects, and only insofar as they are free.' (Foucault 1982, p.221). Resistance is conceptualised in terms of this freedom, a 'field of possibilities ...', a range of behaviours available to the free subject. (ibid). But the mechanisms of resistance in Foucault's typology of power are not made clear. Peter Dews argues that Foucault's 'lack of any theory of drives' is conditioned by his hostility to psychoanalysis and that this relates also to his difficulty in defining what power operates against. (Dews 1984, pp.90,92). While Foucault posits that discourse can be an instrument of power and also a point of resistance and a starting point for an opposing strategy, (Foucault 1979, p.101) the boundary between power and resistance is not clear; whether and in what circumstances resistance may be seen as withholding of consent or itself a form of power, an oppositional force, a power/power relation.

Meaning is not fixed in discourse; new 'truths' emerge as the disciplines engender 'new domains of understanding.' We may deduce from Foucault's examples of the ways in which meanings change and myth is constructed, that the truth claims of modern medicine and psychiatry, and indeed those of other specialised discourses, can likewise be perceived as arbitrary, as myths constructed through the meanings ascribed to certain behaviours; the signifiers of the mad and the not-mad for example and the changing

discourse of mental illness; the signifiers of child abuse and the changing discourse of child protection.

The discourse of child abuse, and particularly child sexual abuse, constitutes one of the new 'truths' of the second half of this century, predicated in the discourses of psychiatry, medicine, preventive health care and social work. Professional discourses have shifted ground on the broad terrain of childhood sexuality, have moved away from the nineteenth century preoccupation with and censure of child masturbation and the mythology surrounding this, to the new truth of infant sexuality and the new truth of sexual abuse of children. As Foucault notes, 'It was necessary to wait until Freud for the discovery at last to be made that children have a sexuality.' (Foucault 1980 (ii), p.120); and he cites the powerful influence of Freudian discourse on the reconstruction of sex and sexuality and on the general 'proliferation of sexual discourses' in contemporary Western cultures.

In discourse, Foucault argues, power and knowledge are joined together, specifically in the privileged discourses of expert speakers. He perceives discourses as 'tactical elements or blocks operating in the field of force relations.' (Foucault 1979, pp.100/102). His concept of discourse is based on his notion of serious 'statements.' In Foucauldian terms, discourse is not formed in the common-sense language of everyday speech. The language of discourse is a form of specialised language use, the language of professional experts whose statements define particular fields of knowledge in which meaning and truth are constructed; language which only those appropriately qualified are authorised to speak.

Catherine Belsey posits discourse as 'a domain of language use, a particular way of talking (and writing and thinking);' and she argues that ideology is necessarily inscribed in discourse. 'No linguistic forms are ideologically innocent or neutral.' She associates the term ideology with common sense 'rather than with a set of doctrines or a coherent system of beliefs.' Her use of the term is derived from that of Althusser. She posits that ideology is inscribed in specific discourses in the sense that it is literally written or spoken in them. (Belsey 1980, pp.5/6). It is through language that we articulate experience; and it is through ideology that we represent to ourselves our experience of the world. For Belsey, language and ideology combine in discourse.

Louis Althusser's theory of 'ideology in general' maintains that ideology is the very condition of our experience of the world. It always exists in an apparatus and its practices. He argues that there is no practice except by and in an ideology, and that it is through ideology that individuals are constituted as subjects and as subjected beings. (Althusser 1977, pp.153-169). What is not accounted for in Althusser's deterministic formulation is the process of historical change and the production of ideas and meanings through which subjectivity is challenged, identity is re-constructed (women, gay people etc.) and societies reformulate themselves.

Foucault finds the notion of ideology 'difficult to make use of,' (Foucault 1980 (ii), p.118). The Marxist concept of ideology linked with the class struggle is inadequate for his theory of

knowledge/power and the truth claims of the specialised disciplines in the complex field of power relations. (Poster 1984, pp.83-87) He makes a somewhat ambiguous reference to the part played by ideology in the construction of the new mechanisms of power and apparatuses of knowledge:

> ... it is quite possible that the major mechanisms of power have been accompanied by ideological productions. There has, for example, probably been an ideology of education, an ideology of the monarchy, an ideology of parliamentary democracy etc.; but basically I do not believe that what has taken place can be said to be ideological. It is both much more and much less than ideology. It is the production of effective instruments for the formation and accumulation of knowledge – methods of observation, techniques of registration, procedures for investigation and research, apparatuses of control. All this means that power, when it is exercised through these subtle mechanisms, cannot but evolve, organise and put into circulation a knowledge, or rather apparatuses of knowledge, which are not ideological constructs. (Foucault 1980 (i), p.102)

It is arguable that the 'major mechanisms of power' have not merely 'been accompanied by ideological productions,' but are themselves rooted in the ideologies of the predominant culture, the contemporary beliefs and values through which such constructions and activities achieve legitimacy. For example, the discourse of child protection (on which this thesis is focussed), and the mechanisms through which power is exercised to protect children from abuse and neglect, are rooted in a predominant belief in the West of human rights; and in the growing recognition during the past few decades of the particular rights of the child (and other vulnerable subjects). While the truth of child abuse is material and is inscribed in the discourses of the human sciences, it is based on a liberal/humanistic ideological perception of the child as a subject dependent for his/her needs on

adults but not an object possessed by its parents or subject to the unqualified power of adults.

Discourses do not emerge in a value-free vacuum but within an environment of beliefs and values. Beliefs may be transient and illusory but they permeate the social fabric and infiltrate into power relations. If power always operates against resistance, which is 'present everywhere in the power network' (Foucault 1979, p.95) resistance may be seen as part of the ideological struggles that emerge from changing values, conflicting beliefs and conflicts of interests; the "rights" and interests of parents, for example, that may be in conflict with the rights and best interests of a child; the rights of children (and adults) with disabilities to lead as normal a life as possible, to be valued as persons rather than being separated out in order that they do not "offend" the public gaze. The power-truth-right model that Foucault proposes is founded in ideology in each of its component parts if not as a whole; and it is through ideological/hegemonic struggles that new 'truths' and new meanings emerge in the 'apparatuses of knowledge' and play a part in the mechanisms of power and resistance.

Michele Barrett proposes a 'post-Marxist' approach to the concept of ideology, based on the notion that the term ideology is a general term referring to 'a process of mystification, or misrepresentation...' that is 'not tied to any one presumed cause, or logic, of misrepresentation;' and which can apply to non-class social divisions. She argues the need for 'new and more precise concepts, rather than mobilising the dubious resonances of the old.' (Barrett 1991, pp.167/168), which manifestly do not "fit" the present historical moment of political,

cultural and economic discontinuities and contemporary power struggles.

The mechanisms of power and apparatuses of knowledge upon which Foucault focusses are the specialised discourses of the social sciences, which he calls the dubious sciences. He positions their 'disciplinary power,' their technologies of 'normalization,' their strategies and rules and the role they play, within the context of the economic, political and social issues of the present. He links them with the apparatuses of the state, the schools, the hospitals, the prisons, the sites of discipline and surveillance; the sites through which power, legitimised by the law, is exercised. He argues that law is an instrument of power; (Foucault 1980 (iii), p.141) but 'Power is quite different from and more complicated, dense and pervasive than a set of laws or a state apparatus.' (Foucault 1980 (iv), p.158). The notion of power is 'impoverished' if posed solely in terms of the state and its apparatuses.

The mechanisms of surveillance are everywhere, not only in the apparatuses of the state – from registration of the child at the time of birth and onwards – but also through the watchfulness which as citizens we are exhorted to exercise. We are expected to be watchful, for instance, for the ill-treatment of children; and we are expected to report our concerns to those who have specialised knowledge and who are authorised by their qualifications and by the rules of their professional and organizational discourses to operate disciplinary power, the power that acts upon the actions of others. We are all subject to this surveillance both formal and informal and to various forms of discipline and social control in our daily lives. On the

whole, although with some exceptions, we do not resist. It is questionable whether our acquiesence is necessarily an effect of the operation of power.

Edward W. Said argues that 'Foucault seemed to have been confused between the power of institutions to subjugate individuals and the fact that individual behaviour in society is frequently a matter of following rules and conventions.' (Said 1986, p.151). There are, moreover, vastly different intensities of discipline and vastly different impacts that disciplinary practices make on our autonomy and our freedom to follow or disregard the rules and conventions. Michael Walzer suggests that it is Foucault's claim that the discipline of a prison represents a continuation and intensification of what goes on in more ordinary places. He argues that while we all 'live in the eye of authority,' work to time schedules and routines, and are periodically subject to examination and inspection, this type of subjection and social control is not the same thing as being in prison. But 'Foucault tends systematically to underestimate the difference ...' (Walzer 1986, pp.58/59).

Foucault traces the historical shifts in the mechanisms of power from the sovereign total power of the feudal monarchy to the contemporary mechanisms of disciplinary power and surveillance. He sees this new mechanism of power working in the interests of the bourgeoisie, positing that the bourgeoisie is interested in power per se, interested in the complex of mechanisms through which power operates and the economic and political advantages that derive from the mechanisms of power, rather than caring about the subjects of power, the "human bodies" over which power is exercised. 'The bourgeoisie is

interested in power ... in the system of control of infantile sexuality, not in that phenomenon itself.'   Not interested either, he argues, in the phenomenon of delinquency and in the rehabilitation of delinquents, which economically has little importance; but interested in the 'complex of mechanisms with which delinquency is controlled, pursued, punished and reformed etc.' (Foucault 1986, p.237).   This position is questionable in the context of current public concerns about child protection,   particularly in relation to child sexual abuse, an abuse of power which occurs in all social classes.

Foucault posits that 'What is needed is a study of power ... at the point where it is in direct and immediate relationship with that which we can provisionally call its object, its target, its field of application, ... where it installs itself and produces its real effects.' (Foucault 1986, p.233).   Somewhat contradictorily, he argues that power 'is never localized here or there, never in anybody's hands, never appropriated as a commodity or piece of wealth.' (ibid p.234).   Yet, paradoxically, while it is everywhere it can be seen to be operating locally and episodically here and there in the "sites" where surveillance and discipline are exercised;   and if it is to be targetted and studied in its field of application it has, by implication, to be seen as being localized as well as everywhere, operating at certain times in certain places, and studied at the point where it produces its real effects.

It is the purpose of this project to undertake such a study, to identify the plurality of factors and the diversity of interests that intersect in the operation of power at this historical moment in one specific site focussed on one specific condition – that of child

protection in the public sphere. I will consider whether the knowledge/power theory is adequate; and whether power can be said to exist even when it is not in action. I will consider whose interests are being served in the field of child protection and the competing discourses which intersect in this site where power is 'in direct and immediate relationship with its target ... its field of application.'

Attempts to understand and analyse the concept of power are informed by the perspective within which it is studied and the ways in which meaning is constructed in the privileged language of specialised discourse – the perspectives and languages of psychology, sociology, organization theory, economic and political theory, military theory, etc; whether it is studied at the micro-level of interpersonal relations, or at the macro-level of political groupings, formal and informal, national or international. In this project the discourses and discursive languages of cultural studies and social work intersect to focus on the site of child protection and the operation of power in the public sphere. [1]

In the complex field of power relations, in specific sites, certain categories of privilege operate; privilege legitimized by the constitutional and legal framework of the particular society, privilege inscribed in the dominant cultural norms, privilege institutionalised in the state apparatuses and the law, privilege inscribed in the status accorded to the specialised discourses of professional experts, a status which is not fixed but which changes over time. Institutionalised privilege is inscribed in language, in the contemporary meanings and "truths" of oppositional signifiers such as

black/white, male/female, capital/labour, employer/employee etc. Privilege is institutionalised in organizational structures and regulations through which disciplinary power is exercised over the discursive practices of professional experts as well as over the subjects of their disciplinary power.

Foucault's focus on the discourses and discursive practices of expert speakers in the human sciences, privileged by their specialised knowledge, opens up a useful insight into the operation of power; but it is necessary to take into account the complex networks within which these function, the organizational structures and the effects of organizational ideology and culture on power relations (Mintzberg 1983, pp.151-162; pp.367-387). It is necessary also to consider the effects on power relations of leaderhip, missionary drive, and personal charisma, resource power and the power of sanctions. These are complex, unstable and interrelated variables; and the equilibrium or state of disequilibrium of the starting point affects the outcome of power relations. Parties, or "agents," operate from different power bases, themselves complex constructions – discursive, institutional, ideological, juridical – and they "own," or do not own, privileging variables such as authority, influence, position, resources (wealth, knowledge, etc.). As a consequence, the quality, the effects and pervasiveness of the outcomes of power relations must inevitably vary to an extent that makes it questionable whether it is meaningful to attempt to analyse power at all except in a specific context.

Power is loosely referred to in "everyday" language (the discourse of common sense), in political discourse, in the discourse of armed conflict, etc., when the "size" of the power relation and its effects

within each of these general contexts, let alone the specific, are widely disparate. Moreover, often what is being referred to is influence, manipulation, violence etc., the effects of power, subsumed under the umbrella term of "power." As Foucault posits, the use of the word is apt to lead to misunderstandings.

A generalised behaviourist approach to understanding power has been premised on the equation that A is able to get B to do something that B otherwise would not do, i.e. A achieves an intended effect in relation to B. (Dahl 1957, quoted in Lukes 1986, p.2). So, for example, a social worker or health visitor may get the parent of a child to behave in a way that he/she would otherwise not do; in the language of the Children Act 1989, to behave as a 'reasonable parent.' (the concept of the reasonable parent is discussed in chapter 6). But with this model there are problems. As Steven Lukes argues, not every change in behaviour within the relationship between A and B is necessarily an effect of power; it may derive from 'successful requests,' or 'persuasive advice,' or 'convincing arguments,' or there may be unintended consequences, etc. (Lukes 1986, pp.2/3). Charles Taylor criticises the behaviourist approach as 'sterile, just because acts of power are so heterogeneous; they absolutely do not admit of being described in such a homogeneous medium of culturally neutral makings and doings.' (Taylor 1986, p.89).

B's behaviour may be changed as a consequence of simply being influenced by A as a role model, B freely choosing to modify own behaviour to accord with his/her perception of the admired model, particularly if A is perceived as prestigious or charismatic. Moreover, there is a disequilibrium at the starting point of most, if

not all, social relations, whether of position, authority, assertiveness and other personal characteristics, command of language, ownership of resources etc., all of which are likely to have a bearing on the behaviour of A and B in terms both of influence and intended effects.

In the above example, the disequilibrium of the relationship can be seen immediately; the effect of the interaction between A and B is likely to be influenced not only by the personal characteristics of each of the parties but also by the privileged position and professional discourse of the social worker or health visitor. Both the latter are "expert speakers," drawing on specialised knowledge, organizational position, and ascribed – although not owned – power of sanctions. If the parent does not behave like a 'reasonable parent' (whatever that is), the social worker "has" the authority/power to institute disciplinary procedures. In the common sense discourse of the parent, "reasonable" may be defined differently from the meaning inscribed in the professional discourse of child care on which the social worker will draw, (Foucault's concept of normalization – the normal parent is reasonable); but the social worker has the privileged position of the expert speaker, the privileging resource of specialised knowledge, and the privileged status of the authorised agent. The effect of the struggle between these competing discourses is likely to be that the social worker will "discipline" the parent to act in a way that s/he otherwise would not do. This domination may be achieved through the expert power of discourse or through the power of threatened sanctions, the social worker's access to resources and disciplinary or punitive action; or the social worker may achieve this effect by suggestion and advice. The same effect could arguably be achieved by the parent's neighbour or friend through

suggestion and advice - through influence and the discourse of common sense; or through a threat to "report" the parent, invoking the institutionalised power of the "authorities."

There is a fine dividing line between influence and power. Gerhard Lenski argues that 'Institutionalized (sic) power takes many forms, but it always involves the possession of certain enforceable rights which increase one's capacity to carry out one's own will even in the face of opposition.' (Lenski 1986, p.250). But, notwithstanding the privilege of institutionalised authority, this outcome cannot be ensured. As long as either party has a freedom of choice without a threat of punishment or other sanction, it is likely that we are talking about influence or persuasion or manipulation rather than power. Lenski defines authority, within the category of institutionalised power, as 'the enforceable right to command others. Influence, by contrast, is much more subtle. It is the ability to manipulate the social situation of others, or their perception of it, by the exercise of one's resources and rights, thereby increasing the pressures on others to act in accordance with one's own wishes.' (ibid p250). The 'enforceable right to command others' and the 'exercise of resources' are key factors in power relations.

To the knowledge/power model we have to add the resource-power of sanctions working against resistance, and control of or access to material resources as in the power relation between the social worker and the parent. Without access to resources and the means of applying sanctions, the facility to act upon the actions of others is curtailed, the power relation is diminished or negated as the 'enforceable right' of institutionalised authority turns out to be not

enforceable.   For example, there have been occasions in my experience as a social worker (prior to the current child care legislation) when after a juvenile court had made a care order, it was then not possible to find somewhere suitable to place the child away from its home. The social worker having been authorised – given the power – by the court to remove the child from the care of its parents was unable to exercise this power through lack of (non-ownership of) resource power.   With resources always in short supply, it could sometimes be diffcult for a social worker to negotiate with the resource managers to reserve a place for a child beforehand in anticipation of a care order being made; or a reserved place could be taken over in an emergency – for an abandoned child, or a child removed from home on a place of safety order. Many social workers will have experienced feelings of powerlessness as they desperately tried to find a place for a child, locally or further afield, to spend the coming night.

Moreover, the "essence" of the power exercised by a social worker is enshrined in the discourse of the law which prescribes and legitimizes the actions of the social worker, and in the discourse of the agency which authorizes the social worker to act on its behalf.   The actions of the social worker operate within a hierarchal structure of power relations – Acts of Parliament, authority delegated to specific agencies, authorised individuals employed by those agencies acting according to their specialised discourses and the organizational discourses of the agency. A social worker who is not employed by an authorised agency may have the knowledge/power of specialised discourse but will not be able to act in the same kind of power relation as an employed authorised social worker; s/he will be in the

privileged position of knowing the rules and mechanisms of the discursive practices of statutory social work and will know how to set them in motion, but can only act directly through an authorised agency. And without "resources" being made available to its professional agents by an authorised agency, the agents are relatively powerless.

Similarly, there are limitations on the power of other "expert speakers." For example, a situation may arise when a psychiatrist diagnoses an individual as needing compulsory admission to hospital for psychiatric treatment; but the knowledge/power of the psychiatrist and the discursive practices of this specialised discipline are constrained by the availability of resources over which the psychiatrist may have little control. There is much contemporary evidence of individuals inappropriately incarcerated in prisons for whom admission to hospital for psychiatric treatment has been recommended in a psychiatrist's report to a court. This is a consequence of the limitations of psychiatric discourse in relation to "owning" the resource of hospital beds. The exercise of power by a psychiatrist is, moreover, constrained by the authorised power of Approved Social Workers who are specially trained and designated persons under the provisions of the Mental Health Act 1983 to safeguard the rights of an individual against unnecessary or inappropriate compulsory admission to a psychiatric hospital or unit. I have known instances of an Approved Social Worker disagreeing with a psychiatrist about the need for compulsory admisson – for example, when the person appears willing to go into hospital on a voluntary basis but the psychiatrist considers it unlikely that s/he will do so or will remain there. The Approved Social Worker may

interpret the person's statement of intent differently from the psychiatrist; or, without disputing the medical diagnosis which s/he is not qualified to do, the Approved Social worker may disagree with the psychiatrist that compulsory admission to hospital is necessary on any basis, having considered whether that is in the person's best interests and whether the person is a danger to him/herself or to other people. The Approved Social Worker has the responsibility for making an application to a hospital for admission to a psychiatric bed, taking account of both the medical situation and his/her assessment of the social circumstances. A power struggle may then operate between the psychiatrist and the Approved Social Worker, the rules of whose discourse are concerned with the rights of the individual not to be unnecessarily or inappropriately committed to hospital.

The operation of power is not necessarily oppressive in intention. It may work to protect the less powerful in the complex field of power relations. It can be productive in the sense that disciplinary power subjects "bodies" to health care, and to the rituals of teaching, training and disciplining 'with a view to making them productive.' (Sheridan 1980, p.219). Moreover, disciplinary action that may control, or punish, the actions of one party may be in the best interests of another. In the parent/child/social worker instance, the discursive practice of social work, itself subject to the regulatory and disciplinary procedures of the agency (discussed in chapter 8), may be seen as punishing or denying the rights of a parent, placing the parent in a position of subjugation and relative powerlessness. At the same time, the discourse of the social worker is primarily directed towards promoting the protection of a child who is relatively powerless and whose "rights" and best interests are perceived as not

being served by the parent. The problem here is the different ways in which meaning is ascribed to the notions of rights and responsibilities of the parent as well as rights of the child; issues which the Children Act 1989 addresses and which I will discuss below.

Lenski argues that institutionalised power is 'a socially acceptable form of power, which means that those who exercise it are less likely to be challenged and more likely to obtain popular support than are those who use force.' (Lenski 1986, pp.249/250). In many instances of institutionalised power relations, for 'popular support' we may read "consent" or hegemony. Bertrand Russell makes the point in relation to Prohibition in the United States, arguing that 'The ultimate power of the Law is the coercive power of the State... But ... the Law is almost powerless when it is not supported by public sentiment, as might be seen in the United States during Prohibition ... The degree of feeling in favour of the Law is one of the most important characteristics of a community.' (Russell 1986, pp.20/21). A measure that is universally unpopular may invert the field of power relations, as we have seen over the Conservative government's climb-down on the poll tax. As Michele Barrett points out, 'politicians have now learnt the lessons of the theorists of hegemony,' dropping issues when a strong tide of opinion moves against them. (Barrett 1991, p.155).

Public sentiment, reinforced by media discourses, can be seen to have entered the force field of power over the abuse of children, and over what is constructed in popular discourse as the abuse of power by social workers and paediatricians. It is questionable to what extent public sentiment informs the media or vice versa; and there is also a

question of why the media operate more powerfully over some social issues and less so over others; for example, in relation to homelessness. Notwithstanding the powerful impact of the "Cathy Come Home" television documentary drama and continuing occasional press coverage over this issue, the situation has deteriorated and homelessness, for a variety of reasons (including an increase in the number of one-person households, the splitting-up of families etc.) has increased over the past few decades and continues to increase. Media discourses predominantly focus on specific incidents of child abuse and social work "failures," as "news stories," rather than on the vast numbers of children living in the insecure circumstances of bed and breakfast accommodation or living on the streets or in squats; children who are being denied their rights and are "at risk" but who are not "news." These children are being abused by the "system" - by the mechanisms of power exercised by "the state," central government, that has tied the purse-strings of local authorities over spending capital receipts from the sale of council houses on new building; a hegemonic power relation between central government, local government and the body of the population, to which the population tacitly gives consent, notwithstanding the draining away of vast sums of its money in the costs, financial and social, of homelessness, bed and breakfast accommodation and temporary "lettings."

On the one hand, public sentiment and media coverage over miscarriages of justice are forcing powerful institutions - the courts, the police, - to review their discursive practices. On the other hand the "human right" of shelter is being denied to substantial numbers of citizens, including children for whom the child care legislation

purports to afford protection and the meeting of their 'needs.' In addition to the absolutely homeless and the virtually homeless living in bed and breakfast accommodation, people living in sub-standard housing that lacks the basic amenities and/or which is dripping with damp and condensation, are not enjoying the kind of "shelter" that contemporary knowledge/right/truth demands; the occupants of such accommodation can be said to be technically homeless in relation to such signifiers of "home" as a warm and healthy environment. This failure of the 'rule of right' brings back the point made by Foucault that the new mechanism of power works in the interests of the bourgeoisie (see above) who are interested in the complex of mechanisms through which power operates rather than caring about the subjects of power, the human bodies over whom power is exercised. It is however questionable who the bourgeoisie are in British society today. A disadvantaged "underclass" is more obvious than a clearly differentiated social grouping that can be classified as the bourgeoisie, many of whom have become the new poor of the 1990s.

In the power struggles that have emerged over the last few decades, we can see the increasing power of the centre, "the state," not only over the practices and resources of the local authorities but also over the discursive practices of the expert speakers. The power of psychiatrists, for example, is limited by the rules of the Mental Health Act 1983; the power of teachers is limited by the government's intervention in school curricula; the power of medical consultants is limited by the management structures and market mechanisms set up in the restructuring of the NHS; the power of social workers is limited by the rules of the Children Act 1989. I will consider below the impact of this last legislation on power relations in the field of

child protection and its effect on the discursive practices of the professional experts.

I will argue also that we cannot ignore the effects on power relations of ideology, and of charismatic leadership and the driving force that motivates the person. We saw this operating on a national scale during the "Thatcher years;" [2] and we are witnessing it operating on a global scale with the resurgence of national identities and the ideology of the nation state, finding expression through assertive/charismatic, albeit unstable, leadership. Moreover, new forms of power relations have emerged in the past few decades, not from the discourses of expert speakers but from grass-roots cultural changes and new forms of knowledge and technology that have, for example, freed women from their subjugation to child bearing; and new knowledge/right that has given new meaning to the signifiers of gender and skin colour and the rights of women and black people, the rights of people with disabilities, alternative life-styles and sexual orientations. This new knowledge, these new truths, new rights might be seen as resistance to the disciplinary power that Foucault posits; or alternatively might be seen as the emergence of new forms of oppositional power, a force stronger than resistance, in the 'mobile field' of multiple force relations.

Foucault argues that the state 'is far from being able to occupy the whole field of actual power relations,' (Foucault 1980 (ii), p.122). While this is manifestly the case, yet the power of the state in Britain in the last two decades has achieved a new dominance and a powerful resource of sanctions operating through the law to enforce the obedience of its subjects and their elected representatives (through

"capping" of local authority expenditure, for example); while also effectively diminishing the power of the specialised discourses of the human sciences and their expert speakers. Other categories of expert speakers, privileged by the political doctrines of the Conservative government, dominate power relations through their discourses of financial management. At the same time, new 'truths' and the 'serious speech acts' (Dreyfus and Rabinow 1982, p.48) of grass-roots intellectuals (Gramsci's organic intellectuals)[3] are constructing new force fields of power, new discourses and new discursive practices, and new subject identities for oppressed and subjugated categories of the population resisting the procedures of 'normalization.' Alliances of 'free subjects' are organizing oppositional forces against the disciplinary power of expert speakers in the human sciences, and against the institutionalised rules and organizational structures which privilege the discourses of the appointed agents of the state.

Foucault posits that 'discourse tansmits and produces power' (Foucault 1979, p.101); but disciplinary power operates over 'free subjects' not only through discourse and the discursive practices of expert agents. It operates also through the extra-discursive administrative procedures and hierarchichal structures of the institutions within which the agents function and to which the agents themselves are subject; the prisons, the schools, the hospitals, the social services departments of local authorities, etc. Foucault makes the point that it is 'perfectly legitimate' to analyse 'the relationship between power and freedom's refusal to submit ... by focusing on carefully defined institutions' which 'constitute a privileged point of observation;' providing that the analysis derives from the standpoint of power relations rather than from the standpoint of the institution.

(Foucault 1982, pp.221/222). While he argues that discipline may be identified neither with an institution nor with an apparatus (Foucault 1977, p.215), he cites the structural, procedural and ritual elements of such institutions as prisons, schools and hospitals as part of the 'technologies' of power and processes of 'normalization.' He instances the effects on internal power relations of the purpose-built architecture of institutions and their systematic organization and use of space; their techniques of classification, examination, assessment and correction; their procedures of time-tabling and the regulation of prescribed activities; their mechanisms of surveillance over bodies, which he finds exemplified in Bentham's Panopticon (Foucault 1977, pp.205-209), an architectural prototype 'polyvalent in its applications.'

Many of the organizational sites within which the technologies of disciplinary power operate do not provide the degree and type of surveillance afforded by such closed institutions as the prison or hospital. Surveillance of the population generally, and in the field of child protection on which this thesis is focussed, is dispersed among various agents and agencies, a network that encompasses us all. 'The judges of normality are present everywhere. We are in the society of the teacher-judge, the doctor-judge, the educator-judge, the "social-worker" judge; it is on them that the universal reign of the normative is based.' (Foucault 1977, p.304). But the discursive practices of these professional agents are regulated by the institutionalised technologies and other extra-discursive elements of the sites and organizations within which they operate.

Foucault maintains that the 'analysis of power relations within a society cannot be reduced to the study of a series of

institutions ... Power relations are rooted in the system of social networks.' (Foucault 1982, p.224). Without falling into a reductionist approach, I will argue that the exercise of disciplinary power is regulated by formal and informal structures, technologies and rules that constitute the organizational sites and institutions within which the agents, the judges of normality, operate. By drawing on theories of organizational power in the following chapter, I will add another dimension to the Foucauldian approach to power relations.

<u>Notes to Chapter 1:</u>

(1) Foucault's concept of discourse and his ideas on disciplinary power have rarely been applied to social work. Rojek et al. (<u>Social Work and Received Ideas</u>, (London, Routledge, 1988) have 'found it useful to explore social work relations through the prism of discourse theory' in their work with students, co-workers and clients. (ibid p.8) Drawing on the writings of Foucault and Lacan, they posit that 'discourse analysis produces a linguisitically grounded model of social work. It submits that there are no fixed or original meanings in social work. What a term signifies is defined negatively by its differences from other terms in the sign system ... The Unconscious plays a full part in this process.' (ibid p.137). Discourse analysis, they posit, 'is founded upon a particular view of the unconscious ...' (ibid p.123).

This is a useful but rather limited application of Foucault's complex ideas on power relations to the field of social work.

(2) The 1980s in Britain were politically dominated by the charismatic and assertive style of the Thatcher leadership; by her exercise of disciplinary power over Cabinet colleagues, the effects of which were the resignation of those ministers who resisted the truths of her discourses; by her drive to cultivate a dynamic "star" image, and the effects of this on her relationships with other "star" players, (Reagan and Gorbachov for example) in the field of international political relations; by her assertive rhetoric of "enterprise" and "self-reliance," and the long-term effects of this on the ideology of welfare

and on the identity of the individual subject, the recipients of state benefits reconstructed as "scroungers" for example.

(3) Antonio Gramsci argues that 'although one can speak of intellectuals, one cannot speak of non-intellectuals, because non-intellectuals do not exist ... There is no human activity from which every form of intellectual participation can be excluded:' He identifies, however, two 'important' categories of intellectuals, 'traditional' intellectuals and 'organic' intellectuals. The role of these intellectuals is to provide moral and intellectual leadership. Traditional intellectuals are those who occupy established positions in civil society. They 'represent an historical continuity uninterrupted even by the most complicated and radical changes in political and social forms.' The most typical category of the traditional intellectuals are the ecclesiastics, the moralists, philosophers, educationalists, etc. The organic intellectuals are created 'organically' by every social group or every new class that comes into existence, 'giving it homogeniety and an awareness of its own function not only in the economic but also in the social and political fields.' (Antonio Gramsci, Selections from the Prison Notebooks, edited and translated by Quintin Hoare and Geoffrey Nowell Smith. (London, Lawrence and Wishart, 1971) pp.4-9.

Barry Smart posits that 'although some of Foucault's ideas on intellectuals may initially seem to resemble those of Gramsci, there are important conceptual and political differences.' He argues that Foucault attributes no leading role to intellectuals; and that while they are occupied in the struggles and conflicts around the question

of truth, they occupy a secondary place in his analysis. Foucault distinguishes between two types of intellectual, 'the "universal" who speaks for and is the conscience of the collectivity and the "specific" who has a particular expertise in a specialized field of knowledge.' (Barry Smart, 'The Politics of Truth and the Problem of Hegemony,' in Foucault: A Critical Reader, edited by David Couzens Hoy (Oxford, Basil Blackwell, 1986), pp.165-166.

2. ORGANIZATIONAL POWER RELATIONS

The discursive practices of the agents of the state are legitimized by the statutory powers of the organizations which employ them, through which they are authorised to operate disciplinary power over subjects. While they are thus privileged as agents, they are themselves subject to the institutionalised disciplinary power and the regulatory discourses and discursive practices of their agencies; and subject also to the institutionalised disciplinary "rules" of civil society through which we are all constituted and "organized" as social beings.

Implicit in the notion of disciplinary power is organization, encompassing rules, structures, systems and strategies which through custom and practice become institutionalised. Foucault's focus on the prison and its apparatuses (Foucault 1977) provides one extreme example of the ways in which social practices and individual bodies become organized and institutionalised. But disciplinary power operates within and through a diversity of organizations 'as different and varied as the nations and societies of the world. They have differing cultures – sets of values and norms and beliefs – reflected in different structures and systems.' (Handy 1985, p.185).

As subjects in civil society, we are organized and we organize ourselves into a variety of social and work-related groupings, organizations and institutions, "freely" subjecting ourselves to the norms and the disciplinary practices of both the state and civil society; and we discipline ourselves in the way we organize (arrange)

our lives. We exist as social beings through our interactions with others and by learning the rules and norms, the disciplines, of social behaviour, initially within our families, later through our wider social contacts, through our schooling and work experiences. We are disciplined into social, economic and ideological subject positions within already constituted structures and power hierarchies, the institutions of the family, the education system, the health and welfare services, the law – Althusser's Ideological State Apparatuses through which, he posits, we are interpellated as subjects and as subjected beings in relations of dominance and subordination. (Althusser 1977).

We are variously privileged or disadvantaged, empowered or subjugated, by the culturally defined meanings of these positionings and by the resources they command – resources of knowledge, skill, wealth, property, alliances, and "traditional" values. So, for example, the "head of the household" traditionally predominantly male, has historically been a signifier of the power relation between men and women, parents and children, boys and girls within patriarchal and religion dominated societies; a signifier of power and authority and of the ownership of resources, human and material.

But while the institutions that are always already there exert a considerable influence in shaping "reality" in a way designed to perpetuate the reproduction of power relations and our subject-positions, the signifiers of subject-position and their meanings are not "fixed." They change over time. Subjectivity and identity are always in the process of reconstruction within a complex environment of socialisation, historical change, contradiction and struggle.

So, in the late 20th century while we are subject to the disciplinary power of an increasingly interventionist state, we are at the same time witnessing organized struggles against the institutionalised structures and disciplinary power of the state and its agents, and against the ideologies that inform their discourses and their discursive practices. Oppositional forces are challenging the discourse of the "traditional" nuclear family for example. Changes in the structure of the family, changes in the positioning of family members in relation to the "rule of the father" and changes in the disciplinary power of parents are coming from "everywhere." In the past few decades there has inceasingly been a recognition of the rights of children, of the rights of women over their bodies and their right not to suffer sexual harassment by men. Ideological struggles over sexuality and "family values," and organized counter-ideologies, that of the gay movement for example, have achieved some changes in the "rules" of social behaviour and the rules of law. Free subjects are resisting the disciplinary power of the state and its agents, constructing oppositional forces through alliances and organized resistance to challenge the received "truths" of the expert speakers.

The notion of organization implies a coming together of individuals whose interests are served, it may be assumed, in one way or another, by becoming 'members' (Mintzberg 1983; Clegg 1989) of a body (an organization) formed for a specific purpose or for the attainment of an objective, the working towards which will be regulated by a system of rules. Clegg posits that 'A conception of rules is essential to an adequate understanding of power.' (ibid p.18) and he argues strongly for 'the centrality of processes of power to

organization and of organization to processes of power.' (ibid p.20). Although organization theorists such as Charles B.Handy and Henry Mintzberg focus on large complex work organizations, Handy finds that there are things that are generally true of all organizations notwithstanding the 'multiplicity of variables impinging on any one organizational situation.' (Handy 1985, pp.9,13)

Even a small group may constitute an organization if it is regulated by rules that determine eligibility for membership based on commitment to a defined objective or "mission;" pressure groups or special interest groups for example. Some social groups are organized and their practices institutionalised to the extent that their rules deny membership to "outsiders." However, any group, insofar as the nature of a group essentially entails relationships, is likely to encompass informal social rules and a 'multiplicity of force relations' (Foucault), not least at the inter-personal micro level.

The individual interests of the members of an organization may not necessarily coincide with the operational goals or the 'mission' (Mintzberg 1983) of an organization. For Mintzberg 'mission describes the organization's basic function in society, in terms of the products and services it produces for its clients.' (ibid p.6); and he differentiates between the notion of mission and operational/non-operational goals (ibid p.6; pp.278-290). He posits 'a theory of oganizational power ... built on the premise that organizational behaviour is a power game in which various players, called *influencers*, seek to control the organization's decisions and actions.' (ibid p.22). He distinguishes between internal influencers, the full-time employees of the organization, and the external influencers who

are nonemployees ; and he posits a notion of 'stable systems of power' formed by 'internal coalitions' and 'external coalitions' of internal and external influencers. (ibid pp.26-30). The most powerful influencers, he argues, are rewarded by the right to dictate, or at least to affect the organization's most important decisions or strategies. The most powerful influencers are likely to be, although not exclusively, those individuals or groups vested with authority, with the "legitimate" power of office or position, and/or the control of resources. Office, authority and control of resources each have an extra-discursive dimension which structurally or materially as well as discursively informs and affects the practices of agents and agencies and their positioning in the force field of power relations.

Mintzberg links mission and membership with ideology in the organic development of organizations:

> Typically an organization is founded when a single prime mover ... identifies a mission - some product to be produced or service to be rendered in a special way - and collects a group around him to accomplish it. ... As the organization establishes itself, it makes decisions and takes actions which serve as commitments and establish precedents that reinforce themselves over time. Actions become infused with value. When these forces are strong enough, ideology begins to emerge. (Mintzberg 1983, pp.152/153).

As habits and myths become established, an organization acquires a distinctive style and character. 'One senses something unique when one walks into an office of IBM.' Mintzberg takes what he calls *'organizational ideology* ... to mean a system of beliefs about the organization, shared by its members, that distinguishes it from other organizations.' And he posits that 'The key feature of an (organizational) ideology ... is its unifying power.' (ibid pp.151/152). While some degree of ideology can be found in virtually every

organization, it varies considerably and some organizations have relatively weak ideologies. (ibid p.161).

The notion of mission and its unifying power is applicable to organized groups that do not come within the canon of organizational management theory or large institutions.   Any organized group united in its mission is usually more powerful than an individual or a group lacking unity, structure and strategies.   For example, when parents in Cleveland accused of abusing their children (see chapter 5) came together with the mission of clearing their names and asserting their rights, forming an organized group, constructing alliances, using the knowlege-power and the position-power of an external influencer, the balance of power among this 'multiplicity of force relations' was significantly altered.   Initially, individual parents were rendered powerless in the face of the knowledge-power, the position-power, the disciplinary power and the organized, institutionalised power of the experts. (Butler-Sloss 1988).   As Clegg argues, 'Lacking the organizational resources to outmanoeuvre existing networks and alliances of power, subordinated agencies are usually able to achieve effective resistance only on the basis of a collective organization ...   With such collective organization they may be able to exploit fissure and division in the ruling ranks.' (ibid p.19).   I will consider in chapter 5 how the Cleveland parents achieved effective resistance by getting organized, setting up their own networks and alliances and drawing into their mission the institutionalised power and resource power of a Member of Parliament and the media.

Not all members of an organization involve themselves in strategic game-playing directed to the mission of the organization.   Self

interest is the overriding goal for some of its members. For example, self-interest that is directed simply towards the personal goal of maximising financial reward for labour time, or to the practising of specialised skills as well as financial reward. At the same time, a close identification with the ideology and mission of the organization may be the motivation for some, or, in some types of organization, all of its members, (not all organizations provide financial reward for their members). While there are general features common to organizations - rules, organizational structures etc.- the "meaning" of membership is relative not only to the structurally defined meaning of positioning within the organization but relative also to the extent to which the individual member identifies with the mission, the goals and the ideology of the organization. It is reasonable to assume, for example, that a major motivating factor for unpaid/voluntary workers is a close identity with the ideology and mission of an organization of which they become members, some religious or charitable organizations for example. It is equally reasonable to assume that these factors are peripheral for some members for whom the meaning of membership, while regulated by the rules of the organization, is different from that of the "missionaries."

Individuals perform a complex range of organizational roles - within the family, within social groups, professional groups, workplace groups etc. Conflicts may arise for professionally qualified and regulated individuals between the meaning of membership of their professional organization, the knowledge/right/truth power of its discourses and discursive practices, and the meaning of their membership of the organization which employs them. For example, professional social workers employed by local authorities, whose

discourses and sense of mission (assuming they have one) are directed towards meeting the social needs of disadvantaged individuals, operate within an organizational culture which has a plurality of functions. Among these functions is the meeting of a wider field of social needs directed to community as well as to individuals (leisure amenities, refuse collection etc.) At the same time the organizational goals are mediated by its political "mission" of exercising an efficient and economical expenditure of the taxpayers' money and determining the priorities for this limited resource. The culture of a local authority is permeated by the 'values, norms and beliefs' of a variety of professionals, social workers, accountants, lawyers, engineers etc. They may be involved in inter-disciplinary power struggles over meaning (the definition of priority needs for example) as well as ideological/political power struggles with the organizational goals, for example keeping down the level of the Council Tax at the cost of unmet needs.

As their discourses intersect with those of other "expert" speakers, the knowledge-power of the human sciences is mediated by extra-discursive factors; by institutionalised management structures and systems, and by the regulation and control of resources both within the organization and without - i.e. by internal financial managers and by 'external influencers' such as local elected members and central government. Their power is mediated also by an inter-disciplinary professional hierarchy that has become institutionalised through the resource-power of wealthy and historically long established organizations like the British Medical Association; and by the differential meanings ascribed by popular opinion to professionals as "experts," to doctors, health visitors, social workers, etc.

Meaning is culturally constructed through the type of perceived relational expertise of professional discourses, through the attributes and characteristics popularly (i.e. by the population generally) ascribed to different professionals, and through the action-power potential of the various professionals. Doctors popularly have a higher expertise rating than social workers. Their relationship with users of their services is universal and sought after rather than the imposed, often perceived as stigmatising, relationship between clients and social workers. But in the field of child protection, the disciplinary power of social workers generally is greater than that of the doctors. In the first instance they have the discretion to act or not to act on suspected child abuse; and they have an enforceable right as the authorised agents of the state to institute court proceedings. However, while social workers are organizationally positioned through the law as the primary actors, the exercise of their power rests not only on legitimization through the law, but also on agency and inter-agency strategies, and on professional alliances within which members are differentially positioned in a hierarchy of discourses and discursive practices. There is evidence that the discourse of medicine and particularly of paediatrics has at times significantly influenced and dominated that of social work in the field of child protection. (Butler-Sloss 1988, p.84).

It is largely through the meaning ascribed to different categories of membership that individuals are positioned in organizational force-fields of power relations. For example the Directors/Chief Executive/Chairperson at one end, managers and professionals in the middle, manual workers at the other end. At the same time, power

relations operate locally both formally and informally at the inter-personal level and between the discursive practices of various professionals and non-professionals. Clegg argues that 'the nub of power resides in the relations of meaning and membership;' (Clegg 1989, p.237) and that 'The *meanings* of and *membership within* the categories of discursive practice will be constant sites of struggle over power, as identity is posited, resisted and fought over.' (ibid p.151). External influencers also play their part in this complexity of power relations – in the public sector, elected members and the local electorate as well as government agencies and watchdog bodies like Community Health Councils.

The power of such external influencers is related to the degree of privilege and delegated authority inherent in their structural positioning, to the alliances they are able to form and to their access to and control of sanctions and resources. Structurally, individual members of the local electorate have no privilege of position in power struggles over the provision of services, although they are "stakeholders" and resource providers – they have an interest, a stake, in the services which they are financing (resourcing) through taxation. When the stakeholders become organized the balance of power may be significantly altered in the field of multiple force relations, depending on the knowledge power, the position power and the resource power of the alliances that are formed – alliances between, say, citizens, Members of Parliament and the media, as in the resistance to the poll tax for example.

Position power is not an absolute even when structurally institutionalised; but it operates effectively in some fields of power

relations, however forcefully resisted, through the institutionalised "right" it commands to control resources (resource power). The knowledge/right/truth power of specialised discourse intersecting with resource/position power is frequently the site of unequal power struggles between the managers who control the resources, the expert assessors of "need", and the service users (clients) in the public sector. Power struggles arise, for example, over the "right" to services to meet a child's special "needs" as identified by educational psychologists, paediatricians, social workers etc. The resources identified by the professionals may not be made available by those who control them; or even if they are, the child's parents may not agree with the professional assessment or with the type of resource that is on offer. The knowledge-power of the professional experts, and parents' rights to choice of schools for their children with special needs, are limited by the discretionary power of senior management office-holders in the education authority who control the resources.

The specialised discourses of experts and their discursive practices are organized and structured around their specific beliefs, their coded language systems through which their differentiated identities are constructed (psychiatrists, qualified social workers, etc.), and the professional organizations of which they are members and which authorise and regulate them, but within which they do not generally work. This gives rise to tensions between the ideology/discourse of the professional and the ideology/discourse of the agency within which he/she works. For social workers within the public sector, who have a dual identity as local government officers, there is a tension between the professional discourse/ideology of rights and

meeting client need, and the institutionalised discourse/ideology of the agency, the "business" of keeping expenditure down and the discursive rules through which limited resources are controlled.

The rules that govern the internal practices of an organization and discipline its members are less easily applied to the professionals than to the non-professional workers lower down in the hierarchy. One example of the strict disciplining of manual workers in large bureaucratic hierarchies is the prescription of the number of words/lines per day that word-processing operators are expected to achieve and the monitoring of this by supervisors. The practices of professionals and their use of time are less easily measured, and less easily disciplined by their professional supervisors who share their sense of professional mission. But all are subject to the position/authority power of those who control the resources and monitor their use. In the market economy, resource power dominates knowledge power. Within the organizations that are themselves institutionalised apparatuses of power, those who exercise power are themselves subject to power. All are enmeshed in the power struggles over resources.

Within any institution (I will use the term to distinguish large organizations with formal structures and constitutions (rules) from smaller and informal groupings) identities and subjectivities are constructed in the language of its specific organizational discourse, through its hierarchy of position-power relations and through delegated authority. For example, in a local authority, managers and specialists are interpellated as "officers," "advisers" or "consultants." In addition, they are "recognised" by their specialised qualifications.

Their disciplinary power is both institutionally authorised and discursively authorised – a disciplinary power which they are not always too happy to recognise; social workers do not like being reminded that they are "agents of control."

Since power is a function of organizational structure and delegated authority as well as of discourse, the field of power relations is always unstable as the various specialised/non-specialised, management/workforce discourses episodically intersect. At all levels in the structure, disciplinary power is exercised through the accountability of the agents, those who themselves exercise position power over subordinates and expert knowledge-power over others. The mechanisms of control are institutionalised in the "rules of the game," the regulation of resources, the rules that govern systems of promotion, etc. A duality of agency regulation and of professional autonomy permeates the field of power relations as organizational discourses and the specialised discourses and missions of a variety of experts and non-experts intersect and sometimes conflict.

The power relations between health service managers and hospital consultants, between consultants and lower-ranking medical and other hospital staff working in the NHS, and between NHS personnel and government agencies, illustrate the complexity of the organizational/discursive field of power relations. Some of the players in the game are empowered by the privilege of professional position within the organizational structure of their authorising bodies, and also by their structural positioning within their employing agency which authorises their actions; Directors of social services departments for example. It is this privileging of position,

together with the knowledge/truth/right power of their specialised discourse and their professional network and alliances, that constitutes a powerful driving force, sometimes an oppositional force, in the multi-directional flow and fluctuating balance of power relations.

Handy distinguishes between power, influence and authority. He uses the word influence to mean the use of power, 'keeping power to mean the *resource* behind it' and authority to be used 'when the power is legitimate and has some recognized official backing.' (Handy 1985, p.119). He posits the notion of personal power 'Sometimes called *charisma* ... This power resides in the person ... It can be enhanced by his position or by his expert status.' It is 'brittle ... elusive ... fanned by success and by self-confidence and can evaporate in defeat.' (ibid p.127). I will argue that it cannot be ignored as a factor in power relations, difficult as it is to define or measure. I would link it with the energy/drive/force of the 'single prime mover,' the 'founding leader' posited by Mintzberg, whose sense of mission and drive to action influences and motivates others. The person with self-confidence and the ability to inspire confidence in others and fire them with the sense of mission – a quality that Handy calls 'Magnetism. The invisible but felt pull of a stronger force' (ibid p.135) – is something that we have all experienced or observed in outstanding political leaders, leaders of religious movements, and charismatic entrepreneurs. And we have to consider the extent to which the purpose of power is the exercise of power itself. John Kenneth Galbraith maintains that 'In all societies, from the most primitive to the ostensibly most civilized, the exercise of power is profoundly enjoyed ... power is pursued not only for the

service it renders to personal interests, values or social perceptions, but also for its own sake ... ' (Galbraith 1986, pp.216/217). Arguably, it is largely motivation and/or the drive to power through which individuals achieve the necessary agency position that enables them to influence, control or discipline others.

Clegg argues that 'The two defining elements of any power system are agencies and events of interest to these agencies.' (Clegg 1989, p.213). The issue of agency and agents and subject motivation and affect are problematic in Foucault's work on power relations. (Barrett 1991, pp.152-155). He perceives the exercise of power as intentional, 'But this does not mean that it results from the choice or decision of an individual subject' or from 'headquarters' or dominant groups. While 'there is no power that is exercised without a series of aims and objectives ... it is often the case that no one is there to have invented them.' (Foucault 1979, p.95). Anthony Giddens posits that 'Foucault's history tends to have no active subjects at all. It is history with the agency removed.' (Giddens 1987, p.98. quoted in Barrett 1991, p.153). However, while there are movements within the culture of a society that seem to come from no specifically identifiable source, it is arguable that one cannot talk about strategies through which power is exercised other than that it is exercised through 'agency,' the instrumentality of agents.

I have argued that disciplinary power is a rule-governed system exercised by privileged agents through the institutionalised rules, systems and structures of organized agencies and by the individual drive to achieve position power, as well as through the discourses and discursive practices of their specialised disciplines; that

motivation, drive, charisma and leadership are extra-discursive elements in the force field of power relations together with organizational/structural position, delegated authority, control of resources and access to sanctions; that these are sometimes in conflict with the discursive practices of the specialised disciplines which are at times in conflict with each other; and that in an unstable field of force relations, the power of the specialised disciplines is eroded by the resource power (control of resources) of agency managers and the state, by external or internal influencers, and by the market ideology.

In the following chapters I will consider the application of these findings to the 'mission' and the power of the various agencies and agents – the specialised disciplines, the employing organizations and the 'external influencers' – in the field of child protection in the public domain; and I will consider whose interests are being served in their oppositional power struggles. I will analyse the ways in which organizations and agencies are enrolled, and common relations of meaning and membership are positioned within a relational field, the ways in which 'Certain fixtures of meaning are privileged, certain membership categories are aligned with those meanings.' (Clegg 1989, p.225); the ways in which internal and external alliances and coalitions are formed and the ways in which authorised agents and agencies intrude into the private spaces of "the family."

To provide the background against which to analyse the contemporary power struggles in the field of child protection, I will discuss in the next chapter the historical development of the intervention of the state in the family and the changing construction of childhood. I will

introduce the discussion with an overview of Foucault's concept of bio power, the regulation of the body of the subject through surveillance and techniques of normalization, a form of disciplinary power which operates not only in such specialised institutions as prisons and hospitals but which is a form of power to which all children are subject through the state apparatuses of primary health care and compulsory education.

3.   THE STATE AND BIO-POWER

The intervention of the state in the family, and the development of
what Foucault calls 'bio-power,' the regulation of the body of the
subject through the apparatuses of the state and through the
discursive practices of the human sciences, has a long history.
Foucault associates this with the development of capitalism and the
interest of capitalist societies in maximising the economic usefulness of
bodies (individual subjects) and, to this end, regulating the health
and fertility of the population. He links the disciplining of the body
at the local and micro level with the operation of power on a broader
scale. In this context, the family as the agency responsible for the
reproduction of the labour force and the rearing of children becomes
an instrument of political control, its child-rearing practices regulated
through the apparatuses of the law and through the disciplinary
power of authorised agents of the state. Foucault argues that the
subjectivity of subjects is gradually and progressively constituted
'through a multiplicity of organisms, forces, energies, materials,
desires, thoughts etc. We should try to grasp subjection in its
material instance as a constitution of subjects.' (Foucault 1986, p.233).

Sex and sexuality are central to the exercise of bio-power, 'the
exercise of power over life.' (Foucault 1979, p.133); the disciplining,
normalization and subjection of the body, an 'individualizing'
technology of power. Foucault posits the emergence of an 'era' of
bio-power developing since the seventeenth century, with the
'explosion of numerous and diverse techniques for achieving the
subjugation of bodies and the control of populations.' He argues that

'the old power of death that symbolised sovereign power,' based on the right of the sovereign 'to *take* life or *let* live,' was now replaced by a power to *'foster* life,' and to *'disallow* it' only in the interest of safeguarding society. He associates the new form of power, 'directed to the administration of bodies and the calculated management of life' with the development of universities, secondary schools, barracks, workshops; and with the emergence of demography and concerns with problems of birthrate, longevity, public health, housing and migration. New fields of knowledge and the economic and agricultural developments of the eighteenth century decreased the 'randomness of death,' the threat to populations of plague and of starvation through famine. 'Methods of power and knowledge assumed responsibility for the life processes and undertook to control and modify them.' (ibid pp.135-142). This was the 'entry of life into history' as 'Western man was gradually learning what it meant to be a living species in a living world, to have a body, conditions of existence, probabilities of life, an individual and collective welfare ...' (ibid p.142). Knowledge-power 'became an agent of transformation of human life.' As the right to life superceded the traditional right of sovereignty, a 'proliferation of political technologies ensued' (ibid p.143) concerned with the disciplining of bodies and the regulation of population.

Against this background, Foucault posits the emerging importance of sex as a political issue, 'tied to the disciplines of the body' and 'applied to the regulation of populations, through all the far-reaching effects of its activity.' (ibid p.145). In every society, he argues, 'the concern with the sexual body' was linked with the establishment of bourgeois hegemony, with systems of marriage, procreation, kinship ties, transmission of wealth; a *'deployment of alliance.'* (ibid p.106).

Since the eighteenth centry, Western societies have developed and 'deployed' a new apparatus, *'the deployment of sexuality'* which has reduced the importance of the deployment of alliance, although has not superceded it. The two 'systems' connect up; but while the deployment of alliance is built around family, the reproduction of relations and the 'homeostasis of the social body,' the deployment of sexuality has developed through a 'progression away from the problematic of relations towards a problematic of the "flesh," that is, of the body.' (ibid pp.106–108).

Foucault argues that the inter-penetration of the two systems has given rise to a 'new tactic of power' in which the family and relatives have become the chief agents, with outside support from doctors, educators and psychiatrists. (ibid p.110). Psychoanalysis, he argues, by positing the parents-children relationship at the root of everyone's sexuality, has kept the deployment of sexuality coupled to the system of alliance. Through the technology of 'confession,' the incitement to speak of sex and loosen the hold of silence and secrecy, an 'endlessly proliferating economy of the discourse on sex' developed in the nineteenth century. (ibid pp.34/35). Sex became 'not only a matter of sensation and pleasure, of law and taboo, but also of truth and falsehood – sex was constituted as a problem of truth.' (ibid p.56). Foucault argues that sexuality 'must not be thought of as a kind of natural given ... It is the name that can be given to a historical construct' in which sex, the body, knowledge, truth and power come together. And it is through sex, 'in fact, an imaginery point determined by the deployment of sexuality –that each individual has to pass in order to have access to his own intelligibility ... to the whole of his body ... to his identity...' (ibid pp.105,155/156).

Bio-power operates through disciplinary techniques, through surveillance, supervision and intervention, techniques of normalization and control. Foucault links the 'knowledge' of sexuality, developed through the nineteenth century, with governmental technologies articulated in the specialised discourses of the human sciences and exercised through their agency; and with the development of 'pastoral power' and the welfare state. He posits that the modern type of pastoral power is derived from the Christian ecclesiastical form of pastoral power and its concern with the moral well-being of the individual and of the community; but the modern secular pastoral power is concerned with 'salvation' and well-being in this world, not in the next: 'in this context the word *salvation* takes on different meanings; health, well-being (that is, sufficient wealth, standard of living), security, protection against accidents. A series of "worldly" aims ... ' (Foucault 1982, p.215). This modern form of pastoral power is exercised not only by the apparatuses of the state but in a multiplicity of forms and institutions, between individuals and between groups. It is a 'tricky combination ... of individualization techniques, and of totalization procedures.' (ibid p.213).

Foucault rejects the notion of power operating only from the top downwards, the idea of the state as the primary locus of power, 'sovereign' power vested in the state. He argues that power is everywhere, multi-directional, coming from everywhere and exercised in a multiplicity of forms. But he does not discount the state. He recognises the importance of the modern state in its political form and the increasing centralization of political power in the form of the state and its apparatuses. He maintains that 'in a certain way' all

forms of power relations must refer to the state 'not because they are derived from it; it is rather because power relations have come more and more under state control ... power relations have been progressively governmentalized ... in the form of, or under the auspices of, state institutions.' (Foucault 1982, p.224).

Resistance, he argues, is an essential concommitent of power. He notes the struggles and 'oppositions' which have developed over the last few years; 'opposition to the power of men over women, of parents over children, of psychiatry over the mentally ill, of medicine over the population, of administration over the ways people live.' (ibid p.211). The struggles, he says, are not limited to one country or to a particular political or economic form of government. 'They are an opposition to the effects of power which are linked with knowledge, competence, and qualification: struggles against the privileges of knowledge ... an opposition against secrecy, deformation, and mystifying representations imposed on people.' (ibid p.212).

Resistance and oppositional forces coming from 'everywhere' to challenge institutionalised power and the "traditional" ideologies, among them traditional familial ideology, are a significant feature of contemporary power struggles in our society. The effects of these 'oppositions' were summed up in November 1992 in an editorial in the Independent newspaper: 'It is difficult to recall a time when so many British institutions were challenged as fundamentally as they are at present. The monarchy, the Church of England, the City, the judiciary, schools, local government, Parliament ... the list can be extended ... It is as if some tremor were running through British life..' (Editorial, The Independent, 28.11.92).

Challenges to traditional familial ideology, to the power relation between men and women and the power relation between children and parents are symptomatic of these power struggles. (Barrett and McIntosh, 1991). Within the context of structural and cultural changes, ideological shifts and new cultural norms, a changing concept of the child and the emergent ideology of children's rights has found expression in the progressive development of legal instruments for the protection of children, most recently in the Children Act 1989 which I will discuss below.

To understand the operation of power and the power struggles in society today, the struggles against domination, exploitation and subjectivity, we need, as Foucault says, a 'historical awareness of our present circumstance.' (Foucault 1992, p.209). He argues that in the nineteenth century it was the struggle against exploitation which was in the foreground. Nowadays, he says, the 'struggle against the forms of subjection – against the submission of subjectivity – is becoming more and more important,' although these operate still within a context of continuing domination and exploitation. (ibid p.213).

Before focussing on the contemporary power struggles around the parent-child relationship and the subjectivity of the child, I will consider the ways in which childhood has historically been conceptualised and the changed and changing construction of childhood.

Phillipe Aries, in his study of the historical evolution of childhood over the centuries, suggests that childhood is a 'modern invention'

stemming from the sixteenth and seventeenth centuries. Childhood became associated with ideas of innocence and weakness and with the need to discipline children, educate them, and prepare them for life. In earlier times very small children were treated as playthings and objects of amusement, young children were not differentiated from adults. Even in the seventeenth century girls could be married and in charge of households by the age of 13 or 14, although the period of childhood had by then lengthened more rapidly for boys. The reformers, Aries says, were primarily moralists rather than humanists. 'The great event,' he argues, was the revival at the beginning of modern times of an interest in education, a recognition that the child was not yet ready for life at a time when a 'positive moralization of society was taking place.' The family 'assumed a moral and spiritual function, it moulded bodies and souls.' Aries links this 'extraordinary development' in the seventeenth century with the modern concept of the family, with its desire for privacy and identity. (Aries 1962, pp.396/397). He finds the modern concept of childhood and the modern concept of schooling originating in the ideas of the moralists and pedagogues of the seventeenth century.

The question 'what is a child?' is, as M.D.A Freeman points out, one answered by adults. 'Adults impose their conceptions of childishness on beings whom they consider to be children.' (Freeman 1983, p.7). There is no absolute meaning of childhood. It is a socially constructed concept, the meaning of which has changed and evolved over time within different historical contexts, the contexts of different cultural norms, societal structures and economies.

Freeman develops a discourse of children's rights based on a concept of 'liberal paternalism,' with the law as the agency for reform. From a lawyer's perspective, he focusses on selected sites of child/family dysfunctioning, i.e. delinquency, child abuse and neglect, children in care, divorce; and he examines the notion of parental autonomy and children's autonomy. He argues that while in the first instance parents may be assumed to represent the best interests of the child, the recognition of children's rights - their right to be heard and involved in any decision-making process about their own lives - should be inscribed in law. He assumes that the law would intervene only in the event of difference of opinion between a parent and child over 'matters of gravity or urgency,' which would presumably come to attention through the intermediary of a medical or social welfare agency. Where it could be shown that parents were not representing a child's views, or were representing views not in the child's best interests, parents could be overriden by a court. He argues, for example, for the intervention of the law over the rights of a baby or an older child to medical treatment that may be opposed by the parents, the rights of an older child to decide whether or not to undergo medical treatment, the rights of a child to be involved in decision-making about where and with whom s/he is to live. The Children Act 1989 addresses these issues, although it will continue to be assumed that in most cases, particularly for younger children, the interests of children will coincide with those defined by their parents.

Freeman, finding Aries' interpretation of the changing attitudes to childhood not altogether satisfactory, argues that they can in part be explained as a response to changes in the economic organization of society consequent upon the emergence of capitalism and the class

structure. This, he argues, 'had profound effects on the bourgoisie and nascent professional class' and explains 'why the change in childhood affected boys rather than girls and why its impact was greatest in the middle-class ranks of society ...' (Freeman 1983, p.11).

Considerable evidence is provided by Lawrence Stone of how attitudes to children have changed from the 'exploitative and authoritarian' attitudes of the sixteenth century when children were in total subjection to their parents and were subject to the severest disciplinary control and punishment; when whipping was commonplace, children were expected to kneel before their parents, fathers were able to control their sons' occupations and their children's marriages. Among the poorer classes children aged 10 became apprentices, domestic servants or labourers. (Stone 1977, pp.166-171). Children were regarded as the property of their parents. Stone sees changes to a permissive rather than a repressive pattern of child rearing beginning among the middle classes in the 1870s, 'spreading to the social elite in the 1890s' and '"then, in the 1920s and more dramatically in the 1960s and 1970s, spreading for the first time to all sectors of the population."' (Freeman 1983, p.16. Quoted from Stone 1977, p.680).

Freeman points out that some of the earlier possessive aspects of parent-child relationships still persist today and also that changes in the relations between parents and children have not been uniform or progressive. The Victorian period saw the return of the authoritarian father-dominated household, the severe disciplining of children and extreme forms of sexual repression. He relates this to a revival of 'the Puritan concept of the innate sinfulness of the

child.' Children regarded as the property of their parents were used by them for social or economic advantage. Among the wealthy, advantageous marriages were still contrived. Children of the poor were exploited for their labour. (Freeman 1983, p.15). An ideology of male dominance, parental rights and family stability predominated. Social reformers were not always consistent in their views and attitudes. For example, Lord Shaftesbury, who was concerned about the exploitation of children as factory labour, opposed compulsory education which he believed 'infringed the right of a parent to bring up his children as he saw fit.' (ibid p.16. Quoted from Pinchbeck and Hewitt 1973, vol.ll, pp.348-358).

In the 1990s we have come a long way from the cultural norms of the "traditional" family and the parent/child relationships of the nineteenth and first half of the twentieth century; from the socialising of children into total subordination to the dominant rule of the father, the total subjectivity of the wife to the husband, and the unquestioned notion of duties owed by children to their parents. At the same time, for many women and children the family remains an oppressive institution within a social system 'which consistently privileges a male breadwinner and a financially dependent wife who takes the primary responsibility for child care.' (Barrett and McIntosh 1991, p.24). Physical violence towards women and children continues and occurs predominantly within the family. Nevertheless, there has been the beginning of a cultural shift in the last few decades, away from the unquestioned power of parents, and other adults, over children, the right to beat them or otherwise harm them, (although in 1994 smacking children as a form of correction or punishment within the family is permissible; the caning of children in some private

schools is still the norm and part of the agreed contractual arrangement between the school and parents). While the continuing idealisation of the traditional nuclear family form persists, together with the privileging of the male in the discourses of the state and its agencies, in media discourses, and in traditional religious discourses, there is a significant move in the 1990s towards a generally more permissive society, the acceptance of alternative life-styles, and a recognition of the rights of women and children.

Freeman posits that children today are not only freer than they were fifty or a hundred years ago, they have greater autonomy than in previous permissive ages. 'Yet remnants of earlier philosophies remain and ideas of the child as property rather than person ... are still with us.' (Freeman 1983, p.16). Freeman links 'the capacity for autonomy' with the concept of children's rights. He argues that the treatment of children as persons with equal rights requires respect for their capacity for autonomy as they develop to become rational persons. (ibid pp.54-60).

A notion of 'capacity for autonomy' does not prescribe total autonomy, an absolute of power which is an abstraction in relation to any kind of social order. The autonomy of adults is limited by what the law allows, by personal "resources," and by the cultural norms of the various social, occupational and religious segments of society within which we experience the world and construct our identities. We all live by rules, some of which are mandatory and carry prescribed penalties. Others are optional, but pressures to conform are considerable, among children as well as among adults. Personal resources, i.e. wealth, 'cultural capital,'[1] physical and emotional health, intellectual ability, specialised knowledge, all relate to the

individual's potential for autonomy. The degree of autonomy an individual can exercise within the power networks that encompass us all may be seen as an indicator of the relative power the person "has." John B. Thompson posits that by virtue of their location within socially constructed contexts, individuals have different quantities of and access to resources and that their social location endows them with varying degrees of power, a 'capacity which enables or empowers some individuals to make decisions, pursue ends or realize interests.' (Thompson 1990, p.59). So, for example, the 'social location' of free subjects living in poverty, of black people, of people with physical disabilities etc. affords them only a limited 'field of possibilities' (Foucault) within which to pursue ends and realize their interests.

A child's social location, dependence and lack of 'resources,' and the meaning ascribed to childhood in various symbolic forms – through the law, the schools, the media, for example – all serve to "position" the child and to construct and perpetuate dominant/subjective parent/child and adult/child relationships. The discourse of the law ascribes both responsibilities and disciplinary power to parents; the responsibility to protect and care for a child, to provide for the child's health and education; and also to be responsible for the financial costs of a child's anti-social behaviour (Criminal Justice Act 1992). The "rules" prescribed by law, cultural norms and the processes of socialisation limit the capacity of children for autonomy. Their subjectivity is constructed by the privileged discretionary power of adults to formulate the rules, and the power of sanctions which adults have over children, who are dependent on them for the basic resources of shelter, food and clothing and loving care.

Children are subject from birth onwards to the pastoral power and the disciplinary power of state institutions and the discursive practices of specialists in health, education, psychiatry, and social services, concerned with their protection and 'salvation.' Freeman argues that 'society's concern for the child is to be seen very much in terms of the child's usefulness to society'; that it is focussed on protection rather than a recognition of children's rights, and that the notion of protection is confused with the concept of rights. (ibid pp.18/19). He points out that there are different meanings associated with the word "right" and different possible interpretations of its usage. For example, there is a difference between the right to be cared for and to an environment which safeguards the welfare of dependent children, and the right of self-determination - the right '"to exercise control over their environments, to make decisions about what they want, to have autonomous control over various facets of their lives." To decide "what is good for themselves."' (ibid p.19. Quoted from Rogers and Wrightsman 1978, pp.59,61).

The Children Act 1989 addresses more specifically than any previous legislation the issue of children's rights,[2] not only the right to protection and to welfare services but also the right to be heard; the right of children who are deemed to be of 'sufficient understanding' to be involved in legal decision making about their future and thus to have some control over their lives; and the right to refuse medical or psychiatric assessment notwithstanding the making of an order by a court. The rights and the needs of very young children involved in legal disputes are to be protected by guardians-ad-litem whose function is to attempt to discover the children's views and represent

their interests. It is arguable that the objectivity of guardians will inevitably be coloured by the range of personal as well as professional discourses they bring to their reading of a child's circumstances. As Judith Masson points out in her commentary on the Children Act 1989, there is a danger that subjectivity in the form of preference for particular life-styles might intrude. (Masson 1990, pp.10/11).

Recognition of the new status of the child was given by the Secretary of State for Health, Virginia Bottomley, in an address to a meeting of the National Children's Home in November 1992. 'Over the years, children's status has changed from being passive victims and recipients of services to people with rights as individuals; the right to be heard, believed, trusted – above all the right to be children.' (The Independent, 10.11.92). Nevertheless, the notion of 'sufficient understanding' and the 'best interests' of a child are left open to adult interpretation and the discourses of developmental psychology, social work and the law. There is no objective or scientific way of measuring 'understanding' or 'best interests' and a degree of subjectivity in any interpretation is perhaps inevitable. The discourse of children's rights addresses the power balance between children and adults, within and beyond the family; and, as Freeman points out, 'the protection of children's rights may depend on infringing parental autonomy and family privacy.' (Freeman 1983, p.17).

The current child care legislation addresses also the privileged discursive power and resource power of the specialised agencies. For example, the Children Act 1989 reqires local authorities to set up

a complaints procedure for consumers (clients), children as well as adults, both about the provision and quality of services and about the 'placements' of children in the care of local authorities. It addresses both the rights of children to protection and the rights of children to be involved in decision making about their environments. It privileges the power of the law over the power of local authorities and their agents, requiring the local authorities to satisfy the courts about the precise arrangements for a child that would follow the making of any order in the courts; and it requires that the court be satisified that in any arrangements made for or involving the child, the child's welfare is the primary consideration. (Department of Health 1991 (i)(a), p.1; Children Act 1989 Part 1 s.1(1). Section 1(3) of the Act provides a checklist of the matters to which a court should have regard. Although 'welfare' is not defined, the checklist indicates some of the relevant issues to be taken into account. It includes 'the ascertainable wishes and feelings of the child concerned, (considered in the light of his age and understanding);' (s.1 (3)(a). The notion of 'age and understanding' remains subject to the interpretation and value judgements of legal discourses.

A year after implementation of the Children Act 1989, a few children, invoking the ascribed power of the law, exercising the resource power of legal aid and legal representation in the courts, won the right to live away from their parents through the making of a Residence Order. Where such an order is made in favour of a person who is not the parent or guardian of the child, that person has parental responsibility for the child while the order remains in force (although the law imposes certain restrictions on the rights of the substitute parent, in relation to adoption, to changing the child's surname, and

removing the child from the country). (Children Act 1989 s.12,s.13). The child remains subject to adult rules and discourses. Moreover, while the child has been heard and involved in the decision-making process about how his/her needs can best be met, the decision ultimately made by the court may not accord with the child's wishes. The court's perception of the child's best interests and welfare takes precedence over that of a child or parent.

For example, in November 1992, a 13-year old child who was in the care of a local authority wished to leave the foster home in which she had been placed, and return home to her father. Her father appealed unsuccessfully in the High Court against an order that had been made by the magistrates court on an application by the local authority. The girl was told by the High Court Judge 'that she was too young to decide her own future.' (reported in The Independent, 7.11.92). The Independent reported on the same day that an 11-year-old girl had won a court order allowing her to leave her mother's home and move back with the couple who had fostered her as a baby. (ibid). In each case, and indeed in every case, different factors have to be taken into account and an interpretation made of the situation. While the outcomes in particular cases are not comparable given the uniqueness of each set of circumstances, age does seem to be an abitrary indicator of a child's ability to know what is in its best interests.

In terms of the Children Act 1989 a child is a person under 18 years of age; but an order placing a child in the care of or under the supervision of a local authority cannot be made by a court in respect of a person aged 17 or a person aged 16 who is married. (Children

Act 1989, part 1V s.31(3)). The "privileged" status of marriage denies the right of "protection" to married people aged 16 that is afforded to unmarried people of the same age. Masson points out 'the only interventions to protect a wayward older teenager ... would be through criminal proceedings or, if the person was suffering from mental disorder, under the Mental Health Act 1983;' circumstances which Masson sees likely to pose particular problems. (Masson 1990, p.68).

Changes in the legislation reflect major cultural changes and shifts in the norms of social behaviour. The last fifty years have been a period of unprecedentedly rapid and extensive disruption, change and innovation. The development of sophisticated and accessible information technology and the expansion of the media have significantly and increasingly changed the boundaries between the public and the private in the last few decades. It is largely through the agency (instrumentality) of media discourses that the debate over children's rights and the problematic of child abuse has entered into everyday discourse.

While there is no conclusive evidence on the effects of the media on attitudes or on their power to persuade, their power lies in their capacity to inform, to enter the private sphere, and to bring events and contentious issues into the public arena. (Curran and Seaton 1990, pp.230/231). Their power lies also in their capacity to inflect meaning and influence public understanding through a selective use of language and emphasis in their discourses. For example, the press, television and radio, from their privileged position of entry into the private domestic sphere, have kept the public informed about

the workings of the Children Act 1989 through the type of cases quoted above. Children have been reported in media discourses as "divorcing" their parents. The use of this adult concept, the culturally defined meaning of which is to terminate a legally entered-into marriage contract, was not only inaccurate and inappropiate, but it carried connotations of children daring to trespass on adult territory and of knowing better than adults what is good for them.

A sense of moral outrage is conveyed in an article by a newspaper journalist commenting on these types of cases: 'no child under 12, however intelligent or sophisticated, is in a position to assess its own best interests ... no child over twelve is fit to make such decisions while in the grip of the social, hormonal and emotional turmoil of adolescence ... in the skirmishes of home life, parents may be nearly as much sinned against as sinning ... The pull of birth and blood and genes is paramount.' (Angela Lambert, The Independent 11.11.92). I will return to this notion of moral outrage engendered by the media, and the effects of the media on power relations, in my discussion of the events in Cleveland in 1987.

There is little, if any, reporting in the media of "good practice" by social workers or other professionals. The public is informed only, or predominantly, of bad practices. Undoubtedly it is in the public interest that these instances are brought into the public arena; but this selective one-sidedness has a powerful effect in constructing a negative representation of agencies and agents in general. The right of agents to be heard is often compromised by the discourse of confidentiality. Social workers in particular are victims of this negative media bias, both in the reporting of news and in fictional

representations, symbolic forms which are *'constitutive of social reality.'* (Thompson 1990, p.58).

The power of the media to select and to emphasise through language or other symbolic forms derives from its privileged relational positioning and its resource power, its technical and technological knowledge. This is not to say that all audiences are necessarily susceptible to a "preferred" reading of media texts.[3] The construction of meaning derives from the reader-spectator/text relationship as the discourse of the text intersects with the range of discourses and the particular framework of reference of the spectator-reader. Nevertheless it is arguable that the media are accorded a high degree of respect and authority through which the public are led 'into an acceptance of the biased, the misleading and the status quo.' (Curran and Seaton 1990, pp.239/240). The power of audiences or individuals to answer back effectively, through letters to the press, or phone-in radio programmes for example, is relatively minimal.

Many of the cultural changes in our society and the expansion of more permissive cultural norms since the second world war owe much to the technological power of the media, the power to reach vast numbers of people, to inform and to "educate" through various media forms, to disseminate information into the domestic sphere about cultural practices that had become, or were becoming, more widely practised and therefore "alright;" alternative sexual preferences and behaviours for example, parenthood outside of marriage, divorce without social stigma.

An educated and informed population is in a better position to make critical judgements and to question and challenge the institutions through which subjectivity is constructed and inequitable power relations are perpetuated. Since the second world war, the greater accessibility of secondary education resulting from the 1944 Education Act (whatever its shortcomings) and the expansion of higher education, together with educative media forms, documentaries on social injustices for example, have resulted in a generally more literate and articulate population. Thompson argues that thanks to the development of mass communication, particularly television, more individuals than ever before situated in a private domestic setting can have access to information and events in *'the sphere of publicness;'* and this accessibility may enable a wide range of individuals to participate 'in spheres of information and communication.' (Thompson 1990, pp.238-248). He posits that the greater accessibility to information and the 'visibility' of events created by mass communication has 'uncontrollable consequences' for the exercise of political power. Media-generated information about the threatened closure of the mines in November 1992 provides an example of effective communication between the miners, the public and the state, and of the way in which the public voice can be articulated in opposition to the power of central government.

Through their access to media discourses, and particularly television, children today are more generally "knowledgeable" about various aspects of adult life. What was formerly private and confined to the home has entered into the public arena. Thompson points out how through television, children have acquired a means of learning not only about events which take place in the public domain but also

those in the private domain, 'including those forms of behaviour which adults generally reserve for the back regions of the private domestic context.' (ibid p.245). Freeman posits that according to theories of child development, a child matures in 'competences, cognitive abilities and moral capacities' through a succession of stages. 'Research shows ... that children under ten to twelve years old lack the cognitive abilities and skills of judgement which are necessary for them to be able to make decisions about major events which could severely affect their lives ...' But while the evidence about older children is not so clear, it seems 'that in both moral and cognitive development, many reach adult levels between twelve and fourteen.' (Freeman 1983, p.46).

It is questionable how meaningful these 'adult levels' are and what is being measured against what in this area of the 'dubious human sciences' (Foucault), given the shifting ground of 'morality' and the broad range of adult abilities and irrational and violent behaviours. While the age of a child may be a useful distinction in relation, for example, to the need for adult provision of the basic welfare needs of nutrition, food, shelter, etc., it is inevitably an arbitrary and shifting concept defined by adults, largely through the powerful agency of the state which prescribes the age of 'majority' (the right to vote) for example, the age at which children's behaviour is criminalised, the age at which consent to abortion or marriage does not require the permission of a parent, the ages at which sexual behaviours (homosexual, heterosexual) are "legal."

With access to a proliferation of discourses around sex and sexuality, children are more sexually aware, and they are more sexually active

at a younger age, than they were fifty years ago. The cultural climate generally is more sexually permissive; and at the same time the public is more aware, largely through the agency of the media, of the extent of sexual exploitation of children and their right to protection from this form of exploitation. Children undoubtedly have a right to protection from abuse and neglect and forms of violence and exploitation, including sexual abuse which positions them as sexual objects used for and subjected to the gratification of (usually) adults and predominantly male adults. Media discourses reinforce public awareness, forming or reflecting public concern, about the abuse of children and their right to protection.

At the same time media discourses are exploiting children in idealised "happy family" advertisements which promote consumer products for adults and children with financial resources and "normal" happy family backgrounds, marginalising the poor and the disadvantaged. There is a parallel in this with the way media discourses promote the rights of women to protection from sexual abuse and violence while, at the same time, women continue to be constructed in various symbolic media forms as objects of male desire and domination, representations which play a significant part in the way meaning is mobilized to sustain relations of domination and the operation of power.

The impact and after-effects of the second world war had a considerable effect on the 'social location' of women, on families, on education and welfare policies. The war was a cultural watershed through which attitudes to the institutionalised nuclear family were to change significantly and the needs of disadvantaged children were increasingly to become a matter of public concern and state

intervention. Women mobilised during the war to the armed services and to work outside the home were increasingly to resist their former domestic positioning and subjectivity, notwithstanding the post-war thrust by the state to the rebuilding of "traditional" family life and the ideology of the sanctity of marriage and woman's place in the home. The wartime experience of evacuation had revealed the effects on large numbers of children of deep and extensive family poverty and related deficiences of parenting. Concerns about the emotional and physical well-being of such children led to the post-war increase both in welfare provision and the surveillance of families by the state through its agencies. (Wilson 1987, pp.126-158).

Elizabeth Wilson points out how changes in the subjectivity and positioning of women in society and within the family are related to the fluctuating needs of the economy (ibid p.75), as well as to the specialised discourses of childcare experts and familial ideology; and how this positioning is related to the extent of welfare provision such as, for example, the availability of day-nursery places for young children enabling women to work outside the home. (ibid p.97). She argues also that post-war social work, 'overwhelmingly' based on psychoanalytic theory, has played 'an expanding and highly ideological role' in reinforcing traditional forms of family life. (ibid pp.83/86). While this may be largely true, I would argue that it overstates the case in relation to current social work training and ideology and is symptomatic of the way that the media (the only news is bad news) and other symbolic forms misrepresent social work and social workers.

Many social workers have disassociated themselves over recent years from an extreme positioning within psychoanalytic theory and an unquestioning association with the discursive practices of such specialised agencies. They may draw on such theories and specialised discourses; but their eclectic training encompasses sociological theories of, for example, poverty, isolation and oppression and the alienating effects of these on individuals. Current social work training is greatly concerned with issues of racism, discrimination and oppression. It is concerned with power relations as well as pathology. It is also drawing on a more heterogeneous intake of students/practitioners from a wider range of cultural, socio-economic and educational backgrounds, even if still predominantly white and female. At the same time, the users of services are forming alliances and pressure groups and are becoming more articulate in resisting the power of the professionals and challenging their discursive practices. Subjects are resisting the processes of 'normalization.' Subjectivity is never completely formed.

Resistance, like power, comes from "everywhere," articulated through the oppositional discourses of free subjects. It operates as a counter-force and instrument of change. Resisting the mobilization of state institutions to perpetuate "traditional" familial ideology – through the discourses of the law, the education system, the welfare services, and the repeated rhetoric of "family values" in political and religious discourses, – the family continuously develops new forms. In the early 1990s a significant number of children aged around 13 are becoming parents. Many young people officially designated as children are leaving the family home or the substitute home provided by welfare agencies. Young people are finding ways of opposing the

disciplinary power of adults. Many of them, lacking "resources," become victims of a social system which protects young people from certain types of abuse and injustice but fails to protect them from poverty, homelessness and sexual exploitation by adults; a system which fails to meet their needs and protect their rights. As Foucault posits, while the struggles against forms of subjection and disciplinary power have come more into the foreground at this historical moment, they operate still within a context of continuing domination and exploitation.

Against this background of cultural change and the continuing exploitation and neglect of children, in the next chapter I will discuss the professional, legal and institutional discourses of professional agents, health visitors and social workers, operating in the field of child protection; the legal discourses that empower them to intervene in the "private" space of the family, and the ways in which they are regulated by agency discourses and by the discourses of the law embodied in the rules and regulations of the Children Act 1989.

Notes to Chapter 3:

(1) The term 'cultural capital' is taken from Pierre Bourdieu. (Pierre Bourdieu, Distinction. A Social Critique of the Judgement of Taste. (London, Routledge & Kegan Paul, 1984). In the sense in which it is used here it refers to such factors as literacy, sophisticated language codes, entry into privileged professional and social networks and other culturally defined social advantages. In Bourdieu's usage, cultural capital is substantially acquired through education, and particularly through higher education.

(2) The Children Act 1989 is a major piece of legislation in the field of child protection, inflected towards promoting the rights of children although the ambiguities of its language privilege the agents. In chapter 6, sections of the Act are analysed to illustrate the ways in which it seeks to re-align power relations between professional agents and parents/children,

(3) Stuart Hall posits that meaning is constructed through a process of encoding and decoding, which he relates specifically to the transmission and "reading" of televisual texts. He argues that while the operation of encoding 'in the form of sign vehicles of a specific kind' will have the effect of constructing some of the limits within which decoding will operate, and will seek to enforce a 'preferred' meaning into the work of decoding and reading the text, this cannot be guaranteed. He posits three hypothetical positions from which televisual discourse may be decoded: a 'preferred' reading through the operation of a meta-code, 'dominantly defined and professionally signified ... that carries with it the stamp of legitimacy ... it appears

coterminus with what is "natural," "inevitable," "taken for granted" about the social order.' Secondly, a 'negotiated' decoding/reading of the text which, while it accords a privileged position to the dominant definition of events, makes its own rules and is shot through with contradictions. Thirdly, an 'oppositional' decoding/reading in which the viewer 'retotalizes' the message within some alternative framework of reference. ('Encoding/decoding,' in <u>Culture, Media Language.</u> <u>Working Papers in Cultural Studies 1972-79</u>, Edited by Stuart Hall et al. (London, Hutchinson in association with the Centre for Contemporary Cultural Studies, University of Birmingham, 1980) pp.128-138).

David Morley makes the point that viewers may engage in any one or, at different times, in more than one of the processes of decoding and constructing meaning from a whole variety of texts in different genres, within their own 'frameworks of reference' and 'according to their range of competences.' ('Texts, Readers, Subjects,' ibid pp.163-173).

4.   PROFESSIONAL, INSTITUTIONAL AND LEGAL DISCOURSES

AND DISCURSIVE PRACTICES

The "private space" of the family, in whatever form, is intersected at many points by various "authorised" agents operating within the public domain.   These agents are privileged by the knowledge/power of their specialised discourses; and they are authorised to act by their employing agencies which are "licensed" by legal statutes, the instruments of state power; Althusser's Ideological State Apparatuses, Foucault's complex of apparatuses and institutions with their technologies and instruments of control.

The notion of private space, and indeed the concept of privacy, is problematic.   Raymond Wacks posits that there is much confusion about the whole concept of privacy, and that generalisations about the privacy of the family are of limited use, even though privacy 'is often characterised, albeit with less precision than rhetoric, as one of the central and inevitable ideas of modern democratic societies:' (Wacks, 1980 p.176).   Mary McIntosh points out 'The pervasive definition of the family as private ... As far as society is concerned the family is a private unit and what goes on within it is not a social concern.' (McIntosh 1984, p.236).   She argues that there is a 'unifying ideology' of the family, that notions of unity and privacy exist only in ideology, and that if the family is seen as private, differentiated from the 'public concerns of the state' the notion of 'intervention' becomes problematic. (ibid pp.234-238).   Much of what goes on inside families is, inevitably, not open to the public gaze.

But, as McIntosh points out, the state has become increasingly interventionist 'even by the very forms of its supports.' (ibid p.238)

The state has legislated to itself a hegemonic right to intervene - the 'right to take children ... into its care if the family is not thought adequate.' (ibid pp.234/235); although the first principle is that 'the best place for children to be brought up and cared for is within their families, wherever possible.' (Department of Health 1991 (ii)(a), p.5). The state invests its agencies and through them its agents with its power, the power it "has" which is always there even when it is not in action - or which, alternatively, may be regarded as always already in action; a power that draws on the knowledge (power) of the professional disciplines and authorises their disciplinary actions; a power that draws on their specialised discourses and contemporary truths; not a sovereign power but a hegemonic power, institutionalised and given material form in the law and in the actions of its agents.

The privacy of the individual and the family is "invaded" by the state through its agents - albeit for the protection of the most vulnerable in our society - even before a child is born. McIntosh points out that 'Legal restrictions on parental rights ... can forbid them even to give birth to their babies without medical supervision.' (McIntosh 1984, p.208). And then throughout childhood the individual is subject to the 'bio-power' of the agencies of the state, to surveillance and disciplining through the health and education services and through subsidiary organizations. Privately run playgroups, for example, themselves registered and monitored by state agencies (local authorities), are expected to be alert to any indications

of child abuse or neglect or suspected inadequate parenting and report their concerns to "the authorities."

The concept of "the family" itself in modern democratic societies is problematic, needing to be understood in its various contemporary formulations, a pluralistic rather than a unitary concept. The stereotype of the "nuclear" family comprising two parents of the opposite sex and their progeny living together in the family home persists in traditional ideology and in political and religious discourses. But in practice the family has been reconstructed, has reconstructed itself through the autonomous acts of free subjects. A wide range of alternative family forms and life styles pervade our society – single parent families, foster families, adoptive families, step families, childless families, single sex families; families living in bed and breakfast accommodation, families squatting, families in sub-standard housing.

The private space that any family enjoys, both its size and its quality and its susceptibility to intervention by state agencies, depends largely upon its resources of wealth and property and its 'cultural capital;' and on the meaning ascribed to its social and spatial positioning – e.g the "at-risk" family, the "problem" estate; and on the ways in which space is geographically and politically organized so that the "chance" of residential location of the family qualifies it differentially for local services and strategies of intervention (e.g. allocation to a social worker), since these are widely disparate between different local authorities.

The spatial organization of council housing often in small, densely-packed units, poorly insulated against noise and outside intrusion by neighbours and others, sometimes heavily policed, provides little if any private space. The residents are more visible to the public gaze and more susceptible to surveillance and intrusion by 'a phalanx of professionals -' (McIntosh 1984, p.208), health visitors, social workers, education welfare officers etc. This contrasts markedly with the physical spaciousness of much privately owned housing whose occupants are less visible and less vulnerable and whose life-styles are likely to be differently interpreted by the agencies of the state; although also subject to agency intervention if the children are identified as being in need of protection.

Our society demands the protection of children from abuse or neglect by parents or other adults, and believes it to be, or simply accepts it, as the ultimate responsibility of the state; a responsibility enshrined in the discourses of the law and exercised through the surveillance and disciplinary practices of a range of professionals. Dingwall et al. suggest that the most important source of identifying children in need of protection are health visitors, who have a universal non-selective responsibility to monitor the well-being of all young children and whose intervention is popularly interpreted as non-stigmatising. (An alternative interpretation of their role is that of 'policing.' see Donzelot 1980). At the same time, it is the social services departments of local authorities that command most of the power and resources in relation to child protection. (Dingwall et al.1983, pp.12-14). In addition, among the professional agents operating in the field of child protection they carry the greatest responsibility .

Paradoxically, there is a significant difference between the autonomy and executive power of health visitors and the greater accountability of local authority social workers, which arises from the different organizational structures and rules within which they operate. Dingwall et al. (Robert Dingwall, John Eekelaar, Topsy Murray) find health visitors operating within a less bureaucratic organizational structure than social workers and with a greater degree of professional autonomy. The power of social workers is limited by their accountability to their supervisors, and by the surveillance and techniques of control under which the supervisors themselves operate. Dingwall et al. argue that local authority social workers are held more accountable than health visitors to their supervisors and managers, since the latter are themselves directly accountable to elected members. (ibid p.110) The power of local authority social workers is limited also by the umbrella mission of the organization, beneath which different departments and disciplines work towards achieving their individual departmental and professional missions and compete for limited resources.

The bureaucratic culture of the organizations within which they operate, their rules, systems and management structures, mediate the discursive practices of the social workers and other professionals. Dingwall et al. argue that while 'Professions are, in effect, licensed to create their own normative order ... Bureaucracies operate within rules created by others.' (ibid p.106) The professional agents working within these bureaucratic organizations are subject not only to the discursive management rules but also to the politically inflected discourse of the organization's "charter." Service delivery is linked

with political objectives. Political mission and agency management practices impinge on the professional discursive practices of social work, including child protection work. Local authority social workers are enmeshed in a complex configuration of professional, political and organizational discourses, a multiple field of force relations within which they carry out their legally ascribed responsibilities and operate disciplinary power over subjects.

The notion of 'the local authority' subsumes a number of professional discourses and a range of discursive practices through which its work, ascribed by statute, is carried out. The discursive practices of the professional agents are always subject to legal discourses and the rules of law. Notwithstanding the stereotyped representation of social workers having the power to intervene in the private space of the family to "take" children into care, it is ultimately only through the legal process and the authorisation of a court that this power can be exercised; through the power of the law institutionalised within the structures and systems of the courts and delegated to authorised agencies and acted upon by their agents. Local authority social workers as agents of the law are empowered and also regulated both by agency discourses and the discourse of the law.

The Children Act 1989 is designed to help and protect children by imposing additional duties and responsibilities on local authorities and their authorised agents. They are required 'to provide a range and level of services that are appropriate to safeguard and provide welfare for children in need in their area.' (Department of Health 1991 (ii)(a), p.7) At the same time the legal discourse imposes new limitations on the powers of the agency and its agents. For example,

the former Place of Safety Order, which allowed for removal of a child from the care of its parents to a 'place of safety' for up to 28 days, with no right of appeal or challenge and without evidence that the child was at immediate risk, (Department of Health 1989 (ii), p.60), has been replaced by the Emergency Protection Order. This places the child under the protection of the local authority for a maximum of eight days, with a possible extension of up to seven days if the court has reason to believe that the child concerned is likely to suffer significant harm in the absence of an extension. An Emergency Protection Order may be made only in a 'genuine emergency' when it is 'necessary to provide immediate short-term protection.' (Department of Health 1991(i)(a), p.51). The Department of Health Introduction to the Children Act 1989 spells out the responsibilities of the courts, to be satisfied about the specific conditions under which an Emergency Protection Order can be made and to give primary consideration to the 'welfare principle,' - i.e. that the child's welfare is the paramount consideration. Also spelled out are the duties and responsibilities of the local authority and its agents to whom an order is made; and the limitations on their powers. (Department of Health 1989(ii), pp.60-68).

The Act has given courts greater flexibility and clearer guidance in deciding what action to take; and the courts do not have to grant an order for which an application has been made. (Department of Health 1989(ii), p3; 1991(ii)(b), p.5). Courts have always had the discretion to refuse an application for an order. In my own experience a court occasionally did so under the previous child care legislation, even in the face of the professional knowledge base of social work, reinforced by its own agency legal guidance and supported by other professional

discourses, educational, medical, psychiatric, etc. Such occasions, however, were rare, perhaps understandably so in the face of influential professional discourses and public anxieties reflected in media texts about serious child abuse and child deaths.

The extensive use of Place of Safety Orders by local authorities, which could be obtained through a number of provisions under the previous legislation, was widely criticised. The Butler-Sloss Inquiry noted the 'somewhat heavy-handed' obtaining of a Place of Safety Order in circumstances when a firm agreement had been made with the parents of the children concerned, and commented that the 'authoritarian intervention was premature and inappropriate at that moment.' (Butler-Sloss 1988, p.12(44). On the other hand, there was, and still is, much criticism expressed in media discourses of the failure of local authorities to act to protect children, notwithstanding their statutory power to do so.

The Official Guidance and Regulations relating to the Children Act 1989 regarding the making of Court Orders (Department of Health (1991(i)(a) specifies the circumstances in which an Emergency Protection Order may be appropriate (pp.51-63) and stipulates the requirement for 'some evidence that the situation is sufficiently serious to justify such severe powers of intervention being made available.' (ibid p.52, para 4.30). The court has extensive powers of direction in the carrying out of such an order (Department of Health 1989(ii), pp.64-65) and discretion as to its duration, subject to the maximum of eight days in the first instance. The Department of Health recognises that most, if not all, Emergency Protection Orders will be made on evidence provided by a local authority or by the

NSPCC and without the court having heard more than the applicant's side of the story (ibid pp.63/66). While the Act gives the child, a parent and other designated carers the right to apply for a discharge of an Emergency Protection Order, such application can only be heard at least 72 hours after the order was made (ibid p.66).

There is clearly a tension between the need to protect a child from the abusive power of adults in circumstances that professional agents interpret as continuing risk to the child, and the rights of the parents or carers to be heard. In this complex area of power relations, the discourse of the law continues to define the power balance in favour of the professional agents. It prescribes their authority and responsibilities; and it accords them the discretionary power to interpret, and the discretion to act or not act. At the same time it limits their autonomy by making them subject to the interpretative and discretionary power of the courts.

While privileging the agents to act in the interests of children, the Children Act 1989 also empowers children and parents in court proceedings that concern the welfare of a child. It requires that a child should be represented by a court welfare officer or independent social worker acting as guardian-ad-litem. It affords parents 'the right to immediate legal aid without a means or merit test in all public law cases involving applications for supervision, care, child assessment orders and, in any emergency, protection proceedings.' (Department of Health 1991 (ii)(b), p.8). It requires social workers to work in 'partnership' with children and with parents. (Department of Health 1991(ii)(a), p.6; 1991 (iii), pp.1/2). Social workers must listen to their views and must give parents a say in how their child is

cared for, even when a court makes an order placing a child in the care of a local authority. It requires local authorities to make information readily available about its services and to set up procedures through which parents, or other local citizens, will be enabled to complain and be heard about the services they get or do not get. The discourse of the law prescribes and authorises the exercise of power; and the law seeks to set the limits on what have sometimes been seen to be social workers' 'extensive powers to make draconian decisions on child removal' (McIntosh 1984, p.226) and their right to intervene in the private space of the family.

Through the Children Act 1989, privacy and parental rights are mediated by legal constraints which require parents, or other caretakers, to be seen to provide a quality of care that will safeguard the health and welfare of their children. The law limits the ways in which they may chastise their children and the ways in which they may educate them. The law prescribes the rights of the state agencies to intervene and prescribes their duty to provide services for children in need.

The right of intervention by the state and its agencies in family life for the purpose of protecting children has its roots in a series of Acts of Parliament: The Children Act 1948, the Children and Young Persons Acts 1933, 1963 and 1969, the Children Act 1975, the Child Care Act 1980, and the Children Act 1989. The latter, which draws together and simplifies previously existing legislation (Department of Health 1989(ii), piii) and which came into operation in October 1991, is intended to be 'about how we, as a society, believe children should be cared for ... It aims to help children in need get the best deal

possible, by providing services to their families.' (Department of Health 1991(ii)(a), p.3).

'Children in need' as defined in the Children Act 1989 is a new concept: children who need services 'to secure a reasonable standard of health and development,' which includes children who are disabled, (Department of Health 1989 (ii), p.2);   'children whose health and welfare may suffer significantly without support from social services,' (Department of Health 1991(ii)(a), p.7).   The Act 'strikes a new balance between family autonomy and the protection of children,' (Department of Health 1989 (ii), piii);   between parental responsibility, 'the collection of duties, rights and authority which a parent has in respect of his child' and the 'overriding purpose' of promoting and safeguarding the welfare of children. (ibid pp.1/3).   At the same time it seeks to promote the upbringing of children by their families. (ibid p.45).   It empowers the local authority to 'step in to protect the welfare of a child – but only if the child's family can no longer do so.' (Department of Health 1991 (ii)(a), p.8).

The "mission" of the Children Act 1989 may be seen as: the provision by local authorities of supportive services to parents and children as a "right;"   modifying the position/authority power of parents in relation to their children, while increasing their resource power in relation to certain professional discourses and discursive practices, through access as a right to supportive professional knowledge and legal representation;   modifying the legitimate power of state agencies and the discursive practices of the authorised agents; increasing the power of children by recognising their rights as persons rather than as objects "belonging" to their parents.   At the

same time the Act increases the rights and the responsibilities of the state, and its power to intervene in the care and upbringing of children through its designated agencies and their agents.

Although the local authority has the responsibility for 'stepping in' to safeguard the welfare of children and to provide services, other agencies and other professionals are more likely to be the source of initial concern and identification of children and parents in need of protection and the selective services that the Act prescribes; health visitors and teachers particularly who are in regular contact with a wide range of children. Dingwall et al. found that the most important single source of referrals in their study was the health care system. (Dingwall et al.1983, p.13). They argue that 'What is important about health visiting is that all children are surveyed with the implication that they may all be equally in need of protection from adult irresponsibility.' (ibid p.232). Health visitors, however, no more have a right of access to a child than social workers or any other agent. If a parent refuses access, it can be achieved only through an order made by a court. It is the law, exercised through its agencies, the courts, in the person of its agents – frequently lay magistrates whose only unifying discourse is the law itself – that "has" the power to order access and to delegate that power to the professional agents. At the same time, however, the discursive power of the professional agents, their discourse of risk, may influence a decision for compulsory intervention in the face of refusal of access to a child.

Refusal of access, or non-co-operation with a health visitor, may be interpreted by professional agents as cause for concern about the

well-being of a child. It may bring into play an inter-professional alliance, either formally or informally "through the grapevine," and the possibility of compulsory intervention. Dingwall et al. suggest that informal communications, through which anxieties can be voiced without explicitly formulating a case as one of mistreatment, are a familiar feature of professional or 'bureau-professional' work in health care. This leaves agents free to act or not to act. (ibid p.114). The interpretation of behaviour and 'agency assessments of parents' moral character' (ibid pp.77-102), as much as physical symptoms of neglect or abuse, may lead to formal referral and intervention by the authorised agencies.

Information derived from health and other agency records regarding family history and antecedents - held by hospital casualty departments, paediatric and mental health departments, health visitors, social services departments - may be shared by a coalition of professionals and interpreted as cumulative evidence of child mistreatment. Interpretation of behaviour, attitudes and a range of "symptoms" is part of the knowledge-power of professional discourses.

Some authorities provide detailed and exhaustive checklists of indicators thought to be indicative of mistreatment. (Dingwall et al.1983, p.31). For example, one outer-London borough has a list of about 40 indicators, signs and symptoms which includes a number of parental factors such as a poor relationship with the parent's own father or mother, an unwanted pregnancy and request for termination, poor physical or mental health, marital disharmony, unrealistic expectations of a child's behaviour, excessive use of drink or drugs, etc. etc. No single factor in itself is necessarily indicative of

potential mistreatment. The list includes poverty and overcrowding, but it is prefaced by the statement that child abuse can occur in all social classes. Also listed are specific types of injuries, repetition of injuries, inadequate, discrepant or excessively plausible explanations of injury, repeated absences from school or nursery, parents' delay in seeking advice or medical treatment, persistent reasons for not allowing a child to be seen, a markedly different attitude to other children in the home, aspects of the child's behaviour such as apathy or withdrawal, failure to thrive where there are good material surroundings and there is no medical illness, etc. etc.

These indicators are known to the professionals whose mission and interest is the protection of vulnerable members of the population. In areas of uncertainty, the indicators in combination can be used as regulators through which an alliance of professionals may come to reach a decision whether to exert their disciplinary power, whether to act or not to act. These "rules of the game" are a powerful tool that is "owned" by the agents of control. While action may be advice and the provision of services, it may be an application to a court for one of a variety of orders under the Children Act 1989.

It is questionable whether the lists of indicators with their "fixtures of meaning," the rules of the game to which the professionals work, are generally known, or ever made known, to parents. Unless the rules are known, the 'partnership' which the Children Act 1989 seeks to promote between social workers and parents/families is an unequal partnership. Knowledge-power, position-power, resource-power, alliance-power, authority all "belong" to the professionals and their agencies, to be exercised in relation to 'events of interest' to these

agencies.   Agency records may contain cumulative evidence of concerns about a child.   The law accords the right of access to their personal records to both adults and children, the right to know what is being said about them and their right for information on record to be changed if it is incorrect (The Access to Personal Files Act 1987). This has gone some way to redressing the power balance, although it is subject to restriction if there are 'good reasons' why information should not be shared.   (Department of Health 1991 (ii)(a), p.12). (Right of access to records is discussed further in chapter 8).

The recording of information by social workers, the need for accurate facts and the legitimacy of opinion and interpretation, has long been problematic.   "Facts" shared by a consortium of professionals involved with child protection may lend themselves to different interpretations according to the values brought to bear on them and the positioning of the participants.   Events do not occur in a vacuum, interpretations are never value free.   Professional judgements made about behaviour and about "unco-operative" parents are likely to be coloured by the knowledge-base of the professionals and their discursive practices as well as by other known behaviours of parents and by their social positioning.

From their study, Dingwall et al. provide examples of the different interpretations put on the physical conditions of a family home by different professionals – a GP, a health visitor, a detective chief inspector, a social worker (ibid pp.55-70);   and they suggest that an assessment of the 'moral character' of parents, drug-taking, inter-personal conduct (especially violence between adults) and past deviance is central to decision-making in cases of suspected child

abuse and neglect. They argue also that there are two 'institutionalized devices' which enable some professional workers to 'prefer an optimistic reading of client behaviour' (ibid p.82); justifying behaviour in the light of the particular cultural norms of a family or local community, and excusing 'deviant' behaviour because of impaired 'capacity-responsibility.' (ibid p.86).

While in some instances this may be the consequence of what they call a 'rule of optimism' (ibid pp.79-102), in social work discourse there is a "rule" of non-judgemental attitudes towards alternative cultural norms and 'impaired capacity;' while legal action and the removal of a child from its family is often seen as a last resort. There may be difficulty in providing evidence that will stand up in a court; and sometimes there is a resource problem if a court order is made for the removal of a child from the family home. It was not unknown for a care order to be made to a local authority under previous legislation and for the social services department then to be unable to provide an adequate resource or indeed any resource. There is now a quite specific requirement in the Children Act 1989 for a local authority to satisfy a court that the making of an order will be of benefit to a child, thus making the agency accountable to the court and leaving it with less discretionary power over its use of resources than under the previous legislation.

Applications to a court for an order, or entering the name of a child on a register, is rarely, if ever, a unilateral action, the operation of a single disciplinary power. It is the consequence of a regulatory system of decision-making that draws together the discourses and

discursive practices of a broad range of disciplines, professional, managerial and legal. Specialised knowledge, hierarchical position, professional status, are privileging factors that affect power relations among the professional agents in a complex field of force relations, within which the agents themselves may be involved in power struggles and subject to disciplinary power.

To illustrate the complexity of power struggles among professional agents and other interested parties in a specific site in the field of child protection, a case study based on the official Report of the Inquiry into Child Abuse in Cleveland in 1987 is provided in the next chapter. The Cleveland affair is still fresh in mind among many social workers but there is evidence that its lessons have not yet been learned. The Children Act 1989, which was a direct outome of the findings of the official inquiry, seeks to prevent the recurrence of mistakes made by various agencies with responsibility for the protection of children under earlier child care legislation.

Following on from this case study, sections of the Children Act 1989 will be analysed in chapter 6.

5.   A CASE STUDY.

THE OPERATION OF POWER IN THE FIELD OF CHILD PROTECTION

IN CLEVELAND   IN 1987.

The Report of the Inquiry into Child Abuse in Cleveland in 1987 (Butler-Sloss 1988) affords a paradigm of Foucault's idea of power as 'the multiplicity of force relations immanent in the sphere in which they operate and which constitute their own organization;' (Foucault 1979, p.92).

The main focus of this inquiry was the unprecedented number of place of safety orders applied for and granted to the social services department in Cleveland in respect of cases of alleged sexual abuse of children, and the precipitate removal from their homes of a large number of allegedly abused children. The basis and the justification for the orders was the interpretation by a Consultant Paediatrician of a physical symptom as indicative of sexual abuse; an interpretation of a sign supported by some medical colleagues but disputed by others, and questioned as a reliable indicator of sexual abuse by other expert speakers.

Prior to the implementation of the Children Act 1989, anyone could apply to a magistrate for a place of safety order under the terms of the Children and Young Persons Act 1969, s.28.   Most applications were made by social services departments of local authorities.   It was up to the magistrate to whom an application was made to be satisfied that the grounds specified in the Act were met.   A magistrate could refuse to sign an order if s/he was not so satisfied.

There was no requirement that a magistrate to whom an application was made should be conversant with child care law or social work practice.

The Butler-Sloss inquiry found that of 276 place of safety orders granted to Cleveland social services department between 1st January and 31st July 1987, the majority were heard by a single magistrate at his/her home during the hours of court sittings. This was 'despite a clear understanding between the Clerk to the Justices and the Social Services Department that social workers would make these applications in the first instance to the full court.' (Butler-Sloss 1988, p.173). The inquiry found that the magistrates most often asked were those nearest to the office concerned, or retired and therefore likely to be at home (ibid p.174). The criteria appeared to be ease of access and availability. The social workers were exercising their institutionalised position power, their specialised knowledge power and a discourse of emergency to approach and, arguably, to influence the magistrates, contrary to the rules and discursive practices of their agency.

A place of safety order was designed to give protection to a child who was considered to be at risk. It could be made on an *ex parte* application to a magistrate without evidence that the child was at immediate risk. (Department of Health 1989 (ii), p.60). An application for such an order could be made to a juvenile court or to a single magistrate. It was frequently a single magistrate who made the order. The applicant had to satisfy the magistrate that there were reasonable grounds, as specified in the Act, for care proceedings. (Children and Young Persons Act 1969, s.28(1). The magistrate's

decision would be based on the information provided by the applicant, on interpretation of the facts, on opinions informed by professional experience, and by agency and professional discourses. An applicant's case could be supported by other specialist discourses and by the professional status of experts such as paediatricians. Their diagnoses, opinions and interpretations of risk factors could be incorporated into and form part of the applicant's discourse of child protection. Magistrates were empowered by law to authorise the removal of a child from his/her family to a place of safety. The operation of this disciplinary power was likely to be influenced by the combined knowledge power and "truth" of an alliance of experts; and likely also to be influenced by the "always there" power of media discourses, if failure to provide the emergency protection applied for by authorised agents resulted in serious harm to a child.

A place of safety order was a powerful instrument in the technology of power, discipline and control. There was no requirement for either parent or child to be informed in advance of an application being made for an order; and the child could be detained in a "place of safety" for up to 28 days. There was no right of appeal. Contact between the parent(s) and child was at the discretion of the local authority and could be limited or totally suspended regardless of the wishes of parent or child. A place of safety order was used to remove a child from a situation, usually the family home, where there was reason to believe the child was exposed to some form of danger or abuse.

Child abuse is a "discovery" of the past few decades. In the early 1970s it was not the dominant element in social work discourse that it

has since become. The overall responsibility for preventing and "managing" child abuse as part of their child care function has been ascribed by the state to the social services departments of local authorities. Public opinion, informed and formed through media reports of child deaths and the events in Cleveland and elsewhere, hold social workers responsible for protecting children from neglect and harm inflicted by adults. The "successes" of social workers in protecting children are not newsworthy and do not receive media attention.

The Butler–Sloss inquiry found that there were procedural guidelines in Cleveland which provided a structure for professionals investigating suspected child abuse. There is no one single definition of child abuse. It is a culturally constructed concept which takes many forms. Concerns may centre on physical abuse (non-accidental injury), sexual or emotional abuse, neglect and failure to thrive, and on children living in the same household as known sexual offenders (Butler–Sloss 1988, pp.4,11); also to sexual practices and references considered to be inappropriate in relation to the age and immaturity of a child. The signifiers and signs are open to interpretation and to the meanings ascribed to them by professional agents who are charged in law with the responsibility for the protection of children. While experts differ in their interpretation and in the weight they place on particular signs, (ibid p.189) certain signs and symptoms have come to "mean" child abuse.

The procedural guidelines appeared to have been well understood by all the Cleveland agencies involved with child abuse and child protection. They included referral to hopital and examination by

paediatricians in cases where there was cause to be concerned about a child's injuries or general development. Prior to the events of 1987 there were few cases of sexual abuse in Cleveland and the sexual abuse or suspected sexual abuse of young children was rare. (ibid p.57). According to police, social workers and health service staff, the guidelines on general child abuse procedures worked well and effectively. Inter-disciplinary arrangements and joint working between the main agencies in response to child abuse were considered by the inquiry to be satisfactory; other than in relation to child sexual abuse. (ibid pp.11,13).

During 1985 and 1986 there was some concern about the response of the agencies to an escalating problem of child sexual abuse. A working party of the Area Review Committee, which was 'the main consultative forum for co-ordinating multi-agency response to child abuse ... ' (ibid p.47) had been experiencing difficulties in gaining agreement from all the agencies to revised guidelines. (ibid p.14). In June 1986 Cleveland social services department appointed a Child Abuse Consultant as part of their programme to give child protection a greater priority. (ibid p.14). The Area Review Committee was superceded by a newly formed Joint Child Abuse Committee which set up a working party, chaired by the Child Abuse Consultant, to re-draft guidelines and make more suitable arrangements for dealing with the special requirements of child sexual abuse. (ibid p.14).

A Consultant Paediatrician, who had arrived in Cleveland in January 1987, was appointed chairman of the Joint Child Abuse Committee. In her previous post she had seen for the first time the 'phenomenon of what has been termed "reflex relaxation and anal dilatation."' This

she had learned from another consultant paediatrician was a sign to be found in children subjected to anal abuse. (ibid p.14). The specialised knowledge-power of the Consultant Paediatrician and the meaning ascribed by her and some of her medical colleagues to this sign was subsequently to dominate the discourse of child sexual abuse in Cleveland, influence the discursive practices of the agencies concerned with child protection, and lead to power struggles among the professional agents.

The Cleveland Child Abuse Consultant supported the interpretation of the sign by the Consultant Paediatrician - 'she had no reason to doubt (the Consultant Paediatrician's) diagnosis.' (ibid p.51). She 'believed in a structured and authoritarian approach to families where sexual abuse was alleged and saw the place of safety order as the method by which control was gained over that family.' (ibid p.174). Following an 'alarming increase in referrals for child sexual abuse' (ibid pp.17,19) in May 1987, the Director of Social Services questioned the Consultant Paediatrician 'very closely on her diagnostic techniques and was satisfied that she was confident of what she was doing.' Other doctors present at the meeting did not query her method of diagnosis. (ibid p.20). The Senior Police Surgeon, however, held strongly to the view that the sign was unreliable as a basis for the diagnosis of sexual abuse. He was supported in this by other police surgeons and by paediatricians who examined some of the children concerned and found no indications of the sexual abuse which had been diagnosed by the Consultant Paediatrician and her supportive colleagues.

In March 1987, the Senior Police Surgeon had not been allowed to examine a young child who had on two occasions made contradictory allegations about different perpetrators. On each occasion the child had been diagnosed by the Consultant Paediatrician as having been sexually abused. An arrest had been made on the basis of the first allegation which could not be sustained the second time as the child's circumstances had changed and the alleged perpetrator had had no access to the child. Charges against the man were dropped. A request was then made by a Police Inspector for the Senior Police Surgeon, who disputed the reliability of the sign as a basis for the diagnosis of sexual abuse, to be allowed to examine the child. This request was refused by the Consultant Paediatrician. The Senior Police Surgeon consulted a well-known colleague who supported his stand. It is noteworthy that the child was seen in the first instance by a doctor who happened to be a police surgeon and who was sufficiently concerned to consult the Child Abuse Consultant. The child was seen on four occasions over several months by the Consultant Paediatrician and each time the sign was observed and interpreted as further sexual abuse. On the final occasion the child was living with foster parents, which helped to convince the police that their view of the unreliability of the sign had been justified. No information is provided in the inquiry report of investigations into the circumstances of the child within her family except that the mother originally sought advice about the child's vaginal bleeding, which was of course a very proper cause for concern and might legitimately raise a question about possible sexual abuse. (ibid pp. 14/15).

This confused incident was the beginning of a power struggle between professional agents and agencies, a struggle dominated by the alliance between two powerful actors driven by the certainty of their mission to protect the children, the Consultant Paediatrician and the Child Abuse Consultant.

Between January and May 1987 a considerable number of children were physically examined by the Consultant Paediatrician and diagnosed as having been sexually abused. In March she diagnosed sexual abuse of three siblings, none of whom had made any complaint of abuse. This was the first time she had diagnosed sexual abuse on the basis of physical signs alone. She asked another consultant paediatrician to examine the three children and he agreed with her conclusions. Following a request for a second opinion, the children were examined by a consultant paediatrician in Leeds from whom the Cleveland Consultant had first learned about the physical sign found in children believed to have been subjected to anal abuse. Again the physical findings were confirmed and the diagnosis of sexual abuse was endorsed.

During May the Senior Police Surgeon for the first time examined children found by the Consultant Paediatrician to have been anally abused. His findings confirmed his view of the unreliability of the sign, and the medical examination associated with it, as indicative of sexual abuse. At a meeting of a working party set up by the Joint Child Abuse Committee, positions became entrenched. The Consultant Paediatrician, some of whose diagnoses had been confirmed by other consultant experts, was firm in her viewpoint, which was supported by the Child Abuse Consultant. The Senior Police Surgeon was

supported by his colleagues who concluded that the police would treat the Paediatrician's diagnosis 'with a degree of caution.' Butler-Sloss comments that 'Each group left the meeting with their preconceived ideas reinforced ... ' (ibid p.18).

Following the meeting, the Director of Social Services signed a memorandum on 29th May, the main effects of which were (1) to exclude a police surgeon from making a second examination; (2) to provide for routine applications for place of safety orders in cases of sexual abuse diagnosed by a Paediatrician; (3) to suspend access to parents during initial investigations. (ibid p.18; p.65). This memorandum was largely the work of the Child Abuse Consultant (ibid P.18). Influenced by the expert discourse of the Consultant Paediatrician, the Child Abuse Consultant was quite firm in her belief in the validity of the diagnosis of sexual abuse (ibid p.82), supported as it was by some medical experts, even though it was disputed by others. She 'did not recognise the importance of the dispute and did not inform the Director.' (ibid p.17).

The Child Abuse Consultant 'occupied a position of some considerable importance and influence in a public authority.' (ibid p.83); and through her position-power and "consultant" status she dominated the discursive practices of the social work agency and even that of its most powerful officer, the Director of Social Services. The exercise of hierarchical position-power by the Director followed a breakdown in communication between the police and social services, and the polarisation of the two agencies over the meaning of the sign and its reliability as a signifier of sexual abuse.

The expert knowledge-power and status-power of the Consultant Paediatrician, her self-confident belief in the truth of the sign, the driving power of her "mission," her alliance with the Child Abuse Consultant, predominated in this inter-professional power struggle between expert speakers whose common interest was the protection of children. The specialised discourse of the Consultant Paediatrician whose findings were of the most serious forms of sexual abuse (ibid p.84) was powerful enough to lead the Director of Social Services to say in a television interview that 'he had no alternative but to act on the diagnosis of the paediatrician.' (ibid p.21). In this force-field of power relations between expert speakers, a new "knowlege," a new "truth" of a particular and widespread form of sexual abuse of children, hitherto unsuspected within the agency, predominated.

The Director's memorandum requiring routine applications for place of safety orders 'where the consultant paediatrician is of the opinion that there is medical evidence of sexual abuse' (ibid p.65) was a new development in the technology of power. It promoted throughout the agency a generalised "truth" of suspected child abuse based on the controversial medical interpretation of the sign. It overruled agency and professional discursive practices of investigating and taking into account individual family environmental factors and other relevant matters before removing a child from its family, unless the family situation was clearly identified as putting the child in danger. It marginalised parents and children and constructed parents as likely abusers. It disempowered social workers by its prescriptive and limiting formulation and language and it contravened their discursive practices of consultation and liaison between agencies. The rules of social work discourse were re-defined and the discursive practices of

the agency were re-constituted through this exercise of privileged hierarchical position-power. The specialist medical/paediatric discourse, operating in an alliance with the specialist social work discourse, dominated the discursive practices of the social work agency. The alliance dominated not only the lay discourse of parents but also the expert medical discourse of specialist police surgeons and other medical experts. The operation of disciplinary power, the removal of the children from their families, was legitimized through the law and the statutory power of the courts. Authority-power, position-power, status-power, knowledge-power, the missionary drive of the 'single prime mover' (Mintzberg 1983), needed the ultimate power of the law to protect the children from what the expert discourse had interpreted as a severe form of sexual abuse.

Western culture is preoccupied with sex, with sexuality, sexual relations and the sexual functioning of the body. As Foucault posits, 'It may well be that we talk about sex more than anything else.' (Foucault 1979, p.33). Sexual discourses have proliferated since in the late nineteenth century Freud discovered the "truth" of infant sexuality and posited the link between the early life experiences and sexual fantasies of childhood and the sexual development of the adult. Attitudes towards the sexual behaviours of children and towards sexual relations between children and adults change over time as, at different historical periods, behaviours are re-interpreted and cultural norms are re-constituted. Sexual references, sexual practices that earlier this century could not be openly spoken about, have become part of everday language and experience, disseminated through a wide range of media discourses. The sexual abuse of children, particularly of very young children, is a recently discovered

truth. Since about 1984 many professionals have become aware of the need to recognise the existence of child sexual abuse, that it is widespread and that it occurs among all classes of the population. (Butler-Sloss 1988, pp.84,243). It is a truth about which the public have been informed and are kept informed through the media, often in highly emotive language and symbolic representations.

Sexual abuse can take many forms; inappropriate touching, penetration, exposure to pornographic images, and group practices connotated as ritual sexual abuse.

A definition of sexual abuse by Schechter and Roberge is widely quoted and is referred to in the Butler-Sloss report: "Sexual abuse is defined as the involvement of dependent, developmentally immature children and adolescents in sexual activities that they do not fully comprehend and to which they are unable to give informed consent or that violate the social taboos of family roles." (quoted in Butler-Sloss 1988, p.4).

The Butler-Sloss report notes that while recognition of sexual abuse of children is becoming more widespread, the subject undoubtedly presents problems for everyone. 'There is an emotional element from which no-one is immune' and a 'voyeuristic component arising from the universality of interest in sexual matters. ... Most people have some understandable unease or distaste for the subject.' (ibid p.11). Investigating and dealing with the sexual abuse of children is a particularly difficult area of work for social workers and many other professionals, some of whom may themselves have been subjected to sexual abuse and suffered its long-term emotional effects. It may

impinge on the personal feelings of individuals in relation to their own sexuality and sexual identity, as well as evoking the instinctive revulsion of most adults to the very thought of sexual abuse of children. The inquiry noted how this area of work makes heavy emotional demands on professionals. (ibid p.216).

There is, moreover, a frequent difficulty in obtaining the necessary corroborative evidence that will stand up in a court, to be used in the interests of protecting a child, when there are no identifiable physical symptoms or forensic evidence. Even when symptoms are present, a child's accusations against a particular adult countered by that person's denial may be difficult to uphold. On the other hand, when powerful professionals have interpreted a physical sign as abuse, a child's statement that s/he has not been sexually abused may be disregarded, as the events in Cleveland have shown. Adults have argued that a child may fantasise, that children have sometimes altered or refuted earlier accusations, that words may be put into a child's mouth (ibid pp.204/205); that allowing a child's evidence to be videoed and the video heard in court without the child being present to be cross-examined is unfair to a defendant. The language and status of adult discourses generally position a child at a considerable disadvantage. Against the dominant adult discourses, the child is relatively powerless.

Proven sexual abuse is a criminal offence; but the disciplinary power of the police to take action through the courts against alleged abusers is regulated by the rules of evidence inscribed in legal discourse. It has been a widely accepted practice, and written into procedures for social services departments and other agencies

involved with child protection, that in investigating suspected sexual abuse, social services should work closely with the police. The police should be invited to attend case conferences and should conduct or be present at interviews with a child and/or parents. "Evidence" of sexual abuse may not satisfy legal criteria but may, on "a balance of probability" lead to a child being entered on the child protection (at-risk) register; and subject the parents to the disciplinary power of the social services department, in order to ensure the provision of services to the child. (see case study in chapter 8).

The physical examination of a child believed to have been sexually abused was and is generally undertaken by a paediatrician or a gynaecologist or a police surgeon, sometimes with one carrying out the examination and another observing. (ibid pp.218-224). Legislation prior to implementation of the Children Act 1989 did not require that the consent of the child or parent to a physical examination should be sought. During the investigations in Cleveland, photographs were taken, at the request of the Consultant Paediatrician, of the ano-genital region of some children without their permission being sought and without consultation with their parents. Parents told the inquiry that they met with resistance and difficulty when they wished to obtain an independent medical opinion. Some were offered a second opinion by a colleague of the Consultant Paediatrician who supported her diagnosis. They were given no other option, which they found unacceptable. A number of parents complained that they received no advice from doctors or social workers about their right to another opinion. Parents were concerned that the Consultant Paediatrician and her colleague appeared not to be prepared to take account of any medical history, and that medication or treatment which their children

had been undergoing was not available or was ignored while their children were detained in hospital or placed in foster care. This they largely attributed to the paediatricians' concentration on and preoccupation with sexual abuse. (ibid pp.36/37). The discourse of the sign dominated power relations. Parents were marginalised and subjugated to the surveillance and disciplinary power of the experts; and senior medical professionals, police surgeons whose expert status customarily placed them in a dominant position in hierarchies of power, were subjugated by the knowledge-power of the specialised discourse.

Although the paediatric discourse that set in motion the train of events in Cleveland was challenged by other paediatricians and by senior police surgeons experienced in the field of child abuse work, large numbers of children were removed from their homes and detained in hospital or placed with foster parents on the basis of the truth of the dominant paediatric discourse. Notwithstanding previous good working relationships between social services and the police, and organizational guidelines for all the agencies involved in the management of child abuse – systems, strategies, rules, procedures – the internal alliances of professional experts developed into a field of force relations within which factional power interests over disputed truths predominated over the interests of the children and their families. Parents and children were denied the institutionalised right, limited as it was, to be heard; a right institutionalised in the discursive practices of social work. The rights of children and parents in all cases of suspected sexual abuse were constituted and limited by the alliance of professionals, with their technologies of control and 'normalization' (Foucault), their organizational power, and

the rules and procedures they themselves constructed and which became institutionalised within the organization. Individuals assumed to be abused or abusers were positioned as subjects, subject to the discursive practices and disciplinary power of the professional alliance; a power institutionalised in the law and exercised by the professional agents through the agency (instrumentality) of the courts.

Power, as Foucault argues, takes many forms. It is not a "thing" that one group or one person owns and another lacks. It acts upon the actions of others within relations of domination and subjection. But arguably it assumes a materiality in the discourse of the law in that it can be "given" to authorise the actions that cannot be exercised without that given power. Professionals are "given" the power – through the apparatus of the law – to remove children from their families. They do not "own" that power but temporally and locally, at a certain time and in a certain place, the power to act upon the action of others is transmitted and received as the agents are empowered by the privileged status of the law.

The power of discretion vested in the agencies under current legislation is recognised in the official Introduction to the Children Act 1989. Magistrates who are authorised to transmit the power of the law which separates children from their families, without which the power to act cannot be exercised, need always to be aware of the enormity of such an action, need always to be testing the assumptions on which their actions are based and to weigh the risks of not removing a child against the likely harm of doing so. Children need protecting from abuse by the bureaucratic practices of professional

agencies as much as from abuse or neglect within their natural families. 'The Act gives the opportunity to rethink practices and unless this is done there will be lost a rare and vital opportunity to improve the lot of children.' (Department of Health 1989 (ii), p.1).

There is much evidence in the annals of child care practice of the harm done to children who have been removed from their families and failed by "the authorities;" children who have been placed in a "bed" that happened to be available and who have experienced a succession of unsatisfactory "placements." There is no always-available supply of placement resources within which the needs of a particular child can be met. The knowledge-power of social workers and other professional agents who identify the needs of a child is regulated by the limitations of agency and external resources. The Children Act 1989 requires social workers and the courts to take into account the needs and the wishes of children and their parents when an application is made for an order; and the courts will need to know and to be satisfied about the resources that will be made available and the actions that will be taken to meet the needs of a child if an order is made. While the law empowers its agents, it now sets boundaries around their operations; but it still leaves its agents with the discretion to exercise emergency powers in circumstances in which it is believed (by the agents) that a child is at risk. The following case illustrates the way meaning may be constructed by the agents and lead to the operation of their discretionary power.

In January 1992 parents were accused of suffocating their seriously ill five-month old daughter, on the basis of a disputed medical diagnosis known as Munchausen by Proxy, a manifestation of which is

a non-accidental form of harming a child by an adult in order to gain attention from doctors. The parents were cleared only after a post-mortem examination proved that the child had died of a rare muscle-destroying disease. According to media reports, while the parents were at the bedside of their child a few days before she died they were seen by police officers who said they had been told by a hospital doctor that the child had been suffocated or smothered. The mother was told that they, the parents, would be arrested if they did not co-operate. The father was told by a doctor that his other children had been taken away by the police. The parents were held and questioned at the police station overnight and their home was searched. Their other children, being cared for by a child minder while the parents were at the hospital, were woken from their sleep at home and taken to the police station late at night.

The sick child died four days later. The next day a child protection case conference was held, which the parents attended. The two other children in the family were placed on the 'at risk' register from which they were only removed in July 1992. From February to July the parents lived with the fear that these two children would be taken away from them. The father is reported to have said 'We were treated like common criminals ... The Police could have done anything they liked and did. You would not think anything had been learned from Cleveland or Rochdale.'[1] (reported in the Independent, 21st August 1992). The controversial medical diagnosis, based on opinion and 'an as yet unproven technique' that was disputed by some medical experts, had in other cases led to trials and wardship proceedings. It subsequently became the subject of a working party set up by the British Paediatric Association. The knowledge-power of

medical discourse, even when it is controversial, still predominates in power relations between expert speakers and those who are subject to their surveillance and disciplinary powers. The at-risk register is part of the apparatus through which disciplinary power is exercised.

The maintenance of child protection (or 'at-risk') registers by social services departments is a mechanism for the surveillance and monitoring of children who have suffered, or who are believed on a balance of probability to have suffered, abuse. It is also a mechanism of control, requiring parents to co-operate with the agency and with the rules of its discursive practices. Failure to co-operate may provide grounds for the operation of disciplinary power through the courts. Names are usually entered on the register as a result of a case conference decision. The attendance and representation of parents at case conferences varies widely. The Children Act 1989 emphasises the importance of 'partnership' between social services departments and parents, and the departments are expected to enable parents to attend throughout case conferences (other than in exceptional circumstances, (Department of Health 1991 (iii), pp.42-44).

In Cleveland, the inquiry found that in 1987 the practice varied even across different areas of the county. Of 175 case conferences on child abuse held in Cleveland between April and August 1987, parents were not in attendance at any that related to child sexual abuse. Within the social services department and other agencies, there was a view on the one hand that the presence of parents would inhibit the free exchange of information and professional opinions, while others believed that parents should be enabled to attend and that the task of the conference could still be achieved. The views of parents were

sometimes represented to the case conference through a social worker. In some cases, however, social work involvement had been only the securing of a place of safety order. Parents felt their views and circumstances were not being represented, ' ... they felt powerless to influence events.' (Butler-Sloss 1988, p.58).

The discursive practices of case conferences are governed by formal procedures. A variety of professionals are brought together, usually by the social services department although sometimes at the request of other agencies, to exchange information about children who may be at risk of neglect or ill-treatment. Data on children and their families collected and held on the records of various agencies are shared, supplemented by professional observations and interpretations of the behaviours of the parents and children. It is a function of the chairperson to ensure that all participants who wish to speak are given a hearing, and to distinguish between facts and opinions. Judgements may be made about parents' lifestyles and moral characters, or about deviations from a subjective model of what in professional discourse is deemed to be reasonable, responsible behaviour; particularly if a family is already known to some of the agencies. The expert opinion of one professional, the meaning ascribed to certain facts and behaviours, does not always coincide with that of another. The discourses and discursive practices of different experts - medical, social work, psychiatric, legal, police - confront each other in this arena of power relations. Decisions, for example decisions about entering a child's name on the child protection register, are sometimes reached on a "balance of probability" and by a consensus or majority of the participants. (see case study in chapter 8)

The possibility of parents influencing decisions, even if they are allowed (empowered) to attend, necessarily depends on the extent to which they are dominated/subjugated by the expert professional discourses, their specialised language, their privileged status, their knowledge power and disciplinary power. For parents, the purpose of the case conference may be seen as constructing them as abusers of their children and stigmatising them by putting their names on a register. Theoretically, the purposes of the register are to provide priority services and oversight of the child by social workers in consultation with health visitors and schools; to alert agencies (hospital casualty departments, GP practices) that the child has been abused and is deemed to be at risk, so that special attention should be paid - referral made to a paediatrician for example rather than to a casualty doctor if a child on the register is brought to a hospital. In the event, social services departments, which have the responsibility for maintaining the register and co-ordinating the services, have often lacked the resources to provide services or adquately monitor the at-risk situation, or even to review the need to keep the child on the register. It then becomes questionable what useful purpose the registration serves. It is seen by many parents as threatening, punishing and non-productive.

At the same time it has to be recognised that the discursive practice of surveillance and the authorised power of the agents to act is often productive in fulfilling its protective function. Some of the parents in Cleveland were grateful to the Consultant Paediatrician and her colleagues for identifying sexual abuse that had not previously come to light. (ibid pp.39,40). At least one mother who gave evidence to

the inquiry approved of the taking of a place of safety order because her husband, the suspected perpetrator of abuse, had threatened to remove the child. (ibid p.41).

This possibility, of a child deemed to be at risk being removed and his/her whereabouts then being difficult to trace, was sometimes used as a justification for a place of safety order. Another possibility that could have influenced an application for an order was of the child being "got at" and threatened with unwelcome consequences if s/he made or persisted with allegations of abuse. It is not unknown, and within my own experience, for children to retract. Many children who have been subject to sexual abuse are put under pressure from many sources not to tell, to 'keep the secret.' (ibid pp.6/7). The issues are often not clear cut and require the exercise of judgement based on knowledge, skill and experience and the weighing up of risks. Mistaken judgements occur in other professions; among doctors and other health professionals, for example. In the field of child protection, public reprobation, given voice through the media, has been heaped on the heads of those authorised to act to protect children who have failed to do so; but it is most frequently focussed on social workers even when other agents have been involved. Malcolm Hill points out that 'in the Cleveland affair virtually all the criticism for the making of so many place of safety orders in a short space of time was directed at the social workers. The role of the Magistrates in granting all those orders was barely touched on.'
(Hill 1990, p.205).

Earlier public enquiries had been critical of social workers, among others, for failing to act promptly to secure the protection of

children. (Department of Health 1991 (iv). The "failures" of social workers in particular had been widely publicised through the media. Public awareness of children at risk and children in need of protection had been heightened through media discourses, particularly during 1986/87 through publicity given to the discourses of the NSPCC and Childline. Through their selective focus, the media had been, and are, largely responsible for the construction of social workers as scapegoats. In this climate social workers and their managers in Cleveland were anxious not be seen to fail children by leaving them in situations of risk; (Butler-Sloss 1988, p.84). These external influencers can be seen to have played a part in shaping the discursive practices of the social work agency.

The Butler-Sloss report quotes Mr.Justice Hollis on the dilemma faced by social workers:

> "The Social Services, of course, always have a thankless task. If they are over-cautious and take children away from their families, they are pilloried for doing so. If they do not take such caution and do not take a child away from its family and something terrible happens to the child, then likewise they are pilloried; so it is a very difficult position they find themselves in."
> (Mr. Justice Hollis, quoted in Butler-Sloss 1988, p.85).

The power to act to protect children from abuse is 'embodied in the state apparatus and in the formulation of the law' (Foucault). It is a power to which we are all subject within a culture and ideology that recognises the inequality of the power relations between the adult subject and the child. It is a power given to the agents whose mission is to protect but it is a power which may be abused. In Cleveland it was abused when place of safety orders were obtained even when a parent had agreed to co-operate with investigations,

when children were removed from their beds at night and from their families without the circumstances justifying emergency intervention of this kind, when children were subjected to intimate examinations and photographs without their consent when no allegations of abuse had been made, when parents were not told what was happening to their children and were denied access to them. Some parents saw the place of safety orders as a threat, to achieve the wishes of the doctors or social workers. (ibid p.40). The parents and children were powerless against the diagnostic gaze and disciplinary actions of the professionals.

Even when the exercise of authorised power is productive in fulfilling its protective function, it always operates in a context of non-egalitarian force relations within which the child, the parents, and sometimes an alleged abuser outside of the family, are subject to the dominant discourses, the specialised language and the discursive practices of an alliance of professionals who are privileged by their knowledge of the rules of the game and the strategies and mechanisms through which power can be exercised. They not only know the rules but they have also the privileged discretionary power to interpret them. Re-constituting the rules, and the organization of a strategic alliance around these new rules, was a significant feature of the operation of power in Cleveland.

According to Foucault, where there is power there is resistance. But for a time the opposing forces seeking to resist the power of the dominant discourse and discursive practices of the organized strategic alliance – The Consultant Paediatrician and her medical colleagues together with the Child Abuse Consultant and the Director of Social

Services - were fragmented and relatively powerless. Resistance came not only from parents. There were doctors who disputed the reliability of the sign as evidence of sexual abuse; and doctors in different parts of England had been questioning the basis of the diagnosis since November 1986. (ibid p.137). Hospital nurses were overwhelmed by the large numbers of children for whom the hospital was providing a 'place of safety' and expressed their concern that the hospital resource was being misused by children who were not in need of medical or nursing care - an effect of the position-power and resource-power of the Consultant Paediatrician who admitted children to hospital without the proper admission procedures being observed. (ibid p.126). Senior police officers who supported their medical colleagues over the unreliability of the sign expressed concern also about the unusual source and nature of referrals coming to them for police involvement (ibid p.93). Magistrates expressed concern about the unprecedented number of contested applications for interim care orders - which could be made under existing legislation at that time (Children & Young Persons Acts 1963 and 1969) - following the expiry of place of safety orders, if the local authority had not had enough time to prepare its case for care proceedings; and magistrates were concerned also about the disputed medical evidence which they were having to consider in relation to these applications and by the refusal of access to some of the parents. These various concerns were not organized into an effective resistance.

Some social workers sought to resist the demands of a paediatrician for an immediate place of safety order, especially when it meant rousing children from their beds at home and removing them to hospital late at night. One social worker who was told (instructed)

by a staff nurse that the paediatrician 'wished two children to be made the subject of place of safety orders' thought it was unreasonable to proceed with this at 10.30 p.m. She was told (threatened ?) by the paediatrician 'that she would have to take full responsibility if she chose not to act.' (ibid p.68). No power of discretion or reference to her professional discourse or discursive practice was allowed to the social worker. The memorandum from the Director of Social Services had "given" that power to the paediatricians.

The children were powerless to resist surveillance and physical examinations at any hour of the day or night, sometimes woken from their sleep in hospital to be intimately examined. Not only were their rights as persons disregarded but their precipitate removal from their families and the physical examinations to which they were subjected when no complaints of abuse had been made arguably constituted child abuse. Children who were being sexually abused were made 'double victims' (ibid p.7) by being precipitately removed from home rather than being protected by the identification and exclusion of the abuser which might have resulted, at least in some instances, from a thorough investigation of the circumstances.

Some individual parents resisted the disciplinary power of the expert professionals through their own knowledge-power (knowledge of the channels open to them) and material resource-power (money). They consulted solicitors and were then able to achieve an independent second medical opinion. Some parents with legal advice arranged for their children to be made wards of court in order to obtain a second medical opinion, invoking the resource-power and authority-power of

the higher courts. Wardship was extensively used by Cleveland County Council in 1987 although they had not used this higher juridical power in previous years. In one instance, when the Juvenile Bench of the magistrates court refused to make a care order, the local authority made the children wards of court; an exercise of power unknown to or unavailable (because of cost) to many parents.

The power balance began to shift as parents became organized and constructed alliances with 'external influencers.' Their 'collective organization' formed a basis for 'effective resistance.' (Clegg 1989, p19). The parents formed themselves into a support group with the assistance of a local clergyman and were encouraged to formalise their complaints and to develop appropriate strategies. The clergyman became the co-ordinator of the group and their public spokesman. He used the power of the media to publicise their cause. An article he prepared on behalf of the group was published in The Guardian. He used the privileged status-power of external influencers, inviting two Members of Parliament to meet with some of the parents to hear their complaints. Parents spoke directly to commentators in the press and on television, expressing their distress and anger. Public and media interest was intense both locally and nationally. Butler-Sloss comments, 'The press of course had a responsibility to cover the story and it was a story which justified and indeed required to be reported.' (ibid p.169). The media played a powerful role in the development of events in Cleveland.

Media discourses served to displace the sense of moral outrage away from the "unthinkable" of adults using children's bodies for sexual gratification, and on to the paediatricians and social workers

represented as threatening to societal values and the family. They were premised in media discourses as taking children away from their parents on the basis of a distasteful and questionable diagnosis. Social workers, periodically constructed in media texts as the 'folk devils' in the centre of a 'moral panic'[2] were positioned as scapegoats for society's anger and fear at what was understood as an attack on parents and the institution of the family. Some media discourses focussed on the Child Abuse Consultant and the Consultant Paediatrician, representing them as aggressive women using their power to deny the rights of parents, rather than as responsible professionals seeking to protect the children. It was not the perpetrators of sexual abuse on babies and young children who were being constituted in media discourses as the folk devils but the social workers and the paediatricians; and the problem was defined in terms of an attack on family life on the basis of a dubious diagnostic technique.

According to some media accounts, it was expected that the technique would be discredited in the report of the official inquiry. In fact, it was not. The inquiry was of the opinion that 'undue weight' was given to the sign by the paediatricians (Butler-Sloss 1988, p.165) and that it was 'elevated from grounds of "strong suspicion" to an unequivocal "diagnosis" of sexual abuse.' (ibid p.243); but it did not discount anal dilatation as a possible indicator of sexual abuse. One of its recommendations was that consideration should be given to 'inquiring into the significance of the phenomenon of anal dilatation.' (ibid p.247).

Meaning is constructed in the way language is used to define a problem. While much of the media, and the M.P. who raised the issue in the House of Commonms, defined the problem as injustice to parents and an attack on family life, the inquiry defined the problem as the sign used as proof rather than as an indicator, alongside other indicators, of possible sexual abuse. It is noteworthy that the Report of the inquiry constructed the issue that needed to be further addressed as the "management" of child sexual abuse rather than the causes or prevention of child sexual abuse.

The media are potent external influencers with the technological power to bring "stories" in various textual forms to the public at large, using the professional expert power of language and imagery, and the privileging power of selectivity, to campaign and give prominence to certain aspects of a story. The inquiry found that the comprehensive coverage by the media was 'for many understandable reasons, to some extent one-sided' and that the media became a factor in the continuance of the crisis. (ibid p.169). The inquiry recognised that media people, reporters, commentators, editors, 'cannot be immune from their own feelings and prejudices.' and that sexual abuse presents particular problems for them as for everyone. (ibid p.168).

Media discourses have campaigned in recent years over various injustices perpetrated against citizens by the actions of powerful agents, among them social workers with their power (authorised by the courts) to remove children from their families. The media brought the crisis situation in Cleveland to the attention of the wider public, often inflecting meaning by their one-sided emphasis on the powerlessness of the parents. The media continued to keep the

matter before the public throughout the inquiry and later through their comments on the Report. The ways in which the media constructed negative images of the Consultant Paediatrician and the Child Abuse Consultant, and inflected meaning through references to aspects of their personal lives, is critically analysed by Beatrix Campbell in her account of the inquiry and related events. (Campbell 1988).

The privileged position power of other external influencers was a decisive factor in this force-field of power relations, notably one of the Members of Parliament whose attention was drawn to the complaints of the parents by the local clergyman with whom the Parents' Support Group had formed an alliance. The M.P. exercised his privileged power of access to other M.Ps. and to the Minister of State for Health, and his privileged access to the media. He had the drive to mount an oppositional power in this 'multiple and mobile field of force relations.' (Foucault 1979, p.102). Extra-discursive factors of media technology and the drive of a 'single prime mover' (Mintzberg 1983) joined with media discourses to change the balance of power. A climate of moral outrage developed as the public became aware of the events in Cleveland as represented in media discourses; representations in which the parents were generally positioned as the victims of an excessive operation of power by paediatricians and social workers.

Parents complained to the M.P. about the allegations of sexual abuse, the removal of their children under place of safety orders, the denial of access, the lack of consultation and the fact that they often did not know what was going on. The M.P. became aware that the

diagnostic technique of the Consultant Paediatrician was being challenged and that sexual abuse was being diagnosed on the basis of the disputed technique and in some instances on the sole evidence of the sign; and that this diagnosis was being followed automatically by a place of safety order. He was concerned that children were being removed from their homes without a full assessment being made. He was concerned that children attending hospital for routine medical matters were being examined for sexual abuse. His concerns were brought to the attention of the House of Commons and he provided detailed case notes on a number of the families to the Minister.

The inquiry report notes that not all the information provided by the M.P. was accurate and some was misleading. (Butler-Sloss 1988, p.167). Beatrix Campbell has challenged not only the accuracy of the M.P's information but also the motivation for his intervention which, she argues, was based largely on personal and political self-interest. (Campbell, 1988).

On the 9th July the Minister announced in a statement to the House of Commons the setting up of a Statutory Inquiry.

The parents, having organized themselves, developed effective strategies and alliances with external influencers through whom their domination by powerful professionals became a matter of public concern. 'Enormous concern was voiced not only by parents of the children involved but also by nurses, police, Members of Parliament and, through the medium of the press, the public both in Cleveland and nationally.' (Butler-Sloss 1988, p.1). The privileged position and status-power of Members of Parliament, the power of the media to inform and influence, and the moral outrage of public opinion entered

into this arena of power relations. The knowledge-power of the specialised medical discourse through which new truths and subjectivities were constructed was effectively challenged. In this field of multiple force relations the discourse of the rights of parents and children was 'a point of resistance and a starting point for an opposing strategy.' (Foucault 1979, p.101); a strategy that became institutionalised in the Children Act 1989.

In the next chapter sections of the Children Act are analysed to identify the ways in which the discourse of the law now seeks to protect the rights of children and parents, linking the rights of parents with their responsibilities and moderating the power of the professional agents.

Notes to Chapter 5:

(1) Presumably a reference to the investigation into alleged "ritual" sexual abuse in Rochdale in 1991. See Dennis Howitt, <u>Child Abuse Errors. When Good Intentions Go Wrong</u>. (Hemel Hempstead Hertfordshire, Harvester Wheatsheaf, 1992) pp.155/156.

(2) The notion of folk devils and moral panics is taken from Stanley Cohen. (<u>Folk Devils and Moral Panics. The Creation of the Mods and Rockers</u> (London, MacGibbon and Kee, 1972). Cohen posits that 'societies appear to be subject every now and then to periods of moral panic. A condition, episode, person or group of persons emerges to become defined as a threat to societal values and interests.' A 'gallery' of 'folk devils' is constructed. The media, he argues, 'have long operated as agents of moral indignation ... their very reporting of certain "facts" can be sufficient to generate concern, anxiety, indignation or panic.' (pp.9-16)

6.   THE CHILDREN ACT 1989:

THE RE-ALIGNMENT OF POWER RELATIONS.

(Note: In the language of the Act, a "child" is a person who has not reached eighteen years of age).

The Children Act 'seeks to protect children both from the harm which can arise from failures or abuse within the family and from the harm which can be caused by unwarranted intervention in their family life.' The tension between these two objectives, 'The Welfare Balance' (Department of Health 1989 (ii), p.5) is a tension which 'the Act seeks to regulate so as to optimise the overall protection provided for children in general.'   These statements exemplify the underlying intentions of the Act, to address the rights of children and protect them from neglect and ill-treatment by external agencies as well as within their own families; to address the power imbalance between professional agents and families; and to control the use of legal instruments by the local authorities.   The legislation 'realigns the balance between families and the State ... (and) also adjusts the relative power and responsibilities of local authorities and the courts.' (Masson 1990, p.6).

The Butler-Sloss inquiry found that under the legislation in force in 1987 some local authority social services departments were relying heavily on the use of place of safety orders in their child care practice. (Butler-Sloss 1988, p.57) At the same time there was general uncertainty expressed to the inquiry about the use and powers of a place of safety order and 'a difference of opinion among social

workers as to its meaning and the extent of control it gave them over the child.' (ibid p.174). While the discursive practices of some social workers in Cleveland were founded on this uncertain legal knowledge-power, their specialised professional knowledge influenced the magistrates to issue the place of safety orders. It was these orders which empowered the social workers to act, to remove children from the care of their families.

The actions of the statutory agents and the courts have to be understood within the context of the 'structure of feeling'[1] and the cultural climate of the time; a climate of general sexual "permissiveness" but uncertainty over the boundaries of sexual behaviours; and the feeling of moral outrage voiced through media discourses over child deaths and over the recently discovered truth of sexual abuse of young children – outrage directed towards the statutory agencies held responsible for protecting children as well as towards the abusers. The media act as indirect external influencers, their discourses affecting privileged professional agents as well as building up public opinion.

The statutory agents, social workers who dominate the power relation between themselves and families/children, are privileged by their knowledge of the law, by their statutory position as agents of the law, and by access to its agents in the courts. They are privileged by the specialised knowledge of their discipline and by the specialised language of their discourses which only they are authorised to speak; and by their alliances with the specialised knowledge of other disciplines, paediatrics in particular. They are privileged by the authority of their agency and by their legally

ascribed power of surveillance, their professional "gaze." Yet, it is ultimately through the privileged power of the law exercised by its agents in the courts that social workers are empowered to remove children from their families. So, however inappropriately social workers in Cleveland (and elsewhere) may have applied for place of safety orders, sometimes 'an automatic response ... to certain sets of facts.' (Butler-Sloss 1988, p.228), it was the magistrates who empowered them.

The Children Act 1989 seeks to regulate the practices of the professional agents and the courts through the discursive "rules" set out in the series of handbooks issued by the Department of Health. These are designed to provide guidance for managers and practitioners and to promote an understanding of the principles of the Act. (Department of Health 1989 (ii), p.(iii). The regulations set boundaries around the power of the professional agents and impose specific responsibilities on the courts and their agents.

The Act is concerned with the welfare of children in their families, with children 'looked after' by a local authority, (i.e. 'in care' through the making of an order, or provided with accommodation by the authority for a continuous period of more than 24 hours); with children living away from home; with juvenile offenders; with court proceedings involving children in private law disputes between parents and public law disputes between a local authority and parents. It amends previous legislation regarding children's homes, community homes, voluntary homes and voluntary organizations; and it makes provision with respect to child minding and day care for young children.

The Act covers a broad range of concerns relating to the welfare and upbringing of children. It 'brings about radical changes and improvements in the law and provides a single and consistent statement of it.' It leaves the courts and local authorities with wide scope for discretion and the opportunity to rethink practices; and 'unless this is done there will be lost a rare and vital opportunity to improve the lot of children.' (Department of Health 1989 (ii), p.1). The detailed guidance provided by the Department of Health for the agencies and the courts was designed to help them 'steer a safe path, to understand the Act as a whole and not to lose sight of underlying principles.' (ibid p.iii)

Within the broad canvas of this wide-ranging legislation, what follows will focus on these underlying principles and in particular as they relate to the concept of 'children in need' as Part 111 s.17 (10) of the Children Act 1989 defines it. This category includes children with disabilities and children suffering or at risk of abuse or ill-treatment.

The Act requires every local authority, as a 'general duty,' to provide an appropriate range and level of services 'to safeguard and promote the welfare of children within their area who are in need; and ... to promote the upbringing of such children by their families ... ' (s.17 (1)(a)(b). As the discourse of the law intersects with the discourse of social work and other professional discourses, it seeks 'to achieve an appropriate balance between the state's powers and those of individual parents.' (Masson 1990, p.39)

Judith Masson in her commentary on the Children Act 1989 points out that 'There is no definition of Welfare for Part 111 ... (and) Even when there is agreeement about children's needs there may be no duty on the local authority to satisfy them. For example s.17... does not require local authorities to take on an income maintenance role...' although there is '... considerable evidence that poverty is associated with poor health, poor educational attainment, employment problems and reception into care for children.' (Masson 1990, p.39).

Local authorities are required by law to act in the interests of children who need services to secure a reasonable standard of health and development, including children with disabilities. In terms of the Act, 'health' means physical or mental health; 'development' means physical, intellectual, emotional, social or behavioural development. (s.17(10,11). It is as the agents of the law that local authorities have a 'general duty' to provide a range and level of services which are 'appropriate' to the needs of children in their area.

Masson comments that 'What services are provided and the numbers they can serve would seem largely to be left to the local authority ... It will be extremely difficult to show that services are not appropriate.' (Masson 1990, p.39). The professional agents retain the discretionary power to make the rules, to interpret need and to determine what is appropriate; and the level of services provided remains subject to the limited resource-power of the agency and to the control of resources by the state.

Schedule 2 of the Act requires that local authorities 'must take reasonable steps to identify the extent to which there are children in

need in their area'; and through the provision of services, prevent children in their area suffering neglect or ill-treatment.' (Department of Health 1989 (ii), p.45). Masson observes that 'The duties in Sched. 2 Pt 1. are largely qualified, *i.e.* that the local authority shall take *reasonable* steps or make such provisions as *they consider appropriate.*' (ibid p.39); and she argues that even slight impairments may be significant for a child's long term development. (ibid p.41).

In the discursive language of the Act, 'harm' means ill-treatment or the impairment of health or development. 'Ill-treatment' includes sexual abuse and forms of ill-treatment which are not physical. The question of whether harm suffered by a child is 'significant' turns on the child's health or development 'compared with that which could reasonably be expected of a similar child.' (Children Act 1989 s.31 (9)(10); s.105). A 'similar child' is not defined. This begs the question of the way in which the notion of similarity is to be applied and how a 'reasonable standard' of health and development is to be defined. For example, is the health and development of a child living in poverty in bed and breakfast accommodation, or in sub-standard housing in a run down inner-city area, to be measured against a child of a similar age living in a financially secure and well-housed family in a prosperous suburb? Masson observes 'It is not clear how reasonable is to be judged: by the standards of the area, by national standards, or by the standards appropriate for a developed nation.' (Masson 1990, p.41). She points out that some authorities may accept lower standards in relation to certain groups such as travellers, which may contravene the Race Relations Act 1976. The Department of Health Guidance and Regulations, Volume 2, states 'The child's needs will include physical, emotional and educational

needs according to his age, sex, race, religion, culture and language and the capacity of the current carer to meet those needs.' (Department of Health 1991 (i)(b), p.5). Drastic measures and a wide range of resources will be needed to provide the necessary services to remedy the well documented ill-effects on the health and development of children marginalised by their ethnicity and those living in poverty and insecurity.

The Act specifies the range of services local authorities must provide 'as they consider appropriate' for children in need who live with their families, including services to disabled children to minimise the effect of their disabilities and 'to give such children the chance to lead lives which are as normal as possible.' (s.17 (10)(11); Department of Health 1989 (ii), p.46). The Act requires local authorities to take 'reasonable steps' through the provision of services to reduce the need for court proceedings; and they may take disciplinary action only through an order made by a court and only when a court is satisfied that the explicit conditions for making a specific order have been met. (Department of Health 1989 (ii), pp.45-46, 60-71).

The legislative discourse is prescriptive of the duties it imposes on its agents, the local authorities, including a general power of surveillance in order to identify children who are in need of services; but it leaves a wide margin for interpretation and the exercise of discretion, and consequently for the way in which an agency will exercise its legislative powers. The Act is a discourse of 'reasonableness;' reasonable standards of development, the taking of reasonable steps and the provision of appropriate (reasonable) services. While the Act is specific in defining "health" to mean

physical and mental health, and "development" to mean physical, intellectual, emotional, social or behavioural development, it leaves open to interpretation and a variety of readings the notion of a 'reasonable' standard of health and development, and what constitutes an 'appropriate range and level of services.' Given that local authorities operate within limited resources and that their statutory duties extend to all age-groups of the population and a variety of needs, rationing of resources is inevitable. It is then questionable to what extent local authorities may realistically be able to provide an 'appropriate' range and level of services for all children 'in need' within their families, however restricted the definitions of 'appropriate' and 'need.'

The reading of 'need' and 'appropriate' depends on the position and interest of the "reader" - parents and children as self-interested subjects; resource holders/rationers-providers seeking to satisfy a range of sometimes conflicting organizational interests; elected members regulated by party-political interests and sometimes motivated by self-interest as well as by the mission of "service." While the Act seeks to regulate a more egalitarian interaction between professionals and users of services, promoting 'partnership' and the rights of children and of parents, the ambiguity of its language threatens this "reality." Its discretionary element and the wide scope it leaves for interpretation privileges professional discourses. But the discursive practices of professional agents remain subject to the privileged position-power and resource-power of agency managers and policy makers who prioritise and ration resources. These other interests intersect with the specialised knowledge-power of the

professionals who read and interpret the signifiers of need and "know" what action is appropriate to meet that need.

Various interest groups may interpret both the text of the Children Act 1989 and the provision of services by its agents in different ways. For example, what in the spirit of the Act is intended by local authority agents to be 'sympathetic support and sensitive intervention' (Department of Health 1991 (i)(b), p.6) may be experienced by parents and/or children as interference and stigmatising, and as threatening to their cultural norms - "travelling" families or some ethnic groups for example; groups who are grossly under-represented among professional agents and policy makers, and over-represented among social work clients.

While there is a specific duty for local authorities to take account of the race, religion, culture and language of a child in need (Department of Health 1991 (i)(a), p.7) and for 'full consideration' to be given to the views of parents and children (Department of Health 1991 (i)(b) p.15), there is an overriding duty imposed on parents to co-operate with the local authority. If the language or behaviour of parents is interpreted by the professional agents as being 'uncooperative' (Department of Health 1989 (ii), p.7), the Act empowers a local authority to apply to a court for a Child Assessment Order. Failure to co-operate, for example by refusing access to a child about whose safety or well-being there is professional concern, can lead to an application by a local authority or 'authorised person' for a Child Assessment Order (s.43), which may be effective for up to seven days. The applicant, not the court, must have 'reasonable cause to suspect that the child is suffering, or is likely to suffer significant harm.'

Masson comments 'It would appear that there is a duty to investigate every allegation unless it is thought to be unfounded, or the harm suggested is not significant.' (Masson 1990, p.106)

The discourse of the Act seeks to promote the rights of the child to exercise choice and discretionary power. For example, a child of 'sufficient understanding to make an informed decision' may refuse to submit to a medical or psychiatric examination or other assessment (s.43 (8). 'However, it is not exactly clear what a young person must understand in order to establish that he has the maturity to refuse an assessment.' (Masson 1990, p.94). The indications are that discretionary power and the power to interpret seems likely to remain the prerogative of the professional agents and the courts. For example, in July 1992 an anorexic girl aged 16 was medically treated against her own wishes following a ruling by the Court of Appeal. The case received wide media coverage.

Outside observers are likely to interpret social behaviours and standards of health and development according to their own social and cultural norms and ideological discourses. Families receiving social work services are stigmatised by some outsiders as inadequate; by others they are seen as socially disadvantaged. A working party set up in 1980 by the National Institute for Social work, under the chairmanship of Mr. Peter M. Barclay, found that 'the public very generally feel that social workers are for "people of a certain kind", people who cannot fend for themselves, people often who are unpopular with their neighbours.' (Barclay 1982, p.149). The Children Act 1989 positions social services departments as monitors of all families with children, with a generalised duty to identify children in

need in their area, to provide services appropriate to their needs, and to safeguard and promote the welfare of all children, not only 'those of a certain kind.' The Act 'recognises that children are best brought up within their families wherever possible.' (Department of Health 1991 (ii)(a), p.4); an ideological position based on the concept of 'the value of the natural family' with which some social workers, and some other professional agents, would not necessarily agree. As Masson points out, 'it is well established that the views of individual social workers (and their managers) differ, particularly in relation to the value of the natural family and the consequences of entering local authority care.' (Masson 1990, p.39).

While their knowledge-power may privilege social workers in their direct relations with users of services, their power is limited by the constraints of their agencies. They are subject to the rules of the agency and the disciplinary power of their managers. (as evidenced in the case studies in chapters 5 and 8). Within the agencies there is often disagreement over interpretation and diagnosis; and the agents are caught up in inter-disciplinary professional power struggles, ideological power struggles and struggles over access to limited resources.

The agencies that are required by law to provide the services to children in need and their families are subject to the control of resources by central government. The power of the state both to legislate and to control the level of resources limits the power of the agencies and their professional agents, the social workers, to provide the 'appropriate' services. It is questionable whether within their limited resources local authorities will be able to, or will necessarily

give priority to, identifying, let alone meeting, the needs of all children in their area. While the Act proposes a hegemonic strategy of partnership between parents and professional agents, and of co-operation between local authorities and other agencies, resource allocation at one level is determined within and among the agencies through power struggles between different interest groups - social work, health care, education, housing etc. At another level, the agents in direct relationship with users of services, children in need, frail elderly people, people with physical disabilities etc., are competing for scarce resources for their individual clients. At another level resources are controlled by central government restrictions on local authority spending and on government allocations to various services. The resources on which the provision of services depends are controlled and administered by bureaucratic and compartmentalised state agencies, within which different departments operating from a more or less privileged power base, often related to what is politically fashionable, debate what is 'reasonable' and compete for their share of the financial cake.

Some local authorities, for example, may consider the provision of daycare (provided by social services departments) for the children of families living in temporary bed-and-breakfast accommodation (provided by housing departments) to be an 'appropriate range and level of service,' and to provide for a 'reasonable' standard of health and development. Many families living in such circumstances, as well as many social workers, health workers and outside observers - sometimes for different reasons - would not agree. Each local authority, and each department, has the privileged discretionary power of managing its available resources and of determining its

priorities in what is an inevitable rationing system. But the state has an overriding power to control what is available – control of the receipts held by the local authorities from the sale of housing stock, for example – and consequently to limit the power of the local authorities. Users of services may be involved in 'partnership' with the local authorities through organized group consultations with the professional agents over the provision and "quality" of services, and their views may be 'taken into account;' but the local authority managers exercise their privileged position-power to make policy decisions about the overall allocation of their limited resources – about the provision of different types of daycare, about charging for services, etc., about which "client groups" will get what; while their power to provide services is overridingly dominated by government policies and resource-power.

The Children Act 1989 achieves a small dilution of professional privilege rather than partnership. The concept of partnership signifies a power equilibrium, not necessarily between equals, but at least with an element of choice for both partners. The choice available to potential users of services depends on the professional interpretation of 'need' and their privileged power to differentiate between choice and need. Unwilling users of services have no choice; professional agents are privileged by the power ascribed to them as agents of the law to intervene in the lives of children and families without their consent. The knowledge-power of professional agents, their discursive practices and alliances, their resource rationing power, their legalised surveillance/disciplinary power, their interpretative and discretionary power, position them in a relation of privilege/disadvantage with individual users or potential users of

services; services over which the authorised agencies have control, which they ration and which they may impose on reluctant recipients. Moreover, since the law requires parents to be co-operative with its authorised agents, agencies have the privileged power of recourse to the courts if they interpret behaviour as 'uncooperative.'

Agencies, moreover, have a local monopoly of services, allowing for no freedom of choice for users. While choice on the open market is limited by what providers make available and by the purchasing ability (resource-power) of consumers, it is possible for customers in the market to make choices about where they will take their custom and purchase, or not purchase, the available services or commodities of which they perceive themselves to be in need. No such choice is available to local authority 'customers,' who have access only to the services of the local authority within which they live, or who are disadvantaged by the local lack of services for which they perceive themselves to be in need. As the Barclay Report notes, 'The agency is usually a "monopoly supplier" and market forces cannot operate.' (Barclay 1982, p.187). While the agencies have been ascribed the power to identify children in need, they have also the discretionary power to interpret need and to determine the services that will meet such need. Many "clients" are unwilling recipients of services, however much they may euphemistically be termed customers or partners, having no freedom of choice whether to enter or not to enter into consumer or partnership relations, under threat of being interpellated as uncooperative subjects. Moreover, through social disadvantage or through disability, clients of social work agencies may be in a poor position to fight for their rights (ibid p.187); including their right to be heard, to identify the needs of themselves

and their children, and to make choices about available services. The exercise of choice is an exercise of power.

The choices available to the professional agents are not unlimited; they are subject to the discourses of the law, the surveillance of their managers and the management control of resources; and the Children Act 1989 seeks to regulate the autonomy of professional agents through its discursive rules and guidelines. It constructs a re-alignment of power relations through a re-positioning of state agents in relation to each other, the social services departments and the courts, making the professional agents more accountable to the courts; and it re-positions the agents in their relations both with parents and children. It requires that the views of children should be heard and taken into account in any matters concerning their welfare. It recognises the rights of children and the "truth" of children as persons, and it seeks to empower them in relation to adults. The Act requires the agencies, local authorities, to provide procedures for considering representations and complaints about the discharge of the agency's functions, by or on behalf of any child who is 'looked after' by the local authority or is a child in need of services as prescribed in the Act. The Act seeks to make 'responsible authorities,' local authorities, voluntary organizations and registered children's homes providing residential care, more accountable; and 'envisages a high degree of co-operation between parents and authorities in negotiating and agreeing what form of action will best meet a child's needs and promote his welfare.' (Department of Health 1991 (i)(d), p.74). The Guidance and Regulations on Residential Care spell out in detail the requirements for responsible authorities to set up procedures for 'representations'

about availability, delivery and nature of these services, and to set up a complaints procedure; and thus seeks to empower the users of the services and interested parties. (ibid pp.74-87).

While there is no regulatory body, similar to the General Medical Council for example, to discipline a professional social work membership, and protect "clients" from bad social work practice, the discourse of social work is premised on such values as respect for all persons, compassion and understanding, justice and equality, and on recognising the powerlessness of many individuals to resist the intervention of social workers into their lives. (Barclay 1982, pp.145-148; 187-189). The legal discourse as it is embodied in the Children Act 1989 complements these values by requiring social workers in exercising their power to balance the perceived risks to children within their own families against the damage done to family life, and in particular to the children themselves, by unwarranted intervention; the type of intervention and disciplinary action that has been much criticised, in Cleveland for example. (Butler-Sloss 1988). Certain interventions in themselves arguably constitute abuse – such actions as social workers taking children from their beds at an early hour in the morning when the risks are not immediate and cannot justify such a draconian exercise of power.

Notwithstanding the realignment of power relations inscribed in and prescribed by the Children Act 1989, social workers will need continually to be aware of the way they exercise authority-power and professional/position power, if the 'rare and vital opportunity' to redress the power imbalance is not to be lost. They will need also to be aware of the privileging power of the legal and bureaucratic

superstructure within which they operate; and aware of how their own personal discourses impinge on their interpretations and value judgements; aware of the limitations of social work taught predominantly by white middle-class academics, and of social work practised within white dominated bureaucracies with a disproportionate representation of white males at the top of the management structures of many social services departments. They will need to rethink practices, as the Department of Health Guidance and Regulations propose (Department of Health 1989 (ii), pl), and to 'let go' of some of their power while recognising the considerable discretion and privilege they will still retain.

The Department of Health recognises that a wide scope for discretion remains in the way the Act is implemented. (ibid p.l). The Guidance documents are themselves framed in discursive language that is open to interpretation, the use of words like 'need' and 'reasonable,' as in 'Reasonable parental care is that care which a *reasonable parent* would provide for the child.' (ibid p.6). 'Reasonable' is a relative term that is culturally defined, changes over time, and begs a question about what is unreasonable. There is no absolute standard. Social workers have long had to make judgements about "minimum acceptable standards," standards that some observers would interpret as not providing for a reasonable standard of health and development or even as bordering on neglect. The Department of Health recognises that 'a standard of care which would be reasonable for a normal healthy child may not be reasonable if the child has special needs because, say, he has brittle bones, or is asthmatic or mentally disabled.' (ibid p.6); and posits that parental limitations such as low intelligence or physical disablement are not relevant to whether the

care provided by parents is reasonable. 'What is expected is the care which the average or reasonable parent would provide ... ' and if a parent 'cannot cope' because of personal difficulties s/he will be acting unreasonably if help is not sought. (ibid p.6).

There is no definition of the average/reasonable parent, any more than there is of a 'similar' child. A reasonable parent is a parent who acts reasonably. However, the considerable explanatory and supportive detail provided in the Guidance and Regulations makes it clear that 'The overriding purpose of the Act is to promote and safeguard the welfare of children.' (ibid p.3); and while 'Families Matter' and parents never lose their right to have a say in any decision-making about their child, and their right to have their views heard, 'Children Come First.' (Department of Health 1991 (i) p.5; 1991 (ii), p.5).

The Children Act 1989, 'the most comprehensive piece of legislation which Parliament has ever enacted about children ... strikes a new balance between family autonomy and the protection of children.' (Department of Health 1989 (ii), p.iii), a striving for a new balance of power relations. It seeks to realign the power relations between professionals working in the field of child protection and child care, the courts, and families, by its prescriptive and restrictive discourses. The Act gives wide powers to the courts to intervene to protect children at risk but with the proviso that prescribed pre-conditions are established (ibid p.5), pre-conditions directed to ensuring that the child's well-being and best interests are being served. (ibid pp.6-8). It is recognised that the 'necessarily potent powers' (ibid p.6) that the Act gives to the courts may 'if

misdirected' cause harm to a child by enabling the state to intervene when it should not, through the misuse of the range of orders for which a local authority may apply and which the court may make. The Department of Health seeks to minimise the possibility of the inappropriate use of power, whether by social workers or the courts, through its detailed Guidance and Regulations. Empirical research will be needed to determine how effective this is in practice.

The Act seeks to empower parents by proposing the notion of 'partnership' with Social Services Departments and by defining their rights – 'Social Services Departments must listen to the views of parents for whom they are providing a service and give them a say in how their child is cared for.' (Department of Health 1991 (ii)(a), pp.6/14). At the same time it imposes on parents the power of the law by defining their responsibilities as well as their rights, requiring them to provide 'reasonable parental care' and to seek help if they are 'unable to cope' because of personal difficulties (Department of Health 1989 (ii), p.6) or if they are unable to provide for their children a 'reasonable standard of health and development.'

The underlying principle, 'the belief' from which the Act derives, is that children are generally best looked after in the family with both parents playing a full part, whether the parents are married or unmarried, separated or divorced. While acknowledging the 'rights' of parents, it emphasises the importance of parental responsibility, 'the duty to care for the child and to raise him to moral, physical and emotional health ... the fundamental task of parenthood and the only justification for the authority it confers.' (ibid p 1). The Act emphasises also the duty of a local authority to return a child being

'looked after' to his family, unless this is against the child's interests; and to ensure contact with a child's parents whenever possible. (ibid p.1)

The Department of Health urges the need to 'grasp the broad objectives which the legislation aims to achieve ... the opportunity to rethink practices ... ' and expresses the concern that unless this is done the opportunity to improve the lot of children, their care, upbringing and protection, will be lost. (ibid p.1). The Department of Health has made more than a statement of intent. It has provided a vast amount of detailed guidance in a series of volumes running into hundreds of pages which together are 'designed to bring to managers and practitioners an understanding of the principles of the Children Act and associated regulations, to identify areas of change and to discuss the implications for policies, procedures and practice.' (Department of Health 1991 (i)(a), p.iii). The Department has also provided free to parents two small explanatory booklets. (Department of Health 1991 (ii)(a)(b)

For 'policies, procedures and practice' we may read discourse and discursive practices. The discourse of rights and responsibilities permeates the Children Act 1989 and the accompanying regulations, defining the responsibilities of parents and the rights of children; setting out the rules governing the discursive practices of authorised agencies and the other agencies responsible to work with them. The Act requires the setting up of new organizational structures, systems and strategies (complaints and representation procedures for example) through which it seeks to reorganize the institutionalised power balance between the autonomy of families and the disciplinary

authority of its authorised agencies. It extends the power of surveillance and intervention by the requirement in law for its authorised agents to identify and respond to all children in need; and it leaves with its agents the power to apply unilaterally to the courts for an Emergency Protection Order, which enables the immediate removal of a child from its family; and to apply for a Child Assessment Order which empowers them to overrule uncooperative parents. The discourse of the law embodied in the Act regulates the power of its agents as well as the families and individuals over whom its agents exercise their disciplinary power; but it leaves with its agents wide powers of discretion and interpretation and unilateral legal power in the interests of protecting the children.

In the following chapter I will consider the power of the agents within the context of the changing cultural norms and sexual behaviours of the 1990s. I will discuss the politics of child protection, the concept of children's sexuality and the emergence of sexual abuse as a widespread "social problem" rooted in the violent power of men. I will discuss the ways in which problems are defined in media discourses, the way meaning is inflected to construct news as "stories" and the ways in which the media re-construct the discursive practices of the agents for public consumption.

Note to Chapter 6:

(1) In <u>The Long Revolution</u> (London, Chatto & Windus, 1961) Raymond Williams introduces the notion of 'structure of feeling,' which, he argues, is in one sense the 'the culture of a period;' not that it is possessed in the same way by all individuals in the community but that it is how each new generation 'responds in its own ways to the unique world it is inheriting.' It will not appear to have come from anywhere but 'it is a very deep and very wide possession, in all actual communities ... the lived culture of a particular time and place, only fully accessible to those living in that time and place.' (pp.48/50).

7.   THE POWER OF THE AGENTS,

MEDIA POWER AND THE POLITICS OF CHILD PROTECTION

Local authority social workers, authorised agents of the law, are both the vehicles of power and the objects of power within the site in which they operate. The case study in chapter 5 has shown that their relational positioning in the Cleveland affair was determined not only by the knowledge-power of their professional discourses but also by the "rules" of the various power games being played out in the site, in which other privileged agents had an interest; and by the resource-power of the various players. In a complex field of intersecting power games, professional agents exercised power over subjects through their specialised knowledge and through the strategic and tactical use of other privileging resources – status, organizational position, agency and statutory authority, and access to the sanctions of the law. And these "powerful" agents were themselves dominated by the privileged resource power of other players. Resource-power, the privileged ownership of, control of, or access to resources, is a key factor in the operation of power.

Agency authority, the authority of the law, knowledge of the "rules," professional alliances, society's recognition of the "right" of agents to intervene into the privacy of subjects, are resources that privilege the agents. The authority conferred on social workers in the public sector through the law, and their 'membership' of an agency that is an instrument of the law, their identification with its 'mission' (see chapter 2), are resources which legitimise their exercise of

disciplinary power. Without the delegated authority of their employing agency and its statutory powers, the disciplinary power of social workers is limited, notwithstanding their specialised knowledge.

Social workers in the voluntary sector (i.e. those not employed by a local authority) may influence the behaviour of subjects through their specialised discourse and knowledge resource, and through their status as professional experts; but their disciplinary power, their power to act upon the actions of others, is mediated by the limitations of their resource power. The statutory power of sanctions, for example, may be exercised only through the authorised agency (instrumentality) of local authority agents. The law privileges its appointed agents through the resource of authority and the discretion it ascribes to them.

While on one level, as Foucault posits, power permeates the entire fabric of society, coming from everywhere, with no single originating source, with no defining essence, and is not, as such, the possession of any group or individual; at another level, at the specific site where it acts upon the actions of others, it operates in its different forms through the agency (instrumentality) of individual subjects, or alliances of subjects, who "own," control or have access to resources.

Children lack the resources to protect themselves from the abusive power of adults; and the state and civil society have recognised this lack and the rights of children to protection from adult power and abuse. The sexual abuse of children has become identified as a singular form of the abuse of power by adults; a power which adults exercise within the "protective" context of 'an intensive administrative

and judicial grid' laid out by the state for the protection of children; the context of an 'entire politics for the protection of children' (Foucault 1979, p.129).

The politics of child protection against sexual abuse cuts acros divisions of social class, gender and ethnicity. Children from any socio-economic or cultural group, boys as well as girls, may need protection from parents or other adults, protection from the exploitation of their sexuality, a form of adult power which violates their emotional trust and physical dependence and which they themselves lack the resources to resist. This form of power which is predominantly exercised by men has to be understood within the wider context of male violence and domination, and the discursive positioning of men in the family and in a society in which various forms of physical abuse and harassment of women and children are a cultural norm. The structural and cultural privileging of men in our society is a critical factor in the politics of power, a factor in the oppression of children, and a factor in the oppression of women which often leaves them powerless to protect their children.

Jeff Hearn notes that 'many major texts on child abuse, and even specifically on child sexual abuse, fail to explore questions of men as perpetrators and of men's power in any depth.' (Hearn 1990, p.65); and he argues that 'it is necessary and important to confront the issue of men's sexual abuse of young people specifically in terms of men's violence.' (ibid p.71).

Unlike physical abuse or neglect, which is more "visible" in families who are socially and economically disadvantaged and consequently

more likely to be subject to the gaze of professional/disciplinary agents, sexual abuse occurs in all social classes. Sexual abusers come from all walks of life and all groups in society; and sexual abusers are predominantly, although not exclusively, men. (Stainton Rogers et al. 1989, p.16). It is comparatively unusual for women to sexually abuse children. Lena Dominelli points out that 'Feminist analyses have revealed that the majority of assailants are men, ... their victims are primarily girl children ... out of 100 abusers, only one is female...' (Dominelli 1989, pp.298/299). Women may collude with an abusing partner on whom they are emotionally dependent, unable to 'suspend disbelief' that such a thing could be happening, and/or dominated by male physical force. And, as the Butler-Sloss inquiry found, children may collude with an abuser for various reasons: sometimes the child is threatened by the abuser against the consequences of disclosure, coerced to keep 'the secret'; sometimes (with good reason) because the child does not expect to be believed by the other parent or any adult: often because the abuser is a parent or relative to whom the child has a strong emotional attachment. The privileged status and culturally ascribed authority of adulthood positions the child always as the "other" in adult/child relations.

While in "traditional" familial ideology and the discourse of "family values," the family is seen as a safe place, 'the best place for children to be brought up and cared for.' (Department of Health 1991(ii)(a), p.5); it is also often the place where children are in danger from adult power exercised through various forms of violence and oppression. At different historical periods, behaviours that at one time were socially constructed as legitimate are interpreted at other times as violence and cruelty. Behaviours that were the norm

even earlier this century, flogging for example, have been redefined in contemporary Western language as 'abuse.' Yet, while corporal punishment is no longer allowed in state schools, it is still practised in some independent schools, and parents are not prohibited from physically chastising their children. Even beating a child to the extent of causing severe bruising may not be constructed as abuse by some agents of the law, privileged to exercise their power of interpretation.

For example, in March 1993, a father who beat his two young children aged five and eight with a belt was cleared by a magistrates' court of 'assault causing actual bodily harm.' (The Independent 20.3.93). The children's bruised bottoms had been noticed at school. The headmaster had informed the local social services who had contacted the police. The defence lawyer declared to the court 'There is no law in this country preventing parents from punishing their children.' The magistrates accepted that the father's behaviour was legitimate punishment. Parents, then, are legally and culturally positioned with a "right" to inflict severe physical punishment on their children against which their children have no redress in law. There is a law that prohibits the physical abuse of children; but in this instance the father's behaviour, in the particular circumstances of the children's disobedience, was interpreted by the magistrates as justifiable punishment rather than abuse. In the discourse of the law the parent's right to chastise his children by physical violence was justifiable (reasonable) behaviour. In the professional discourses of social work and other child protection disciplines, severe bruising on a child caused by this type of action, whatever the circumstances, would be construed as non-accidental injury constituting child abuse.

Meaning is constructed in contextual discourses that determine how behaviour is to be interpreted, not in the behaviour itself.

In the nineteenth century child-rearing was based on the discourse of parents' absolute rights in relation to their children, and their right to inflict punishments that today would be consensually interpreted as physical abuse. The severe physical punishment of children was seen as good parenting and was believed to be for the child's own good, even in families where there was love and affection. (Stainton Rogers et al 1989, p.13/14). Steve Taylor, discussing the way sexual abuse is constituted in contemporary society, argues that 'Children have been savagely beaten, neglected and sexually exploited for centuries without people even feeling that it was wrong, let alone categorizing such behaviour as abuse. Child abuse is thus a product of social definition ... a social construction whose meaning arises from the value structure of a social group ... ' (Taylor 1989, p46). Complex economic, demographic and social factors contribute to major shifts in the values that fundamentally affect power relations, such as those between adults and children.

Among different social and ethnic groups in contemporary society, in different family configurations, children are variously disciplined to conform to differing cultural norms and value systems. Among some social groups the threat, or infliction, of physical punishment is regarded by parents as a legitimate means of protecting their children from the harmful influences of the wider "permissive" society, the dangers of drugs and under-age sex, for example; and among some ethnic groups it is seen as a means of protecting their culture from contamination and erosion, as the younger generation is

perceived to be "at risk" of socialisation into the dominant societal norms that conflict with their traditional cultural values. The difficulties for parents of "controlling" their children caught up between conflicting cultural norms and values, and for children caught up between parental and peer group pressures, have brought many ethnic minority families under the surveillance of social workers.

Societal norms and legal discourses require parents to control the behaviour of their children and to exercise disciplinary power over unacceptable behaviour. The meaning of various behaviours and the limits of deviation from what is "acceptable" are defined by adults. Parents have both the right to control their children and the responsibility to do so. If according to legal discourses they are seen to fail, they are subject to the disciplinary power of the law and its agents. While the discourse of social work and the discursive practices of social services departments seek primarily to maintain children within their families, the discourse of the law requires social workers, as its agents, to operate disciplinary power over children who are beyond the control of their parents; if all else fails by removing them from their families and placing them in corrective environments. However, neither the discourse of the law nor the specialised professional discourses and discursive practices of the human sciences – social work, psychiatry, psychology – have succeeded in effectively disciplining and controlling the behaviours of certain "disruptive" or "disturbed" children.

In the unequal power relation between children and adults, a "child" is subject in law to the authority/power of the parent until s/he reaches the age of eighteen (unless married). While there may be a

moral obligation as well as a legal requirement to exercise "control" in order to protect children from the consequences of behaviours that are dangerous to life or threatening to the interests of others, or that are defined (subjectively) by parents as inimical to a child's best interests, the reality is that many children and young people are resistant to the disciplinary power of parents. In an age of rapidly changing social and sexual norms, of 'flux' and uncertainties, we have not yet found a way either to control or to protect children within the family. Our understanding of childhood is full of contradictions and fails to take account of the earlier physical and sexual development of children, their intellectual development, and their right to be involved in negotiating the rules and limits of behaviour and the sanctions if those limits are contravened.

The social definition of childhood, and children's sexuality, have been reconstructed at different historical periods. A proliferation of professional discourses have periodically re-interpreted childhood and children's sexuality and have realigned the boundaries of what sexual behaviours are permissible for young people. Precocious childish sexual behaviour that was tolerated with amusement in earlier centuries was re-interpreted in the eighteenth century in a 'new regime of discourses.' Sex was reconstituted as 'a constant danger,' particularly to children, requiring the vigilance of doctors, parents and educational institutions. The health of the population as labour power and as wealth became the concern of the state and of medical, psychiatric and pedagogical discourses; a phase in the historical discontinuities in the construction of childhood, which Foucault links with 'the emergence of "population" as an economic and political problem:' Since the eighteenth century, he argues, the sex

of children and adolescents has been 'an important area of contention' as differential meanings have been ascribed to 'dangerous' sexual behaviours. (Foucault 1979, pp.25-35).

The boundary between what is interpreted as permissible behaviour and what is not permissible is contentious and constantly shifting. Through the last few decades children have been increasingly exposed to media discourses on sex and sexuality and to visual demonstrations of intimate sexual behaviours that in the first half of this century were confined to adult discourses and the privacy of adult bedrooms. "Under-age" sex, although prohibited in law, is widely practised and has become a cultural norm. Schools are promoting the use of contraceptives, unthinkable even a decade ago. Pregnant schoolgirls today are allowed to attend school. Earlier this century they were likely to have been detained for years in mental hospitals, and even a few decades ago were likely to have been hidden away by their parents while they had a termination or gave birth to a child who was immediately placed with an authorised agency for adoption.

Sexual discourses have historically privileged male hetero-sexuality and male sexual behaviours. Even during the earlier decades of the twentieth century, while male adultery and promiscuity continued to be a cultural norm, as it had been for centuries, women who had sexual relations and gave birth to children outside of marriage were positioned in the male-dominated discourses of medicine and psychiatry as both bad and mad; and the male-dominated discourses of the law prescribed that these dangerously mad/bad women were to be incarcerated in lunatic asylums, in which some women spent most of their lives. Oppositional power coming from the "women's

movement," and from the knowledge-power of late twentieth century women, is partially and gradually reconstituting this culturally defined gender-power and the rules governing sexual behaviours. As women have acquired resources of knowledge, information, literacy and communication skills and increasingly entered into the professional disciplines, they have resisted and challenged gender inequalities. But sexual harassment and other forms of sexual abuse and the objectification of women persists and is institutionalised in their societal and organizational positioning. The privileged structural/cultural position power of men still predominates in power relations between men and women.

There are some parallels between the oppression of women by men and the subjectivity of children in adult/child relations; but it is simplistic to try to understand the oppression of children solely in the context of men's domination of women. Male power and the oppression of women is in itself a more complex issue than simply male physical violence and the structural positioning of women per se. The discourses of black feminists, unwaged women, women exploited in poorly paid waged work, mothers living in poverty, have premised issues that differentiate their experiences of oppression from those of privileged white, educated and relatively wealthy middle-class women; women privileged by their resources of property and cultural capital, dissatisfied with their institutionalised role as child rearers and their structural disadvantage in the world of career-type work.

The subjectivity of children is constituted first in their physical dependency on adults and particularly mothers during infancy; and on their structural positioning in language as "dependents" rather

than as persons with natural and unalienable rights. Within the family, whatever its configuration, the subjectivity of children is perpetuated in the ideology of parents' rights of possession in relation to their children. Mothers as well as, perhaps more so, than fathers are possessive of their children; they play a significant part in the socialising of children into traditional or alternative societal roles; and mothers as well as fathers "use" their children as objects in marital disputes. Mothers exploit their children's bodies and their children's "innocence" through various media forms, television advertising for example. Jenny Kitzinger argues that innocence is a sexual commodity and that the notion of childhood innocence is a source of titillation for abusers. (Kitzinger 1988, pp.79-80). The meaning of childhood innocence is itself problematic, particularly if childhood is defined as extending to the age of eighteen, an age when large numbers of children have long been sexually active.

Through the continual processes of change and the 'endlessly proliferating economy of the discourse on sex' (Foucault 1979, p.35), new meanings and changing cultural norms have reconstituted the rules regulating what sexual behaviours are permissible in contemporary western society. While there is evidence that many children in their early teens are having the experience of sexual intercourse, the meaning of sexual behaviours between children is constructed differently, both in professional discourses and in the language of everyday speech, from sexual behaviours between children and adults. In professional discourses, social work, health care, etc., a problem is seen to arise from the relative powerlessness of children in their relations with adults, their physical and emotional vulnerability, their dependency and limitations of language and

articulation. Very young children do not understand what is happening to them, they do not know the "meaning" of their sexuality or have the resource of language to resist or to speak of it. Even older children have difficulty in articulating their experiences and feelings of violation; and they fear, and have reason to fear, that their statements will not be believed in the face of adult denial.

Sexual behaviour among adolescent children is associated with peer group pressure and experimentation. Although not universally condoned, it has become widely accepted as a reality in contemporary Western societies. Sexual relations between adolescents provoke a moral outrage in popular discourse only occasionally; for example in February 1993 when an incident in which a schoolgirl was raped by one of her peers received considerable media coverage – an example of media power creating a popular 'structure of feeling' through the transmission of information into the public domain. (media power is discussed in greater detail below). An assumption of mutual consent to experimentation between adolescent children takes no account of the privileging of masculinity in discourses of sexuality; the ways in which boys are generally socialised into stereotypical macho–male models, reinforced by media use of female bodies for pornographic display, and the cultural norms of male sexual behaviour which positions females as sexual objects. The power relation between adolescent boys and girls may be different from that between children and adults; but it is not an equal relation.

While sexual behaviour among young people is not generally constituted in popular discourse as abuse, the sexual exploitation of young children and babies, which became publicly visible in 1987

through the Cleveland Inquiry, excites considerable moral outrage in the media and among the public. Child sexual abuse within the family, which in popular discourse is constituted as the safe haven for children, is regarded as shocking to the point of disbelief. Often in investigating suspected sexual abuse there is no physical evidence, only a child's words or observed behaviour against the denial and disbelief of adults. Interpretations of verbal and behavioural signs by professional workers may lead them to believe that a child has been sexually abused; but their power to act to protect the child and "discipline" the abusing adult is limited by the discursive practices of the authorised agencies, the social services deparments which are themselves limited by the rules of legal discourses and the rules of evidence.

The interpretation of signs and the language of "evidence" may differ among the professionals who are charged by the state (with the hegemonic acquiesence of society), with responsibility for the surveillance and protection of children - social workers, teachers, the police, paediatricians and other health professionals. These differences often emerge in a case conference, an inter-disciplinary forum for the exchange of information where professional discourses intersect and may conflict. Each input of information constitutes a text and a specialised discourse reflecting the ideological positioning of the speaker. For some professionals, for example, the ideology of family values within marriage predominates; for others the ideology of children's rights predominates over parents' rights and traditional familial ideology. Disagreements over interpretation of evidence, professional self-protection, ideological bias and "personality" clashes may lead to inter-professional rivalry and cloud the issues over the

"best interests" of the child. Each agency has the discretionary power whether to act on the recommendations made by a case conference. I have, for example, known a unanimous case conference "decision" overturned by local authority senior professionals when the risk to the life of a baby was deemed by the chairperson to be unacceptable, in circumstances when the interests of the parents were seen to have predominated over the rights of the child (A study of a case conference is provided in chapter 8).

The local authority as an agent of the state has the primary responsibility and the statutory power to institute legal proceedings for the protection of a child. It may be a point of disagreement in a case conference whether the best interests of a child would be served by removal from the family home. Paediatricians, educational psychologists and psychiatrists have, in my experience, sometimes put pressure on social workers to initiate care proceedings in circumstances that do not accord with the professional discourses of social work and the discursive practices of their departments, which have tended to favour the child's natural family if at all feasible against the limited alternative options. Social workers know well that the "matching" of a child to an appropriate placement is a frequently unattainable although desired outcome of receiving a child into the care of the local authority. Too often, particularly in an emergency when a child's safety demands immediate removal from the family home, a child has had to be placed in an available approved "bed," wherever that might happen to be and whether or not it met the child's "needs." The history of ill-matched fostering placements breaking down, and children's experiences in overstretched and inadequately staffed children's homes is well documented. Countless

children who have been removed from their families into the "care" system have suffered the insecurity of a succession of alternative accommodations. Many of them have become the homeless young people on the streets of the inner cities.

Where a risk is interpreted as so great that a child's life is believed to be in danger, or there are grounds for believing that a child will suffer serious physical harm unless moved without delay from the source of severe danger, the rules of their employing agency and their professional discursive practices require that social workers must seek the empowerment of a court to protect the child by removing her or him to a safe place. However, if the evidence is interpreted differently, a court may refuse an application for an order. While bruising, fractures or broken bones may provide evidence of physical abuse (although not always conclusively, as alternative explanations may emerge on further investigation), evidence of sexual abuse and the immediacy of continuing risk is more difficult to establish. The "discovery" of the anal dilatation sign offered the possibility of providing evidence that sexual abuse had occurred and was of recent origin, thus with a risk that it was likely to continue.

Although the recognition of child sexual abuse has only in the last two decades become prominent in professional discourses and entered into the public domain, it is not a new phenomenon. The anal dilatation sign was not new when it was observed and interpreted by the paediatricians in Cleveland in 1987. As long ago as the late nineteenth century social workers in the United States were familiar with child sexual abuse, its most common form being incest. (Gordon

1988, p.57). American research had started long before a paper on the anal dilatation test was published by two paediatricians in England in The Lancet in 1986 and work on the significance of the physical sign had been going on in various parts of this country. It had long been regarded in forensic pathology as strongly suggestive of buggery. It was not controversial as a physical indicator of sexual abuse until it was applied in the field of paediatrics. (Campbell 1988, pp.21-35).

In the absence of a physical sign, certain behaviours, emotional disturbance, precocious sexual knowledge and overt sexual behaviour in young children are likely to be interpreted in professional discourses as indicative of sexual abuse. Some forms of sexual abuse leave no physical mark. Unlike the identification of abuse when physical injury is evident and cannot be accounted for as accidental, the "truth" of sexual abuse is often difficult to establish. It frequently happens that there is no indisputable evidence. The evidence of a child is disputable.

During the 1970s severe forms of discipline which resulted in observable physical injury, together with serious neglect and emotional rejection, (although these were more difficult to establish), were defined as 'child abuse' and became classified as a social problem. The language of child abuse entered the professional discourses and discursive practices of social workers, doctors, health visitors, educationalists. Organizational structures, case conference and registration procedures, were set up by local authorities. Inter-disciplinary local Review Committees were instituted to monitor procedures. All children were to be under constant surveillance,

subject to the professional gaze in the home or at the clinic by the health visitor; at the GP's surgery; at school or playgroup. If they attended casualty departments of hospitals, children's names were to be checked against an at-risk register. The meanings of certain behaviours and certain signs were to be constructed by those whose knowledge-power authorised them to speak the specialised language of professional discourses - doctors, social workers, health visitors, paediatricians, the police.

In the interests of protecting the children, parents who were suspected of deliberately injuring, "neglecting" or "rejecting" their children were to be subject to the disciplinary power of social work and other professional discourses and discursive practices. This disciplinary power prescribed a new identity for such parents and children as unwilling "clients" of the social services department. Parents not yet proven to be abusers often complained they were made to feel guilty of abusing their children by the language, attitudes and (discursive) practices of some professionals. Parents found themselves positioned subjectively in relation to the privileged institutionalised position of the professional speakers in whose specialised discourse the "problem" was constructed. Parents and children became classified as a "case," the subject of a confidential file record to which they had no access; and the subject of discussion and exchange of information and opinions among the professional agents, initially without the right of being heard. Child abuse work became a priority for social services departments. Although an occasional case of sexual abuse emerged, usually of an older child, the recognition of sexual abuse of children as a widespread phenomenon emerged only later.

It was not until the 1980s that the sexual abuse of young children found a prominent place in professional and juridical discourses. In 1987 two paediatricians provided evidence that boys as well as girls, and even babies, were victims of forms of sexual abuse. (Stainton Rogers et al 1989, p.16). The Cleveland inquiry found that 'sexual abuse occurs in children of all ages, including the very young, to boys as well as girls, in all classes of society and frequently within the privacy of the family.' (Butler Sloss 1988, p.243). Once the awareness of child sexual abuse spread into the public consciousness and entered into everyday discourse, more and more adults and young people disclosed their experiences of sexual abuse in childhood. The incidence of child sexual abuse cases increased in social services departments. Parental care had not protected children from this form of adult power, which more than any other form of child abuse or neglect excites most media attention and public outrage. Nor had the surveillance of the agents or the professional discourses of the experts served to protect the children. Their disciplinary power does not "work" on subjects except by their acquiesence or through the sanctions-power of the law.

The children involved in the investigation of the severe form of sexual abuse indicated by the sign of anal dilatation in Cleveland ranged in age from under one year to adolescence. Until the 1980s it was generally believed that incest was usually a sexual liaison between a father or stepfather and his teenage daughter, - 'a transgression of taboos, maybe but not all that far beyond the bounds of decency.' (Stainton Rogers et al. 1989, p.16). The incest taboo assumed a new symbolic form as very young children were seen

to be the objects of male sexual desire and adult power, against which the disciplinary power of the 'entire watch-crew' (Foucault 1979, p.98) of educators, social workers, health visitors, doctors, had failed to protect them. Incest, conceptualised as a form of sexual behaviour that threatens the stability of the social order, is prohibited both in the cultural norms and received moral codes of Western societies and in juridical law. Foucault argues that 'If one considers the threshold of all culture to be prohibited incest, then sexuality has been, from the dawn of time, under the sway of law and right.' (ibid pp 109,110). In Freudian terms, the violation of the incest taboo is the violent expression of prohibited and repressed desires, as 'The instincts in the id press for immediate satisfaction at all costs ...' (Freud 1962, p.111)

From the accounts of adults in recent years of widespread childhood experiences of sexual abuse, it is evident that the moral law, the law of right, the legal instruments of the state, and the disciplinary power of the state apparatuses have failed to protect the body of the child from the power of men. Fathers, step-fathers and male relatives and friends have been identified as the exploiters of 'the dangerous and endangered sexual potential' of children. (Foucault 1979, p.104). The power they exercised was not 'knowledge-power' but male adult-power exercised over dependent others who lacked the resources to resist, a power that subjugates women as well as children.

Male adult-power is enshrined in the discourses through which men maintain a privileged cultural position in our society. In traditional familial discourse male adult-power is built around the symbolic form of "the father," the dominant member of the family, the godhead to

whose authority women and children are subject; and it is built around the mythicised symbiotic relation between the family organism and the social, 'the belief that the family is crucial to social order and well-being.' (Rojek et al 1988, p.87). In political and economic discourses the man is positioned as head of the family and as the wage earner on whom women and children are financially dependent; men are positioned as the primary workforce; the interests of men are promoted in the Trades Unions and in the major professions. In the politics of gender relations, women are constructed subjectively as wives and mothers, people with biological functions and special nurturing qualities that preclude them from equal participation with men in the worlds of work and public affairs. In the politics of representation, it is men who are predominantly selected to represent "the people" in the Unions and in Parliament. In the politics of selection and preference, institutionalised male power continues to dominate the major professions and higher levels of the state agencies. Psycho-analytic discourse constructs images of women as weak and hysterical, subject to the dominance of 'the father' and subjugated to the symbolism of 'penis envy' and to the male sexual drive. While the discourse of childhood disciplines children to the general dominance of adult authority, children together with women are subject to male power, both the symbolic and real authority of the father.

The problematic of the power relation between adults and children and the intervention of the state in this power relation has changed through the centuries. (Aries 1962, Stone 1977, Donzelot 1980)). According to Donzelot, the increasing intervention of the state into family life and the regulation of childcare by the state began in the

early nineteenth century, influenced by the specialised knowledge-power of medical discourses concerned with poor standards of hygiene and the abandonment of babies. Medical discourses were concerned also with the danger of the 'self-abuse' of masturbation which 'caused a range of physical and mental problems including insanity!' Parents were warned against these dangers. This "truth" led to practices that, as Rex Stainton Rogers points out, we would define today as the abuse of children - 'castration, clitorectomy and other surgical interventions to control masturbation.' (Rex Stainton Rogers, 1989 p.24).

The problemisation of children's sexuality began with the "discovery" by Sigmund Freud of children as sexual beings and the positing of a new "truth," the Oedipal phase of children's psycho-sexual development. The surveillance of infantile sexuality through the mechanisms of the state, Foucault argues, began from this particular point in time with the definition of children as '"preliminary" sexual beings,' and the revelation that children 'are prone to indulge in sexual activity' which, both '"natural" and "contrary to nature"... posed physical and moral, individual and collective dangers;' (Foucault 1979, p.104).

What was conceptualised in Freudian discourse in myth, and as the fantasy of unconscious infantile desires (Freud 1962, p.125), the resolution of which was a natural stage in "normal" human development, has been re-constituted in feminist discourse as the sexual exploitation of children's bodies by adults, particularly men, for their own pleasure. Dominelli argues that Freud reconstructed and trivialised women's accounts of incestuous behaviour as 'fantasies

rooted in their unconscious desire to have sex with their fathers'; and that 'helping professionals' who endorse the Freudian 'insights' have 'silenced the voices of those who have been abused ... ' Gender power was ignored by Freud in his reconstruction of women's experiences. Dominelli maintains that 'Like Freud, experts drawing on psychoanalytical approaches ignore the significance of gender in incestuous relationships, the power emanating from the subordination of women to men ... and the impact of the power relations inherent in adult-child relationships.' (Dominelli 1989, pp.292/293).

The concept of child sexuality has been constructed and reconstructed in the specialised discourses of expert speakers, privileged by their ownership of qualifications and knowledge which confer on them status and authority, through which contemporary truths are constructed and "normality" is defined. Over time, these truths are reconstructed and normality re-defined, as each society produces its own 'regime of truth,' centred on its 'scientific' discourses and dominated by 'the status of those who are charged with saying what counts as true,' (Foucault 1980 (ii), p.131). These reconstructions, these 'new domains of understanding,' are, as Foucault posits, historically discontinuous. Now, in the last decades of the twentieth century, the specialised knowledges of the human sciences, particularly the medical sciences of paediatrics and child psychiatry, have identified the widespread sexual abuse of children and defined a new type of adult; not the "inadequate parent" but the abusing adult and the collusive parent who must be subjected to the disciplinary mechanisms of power vested by the state in its agencies and its agents - the agents who are the 'vehicles' of power.

Foucault, arguing against studying the operations of power within the context of social class and the domination of the bourgeoisie, posits that what we need to do is identify the agents responsible for the functioning of the mechanisms of power, the 'real agents,' who constitute 'the immediate social *entourage*, the family, parents, doctors etc.' (Foucault 1980 (i), pp.100/101). Although it is argued by some critics that the issue of agents and agencies and subject motivation are problematic in Foucault's work and that his history tends to have no subjects (Barrett 1991, Giddens 1987), he does not exclude agency and agents in his discourses on the operation of power. While he maintains that it is 'often the case that no-one is there' to have invented the aims and objectives of power, he recognises individuals as both constituted by power and 'its vehicles.' Power can never be 'appropriated as a commodity' by an individual since it has no essence; yet it is always individuals who are in the position of exercising power as its vehicles. The issue of individuals, agents, being in the position of exercising power and having 'the status of those who are charged with saying what counts as true' is crucial to understanding the operation of power. It is the individual who 'acts.' But in the process of acting, the individual agent who is the instrument or vehicle of power is caught up in a mesh ('net' 'chain') of power networks. And what counts as true is always open to the challenge of other expert agents who posit an alternative 'truth.'

The professional agents who function and act within the state apparatus to exercise disciplinary power over subjects are not autonomous. They are the vehicles through whose "agency" (instrumentality) the hegemonic consent of the population to the disciplining of those who transgress certain behavioural norms is

carried out. The rules that govern social behaviour, and the very fact that there are rules, essentially derives from the fundamental need of any society for a form of social order and from the self-disciplining of individuals to conform, more or less, to the consensus about what constitutes contemporary norms. Subjects are disciplined by the need to be "accepted" within their social groups and by the interpretations placed upon social behaviours within that milieu. Peer pressure to conform is very strong among all social groups and is a spontaneous disciplinary force through which social behaviour is largely regulated. We are disciplined as much, or more, by the "self" that seeks for structure and order in everyday life, and by the social norms with which we feel comfortable, as by the disciplinary power and the influence of the discourses of those charged with saying what counts as true. Within the 'social entourage' of the family, the rules to which adults, and children, conform are most likely to be the implicit rules that govern the social norms of their particular sector of society and their particular experience of "reality."

Professional agents may have the status of those who are charged with saying what counts as true, but their truths may be overriden by the greater status power of their political masters. While professional agents may be in the position of exercising power in their inter-personal relations with users/receivers of services, they can act only within the framework of Parliamentary law; and they are regulated by the rules and procedures of the institutions (state agencies) which employ them. It is only through their positioning as the authorised agents of these institutions, that are part of the state apparatuses through which Parliamentary law is implemented, that

individual agents are able to exercise disciplinary power over subjects. They themselves are subject to the greater status power, resource power, and sanctions power of the state in the form of the law, and they are answerable to the elected representatives of the people. The interventions of local councillors and Members of Parliament in power struggles between the statutory agencies and individual subjects over the provision of services are common. The status power of elected representatives requires the statuory agencies to account for their actions. For example, inquiries and letters from M.Ps. and councillors are (must be?) responded to promptly. At the same time, however, the agency managers are familiar with the rules and tactics of this power game. They know how to construct meaning in their reponses, designed to protect themselves and their agents from criticism or disciplinary action; a tactical manoeuvre with which some of the agents may not agree but which they do not have the resource-power (agency position and authority) to overrule.

That the discursive "statements" of professional agents count as truths derives from their status as experts and professionals. They symbolise the status of the academic institutions that have trained them and authorised them to speak the specialised language of professional discourse, conferring on them through their qualifications the status of experts, owning the resource of a specialised knowledge. This knowledge and their expert status, together with their agency position are privileging resources which "position" agents in a dominant relation with subjects. But the agents can act against subjects who transgress certain rules of social behaviour only within the parameters of the law, the rules which the law prescribes as within the bounds of the agents' authority; and only within the limits

of the sanctions the law allows them - for example, the degree of physical restraint that the law allows social workers to exercise over young people, a sanction that changes from time to time.

The knowledge-power of professional agents is subject to the authority power the law ascribes to them. A paediatrician, an expert speaker who has specialised knowledge, status as a consultant and a senior position within the hierarchy of a medical institution, may articulate the truth of child sexual abuse and use resources of status and position to exercise disciplinary power over parents by detaining a child in hospital against the parents' wishes; but the parent has the legal right, the power, to remove the child from that place, or from any place, unless a court has made an order preventing this. The disciplinary power of the paediatrician cannot be legitimately exercised without such an order. But parents must have the necessary knowledge of the law to exercise their legal right, otherwise their attempts at resistance will be ineffectual, dominated by what they "recognise" as the knowledge/status-power of the consultant. If the parents have the resource of this particular knowledge, the paediatrician may be "disciplined" by the oppositional knowledge-power of the parents. Similarly, a social worker, even with consultant status, cannot exercise disciplinary power to detain a child against the wishes of the parents without the authorisation of a court. The exercise of this form of disciplinary power is governed by the rule of law. Although the magistrates suffered little criticism for their role in the Cleveland affair, it was after all the magistrates, exercising the power of the law, who made the orders for the removal of the children.

Notwithstanding the knowledge-power of professional agents and the influential truth of their discourses, they are able to exercise power, to "act," only insofar as the law and agency legitmacy, and their positioning and status in the organizational hierarchy of the agency, allow them to act. The disciplinary power of agents operates within a context of organizational rules and is mediated by the domination of more privileged agents. The specialised knowledge that informs the discourses of professional agents, their knowledge-power, is only one of a multiplicity of privileging resources that interact in the complex field of force relations.

The Consultant Paediatrician in the Cleveland case, for example, operated within an organizational context legitimised as an agency of the state, the National Health Service, which constituted her as its agent and ascribed to her a privileged hierarchical position, the privileged status of a consultant and the privileged resources of autonomy and discretion. To this she brought the highly-rated discourse of paediatrics and a specialised knowledge of a form of child sexual abuse that could be identified by a physical sign. While the new truth of the physical sign was both endorsed and disputed by various expert speakers, in the local site in which she operated she dominated the power struggles over this disputed truth. Resistance came initially from other expert speakers, the police surgeon and his senior colleagues, rather than from parents and children who "freely" subjected themselves to the status-power and the legitimate bio-power of a paediatric expert over the bodies of the children. In the power struggle between the discourse of the police that interpreted the sign of anal dilatation as a dubious indicator of sexual abuse, and the discourse of the Consultant Paediatrician in

which the meaning of the sign was the truth of sexual abuse, the discourse and the missionary drive of the Consultant Paediatrician were the dominant forces. Her specialised knowledge-power and her status as one who was charged with saying 'what counts as true' drew her into an alliance with the Child Abuse Consultant who believed in the truth of the diagnosis and in the paediatric discourse of emergency action to protect the children. Both the Consultant Paediatrician and the Child Abuse Consultant believed not only in the truth that the children identified by the sign had been recently sexually abused but also that they were at risk of the abuse continuing unless they were removed as a matter of urgency from the situation in which the abuse had occurred. These truths of abuse and continuing risk and the discourse of children's right to protection constituted the meta-discourse. It dominated the oppositional discourses of the police surgeon and his allies. It influenced the Director of Social Services into the responsive discursive practice of authorising emergency action to protect the children. Privileged by his hierarchical position and status in the organization, by the legitimacy of the organization as an agency of the state and of the law, the Director exercised his disciplinary power.

It was through the pro-active drive and positive belief in the truth and right of their discourse, through their 'missionary' drive, that the Consultant Paediatrician and the Child Abuse Consultant, in a powerful alliance, exercised disciplinary power not only over parents and children but also over the knowledge-power and re-active (resistance) power of the police surgeons, and over other experts who disputed the truth of the sign as a reliable indicator of sexual abuse.

The effect of this forceful and charismatic alliance between two privileged agents in conflict with other powerful players was that the inter-agency power struggle became increasingly personalised. Professional values and priorities were forgotten as 'the interests of the children became completely submerged.' (Butler Sloss 1988, p100). Power struggles over truth and the certainty of meaning, and personality clashes between individual agents all of whom had the privileged status of those who are charged with saying what counts as true intruded into professional discourses and dominated the force-field of power relations.

The Child Abuse Consultant held a privileged and high status position comparable within her own agency with that of the Consultant Paediatrician; but her power to act was contingent on the meta-discourse of the latter and the true knowledge-power of her expert diagnosis based on the evidence of the sign. Social work does not have this diagnostic expertise, although it has borrowed the medical language of 'diagnosis' and 'treatment' in its discourses and discursive practices. The power of the Child Abuse Consultant rested in part on the knowledge-power of the Consultant Paediatrician and her discourse. Moreover, the Child Abuse Consultant was more accountable within the bureaucratic structure of her organization than the Consultant Paediatrician was within her organizational milieu. Even as a "consultant" she needed the position power of the Director of Social Services to authorise place of safety orders as a standard discursive practice. The truth and right of the discourses of these two Consultants, together with their status/position power and the resource power of their personal drive dominated other powerful players. The meta-discourse influenced the Director of Social

Services, to whom the Child Abuse Consultant was organizationally accountable, and the elected members to whom the Director was accountable, to accept the truth of the Consultant Paediatrician's diagnosis.

The Child Abuse Consultant exercised disciplinary power over her social work colleagues so that they acted on the instructions authorised by the Director of Social Services. Driven both by a belief in the true discourse of the Consultant Paediatrician and a strongly motivated commitment to the rights of the children to protection, she operated disciplinary power over her subordinates. The social workers, whose professional discourse and discursive practices required them first to investigate allegations of abuse and consult with other professionals, were subject to the authority-power, knowledge-power, hierarchical position power and status power of the Child Abuse Consultant. Seen by parents and observers as powerful agents who removed children from their homes and the care of their parents, within the organizational context the social workers were relatively powerless as they were subject to the disciplinary power of the Child Abuse Consultant. The rules of the institution which employed them required them to follow the instructions of senior "officers."

Organizational discourses and professional discourses, sometimes in conflict, were among the factors in the struggles between the various players, whose employing agencies ascribed to them the right to exercise disciplinary power within a structure of rules, systems and priorities, features of all organizations through which the boundaries of individual autonomy/power are defined. (see chapter 2). For the

police, the rules and discourses that govern their disciplinary actions require evidence that will stand up in a court. For social services departments the rules that govern action, in various contexts within which children are perceived to be in danger, are largely discretionary and based on a balance of probabilities. The discourses of social work require that account must be taken of a range of social factors, physical and emotional symptoms, attitudes and statements, and the degree and immediacy of harm to which a child is deemed to be exposed.

For the Child Abuse Consultant the balance of probability, based on her view that sexual abuse is '"essentially the misuse of power by an adult aginst a child,"' was that in any investigation the adult concerned 'was likely to continue to misuse and exploit that power.' (Butler-Sloss 1988, p81). Her specialised knowledge about the problems of child sexual abuse together with the truth of the 'phenomenon of anal dilatation,' her privileged status/position in the agency, her power of sanctions through the resource of place of safety orders, enabled her to act. Her knowledge-power, position-power, sanctions-power, alliance power were interdependent resource elements which, together with the discourses of child sexual abuse and the right of the child to protection, predominated in the power struggles with the police. Her drive and sense of mission, like that of the Consultant Paediatrician, played a significant part in this field of force relations, leading her forward 'at a faster rate than the Police were prepared or able to go.' (ibid p.82).

Among many social workers, managers and practitioners, with whom I have discussed the events in Cleveland in 1987, it was the way in

which power was exercised to remove children from the care of their parents through the use of place of safety orders, sometimes taking children from their beds at night, when the immediacy of risk had not been established, which caused most concern and criticism. This mechanism for the exercise of disciplinary power has been superceded by the Emergency Protection Order in the Children Act 1989. The way this resource is used will still depend on the discretionary power and discursive practices of the empowered agencies, the social services departments of the local authorities and their agents. It is through these 'real agents' and their resource-power that the mechanisms of disciplinary power are able to function.

Resource-power falls into a number of categories, some of which overlap and which may be both discursive and non-discursive, premised in discourse and operating through discursive practices but legitimized and acted upon organizationally and structurally by agents – through status, position, delegated authority, discretion. The knowledge-power of expert speakers, the 'serious meaning' of their discourse and its relative professional ranking, is one type of resource. But clearly it is not the only resource operating in the field of power relations. To distinguish between discursive and non-discursive resources is not useful in understanding the operation of power. Some resources are arguably non-discursive, information systems and communication systems for example which are technological resources available to privileged agents; also such material resources as money, property, labour-power, accommodation. But they are activated through ideology and in discursive practices. Charisma and missionary drive are resources through which individual subjects exercise power; but 'mission' is inevitably founded in the

language and thinking of discourse, ideology operates in discursive practices, and charisma is a discursive cultural construction.

Knowledge-power is not the exclusive possession of expert speakers. Knowledge is accessible to non-expert individuals who exercise the power of personal drive to inform themselves and construct alliances with individuals or groups who own or have ready access to expert knowledge - groups like Parents Against Injustice for example. "Expert" knowledge-power is increasingly being resisted in the last decades of the twentieth century by a literate and articulate population with a will to know and with access to resources through which oppositional power may be effectively directed against the knowledge-power of the professional agents. These resources include Members of Parliament, the media, and oppositional alliances such as the Parents Rights Group, Parents Against Injustice, The Voice of the Child in Care, etc. whose own resources are knowledge of the law, knowledge of the 'systems,' and knowledge of the rules of the game and how they may be challenged. Individual drive is a resource that is owned by and exercised by free subjects. Used collectively, it may effect a shift in the force field of power relations from power/resistance to power/power. The events in Cleveland called up more than resistance. Through the intervention of external influencers who owned or had access to a range of resources, the struggle developed into a loose alliance of oppositional powers. The "drive" of the Consultant Paediatrician and the Child Abuse Consultant was countered by the oppositional drive of other interested parties.

The analysis of the text of the Butler-Sloss report has identified a 'multiplicity of force relations' operating in this particular site, in which individuals became both the instruments and the objects of power. Social workers who were the legitimately empowered agents (instruments) of the law and their employing agencies, authorised to remove children from the care of their parents, were also objects of the authority power of their managers. Their professional discursive practices were subjected to the position power of the Child Abuse Consultant and the Director of Social Services.

This dual positioning of social workers is not unique to the Cleveland situation but is often not recognised by their critics who construct them as all-powerful. Social workers as well as parents and children may be caught up in the playing out of a complex power-game, caught between the expert discourses and discursive practices of organizationally more privileged players – managers, consultants, paediatricians, police surgeons, magistrates, MPs, the media; a power-game in which the power-knowledge and truths of specialised professional discourses intersect with the discourses of management, with discourses of gender and with the discourses of the law; a power-game in which the media play a significant role in their function of serving 'the public interest.' The events in Cleveland entered the public domain through the media and through the complaints made by parents to their Members of Parliament, the state officers whose privileged status power gave them access to the national media and enabled them to bring the matter to the attention of the House of Commons. Privileged forms of power, media power and the status power of Members of Parliament, entered into this complex field of power relations. The power balance was changed by

the intervention of privileged 'external influencers.' A 'moral panic' was constructed around social workers and paediatricians as the new 'folk devils' threatening the institution of the family and thereby the whole social order.

Exercising the hegemonic authority and influence accorded to Members of Parliament by virtue of their privileged status power, one of the local M.Ps. became deeply involved in the events in Cleveland. He made several visits to the hospital where he saw not only parents but also the District Manager of the local Health Authority. He was able to speak several times with the Director of Social Services, with the leader of the County Council and local councillors, and with the General Manager of the regional Health Authority. He 'became caught up in the media attention being devoted to Cleveland.' He became a resource for the media. He was able to hold a press conference. He appeared on television. He was able to speak with the Police Surgeon and with the Deputy Chief constable to confirm that child sexual abuse guidelines had not been operative. He was able to gain access to information about the affairs of families and to present to the Minister of State for Health a file containing his observations and his interpretations of these matters, and to present the "truth" of his inquiries in a way that favoured the perspective of the parents. His intervention was instrumental in engaging the power of the Minister in the setting up of a Statutory Inquiry. (Butler-Sloss 1988, pp.163/164). The power of the state in the form of its major institution was brought to bear on the knowledge power and disciplinary power of the expert professionals, through the agency (instrumentality) of the elected representative of the people exercising his status power and privilege as a Member of Parliament. The

hierarchical position power and the status power of the Consultant Paediatrician and the Child Abuse Consultant which had dominated this field of power relations were in turn dominated by the higher status power and parliamentary privilege power of the M.P.

Status and institutionalised privilege are major resources in power relations. The media are privileged by ease of access to individuals with status, and by access to the "true" statements provided by individuals with status power; privileged by technological resource power through which their discourses can reach vast and diverse audiences; by expert power through which media professionals are able to select that which is "newsworthy" and construct meaning through the various forms and emphases which they employ to bring "stories" to specific audiences. The media have become institutionalised in modern societies, a central feature of everyday life through which we receive our information and which influences the way we construct our understanding of the world. Media technologies have reconstituted the boundaries between private and public life. The media are able to turn the private lives of individuals into public events and bring them as news stories into countless homes. As in no earlier historical period, information and messages can be made available to audiences widely dispersed in time and space. (Thompson 1990, p.238). The media are able to bring their news stories to greater numbers of subjects than ever before in history. Through the technologies of message construction, specialised language use and graphic forms, the media transmit information selectively and persuasively to discrete audiences. The language and style of different newspapers, different radio and television channels, are addressed to different sections of the reading/listening/viewing

public, not only to inform but to influence and reinforce. 'The media define for the majority of the population *what* significant events are taking place, but, also, they offer powerful interpretations of *how* to understand these events.' (Hall et al. 1978, p.57).

It was through the power of the media that the private affairs of families in Cleveland became public and that the meaning of these events was constructed and the problem defined primarily as an infringement of the rights of parents and a fundamental attack on family life.   Beatrix Campbell argues that the definition of the problem in Cleveland for most of the media was 'not society's crisis in confronting sexual abuse, but the tragedy of innocent parents wrongly accused.' (Campbell 1988, p.210).[1] A sense of moral outrage was engendered, not against the perpetrators of sexual abuse but against the way power was exercised by the social workers and paediatricians – whose exercise of power had been directed to the protection of the children.

Reported first in the local press, the Cleveland "story" was subsequently covered comprehensively for weeks by television, radio and the national press. The official inquiry found that 'The effect of the Press generally, was to underline and increase the importance of the story' and to assist the M.P in his efforts to place the crisis in the public domain. The report notes the 'danger of the media, even by accurate reporting, assisting in a degree of hysteria among the public, both locally and nationally;' (Butler-Sloss 1988, p.169). Not only was anxiety raised locally, that taking a child who needed medical attention to be seen by a paediatrician at the Middlesbrough General Hospital might lead to the child being removed from the

parent with an allegation of sexual abuse (ibid p.169); the anxiety of parents about the possible consequences of seeking medical attention and subjecting their children to the medical gaze spread beyond the boundaries of Cleveland. It was voiced by parents elsewhere, to social workers and health visitors, and even among professional workers themselves. The panic was increased by mythical accounts of conspiracy among professional workers, initiated by individuals with status power and privilege power and disseminated through the media. For example, the M.P.'s accusation, made under Parliamentary privilege, that the Consultant Paediatrician and the Child Abuse Consultant had '"conspired and colluded"' to deny access to the police in sexual abuse cases, was reported in all newspapers (Nava 1988 p.115), reinforcing public anxiety and the sense of moral outrage. The powerful technology of 'inflammatory headlines' reinforced the construction of a '"scandal"' that the media themselves were largely responsible for promoting. (ibid pp.106,112).

Thompson argues that what he calls the 'mediazation' process not only endows events with the status of 'publicness' but also changes the nature of events themselves. (Thompson 1990, p.242). It is not only the visibility and publicness that changes the nature of the events but also the language and selectivity of media discourses through which meaning is constructed and a 'structure of feeling' built up. Media discourses may be seen to reflect public opinion but they largely create it, through the power of their technologies of production and distribution, and through the specialised language of their discourses addressed to selected audiences. Editorials that claim to be expressing the public's views, through the use of such language as "most people believe," or "the public believes," a

technology that Hall et al. refer to as *taking the public voice*, is 'the point where the media most actively and openly shape and structure public opinion.' Creating and re-presenting public opinion, the media 'play a critical mediating and connecting role in the formation of public opinion, and in orchestrating that opinion together with the actions and views of the powerful.' (Hall et al. 1978, pp.63/64). Forming, reflecting and reinforcing public opinion, the media in their reporting of the Cleveland story constructed what Hall et al. term (in the context of a different crisis) a 'spiral of amplification' and a 'mediating link betwen the apparatus of social control and the public.' (ibid).

Reviewing the press on the events in Cleveland, Mica Nava notes how, faced with the conflicting professional discourses of the various experts involved in the events in Cleveland, media discourses were themselves often confused and contradictory. And 'a phenomenon which had hitherto been kept a family secret ... as a consequence of media attention, grew over a period of weeks to occupy a position of prominence in public discourse and popular consciousness.' (Nava 1988, p.103).

It is largely through media discourses that the expert knowledge and the disciplinary power of the professional agents, their serious statements and truth claims, have been opened up to widespread public scrutiny and debate. But at the local and micro level, in their inter-personal relations with subjects, the privileged discursive practices of the professional agents predominate.

The operation of power at the local level, where the privileged professional discourses and discursive practices of social work agents intersect with institutionalised agency discourses and with the discourses of the law, is analysed and discussed in the next chapter. An inter-disciplinary child protection case conference is analysed to illustrate power relations between professional agents and subjects and among a range of professional agents. Through this analysis I provide an insider's view from my own experience of the hierarchy of discourses, the hidden agendas and the power games that permeate this arena of power relations.

Note to Chapter 7:

(1) For a feminist reading of the events in Cleveland in 1987 see Beatrix Campbell, Unofficial Secrets. Child sexual Abuse - The Cleveland Case. (London, Virago, 1988).
Also Feminist Review No.28 (January 1988)

Although there were undoubtedly underlying agendas of male/female power relations operating in both directions among the professional agents and other interested parties, gender issues were not the most significant feature of the Cleveland affair - other than the overriding issue that the sexual abuse of children is known to be perpetrated predominantly by men. Until the intervention of the clergyman and the Member of Parliament the dominant players, the Consultant Paediatrician and the Child Abuse Consultant, were both women; but the fact that they were women was coincidental. Their operation of disciplinary power was contingent on the knowledge/truth of their professional discourses, their privileged institutionalised status, and their alliance with the Director of Social Services, not on their gender. And it was through Parliamentary privilege, not gender power, that the M.P. was able to constitute an oppositional force. Even though, as Mica Nava posits, the Press 'controlled the parameters of the meanings' that were produced, and transformed the Consultant Paediatrician into 'a symbol - a standard bearer of feminism,' (Nava 1988, p.116), these were peripheral issues against the serious and complex issue of the power relation between professional knowledge-power privileged by the enforceable right of authority, and the rights of children and the rights and responsibilities of parents.

8.   POWER RELATIONS AT THE LOCAL LEVEL –

THE DISCOURSES AND DISCURSIVE PRACTICES OF SOCIAL WORK [1]

Among the 'real agents' responsible for the functioning of the mechanisms of power, those who Foucault posits 'we need to identify' and 'investigate,' (Foucault 1980 (i), p.100) are social workers in the public sector employed by local authorities. Not only are they privileged by the specialised knowledge and status of their professional discourses, which positions them in a dominant relation with subjects; they are additionally privileged by their status as agents of the law which authorises them to exercise disciplinary power over subjects, some of whom may be unwilling users of their services.

Social work can be subsumed within the general category of the human sciences and, as it operates in the public sector, among the range of state apparatuses through which disciplinary power is exercised. However, while social workers are represented as "having" and exercising considerable power both over subjects who transgress certain social norms and over scarce resources (day care, residential care, support services, for example), there is an ambiguity about social work as a science, as a profession and as a source of disciplinary power.

There is no single unitary text that "is" social work. It encompasses the language and meanings of a range of professional discourses from which its body of knowledge and expertise is derived – sociology,

social history, psychoanalytic theory, psychology, the law and the justice system. Like the other "human sciences" its scientific base is, as Foucault posits about the human sciences generally, indeed dubious. While the discursive practices of local authority social work are informed by a range of theories and methodologies (Roberts and Nee 1970; Rojeck et al 1988), and are regulated by rules and procedures, its methods follow no strictly prescriptive formulae. Its outcomes are not precisely measurable against validated criteria. The language of its discourses is descriptive and qualitative rather than rigorously specific. Through its discursive practices, addressed to the provision of services, social work is in a relationship with people, and people are not ciphers. People have feelings, and people's "needs" are not only for services but also that their feelings, their emotions, should be understood and respected. The discourses and discursive practices of social work encompass understanding interpersonal relationships and "working with" feelings. Social workers too have feelings, not least about the political power, institutionalised in the organizations which employ them, which dominates their professional discourses. This requires them to prioritise and ration resources and so marginalise the people into whose lives they intrude to assess their "needs," which they are then unable (do not have the resource power) to satisfy. When individuals feel angry and powerless through the refusal of services for what they perceive to be their legitimate needs, and blame the social workers, the social workers too may have feelings of anger and powerlessness.

New legislation, such as the Children Act 1989 and the NHS and Community Care Act 1990, is not deemed by central government to

require the level of financial resourcing that the service providers themselves estimate as necessary in order to implement the legislation's declared intention of responding to assessed need. While the agents necessarily exercise control (power) at the local level over the deployment of resources, the specialised knowledge that informs their estimate of requirements is dominated and overruled by the political power of governments and finance managers. Not only is rationing inevitable, but the rationing systems of social services departments are not to be made explicit. According to a study financed early in 1993 by the non-political Joseph Rowntree Foundation just prior to the implementation of the NHS and Community Care Act 1990, guidelines issued by the Social Services Inspectorate warned Directors of Social Services that if they told clients the services they needed and then were unable to provide them, they could face legal action. Their suggested advice was that they should record unmet choice instead of unmet need. (The Independent 30.3.93). Thus a new language use, fraught with ambiguities over the meaning of need and choice, was forced into social work discourse to protect the providers of services and to confuse and mystify the people wanting/needing services.

As customers/consumers we all have to measure our wants against our financial resources. If our resources are insufficient to satisfy all that we want, we have no legitimate option but to make choices, distinguishing those things that we deem to be essential to our personal definition of an acceptable quality of life, our needs, from those that we believe to be desirable but not essential, our wants. The difference between "needs" and "wants" is the difference between those things we categorise as essential and those things we would

like to have, would choose to have, if our resources would allow for this after our essential needs have been met. There is an indeterminate boundary between needs and wants; and "essential needs" and "quality of life" are subjective notions open to interpretation and the vagaries of contemporary cultural norms.

The majority of individuals owning the resource power of surplus money, or credit, beyond what is required to satisfy basic essential needs - food, clothing, shelter and warmth - have the choice to determine for themselves how they will provide for an acceptable quality of life. As customers with financial resource power we have the right and the discretionary power to shop selectively both for our basic needs and our wants, to the extent that our resources will allow; and to take our custom where we believe we will get the best value and the best service for our money. Parents with financial resource power may, for example, choose to buy selected daycare for their young children, defining their own need and their children's need and operating the power of free choice. Parents who lack financial resource power are dependent on the definition of need by social services agents and on the limited daycare provision of the local authority.

Through the machinery of the law, the state has recognised that certain individuals, children and adults, have a "need" for, and a right to, a range of health and social services provided by the state through its agencies. So there are 'children in need,' children who need services provided by the state, 'broadly defined as children whose health and welfare may suffer significantly without support from social services, and children who have a disability.' (Department of Health 1991 (ii)(a), p.7); and there are frail elderly people and

adults with disabilities who have particular physical and emotional needs and who have a right to public services to enable them to live as independently as possible in their own homes; and there are the carers of these people who are recognised as having a need for, and a right to, support from the public services to enable them to continue their caring role (without which the costs to public funds would be vastly greater) – the concept of caring on which the NHS and Community Care Act 1990 is premised. But individuals who believe themselves to be in need of such services have no *unqualified* right to receive services or to specify the extent to which services should be provided in order to meet their needs. The "welfare state," through its benefits system and its provision of public services, has recognised an obligation to those of its citizens with special needs; needs which outstrip their personal resources of ability and money and who consequently are unable to provide for themselves those things which are essential to an acceptable quality of life. But the right to define need, to define what is an acceptable quality of life and what is essential to achieve it, is determined in the last instance not by those who need the services but by the agents of the state, 'those who are charged with saying what counts as true,' operating discretionary power through the apparatuses of the local authorities.

The institutionalised position power of the agents, however, is itself limited by the rules of the organizations through which they operate. While the agents carry with them in their relations with subjects the authority power of their agencies, the agents are themselves subject to the disciplinary power (the operational rules) of their employing organizations. Exercising their authority and professional knowledge

power over subjects in the assessment of "needs," the power of the agents to provide the services to meet those needs is limited by the rules and procedures that regulate the discursive practices of the organization. The legislation requires that those who need services shall participate in the assessment of their needs; but they are subject to the hidden rationing power of the agencies providing the services. At the interface between the applicant for services and the social worker/agent of the organization, the social worker is privileged by professional knowledge and by agency authority, and by knowledge of the discursive practices and language of management discourse through which services are rationed. The professional assessor of "needs" knows and must take account of the management discourse and the rationing power of those who control the resources. The provision of service will be determined partly by the professional discourses of the social worker agent operating in a power relation with the applicant, but overridingly by the resource-management discourse of the agency which dominates the professional discourses of its agents, and which regulates the provision of services.

Unlike free customers seeking services who can exercise their power of choice to take their custom elsewhere, the "customers" and would-be users of local authority services, if dissatisfied, have nowhere else to go. They are subject to a "professional" assessment of their needs, sometimes by non-professional ("unqualified") agents, and denied the power to assess their needs for themselves. Indirectly, they are subject to the institutionalised power of the organization, its rules and procedures and its discursive practices, (which dominate also the professional discourses of the agents). The customers/consumers of the personal social services in the public

sector do not have the power of freedom of choice about where they will shop or about who will serve them. They can receive services only from a specified location in the constituency where they are resident. They will be "served" by an agent not of their choice but to whom they will be "allocated." The consumers of personal social services do not have the right, or the power, to determine their own needs or how those needs will be met.

So, for example, daycare provision for young children is a "need" articulated by significant numbers of parents, as well as by health visitors and social workers. Since the daycare resource in the public sector is insufficient to meet the demand, the service can be provided only to a limited number of potential users on the basis of priority need assessed by professional agents. The reality of need experienced by parents who are refused the service is thus denied. The agents who ration the service are likely to be "recognised" as powerful arbiters of "who gets what;" but the discursive practices through which their rationing power operates – admission panels, organizationally prescribed priority criteria – set boundaries around their discretionary power. The knowledge and position power of the agents at one level dominates their relationship with consumers of services; but at the organizational level the agents are themselves subject to the institutionalised power of the organization; and they are constrained by a use of language that re-constructs need as "choice."

Social work discourse is sensitive to the disempowering effects of language, the implicit dependency of "client," the cumbersome designation of "consumer," and the ambiguity of "customer."

Uneasily enmeshed in the local authority business and market culture that has replaced the culture of public service, social work tries out the appellation of "users" of services. We are all users/consumers of universally provided local authority services. For some of them we may even cross geographical boundaries; highways, parks, for example. Users, consumers, customers of local authority personal social services, however, may not choose where to go for the services they need. They may "use" such services through institutionalised discursive practices in which they are not involved; through systems of definition, of "referral," "prioritising," "allocation," sub-contracting out, or re-referring elsewhere if the requested service does not fit into the categories that inform the practices of the particular agency. They may be denied services, or they may have services imposed upon them as unwilling users, i.e. as "receivers" of services. Among the unwilling receivers of services are, for example, parents whose assessment of their child's needs does not conform with the expert assessment of professional agents, parents who will not willingly co-operate with them. (see case study below).

The articulated needs of an individual (or family) for personal social services addressed to a local authority social services department, either directly or through an external agent such as a health visitor, are re-constituted in agency discourse as a "referral." Their needs and information about their circumstances will be recorded and categorised and entered into the organizational system through which it will be interpreted and processed. What is experienced by the individual or referring agent as an urgent and legitimate need may not be interpreted as such by the agents or may not fit into the priority discourses of the agency. The need will have to fit into a

category, be measured against the needs of others and against the resources of the particular agency and its priority/rationing/sub-contracting system. The provision of public services is uneven across the country. Response to various types, categories and immediacy of need depends largely on the chance of location and the political power that dominates local agency discourses and discursive practices. The politics of resource management as demand exceeds availability cuts into the professional discourses of assessed need.

A "gatekeeping" system eliminates those requests for services that are deemed to be inappropriate to the agency. If a request for service is allowed to enter the system as a legitimate referral, the citizen will become constituted a client, not yet "served" but to be "allocated" to a worker for "assessment." The consent of the client to the designated worker is not required. If clients/users/receivers of services do not like the worker to whom they are allocated they may request a change; but the agency has the discretionary power whether to respond to such a request. If the request is refused a client has no other available option. Some clients will receive priority service; not necessarily in accordance with their own definition of the urgency of their need but as defined in the discourses and discursive practices of the agency. Social workers, however uncomfortable about non-priority clients and those whose self-assessed needs are not provided for, know only too well that with demand outstripping resources, whatever is provided for one person inevitably means that some other person will go without. As management discourses intersect with their professional discourses, their professional practices are mediated by resource rationing systems.

As in the market generally, the users/receivers of local authority services have the right to complain – in accordance with formal institutionalised discursive practices set up by the organization against which they are complaining. The rules and procedures are laid down by the management agents of the organization. In the first instance a complaint is likely to be investigated by the agents of the organization. The complainants are not free to take their custom elsewhere if they do not feel satisfied with what the service providers offer or with the outcome of their complaints. They can take their complaints further, to an Ombudsman for example who may identify maladministration. But if their complaint is that their "needs" have not been met, all will depend on interpretation and the way that need is defined and distinguished from "choice." External influencers, local councillors or Members of Parliament, frequently intercede on behalf of their constituents; but professional agents, with their detailed knowledge and "expert" interpretation of the circumstances, are skilful in explaining and defending their position against complaints. Social workers, housing officers, senior managers, legal advisers, may constitute powerful alliances against subjects who complain.

Local authority social workers are caught up in a complex dilemma – between the discursive practices and culture of their agencies which position them as agents of control and rationers of scarce resources, their professional discourses which premise the moral and legal rights of each individual to have his/her needs objectively assessed and met, their professional commitment to the particular individuals with whom they are directly engaged, and their own personal interests.

Castigated in the media as a so-called "caring" profession that does not care, many local authority social workers are involved in in-house power struggles over the management of resources and the needs of clients who are not being "served;" while, perhaps, mindful of their jobs and career aspirations in a climate of "voluntary" redundancies and the elimination of posts.

If people articulating their need for public services feel marginalised (put-down) by the agents of social services departments as though they were being too demanding and unrealistic in their expectations, these agents themselves often feel anger, frustration and despair. They know that because of limited resources the legitimate needs of people for services will not be met. Their professional knowledge through which they interpret and assess the circumstances of applicants for services and define their needs is dominated by the rationing power of the resource providers. Organizational rules regulate and "discipline" the discretionary power of the agents. The resistance of the agents to inadequate resource provision is ineffectual, as the only form of power which these workers can exercise is to withdraw from the power struggle over resources and leave the agency. This unilateral course of action will not be of service to those in need. There is a long history in social services departments of vacant posts left unfilled for considerable periods, sometimes opportunely deleted. And the scarcity power of qualified social worker expertise, dominant in the 1970s, has diminished. As in the employment market generally in the 1990s, professional workers are replaceable and expendable. In the market culture, knowledge-power is dominated by resource power. The organizational power of the resource managers predominates over the professional discourses

and specialised knowledge of the agents who exercise power over subjects.

The managers themselves, their professional/management discourses, are dominated by the political discourses and resource power of the government. Even the combined knowledge power of a majority of Directors of Social Services was ineffectual in the power struggle with Ministers when they argued the case in 1993 that the Children Act 1989 already implemented and the NHS and Community Care Act 1990 about to be implemented were each under-resourced. In Ministerial discourse the need they articulated for additional resources was interpreted as unrealistic; the under-staffed professionals were told by their political masters to get on with it and manage. Their "needs" like those of the "users" were subject to the power of the centre, the state.

The power to control resources, ultimately the institutionalised power of Ministers of State, is a vital factor in power relations between central government and the institutions of local government; and, by extension, between the local managers of resources and those professions which Foucault perceives as exercising disciplinary power over subjects. Notwithstanding the knowledge-power of the specialised disciplines and the influence on policies of their 'serious statements' and 'truth claims,' the discursive practices of health care, education, social work in the 1990s are all dominated and disciplined by the discourse of resource management and by the institutionalised power of the organizations within which the agents operate. Within each service in the public sector, the resource power of the state and

the disciplinary power of institutionalised resource management is dominant.

In its contemporary form, social work operates predominantly in the public sector through the institution of local government, at once empowered and constrained by the authority and the rules and structures of public sector management, in an uneasy power relationship between professional and local authority discourses. With resources under central government control and services having of necessity to be rationed, resource power operates at all levels across and within the departments of local government organizations as political decisions are made about who gets what; at one level, decisions about how resources will be spread among different "client groups;" at another level, how much each individual user of services will get. Social workers employed by local authorities are local government officers as well as specialised professionals. They are subject to the disciplinary power of the local authority, and they are institutionalised within its hierarchical and departmentalised culture and its management structures. Caught up in the power struggles over resources, their professional knowledge power and their power to "act" is dominated by the power of the managers who control resources at each level in the management hierarchy.

The managers and supervisors who exercise disciplinary power over social workers by supervising their work and controlling local resources, are themselves social workers. They are privileged by their specialised knowledge which positions them in a dominant power relation with subjects; and they are privileged also by their position/status within the organization through which they exercise

power over other social workers. They have not "become" managers singularly through their resource of knowledge-power but also through their personal resources, their drive and the need to achieve the status of management. Unlike their peers who likewise own the privileging resource of specialised knowledge, they have aspired to achieve a structural position through which position power and status reinforce knowledge-power. The processes through which individuals achieve position and status begin with motivation and the drive to satisfy their own needs.

If the interrelation between knowledge and power is accepted, the drive to acquire knowledge, whether or not recognised as such, is a response to a need to achieve the power that knowledge confers on the individual; the power to gain employment in a chosen field, to achieve financial reward for specialised knowledge, to achieve position power; and to be able to exercise power over others who lack the resource of specialised knowledge, those who do not speak, and may not speak, the specialised language of professional discourse. For some individuals, the drive to achieve distinctive recognition, status, financial reward, is a personal resource through which they achieve organizational position power, the 'enforceable right to command others.' (Lenski 1986). Through this form of power they may influence and exercise control over other privileged professionals, as well as directly or indirectly operate power over the users and potential users of services.

Knowledge is one aspect of a complex configuration of power. For the achievers of organizational power, the specialised knowledge that informs the professional/ideological discourses and discursive

practices through which power is operated over subjects becomes conflated with the discourses and discursive practices of management. When resources are insufficient in the personal social services to meet identified need, as in the "real world" they invariably are, the managers must reconcile the discourse and ideology of social work based on the value of the individual and his/her rights, with the conflicting discourse of resource management and the political market ideology of "value for money."

The gap between the political view of the world and the real world as individuals experience it widens, as services in the public sector are eroded while evidence grows of the enormity and variety of need among certain categories of the population; the needs of children disadvantaged by poverty or disability, of adults with disabilities, of mentally frail people, of physically infirm people, of very old people, and of the "carers" without whose unpaid work the "needs" addressed to the social services departments of local authorities would be even greater. Janus-like, the social workers as managers must face two ways. As social workers/supervisors they are guardians of the discourses and discursive practices of social work; and as managers they are accountable guardians of the purse, dominated by the discursive power of administrators and accountants, the controllers of resources on which the operation, the putting into action, of the specialised professional knowledge-power of the human sciences is dependent.

Control and disciplinary power over professional agents, as well as over ancillary workers, is exercised through the institutionalised discursive practices of organizations by their appointed management

agents. In social services departments these agents are social workers who acquire a new identity through their re-positioning in the hierarchy as seniors, team leaders, area managers etc.; who supervise those lower down in the hierarchy and who themselves are subject to the surveillance of more senior managers. Unlike the specialised knowledge-power that dominates relations between the worker as local authority agent and the client as user or unwilling receiver of services, it is the structural position power within the organization that is the dominant factor in power relations between supervisor and supervisee. In local authority social services departments, "supervision" is a form of surveillance that is supportive and protective but is also covertly disciplinary and controlling, addressed not only to professional discourses but also to departmental discourses of resource management, and to agency rules and procedures. The supervisor, privileged by hierarchical position, by organizationally ascribed status, and by financial reward, shares the overall responsibility for the management of the workers "cases" within a complex field of power relations. These power relations encompass qualified and unqualified social workers, supervisors and senior managers as well as clients/users/receivers of services; power relations that are over-determined by gender, race and cultural positioning as well as by professional knowledge, organizational positioning and agency discourses.

Only rarely are users/receivers of services "served" by social services personnel from the same cultural, ethnic, religious background. Black social workers are generally in a minority even in social services departments serving a local population with a high proportion of disadvantaged black people; they are most likely to be

supervised by white middle class supervisors; while for black female social workers supervised by white males there is an additional power dimension of gender as well as race. Organizations with declared policies of non-discrimination and equal opportunities are still seen to privilege white males in senior management positions in a predominantly female workforce.

The discourse of power relations within agencies as well as between workers and clients, has entered into the agendas of social work training courses in the 1990s. For many social work students on placement in social services departments, particularly black women, the power imbalance in the departments where they carry out their placement is perceived as a personal and political issue. Not only has their training made them sensitive to the power relation between themselves and the users/receivers of services; they are aware also of the power relation between themselves and the social workers who act as their practice teachers, most often white, middle class social workers designated to oversee and report to the training colleges on the students' work in their placements. They note the power relations within the agency – that in a predominantly female workforce the majority of senior management posts are held by white males; that black people are under-represented at all levels within the department; that secretarial and administrative posts are predominantly staffed by women, and even so, mostly by white women. Black students have remarked on the particular anomoly of this type of hierarchical configuration in locations largely populated by ethnic minority groups.[2] The discourse of institutionalised oppression and the discourse of power relations have begun to permeate the more traditional discourses that inform the meta-discourse of social work.

But the traditional discourses and the "received ideas" of social work (Rojeck et al. 1988) continue to predominate; and the structural, cultural and institutionalised inequalities in power relations among the providers of services as well as between providers and the users/receivers of personal social services persist.

Unlike the users of public local authority services (highways, parks, libraries etc.) who are anonymous local citizens, becoming "known" to a social services department as a user/receiver of personal services re-constitutes an individual or family in social work discourse as a client, the subject of a "case." Having been "referred," or self-referred, made known, to a social services department, having passed through the gatekeeping procedure and been accepted (constituted) as a client, detailed information about the social environment and circustances of the potential user(s)/receiver(s) of services is required, to be recorded and constituted as a case file. The source of the information in the first instance may not be the client. Professional workers in other local authority departments and other agencies, some of them state agencies, education departments, health clinics for example, are part of the surveillance network that is everywhere, always already there. Their power of surveillance over the population is unlimited; but their power to act is limited and regulated by agency discourses and discursive practices and by the law. They are required (disciplined) to inform and co-operate with the appointed agencies, the social services departments, in investigating situations of risk or "need" as specified in various statutes, the Children Act 1989, the National Assistance Acts 1947 and 1984, the Mental Health Act 1983, etc.

A referral through which an individual or family is constituted as a client does not necessarily come through an "agency." A referral can come from anywhere. Any member of the public may refer, may become a referral agent, may provide information about an individual or family, even without their knowledge, to a social services department which "has" the responsibility and the discretionary power ascribed by law to act or not to act. The agents of social services departments are singularly privileged by law to act in statutorily prescribed circumstances and to operate their professional discretion; they are authorised to act upon the actions of others and to exercise, as its agents, the ultimate disciplinary power of the law. They are privileged by the availability to them of legal agents within the local authority, and through their alliances with other professional agents. They are privileged by the legally ascribed power of their agency which delegates its power to individual agents. This power, the authority power of the agents prescribed in law, is always there, whether in action or as the capacity for action.

The professional workers, the agents of the department and indirectly of the law, must interpret the referral information and consider whether it falls within the statutory responsibilities of the agency. The specialised knowledge of their professional discourses and their knowledge of the statutes which empower them legitimise the interpretations of the agents. If the referral is interpreted as the responsibility of the agency, it will be entered into the system to be categorised, prioritised and sooner or later allocated, depending on the discursive practices of the particular agency and the subjective professional reading of the information and perceived degree of risk and urgency. The power to act, the authorisation to investigate, to

intervene in the lives of even unwilling clients, is a power ascribed by the state, through the apparatus of the law, to certain of its agents. They exercise the power of the law as its privileged instruments. While the statutes prescribe the limits within which the agents of the law must operate and thus mediate their power, they are "recognised" by users and receivers of services as powerful, sometimes too-powerful, agents of the local authority with the right to intervene in people's lives.

Carrying with them the authority of the agency and the authority of the law, recognised by subjects as having the 'enforceable right' (Lenski 1986) to act, the agents are "admitted" into the lives of individuals and families in a power relation determined both by their specialised professional knowledge and, primarily, by the authority and the status conferred upon them as official agents.

The agents authorised to intervene in people's lives and acquire information about them are not always professionally qualified. Their power relation with users/receivers of services derives from the status and authority conferred upon them by their agencies as persons positioned as agents. They are thereby authorised to seek information and to act on behalf of the agency. They may be "recognised" as social workers. While unqualified agents lack the knowledge-power of specialised training, their common-sense discourse is informed by their acculturalisation into the discourses and discursive practices of the agency. Through their status as agents, their experience of the agency and its discursive practices and the discretion the agency allows them in their unobserved interactions with clients, unqualified workers are able to exercise disciplinary

power and resource-rationing power in their relations with subjects who are users/receivers of services. A considerable amount of work with elderly clients, for example, living in their own homes, attending day centres and in residential care, has historically been undertaken by unqualified workers. "Supportive" and "monitoring" work with families, even major life changes such as permanent entry into residential care, have sometimes been allocated to unqualified workers. While the information they acquire is re-constructed into the specialised language of 'serious meaning' (Dreyfus and Rabinow 1982 p.49) in the professional discourses of their supervisors to whom they report, to whom they are subordinate and who exercise position power and knowledge power over them, unqualified workers themselves exercise status power and knowledge power in their direct interface with clients. They exercise discretionary power in the content and style of their feedback to their supervisors.

The information the agents acquire and record about users/receivers of services, and the "professional" interpretation of that information, constitute the text of a case file. The discursive practice of maintaining case files on users and receivers of services is one of the control mechanisms through which agents operate the services, exercise disciplinary power, and also protect themselves in the face of public scrutiny. The case file record is the basis for taking action. It may for example provide cumulative evidence for action through the courts to protect a child and to constitute an adult as a child-abuser. Facts are often open to different interpretations and evidence may not be clear cut. Minor bruising on a child, for example, may be accidental. Recurrent bruising may be accidental. The circumstances, the explanations, the "fit" between the injuries and the explanations,

the child's behaviour, have to be explored and recorded. Not only the facts and the interpretation of the facts by the social worker agents, but also the specialised knowledge and interpretations of other professional agents is often required. Paediatricians for example, through their specialised knowledge and experience, are better qualified than social workers to assess the nature and extent of physical injury and whether an injury is consistent with the explanation offered; to interpret injury as non-accidental, that is to say as child abuse. A failure to "read" and correctly interpret the signs, to record and to take action, can lead to serious consequences. Official Inqiries into child deaths through physical abuse or severe neglect have sometimes been critical of the failure of social worker agents to keep adequate records, their failure to make clear in their records the basis on which decisions to act or not to act were reached, and their failure to take protective action when recorded evidence indicated that such action should have been taken. (Department of Health 1991 (iv).

Information received and recorded in case files in social services departments is subject to the Access to Personal Files Act 1987. But a great deal of information held on agency files is not available to clients. The complex text that comprises a social services case record, in addition to information provided directly by a client, is likely to contain "information" from a range of other sources, from family and social contacts, from concerned or hostile neighbours, from teachers, doctors, health visitors, psychologists, psychiatrists, the police. While a declared policy of client access to records informs the discursive practices of social services departments and should enable clients to have access to what is written down about them, control of

the content of file records, and ease of access, depends on organizational gatekeeping procedures, such as permitted exclusions and the requirement for formal written requests for access from the clients.

Even prior to the Act some departments were making extracts of their case files available to clients on request; for example, young people in care or who had been in care were enabled to read sections of their case files, with explanation of exclusions and with "emotional support" from a social worker. Certain information, however, was and is protected from disclosure. Information recorded prior to implementation of the Act need not be disclosed; information that is considered by professional experts to be potentially damaging, for example information about parents that they do not wish a child to know or information that a child does not wish its parents to know, may be withheld; and any information provided by "third" parties may not be disclosed without the permission of the third party.

A long drawn out debate among social workers about what should and should not be entered onto case files that could be made available to clients preceded the Access to Personal Files Act. There was concern about opinions recorded as facts and about "judgemental" styles of recording that constructed users/receivers of services as, for example, "difficult" clients. It had long been the practice of some social workers to record in detail their "thinking-through" of complex situations, their interpretations, judgements and decisions, the professional disagreements over interpretations and opinions, and the agency's inability to provide the necessary resources to satisfy professionally assessed needs. The social work discourse of respect

for the client, which abhors secrecy, judgemental attitudes and behaviour, stops short of sharing all this with the client. While it extends to "involving" the client in the case record process, social workers, privileged by their position-power, retain the discretion to decide what is and is not to be recorded and made available. During the professional debate on client access to their records it was suggested that social workers might keep a second, private record comprising working papers that would not be part of the case file and to which a client would not have access. It was suggested also that clients might be invited to add their own comments to their file records; but it is not statutorily required that this facility must be made available to them. A person can, however, ask for information held on file or computer records to be changed if it is incorrect. (Department of Health 1991 (ii)(a), p.12).

Clients, users and receivers of services constituted as cases, are "allocated" to qualified and unqualified workers through the discursive procedures of management. The supervisor, team-leader or manager (the terminology varies), exercising hierarchical position-power over professional as well as non-professional workers, has the responsibility for ensuring that the statutory work of the agency is carried out as far as resources of time and skills will allow, and that as much high priority work as possible is allocated. The workers' choices are limited by the concept of priority cases and by the position power of the supervisor/manager.

The concept of priority, whether in relation to a constituted case or a referral interpreted as an emergency, derives from the discourse of risk, the perceived degree of physical injury to an adult or child, or

the immediacy of physical or mental deterioration, based on the professional interpretation of the available information. An emergency referral or priority case may be allocated to social workers jointly if the work required appears to be highly complex or likely to put an individual worker at risk of physical injury, a not uncommon experience for social workers interacting with physically violent people or mentally unstable people. Such risk is not often recognised in Ministerial calculations of resource requirements or in public debates about the "draconian" power of social workers. In non-urgent circumstances, "priority" is sometimes determined by the discursive practice of senior managements giving privileged treatment to powerful external influencers, such as M.Ps or local councillors intervening on behalf of their constituents. Their status-power predominates over the professional knowledge-power of social workers who, having interpreted the client situation not as one of urgency, are required by management discourses to treat it as such.

Social workers may "bid" for cases that interest them, for which they have particular expertise, and/or which they believe will enable them to develop expertise in certain areas of work. However, the knowledge-power of the professional worker, dominant in the client/worker relationship, is dominated in the organizational context by managerial position-power. The supervisor/manager may exercise hierarchical position-power to require an experienced worker to take on a case that the worker would prefer not to take. This might be a case categorised as high priority complex work that must be allocated to a worker who has the necessary expertise, which may be in short supply. The manager may disallow a worker to take on a case which the supervisor defines as too complex in relation to the worker's

professional knowledge and experience, or that the supervisor considers will overburden the worker's caseload. The discursive practice of case allocation is likely to be one of negotiation; but in some circumstances, as seemed to have happened in Cleveland in 1987, it may become directive, as managers operate organizational position power over caseload management.

The discourse of "caseload" in social work is problematic. Caseloads cannot readily be measured quantitively in any meaningful way without taking account of the complexity of the intersecting and sometimes conflicting dicourses that constitute many of the cases with which social workers operate. Managers in social services departments have for years grappled with the difficulty of assessing caseloads qualitatively. Attempts to measure cases and caseloads have had to take account of the complexity and range of a number of indeterminate factors: a worker's involvement with interpersonal relationships, which are often hostile and violent within the "client group" and sometimes directed towards the social worker; the assessment and containment of risk, sometimes risk of serious injury or even risk to life; the balance of probabilities on which many decisions must be taken; legal ramifications, court work and statutory responsibilities. While specialist and "voluntary" social work agencies work with a limited and selected, often self-selected, range of clients, the social services departments of local authorities are required by statute to work with unwilling receivers of services, to provide a range of services locally to children and families, people of all ages with learning difficulties or physical disablities, people with mental health problems, elderly frail people, people with "social" problems. They are also required to accept and investigate referrals

from other agencies which might require the exercise of statutory powers delegated to local authority agents as agents of the state; the investigation of child abuse for example. Social workers in the public sector have a complex identity – as "caring" professionals working in partnership with users of services; as local government officers exercising disciplinary power over subjects, while subject themselves to the discourses and discursive practices of their agencies; as the instruments through which other professional agents operate disciplinary power over subjects; and as agents of the state, subject to central government control of resources while exercising authorised surveillance over the population.

Internally in the public sector, social work has developed out of the former children's departments, welfare departments and mental health departments, since the implementation in 1971 of the Seebohm Report recommendations (Seebohm 1968) for generic rather than separate, specialist departments. In everyday practice, the discourses and discursive practices of the former departments persist. A great deal of "welfare" type of social work is still carried out by workers who are not professionally qualified; mental health work has increasingly become a specialism requiring specific training in addition to the basic professional social work training; and child protection work, particularly since the emergence over the past decade of a high incidence of child abuse throughout the population, has likewise called for additional training programmes and it attracts some of the most experienced qualified workers.

Through the discursive practices of social work departments, certain categories of workers are marginalised and exploited even while they

operate the legitimate authority power of the agency. Unqualified "social workers," those who have not completed a training course recognised by the Central Council for Education and Training in Social Work (CCETSW), largely carry out the lower status "welfare" work with elderly, frail or disabled persons. They may be differentiated as "social work assistants" or, in recognition that their work is not to "assist" social workers and that they have their own cases, they are sometimes known as "social services officers." Whatever the distinction in language, they or the work they do is of less "value" in that they are paid less than qualified social workers. They have historically constituted a significant proportion of staff in residential establishments. They have little status or position power within the organization. But as local government officers they exercise discretionary power and rationing power over subjects who request and use services; and they exercise legitimate authority power over those whose personal condition and circumstances are interpreted by other "experts" as putting them "at risk" – frail elderly people whose mental faculties have been medically assessed as so impaired as to require them to live under constant surveillance in residential care, for example. The interventions of these unqualified agents, like the interventions of qualified social workers, may have significant long term effects on the lives of many of the subjects over whom they exercise agency/position power.

It is not unknown in understaffed departments, and many social services departments are frequently staffed below the official establishment levels, for unqualified workers or inexperienced workers to undertake complex or high-risk work that has a major impact on the lives of individuals and families and may result in permanent

changes in their life-styles, such as entering into care. Newly qualified, inexperienced workers whose expert "knowledge" is limited, and who may themselves be aware of their limitations, may be positioned to operate disciplinary power over subjects who "recognise" in them the authority power of the agency, which gives them the "right" to intervene in the lives of subjects. These workers may not be directly coerced into undertaking complex work that affects people's whole future lives; but the culture of the "team," an ideology of individual as well as collective responsibility to respond to client need, together with the institutionalised power of management to "manage" the workload, is a considerable pressure on the social workers.

Social work departments are subject to the pressure, the "disciplinary power," of public expectations that they will always respond to high risk situations even when their resources of knowledge and expertise are already exhausted. Inquiries into child deaths have revealed that, under this pressure, newly qualified workers have been called upon to work with high-risk cases for which they have lacked the necessary expertise and the necessary level of quality supervision. (Department of Health 1991 (iv). The difficulties faced by the social services department in Cleveland arose partly through the unprecedented volume of high risk and complex work coming into the department, together with the general lack of expertise in working with child sexual abuse. Even for social workers experienced in cases of physical abuse there was an additional difficulty in understanding and responding to child sexual abuse. (Butler-Sloss 1988, p.73). The managers' need to respond to the demand resulted in the deployment of inexperienced workers to undertake very complex work. As an

agency, the department in the symbolic form of its managers was dominated by the disciplinary power of the law that calls for the protection of children against abuse; and dominated also by the power of public opinion that censures social workers for failing to intervene to protect children. The failure in Cleveland was perceived to be in its lack of procedures, rules and systems appropriate to the particular form of risk; and a failure to ensure that the exercise of power intended to protect children from a particular form of abuse was not in itself abusive. Because the discursive practices of the agency were in this respect inadequate, the operation of disciplinary power by its agents contravened the rules of their professional discourses. But the failure in Cleveland arose also from its insufficient resource of specialised knowledge and, as a consequence, from the domination of its agents by the knowledge-power and status power of other professionals, the consultant paediatricians.

All workers are subject to the institutionalised discursive practices of their employing organizations, their hierarchical power structures and management discourses which may at times conflict with their professional discourses. The work of social services departments is specified by statute, while priorities are determined in the management discourses of the agency. There is usually some element of choice and discretion about the work of a team and the work an individual social worker will undertake; but there is no absolute freedom of choice. Managers and qualified social workers as well as the unqualified are subject to the disciplinary power of the organizational rules and the legitimate power of the statutory discourses to which the organization itself is subject. But even these powers are not absolute. Despite the statutory discourses that

require local authorities to identify and respond to children at risk and children in need, even "priority" child protection work may not receive attention. Eighteen months after the implementation of the Children Act 1989, many Directors of Social Services were saying publicly through the media that their resource power was insufficient to enable children on child protection registers to receive attention. In the power struggles between local authorities and central government over resources, the power of central government is dominant, its power to control and limit resources predominates over the specialised knowledge and the experiential discourses of its agents.

It is not only workers who are either marginalised or privileged by the discursive practices of social work agencies in the public sector. Certain client groups are privileged over others. The discourse of child protection enjoys a "status" both in statute and in organizational discourses that historically has not been accorded to the discourse of "welfare." It not only has the legitimate power of high priority work in statutory and departmental discourses but is often the preferred work of experienced qualified workers who have the knowledge power and status power that enables them to exercise a greater degree of choice about the type of work they will do. Children and families have historically been the primary focus of social work, both among voluntary agencies concerned with rescuing children from exploitation and poverty, and state agencies whose discursive practices have been directed towards the reproduction of a healthy and productive population. Since the setting up of social services departments in 1971 with their "generic" workloads, there has been a marked preference among workers privileged by

knowledge and qualifications to work with children and families rather than with elderly, frail or disabled people.

Historically the former children's departments were more likely than welfare departments to be staffed by qualified workers; many of them trained under Home Office Regulations and with official recognition as Child Care Officers, others with the newer Certificate of Qualification in Social Work (CQSW) under the aegis of the Central Council for Education and Training in Social Work. (CCETSW). There were some qualified and very experienced staff in the other departments and in hospital social work departments, particularly at supervisory or management levels. Consequently, with the setting up of the generic social services departments, internal power struggles broke out among trained and experienced workers over newly created senior and management positions, as some of the posts at these levels ceased to exist with the disappearance of the former separate departments. A widespread concern was articulated among all grades that management and supervisory posts had predominantly gone to workers from the former children's departments. Internal power struggles dominated the culture of the new departments in their early months. Different discursive practices that workers brought with them were only gradually institutionalised into a new culture of standardised systems, rules and procedures and reconstituted practices.

As an example, in the children's department in which I had worked before Seebohm there were very clear rules about keeping detailed and up-to-date case-file records, about regularity and format of case reviews and about regularity of supervision. File records were often the basis of court reports in care proceedings. The cultural norm

was to conform with the disciplinary requirements and discursive practices of the department. Power operated by "consent" rather than by coercion. Following reorganization, many of the workers coming from other departments with different discursive practices - sketchy file records for instance - strongly resisted the organizational norms of the children's department and the disciplinary power operated by the new managers, based on the organizational systems and discursive practices of the former children's department. Some of those who would not conform resigned their posts. Over time however, over two decades, new discursive practices became established and the culture changed; the rules concerning record-keeping and case reviews, for example, were less stringently observed in some departments. New norms developed, among them during the 1980s, the permitted opening up of case files to "users" of services, no longer interpellated in management discourses as clients but as users or customers. New discursive practices and the language of professional discourse sought to accomodate the concept of user empowerment. In the 1990s the discourse of partnership between users and local authority agents holds the promise of a cultural change, a breaking-down of the institutionalised barriers between "them" and "us," a new and more equal power relation; but the agents remain privileged by their ownership of or access to resources - by their specialised knowledge, their "professional" status, the authority of their agencies, their alliances with other professionals, their resource of sanctions, the ascribed authority of the law, and their knowledge of "the rules" of the game.

The former Child Care Officers had considerable status power as well as the ascribed authority of the law. They were recognised by

clients and by the public as "having" the authority power of their employing agencies and the sanction power of the courts. The potential sanction power of these local authority "officers" and their "right" to operate disciplinary power was recognised by a public more compliant in the 1960/70s than in the 1990s, more readily dominated by institutionalised power. Child Care Officers were privileged by this "popular" recognition of their specialised knowledge power, specialised status power, and institutionalised authority power. While today's social work agents are still privileged over users/receivers of services, the "truths" of their professional discourses are constantly the subject of media debates, their knowledge, status and authority power publicly questioned. Their knowledge-power, which is less specialised, is likely to be subordinated to the specialised knowledge-power of "experts," psychiatrists, paediatricians, psychologists etc. Their power relationship with users/receivers of services is being challenged by the notion of partnership, and by the formal complaints procedures for users of services which local authorities have been required to set up. Such procedures, while likely to be dominated by the institutionalised power, the discursive practices and the internal alliances of the agencies who set them up, are being confronted by the organized oppositional power of specialised interest groups such as Parents Against Injustice; by a driving force stronger than resistance and itself privileged by specialised knowledge and by alliances with external influencers such as the media.

While the ideological base of social work is anti-oppressive and its discourses are premised on the rights of disadvantaged and oppressed individuals, many of its discursive practices are oppressive and discriminatory even over those subjects whose interests it

"protects." The discursive practices of social workers as local government agents marginalise certain user groups through rationing systems and by over-allocating the resource of specialised knowledge to work with children and families. The discursive practices of social work managers, themselves predominantly social workers by professional training but interpellated as local authority management agents, exploit unqualified, underpaid, under-resourced and inexperienced workers in the struggle to reconcile the discourses of social work "service" with the discursive rationing practices of the agency. The professional status of social work is ambiguous as unqualified people are allowed to carry out "social work" and as its discursive practices are dominated by the institutionalised power of the local authority as its employing agency.

Yet, for all its inter-textuality and contradictions, its indeterminate positioning in the network of power relations in which it is enmeshed, and the resource limitations within which it functions, the discursive practices of local authority social work are directed to the service and protection of the most "needy" members of society, those individuals who through age or infirmity are rendered "vulnerable," marginalised and dependent on others. While its failures receive media attention and public censure, its successes are not newsworthy and they go unmarked. Because of the individual's right to privacy and confidentiality, social workers appear unable to defend themselves when a private matter is brought into the public domain through the media. According to their discursive practices and the concept of confidentiality, it is often that their side of a story cannot be heard because it would enable the identification of clients and their families. The right of individuals to the protection of their privacy from the

public gaze thus mediates the power of social workers and leaves them vulnerable to what might be unjustifiable censure and the discursive practices of the media, the construction of "stories" and the casting of individuals into the roles of heroes or, more usually, villains.

Media stories are not only selective of "facts" but also are presented from selected perspectives and expressed in the language and style that will appeal to their audiences and readers. When something has "gone wrong" and thus is perceived as newsworthy, as in Cleveland for example, the media build up a story, construct the main players as a cast of "characters," identify a scapegoat onto whom the public's anger and guilt can be displaced. In media discourses it is not the violent parents, not the failure of society, but "the" social worker who is to be blamed; and social work as such is to be held responsible for what is society's failure to know how to protect its children. On the one hand the media argue on behalf of "society" for the rights of the family to privacy and freedom from the intrusive power of social workers, and on the other hand expect social workers always to be already there and to have the right answers when a child is at risk. And yet day by day social workers are having to tread a fine balance of possibilities and probabilities; needing to weigh up whether, if a child is not removed from a situation that appears to put it at risk, it will probably continue to be harmed; or whether it will possibly suffer a greater harm if it is removed from the risk situation; needing to estimate, because there are no absolute certainties in their professional discourses, how great is the risk to any one child within a particular set of circumstances at any one time.

In social work discourse "risk" is a key word. In few other disciplines, perhaps only medicine and psychiatry, with their much longer period of professional training and their professional regulatory bodies, are workers called upon to interpret from a limited set of facts the nature, degree and immanence of risk to life and limb, risk to self and others. "Mistakes," that is to say interpretations of the facts that in the event turn out to be incorrect, are inevitably made by doctors, paediatricians and psychiatrists as well as by social workers. Their discursive practices are not informed by exact scientific discourses, the outcomes of their interventions cannot be "known" with total certainty beforehand. Empowered by specialised knowledge and agency authority, local authority social workers are required by statute to investigate situations of potential risk and, if necessary, to take such action as is determined by their specialised knowledge and the authority of the law. In many situations the degree of risk is not clear cut, the social worker will have to exercise professional judgement and act, or not act, on a balance of probabilities. If the risk is interpreted by the worker to be of immediate severe physical harm or life threatening, the worker must exercise disciplinary power to protect the vulnerable individual and act upon the actions of those who constitute the risk.

One of the key questions in Cleveland was the interpretation of the evidence and immediacy of the risk of continuing sexual abuse. In the expert view of the Consultant Paediatrician and the Child Abuse Consultant, not only the severity of the harm to which sexually abused children had been exposed but also the likelihood of them continuing to suffer that harm warranted the immediate removal of the

children from the danger; even to the extent of taking them from their beds at night to be examined for the physical evidence that could be lost through delay. The evidence that was used to justify the actions of the social services department in obtaining immediate place of safety orders was the evidence provided by the physical sign and interpreted by the Consultant Paediatrician as indicative not only of sexual abuse but of very recent abuse and thus of continuing risk.

The fact that many of the families were already "known" to social services, that is to say were already the subject of official surveillance, was part of the "evidence" that made them particularly vulnerable to the exercise of disciplinary power. Being known to a social services department, becoming a "case," constructs a special kind of subjective identity and often an intensification of any perceived risk factors. Risk, however, may be interpreted differently among different professionals concerned with child protection. It may be calculated on the basis of cumulative information from different sources, health visitors, teachers, G.Ps., educational psychologists, paediatricians, child psychiatrists; and on the construction of meaning within each of these professional discourses. It may be calculated on the basis of a single event. It is likely to be a calculation rather than a certainty. Different interpretations of the evidence of risk factors may lead to conflict and power struggles among professionals.

Inter-disciplinary case conferences are often the site of these conflicts and power struggles over interpretations of evidence, over calculations of risk and over recommended outcomes. Case conferences do not make decisions (other than whether to put a

child's name on the child protection register), their recommendations are not binding on any of the agencies involved. In the last instance, the local authority social workers are the agents who are "called upon" by law to act and who are held publicly accountable through official inquiries and media reporting if their judgement not to act results in the death of a child; or if their judgement to take protective action, as in the Cleveland case, is seen to offend citizen's rights and/or the discourse of common-sense. While every situation is unique, common organizational procedures are carried out through the discursive practices of referral, investigation, consultation both internal and inter-disciplinary, conference recommendations and agency action.

Although not within the highest priority category of risk to life and limb, a referral of child sexual abuse to a social services department from whatever source is likely to receive urgent investigation and to become the subject of a multi-disciplinary case conference. While it is not uncommon for another professional to be involved initially as the referring agent, anybody, a parent, relative or friend may refer suspected child sexual abuse. Investigation necessarily brings into play the specialised discourses and discursive practices of a number of professional workers who have 'the status of those who are charged with saying what counts as true;' the police, since child abuse is a criminal offence which needs the type of evidence that can be obtained through the discursive practices of police interrogation, evidence that can lead to a prosecution; a paediatrician and/or specialist police surgeon who has the specialised medical knowledge to diagnose physical sexual abuse; a G.P., health visitor and teachers who have "knowledge" of the child and of the family; possibly an

educational psychologist and/or a child psychiatrist to whom the child has already been referred. While the "management" of child sexual abuse, criticised in the Cleveland Report, is the responsibility of local authority social workers, its "truth" derives from the specialised knowledge-power of other professionals brought together in the arena of the inter-disciplinary case conference, usually convened and chaired by an agent of the social services department. Here professional and agency discourses and discursive practices intersect and may be in conflict, within and across the disciplines.

A case study will be used to illustrate the complexity of power relations and the processes at work in an inter-disciplinary case conference on suspected child sexual abuse; the way meaning was constructed, and the way professional and agency discourses and the interests of the various parties intersected and affected the outcome. (Although the events referred to preceded the implementation of the Children Act in October 1991, the analysis serves to illustrate the salient points).

CASE STUDY:

1. Summary of a Referral and Case Conference on Suspected Child Abuse.[3]

2. An Analysis of Discourses, Discursive Practices and Power Relations Among the Professional Agents.

1. Summary of a Referral and Case Conference.

The behaviour of Julie A., aged 8, had been causing concern at school. Her mother was invited to speak with Julie's teacher and the headteacher. She told them there were marital difficulties. On several occasions her husband had left home to stay with his parents and had later returned to the family home. Mrs. A said Julie was attached to her father and she believed his coming and going was upsetting the child. Julie had become withdrawn at home. Mrs. A. was finding Tom, aged 5, difficult to control although his behaviour at school had not been remarked upon. The headteacher suggested that referral to the child psychiatrist at the local family centre might be helpful. Mrs.A., who gave the impression of being concerned, said she would think about it but that she did not believe in psychiatrists. She returned to the school two weeks later to tell the class teacher that Julie would miss a morning at school as she had an appointment with the psychiatrist.

After seeing Julie on two occasions, the psychiatrist referred the child to the social services department on suspicion of sexual abuse by the father, although Julie had not made any specific allegations.

Mrs.A. had not kept a third appointment. The police were informed. After consultation with the psychiatrist, it was agreed between the police and social services that the police (C.I.D) would interview the father. It was not clear whether he was living away from home at this time.

A case conference was convened by the social services department, to be chaired by a social work manager. It was attended by two police officers, the child psychiatrist, a social worker at the family clinic who had spoken twice with Mrs.A., the class teacher and headteacher of Julie's school, Tom's class teacher, an Education Welfare Officer, a health visitor (who had recent knowledge of the family as Mrs.A. had a seven month old baby), together with her manager; the G.P. who had known the family for several years, a team leader from the social services department (who would have the responsibility for supervising the case if social services agreed to become involved, as the family lived within the geographical area for which he was responsible), and a social worker to whom it might be allocated. A social services administrative officer was present to take notes. The police, the health visitor, the local authority social workers and the managers had frequently met together in child abuse case conferences and were familiar with each other's discursive practices and with the language of their discourses. The chairperson explained the case conference procedures for the benefit of those who had not previously been involved. Both Mr. and Mrs.A. had been invited to attend for the latter part of the case conference. The family had not previously been known to the social services department.

By the time of the case conference the police had interviewed Mr.A. who denied any form of sexual abuse and dismissed the allegations as preposterous and totally unfounded. Although Mr. A. used forceful language, the police officer interpreted his attitude and behaviour as cautious and defensive. He felt Mr. A. had something to hide but there was nothing specific on which the police could act. The discursive practices of the police demanded evidence of criminality.

From limited discussion with Julie, who had been withdrawn and difficult to engage in conversation, and her observation of the child, the psychiatrist was "pretty certain" (had interpreted) that some form of sexual abuse was being perpetrated by the father. She was concerned that a third appointment had not been kept. The clinic social worker who had spoken with Mrs. A. while the psychiatrist saw Julie interpreted Mrs.A'S behaviour as "ambivalent." While she had said her husband would "never do such things," she had seemed thoughtful and preoccupied. She had been reluctant to discuss her relationship with her husband except to say that the last baby was an accident. The social worker had offered appointments jointly to Mr. and Mrs.A but Mr.A. had not attended. According to the professional discourses of the psychiatrist and the clinic social worker, Julie was at risk and the father should be required to leave the family home and have no unsupervised contact with Julie until the matter had been further investigated.

The class teachers reported on the children's behaviour at school. They knew Mrs.A. as an interested and co-operative parent. She had never before spoken to them of marital difficulties. Mr.A. had attended parents' meetings. Julie's class teacher had noted a marked

deterioration in her concentration and that she had withdrawn from socialising with the other children. She had interpreted this behaviour as "resulting from trouble at home."

The health visitor had known the family for eight years since Julie was born, although she had rarely seen Mr.A. and then only in passing. Mrs.A. had not previously spoken to her of marital difficulties but had mentioned at times that she was short of money as her husband's business was doing badly. She was a capable mother and kept a clean but untidy house. (The police officer said the house had looked chaotic when he was there). Julie seemed a rather "clingy" child, which the health visitor had interpreted as the result of Mrs.A. giving all her attention to Tom and the baby and perhaps expecting too much of Julie

The G.P. knew Mrs.A. and the children from their visits to the surgery but had met Mr.A. only once. He had never had any concerns about the health of the children or about the way they were cared for. Mrs.A. had been to see him when the school had expressed their concerns and he had reinforced the headteacher's suggestion of seeing the child psychiatrist. He wondered how the father could be made to stay away from the family home and not see Julie on his own if he did not wish to comply. He felt there was "not a lot to go on" but at the same time it seemed that something ought to be done.

The psychiatrist suggested that if the father would not comply, social services could take steps through the court to remove the child from the family home. The social worker/manager who was chairing the meeting explained for the benefit of those present who were not

familiar with the procedures what this meant in the legal and social work discourses of child protection. The legal discourse required that a court would have to be satisfied that this would be in the best interests of the child and that the available evidence justfied the making of an order. Only the making of an order by a court would empower the social services department to act. Without a court order the social workers did not have the power to remove a child from its family. In social work discourse, the removal of the child from the family home and the care of her mother would be distressing for the child and give her the wrong "message," that she was being punished. Encouraging Mrs.A. to give more time and attention to Julie and to keep a careful watch when Mr.A. was at home, while at the same time persuading the father to stay away, was the better option. Also encouraging Mrs.A. to keep further appointments at the clinic.

It was agreed that Mr. and Mrs. A. should be invited to join the meeting. The police officers said they would withdraw while the parents were present. The G.P. said he would leave at this point as he had nothing further to add.

Mr. and Mrs. A. had received a letter from the social services department inviting them to the meeting and explaining its purpose. They had been offered the opportunity to speak with a social worker before the meeting but had not taken this up. When they joined the meeting the parents were faced by the eleven people in the room, people with the status of authority, who obviously knew each other; people who were socialised into the conventions and discursive practices of the case conference. They seemed comfortable, which the

parents were not. They gave the impression of having been there for some time, talking together. The power struggles and the power alliances (discussed below) that had formed among them would not have been obvious to the parents. An "atmosphere" of mutual confidence and familiarity among the professionals constructed an invisible barrier between them and the parents.

The chair-person introduced the people present and asked the parents if they had understood the letter. Mrs.A. seemed to take a cue from her husband. Both shrugged but did not otherwise respond. The chairperson told them there was concern about Julie's very marked withdrawn behaviour, her sudden under-achievement at school and lack of concentration; and that social services and other professionals had a responsibility in law to try to help the child and help the parents to help her. Mr.A. said quietly but angrily that he could understand that but why bring in the police, and why all these people. It was explained that this was standard practice in the local authority child protection procedures, as was the case conference itself, and that these procedures were required by law. Mr. A. said angrily they had no business to be talking behind their backs and wanted to know what had been said. In response, the child protection register was explained to the parents, why there was a need to have all the relevant information about a child, and the requirement for the parents' co-operation. Mr.A. asked questions about the co-operation requirement and was told this meant keeping appointments for Julie to be seen by the child psychiatrist, for Mr. and Mrs.A. to keep appointments with a social worker, and for Mr.A. to stay away from the family home and not to be with Julie on his own while the matter was being further investigated. Mr.A. said

angrily that it seemed he had already been found guilty; what was he supposed to have done? He had never touched Julie; kids went through funny phases without it meaning they were being abused; and the psychiatrist didn't know what she was talking about. He said he had read all this stuff about child abuse and how they managed to find what they were looking for without any real evidence. Mr.A. referred to newspaper and television reports of child abuse errors by so-called experts and on the incompetence of social workers. Mrs.A., who looked distressed, said she would keep the appointments. Mr.A. made no further response and gave no commitment. They were asked to leave and to wait while a decision was made whether to put Julie's name on the child protection register.

When they had left the meeting their comments and behaviour and their "body-language" were discussed and interpreted. The class teacher suggested that if the father really had not done anything his anger was understandable; and she wondered if perhaps somebody else or something else might be responsible for whatever it was that was upsetting the child. There seemed to be a lot of hostility between the parents which was probably affecting her; and after all, Julie had not made any specific allegation. The psychiatrist said that most sexual abuse occurred within the family; and after seeing both parents she was still of the opinion that some form of abuse was being perpetrated by the father, perhaps with some degree of collusion by the mother in that she suspected something was going on. She elaborated on her concerns.

The senior police officer said that in his opinion (i.e. in the way meaning was constructed in his professional discourse) there was no

substantive evidence of sexual abuse although he respected what the psychiatrist was saying; but if it was recommended to put the child's name on the register he would go along with that as, apart from anything else, it would ensure priority allocation in the social services department and further investigation by them.

The local authority social worker said she would be unable to work with the case for several weeks, which she had already mentioned to her supervisor, as she had a heavy caseload and was currently involved with a complex and long-drawn-out court hearing. She pointed out that the clinic social worker was already involved.

The clinic social worker said there was nothing she could do if Mrs.A. would not keep appointments. She had no power to make her attend. Child abuse was a social services responsibility. If it was felt the father must be kept away from the child, somebody would have to monitor what was happenning. She recommended that the child's name should go on the register and a plan worked out between the clinic and social services. She thought her continued involvement might not be appropriate. She had not developed a relationship with the mother.

The teamleader/supervisor agreed there was reason for concern but according to his professional discourse, the psychiatrist's evidence did not satisfy the criteria for the child protection register. Perhaps following the case conference Mrs.A. would keep appointments at the family clinic and the psychiatrist could do further work with Julie that would clarify the issues. He said there were several cases of child abuse on the register waiting for allocation to a social

worker, with some of which no professional worker was directly involved.

The headteacher confirmed this as it related to some children attending her school. She said that while she understood the difficulties for social services it made a nonsense of the procedures and of the register and left a heavy responsibility with teachers who were expected to monitor children at risk. The teamleader/supervisor again pointed out that Mrs.A. had now agreed to keep appointments. Perhaps this should be tested out.

The psychiatrist said she was prepared to continue to see Julie only if her name was put on the register and the local authority accepted their responsibilities. A plan for joint intervention must be worked out. It would have to be considered which social worker would work with the mother and who would engage the father. She was deeply concerned about the child. She was concerned that pressure would be put on her by the parents that would inhibit "disclosure work." Doing nothing would give the wrong message to Julie and to the parents. The register would put pressure on both the parents to co-operate and would signify the social services department's acceptance of responsibility for a child at risk and in need of services.

The chairperson interpreted this as a recommendation for the child's name to go on the register. She summed up the discussion and put the recommendation to the meeting. As no further objection was raised, this was agreed. The decision was reached on the balance of probability rather than certainty that the child had been abused; and

to ensure the provision of sevices. The reason for the decision, not unanimously approved, was recorded and explained to the parents.

The discourse of the child psychiatrist together with her personal drive and assertiveness, had predominated. Her knowledge of child sexual abuse, her expert truth, intersecting with the discourses and discursive practices of child protection and the law, had dominated the power relations with other professionals. The professional agents had been "disciplined" through the knowledge-power of the psychiatrist to provide the family with services. Through her knowledge-power, the family was constituted as a case, with a history, with information accumulated from various agencies on record; the members of the family were to be receivers of services, to be further investigated, to be required to co-operate with the professional agents. The parents were to be subject to the disciplinary power of the agents in order to protect the child, the (unwitting) "client," who was powerless (lacked the resources to protect herself) in the child/adult relationship.

Prior to the Children Act 1989, local authority social workers might have applied to a magistrates' court for a place of safety order to enable them to remove a child from the family home, as happened in Cleveland, without previous notification to the parents, on the basis of expert paediatric or psychiatric diagnosis of abuse, whether physical, emotional or sexual. I have known pressure to do so put on social workers by paediatricians, psychiatrists and educational psychologists, exercising their specialised knowledge-power, seeking an alliance with the statutory-power of the authorised agents in order to operate disciplinary power over subjects through the courts.

The Children Act 1989 Act supplemented by the Department of Health Guidance and Regulations mediates the power relations between the authorised agents and the courts. For example, under the terms of the current legislation, the subsequent behaviour of the parents in the case quoted, if interpreted as uncooperative, could lead the local authority social workers to apply to a court for a Child Assessment Order; but the court would have to be satisfied on several quite specific accounts. The Department of Health Guidance and Regulations provide detailed information for 'professional practitioners' on the circumstances in which such an application can be made. They are required to explain these details to parents before making an application, this to be 'backed up by easily understandable leaflets outlining local authority powers and duties and the rights and responsibilities of parents.' (Department of Health 1991 (i)(a), pp.45-51). A court would want to be satisfied that the applicants had complied with the regulations; and would not necessarily grant an order. If an order is made, a court has the statutory power to make specific directions on how an assessment is to be carried out 'as seems appropriate and in the child's interest.' (ibid p.47).

Thus, the disciplinary power of the agents, constituted by their specialised knowledge and by the privileged status of those who speak what counts as true, is itself regulated by procedures, systems and rules. The agents who operate disciplinary power are themselves disciplined by the authority power of other agents. The privileged discourses of the specialised disciplines influence power relations among the agents, and dominate the power relation between professional agents and subjects; but the discursive practices of the

professional agents are subject to the rules and procedures of the organizations within which they operate and the discursive practices of the law. The organizational rules and the rules inscribed in law set the boundaries within which the agents operate disciplinary power.

2. An Analysis of Discourses, Discursive Practices and Power Relations.

(note: In the following analysis, repetition of the words "discourse" and "discursive" is unavoidable. Where reference is made to "practices," in order to keep repetition to a minimum, this should be read as signifying "discursive practices.")

Drawing on Foucault's ideas on the ways in which language is used to construct the 'serious speech acts' of professional speakers, those who are authorised to speak the language of serious meaning, we can understand child sexual abuse as a contemporary truth constructed in the concepts and theories of the specialised disciplines of psychiatry and paediatrics and articulated in the language of their discourses; a truth that is linked with the systems of power, the knowledge-power and the status power of the experts, which have produced and 'extended' it; a truth that only they are qualified to speak.

A child psychiatrist, authorised by her qualifications to speak the specialised language of her discipline, having the status of one who speaks that which is true, operates her knowledge-power to construct

meaning from certain behaviours, to interpret them as signifiers of abuse. The 'statements' of the psychiatrist are constructed as serious speech acts according to the rules that regulate this particular 'truth game' in which other players are subject to the disciplinary power of her status and specialised knowledge; not only the parents (who do not know the rules) but also other professionals who, dominated by the expert truth, must obey the rules that require them to operate their statutory/agency power to act.

The case conference is part of the control mechanism through which disciplinary power operates. Its practices are regulated by the institutionalised rules and procedures of the primary agency, the local authority. The rules require its agents to act in cases of actual or suspected child abuse, often on a balance of probability when there is evidence but no "proof." The agents are subject to the management discourses and discursive practices of the organization and the hierarchical power relations that intersect with their professional discourses. Local authority social workers may have no direct knowledge of a child or family but must act, in accordance with the rules and practices of the organization, on evidence that presupposes child abuse. This evidence may come from any source. Organizational discourses allow social workers to exercise their professional power of discretion to intepret and make a decision whether and how to intervene; to act directly, to organize a case conference, or to take no action. The 'serious statement' of an expert speaker will influence the decision of the agents. Professional, organizational and legal discourses intersect at the point of decision-making. If the evidence is interpreted by the agents as constituting serious risk, indicating a need for immediate direct action such as the removal of a child from a

situation of danger, the agents must act in accordance with the procedures, rules and systems precribed by the agency and by law. Networking systems operate among professional agents who are likely to have knowledge of the child and family, a G.P., a health visitor, a teacher or an education welfare officer for example, frequently before a decision is made on the action to be taken, sometimes subsequently. As the professional discourses intersect, power relations, some pre-disposed by earlier experiences, mediated by personal agendas, come into play and permeate the decision-making processes and the case conference environment.

The given case study demonstrates the power struggles between the professional agents, the way alliances and coalitions were formed and their effects on power relations; and the way the truth of child sexual abuse in the privileged discourse of psychiatry dominated other professional discourses and practices. It demonstrates organizational power relations and the privileged position power of managers; the way that powerful influencers, individuals vested with status and authority, with the legitimate power of office or position and the control of resources, dominate other less privileged players. It demonstrates the link between knowledge-power and the systems and mechanisms through which disciplinary power operates.

Foucault argues that it is in discourse, 'tactical elements or blocks operating in the field of force relations,' that power and knowledge are joined together (Foucault 1979, pp.100-102). The analysis that follows will identify the discourses and illustrate the 'multiplicity of force relations' at work in the case conference. Reference will be made to each of the participants and their specialised discourses.

In the site of the case conference, the discourse of "child protection" was inscribed in the professional discourses of all the participants and was in this sense the overriding "meta-discourse." However, in the institutional contexts within which the child protection discursive practices were positioned, agency discourses, the language of agency responsibility and authority intersected with the professional discourses and the personal agendas of the participants.

The psychiatrist constructed meaning from the child's behaviour in the specialised language of her expert discourse, a language that only she among the participants was authorised to speak. Her expert discourse influenced the outcome of the case conference but the tactical elements she brought into play were not only her expert knowledge but also the discourse of agency authority and responsibility and the institutionalised discursive practices through which, and only through which, disciplinary power could operate. The clinic social worker spoke the same professional/agency language as her higher-status colleague, the child psychiatrist.

In the educational discourse of the headteacher and the class teacher, the child needed help; she was not making "normal" progress or socialising "normally" with other children. But their professional discourse did not enable them to "read" her symptoms as signifiers of sexual abuse; nor did the discursive practices of their agency enable them to operate disciplinary power over the parents. The tactic of the headteacher was to form a strategic alliance with the psychiatrist over the issue of agency responsibility. The expert discourse of the

psychiatrist dominated the alternative "reading" of the class teacher; and the alliance was a determining factor in the outcome.

The professional health-care discourse of the health visitor was mediated by the discourse of women's oppression. She understood the child's behaviour in the context of relationship problems in the family, poverty and the mother's physical exhaustion and depression.

The professional social work discourse of the teamleader was mediated by tactical discourses of resource management, priorities and agency responsibility, and by the uncertain discourse of "risk." He resisted the knowledge-power of the psychiatrist and her interpretation of the "signs" and he formed a minority alliance with the social worker he supervised. The social worker's personal agenda of protection from work overload was dominated by the majority alliance and by the professional/management discourse of the chairperson.

For the police officers, the discourse of child protection intersected with the discourse of criminality. Although they accepted the psychiatrist's expert construction of meaning from the signs, her discursive language was not the language of "proof" required for them to act.

The medical discourse of the G.P. was mediated by his personal agenda to protect the doctor-patient relationship. He did not wish to meet the parents in the context of the case conference. He did not speak or fully understand the specialised language of the child psychiatrist but he "recognised" her consultant status.

The social worker/manager/chairperson was privileged by her organizational position and status and her experiential understanding of the expert discourse of "probability" of sexual abuse. In the context of the statutory responsibilities of her own agency and the search for "truth," the rules of case conference procedures required her to exercise balance and objectivity in her summing up of the sometimes conflicting professional discourses of the participants.

While child abuse was identified through the expert discourse of the psychiatrist, her power was, initially, successfully resisted by the parents. Mr.A. did not attend the clinic appointments at all, Mrs.A. ceased to attend after keeping two appointments. At the interface between the psychiatrist and the parent/child, and between the clinic social worker and Mrs.A., the knowledge-power of the professionals dominated these inter-personal relationships; but the legitimate power of the local authority agents was necessary in order for the psychiatrist and clinic social worker to continue to exercise their expert power and discipline the parents.

Prior to the case conference and through the networking system, the psychiatrist had formed an alliance with the manager/chairperson. After the second visit of Mrs.A. and Julie to the family clinic, the psychiatrist had written to the social services area office expressing her opinion that some form of sexual abuse had been, possibly still was being, perpetrated. When Mrs.A. failed to keep the third appointment and the psychiatrist had not received a reply to her letter to the social services area office, she telephoned the social services manager/chairperson, by-passing the teamleader/supervisor who was said to be "dealing with it." Through her privileged

position and status she had easy access to the senior managers of other agencies. She explained her concerns to the manager, calling on her experience, her knowledge and her hierarchical position, and their established working relationship (their professional alliance). Although not an expert speaker in the discourse of child psychiatry, the manager was familiar with its specialised language through her own professional training and experience. She knew the psychiatrist well through having worked with her on joint training sessions and on previous case conferences. The manager was satisfied (influenced) by the discourse of the psychiatrist that further investigation was required. In cases of suspected child abuse, whatever its form, the rule was that the social services department had a duty to investigate and follow the prescribed procedures. The manager, herself disciplined by the requirement to conform with the rules of the agency, exercised her position power to discipline her subordinate, the teamleader/supervisor, to obey the rules.

The teamleader/supervisor, whose responsibility it was to "follow-up" referrals, had conformed with the institutionalised practices of the agency in accordance with his interpretation of the referral. Although not convinced that the information provided by the psychiatrist indicated sexual abuse or a priority for intervention, he had already initiated an investigation through the professional network. He "read" the text of the referral as information rather than as a request for action; but as he had earlier been contacted about the same matter by the headteacher, with whom he had a contentious relationship, he caused enquiries to be made, through a duty officer.

The headteacher's educational discourse and the discursive practices of her agency extended to monitoring the social development and well-being of the children at her school; and to report suspected neglect or abuse through an organizational system of procedures. She had previously made a number of other referrals about children at her school and had complained to the managers in her own department and to social services managers that nothing ever seemed to be done about them. The teamleader felt the headteacher had generally unrealistic expectations of social services resources and responsibilities. The professional discourse of the teamleader as it intersected with the political discourse of resource management demanded attention to priority work; and his assessment (interpretation) of several of the headteacher's referrals did not accord them priority.

From the headteacher's perspective, legitimate referrals she made to social services through the prescribed organizational procedures seemed to be ignored by the local area team. Her discourse of complaint and her practice of involving senior managers about what she interpreted as social services inefficiency had led to power struggles between the senior education welfare officer and the teamleader's manager over the need to take action. Consequently, the headteacher informed social services of her concerns about Julie as a last resort, only when it seemed to her unlikely that Mrs.A. would follow her suggestion of seeing the child psychiatrist. She exercised her position power to ensure that the education welfare officer attached to her school would be present at the case conference to support her concerns and complaints, although this family was not known to the education welfare department. The historic power

struggles between the teamleader and the headteacher spilled over into their discursive exchanges at the case conference.

Information about the family during the initial networking had been provided by the health visitor who, although she had not seen them recently, expressed the opinion that Mrs. A. seemed depressed and was finding it difficult to cope since the arrival of the third child. There were marital difficulties, the middle child was demanding and Mrs.A. was expecting too much of Julie who had always been shy and seemed rather withdrawn at various times when the health visitor had seen her. The health visitor had suggested that Mrs.A. should see her G.P. about depression and physical exhaustion. She had never had any concerns about the care of the children; and she was sceptical about the psychiatric "evidence" of sexual abuse. If anything, Mrs.A. was over-protective of her children. She would not be likely to collude with her husband. In the complex professional/personal/feminist/commonsense discourse of the health visitor, Mrs.A. was a typically over-burdened mother, oppressed by a husband who left all the responsibility of the children to her.

As part of the networking process, the G.P. was contacted. He confirmed that Mrs.A. had consulted him about depression and had asked his advice about Julie seeing the psychiatrist, which he had encouraged and for which he had provided an introductory letter. According to his professional medical discourse, Mrs.A. was behaving responsibly in following his advice.

After checking with the family clinic that the recommended appointment had in fact been made and kept by Mrs.A., the social

services teamleader exercised his professional/agency discretionary power. He took no further action until "disciplined" to do so by his manager.

Following her long discussion with the psychiatrist and concerned (if not totally convinced) by the psychiatrist's expert discourse of child sexual abuse, the manager to whom the teamleader was responsible, exercised her hierarchical position power. She checked on the information that now constituted a case file and advised (directed) the teamleader to convene a case conference; also to discuss with the police, who would be invited to attend, whether it would be helpful for them to speak with the psychiatrist with a view to interviewing the father, about whom nothing was known, prior to the case conference. The psychiatrist, as an 'external influencer' exercising her knowledge-power and status power and the driving force of her alliance with the senior manager, had dominated in her relationship with the teamleader and overcome his resistance. Thus, prior to the meeting of the professionals at the case conference, as their discourses and discursive practices had intersected, alliances and oppositional forces were already in play.

These underlying processes permeated the child protection discourse, the meta-discourse of the case conference. The headteacher strongly supported the child protection discourse of the psychiatrist and forcefully expressed her view that it was the responsibility of social services to become involved. According to her professional discourse, she herself and "her" teachers as agents of the education services had carried out their responsibility to monitor and refer a child whose educational and social development was causing concern and

whom they believed to be in need of other specialised services. She called on the education welfare officer to support her. The power struggles developed as a discursive alliance was formed between the headteacher, the education welfare officer, the psychiatrist and the clinic social worker, putting pressure on the local authority social workers to carry out their statutory responsibilities.

Among all the professionals, personal agendas and professional alliances, experiences brought with them from other contexts and other environments, intersected with their professional discourses in the power arena of the case conference. No professional discourse, no construction of meaning, can be totally neutral and uncontaminated by other intersecting discourses. At this case conference, meaning was constructed differentially in the ways the various professionals presented the factual accounts of events, and the ways in which they variously "read" and interpreted these texts.

For example, it emerged at the case conference that Mrs.A. had mentioned to the health visitor as well as to the headteacher and class teacher and the G.P., the difficult relationship with her husband; he was unsupportive, kept her short of money and sometimes went to stay with his parents leaving her to manage with the three children. She told the health visitor also that he was sexually demanding, although would not be encouraged to speak more about this. In the health visitor's initial commonsense reading of this text, the effects of these difficulties could reasonably account for the changes in the child's behaviour; the consequence of a combination of financial problems, sexual difficulties, a new unplanned baby, mother's depression, father's comings and goings, and the extra demands her

mother was making on Julie: a more developed version of the "trouble at home" reading of the text by the class teacher. The health visitor expressed surprise that Mrs.A. had not continued with the appointments at the family clinic as she had found her to be a conscientious mother; and she wondered whether it was simply too practically difficult for Mrs.A. to get there. She seemed to have no supportive family or friends. Perhaps she needed transport or a baby minder. Perhaps she needed financial advice; was the family entitled to benefits? Perhaps social services could help. The health visitor's reading and her discourse of common-sense was derived from long experience of working with over-burdened mothers as well as her professional training. Doubtful on the issue of possible sexual abuse, she shifted ground and revised her reading during the case conference as the psychiatrist expanded on her specialised text of child abuse and on her own reading and interpretation of the various professional texts.

The reading of the police officer who had interviewed Mr.A. was different from that of the psychiatrist. Both police officers were familiar with the discourse of child abuse and child sexual abuse, had had special training and had been involved with social services in case conferences. But their discourse was of legally permitted evidence, criminal charges, and presumption of innocence. Their reading of the texts provided no evidence that would stand up in court; but they accepted the expert interpretation of the psychiatrist that the child's behaviour and the way she had responded in the two sessions with the psychiatrist suggested a need for further investigation.

The G.P. did not commit himself either way on the psychiatrist's reading of the texts and her discourse of sexual abuse and wished to leave the case conference before the parents came in. He asked to be informed of the outcome.

By the time the parents joined the case conference the professionals were already positioned. An alliance had formed between the psychiatrist, the clinic social worker, the headteacher and the education welfare officer. The class teachers implicitly supported the alliance. The discourses of the teamleader and the local authority social worker were dominated by the force of the combined discourses of the alliance. The health visitor and her manager and the police were "sitting on the fence." The G.P. had distanced himself from the proceedings.

After the parents had joined the case conference and subsequently been asked to leave, the teamleader/supervisor continued with his oppositional discourse based on an alternative reading of the texts. He argued that although there was cause for concern there was at present not enough firm evidence to support a finding of sexual abuse, nor to presume that the parents would now be unwilling to co-operate. He urged the point that Mrs.A. had agreed to keep further appointments at the family clinic; and although Mr.A. had not given a commitment that he would attend, he had not specifically said he would not do so. The clinic social worker should continue her work with Mrs.A. and work with both the parents while the psychiatrist saw Julie, so that it would become clearer what was going on. An inevitable delay in the local authority social worker taking on the case had already been explained and this would not be in the

child's interests. Even at a later stage if she were to be involved, the social worker would have difficulty in allocating the necessary time for this complex type of work. Like the rest of his team she was working overtime - and not getting paid for it. It was recognised by senior management that the resources of the area team were overstretched. As the teamleader resisted the alliance power and the driving force of the psychiatrist and headteacher, his professional discourse intersected with the political discource of scarce resources and resource management.

The clinic social worker, opposing the discourses of the teamleader, argued that she had not engaged Mrs. A. in any "work in depth" but had concentrated on taking a family history. According to her professional discourse, this process of obtaining factual information had not "engaged" Mrs.A. in "work." She argued that it would be more appropriate for a social worker to work with the family in the home environment, which she herself could not (meaning, would not) do. According to her reading of the texts, further investigation of suspected sexual abuse was indicated and this was a responsibility for the social services department not the family clinic. The problem of social services resources was not part of her discourse.

The psychiatrist challenged the teamleader's discourse and his reading of the texts; that there was little to go on and that Mrs.A. would now probably continue to keep appointments. She argued that it was not known what part Mr.A. had played in Mrs.A's failure to carry on with the appointments; and had the teamleader noticed the way the parents interacted? If the case conference did not put the child's name on the register, the parents would get the message that

they could go away and carry on as before, they could and probably would refuse any intervention. Whatever the child was suffering, she would continue to suffer. The brief intervention by the psychiatrist would have a negative effect as the child would not understand the position in which she had been virtually abandoned. The child's name should go on the register and then an action plan could be worked out between the clinic and social services. The discourse of child protection and inter-agency practices demanded the intervention of the local authority social workers.

The operation of power that resulted in the child's name going on the register derived from the specialised and exclusive discourse of the psychiatrist, from the true statements that only she, among the professionals, was authorised to speak; but underlying this were the political discourses of agency resources, accountability, statutory responsibilities and the rules of evidence. The "fact" of child sexual abuse, its identification, is regulated in different professional discourses by their rules of evidence and proof of guilt. The rules of evidence in the privileged discourses of the speakers of psychiatry and paediatrics may not accord with those required in law; but the truth articulated in the exclusive language of their discourses may provide the evidence of child abuse that will serve to "discipline" the social work agents to operate their statutory powers to take action, to intervene according to the rules and procedures of their agency.

Thus, 'at the point of application,' in this particular site 'where it produces its real effects,' (Foucault) power can be seen to operate through a combination of specialised knowledge and the rules that

regulate the discursive practices of child protection agencies. The contemporary truth of child sexual abuse articulated in the specialised discourses of psychiatry and paediatrics influences the practices of other agencies; and truth achieves its effects through the mechanisms and apparatuses which empower the agents. The truth, the knowledge-power which dominates the inter-personal relationship between a psychiatrist and an individual subject does not allow the professional to operate disciplinary power over unwilling subjects who resist and will not make themselves available. In order to operate power over these subjects, the psychiatrist must influence the discursive practices of other agents; must invoke their institutionalised authority and statutory power and their power of sanctions against uncooperative subjects. As Lenski argues, there is a basic distinction within the category of institutionalised power between authority which is the 'enforceable right to command others' and influence which is 'the ability to manipulate the social situation of others, or their perception of it, by the exercise of one's resources and rights.' (Lenski 1986, p.250). The power of a psychiatrist to influence/manipulate others requires their consent; and in the case of unwilling subjects who resist, the operation of expert power depends on the 'enforceable right' of the statutory instruments activated through the practices of the authorised agents.

Power, as Foucault posits, is everywhere. It operates in different forms, on different planes, and in different relational circumstances, to produce its diverse effects. The expert speakers of the human sciences are empowered through the discourses of their specialised disciplines which determine that which is 'true.' They exercise power through the influence of their truths on subjects; and

through the influence of their truths on the discursive practices of agents who are empowered by their institutionalised authority to act on the actions of others. Disciplinary power operates not only through 'truth' and knowledge but through a complex interaction of discourses, organizational rules and procedures that simultaneously empower and regulate the agents.

Notes to Chapter 8:

(1)   In this chapter, the author has drawn on her 18 years experience of local authority social work as fieldworker, supervisor and area manager, as well as on texts referred to in the bibliography.

(2)   These observations are based on comments made by social work students in their placement reports.   The author has had access to the reports of more than a hundred social work students over the past four years as an External Assessor for a CCETSW practice teacher training programme.

(3)   In this case study, names have been changed and some of the details generalised from several very similar cases, in order to avoid any possibility of identification.   The outcomes varied in each case, according to the professional discourses and the nature of the evidence.   The author had considerable experience of participating in and chairing case conferences on child abuse and child sexual abuse prior to the implementation of the Children Act 1989.

Since the implementation of the Act in October 1991 social services departments, in accordance with the discourses of 'partnership' and 'Working Together' (Department of Health 1991 (ii)(a), p.6; 1991 (iii), pp.43/44), should facilitate the attendance of parents and children throughout child abuse case conferences, other than on 'exceptional occasions' (p.43 para 6.15).   It is not known how widely spread this practice is, or what effect it has on outcomes where the practice has

been instituted. Detailed research in this area is required. It is likely, in any event, that networking and informal case discussions that will not include parents will continue among professional agents; and that the agendas constituted in other discourses will enter into the meta-discourse of child protection in the case conference arena. Moreover, while the presence of parents will change the environment, the "playing-field" will not be level. The professional agents will still be privileged by their resources of specialised knowledge-power, status, alliance-power, authority; and they will still have the advantage over subjects who lack the discursive language with which to de-construct the specialised professional discourses.

9. RULES, RESOURCE-POWER AND PRIVILEGE.

CONCLUSIONS

Central to my study has been Michel Foucault's concept of discourse, his dictum that discourse is 'both an instrument and effect of power' and also 'a point of resistance and a starting point for an opposing strategy.' I have drawn on his notion of knowledge-power and the ways in which 'truth' and meaning are constructed in the discourses of the human sciences; and on his idea of 'disciplinary power' and the processes of 'normalization,' the apparatuses and institutions through which they operate.

I have focussed on social work as one of the 'dubious' human sciences, specifically as it operates disciplinary power over subjects in its institutionalised form as part of the state apparatus. I have argued that statutory social work is privileged and empowered both by the specialised knowledge which informs its discourses, and by the authority conferred upon it by the law; but that its power is mediated by the organizational and statutory rules within which it operates, and by its limited access to resources.

Throughout this thesis I have argued, and demonstrated through case studies, that rules and resources - ownership of, access to or control of resources - are significant factors in power relations; and that the discourses and discursive practices of expert speakers, who are privileged by their resource of specialised knowledge, are regulated

by rules which mediate the operation of their disciplinary power - the rules of who may speak the language of specialised discourse, the rules of resource management, the rules of the organizations which authorise them to act as their agents, a 'right' which is constituted in and subject to the rules of law.

I have argued that subjects are largely self-disciplining and that they freely subject themselves to the rules and norms of cultural groups and organizations; that the operation of disciplinary power depends on the consent of subjects to the rules of 'normalization,' and failing consent, on the resource of effective sanctions; that subjects are increasingly withholding consent to the discursive rules of expert speakers and are forming alliances through which organized resistance assumes the force of oppositional power; that common-sense discourses are challenging the 'truths' of the expert speakers, the discursive rules and the systems of power with which, Foucault argues, their 'regimes of truth' are linked.

In order to broaden the canvas, I have looked at other theoretical approaches to the understanding of power and the ways in which it operates, the organizational theories of Mintzberg and Handy and the work of Clegg. (chapter 2). From their writings I have extrapolated and applied their ideas of external influencers, organizational mission and membership, organizational ideology and its unifying power, charisma and drive, power-games and the rules that regulate them. These ideas and Clegg's notion of 'collective organization' (alliances) as a basis for 'effective resistance,' (Clegg 1989) have been directly applied to my study of the events in Cleveland in 1987 in chapter 5

and to my analysis of power relations among the professional agents in chapter 8.

Within the context of the institutions and apparatuses through which disciplinary power is exercised over subjects, I have posited the link between the operation of power and the organizational rules and structures which privilege the agents of the state. In chapter 3 I have discussed this power relation, Foucault's notion of bio-power and the historical development of state intervention in the family and the rearing of children. I have discussed the changing discourses of "the family" and the discursive construction of childhood at different historical periods, the development of the discourse of children's rights and its articulation in the Children Act 1989. I have considered how this addresses the power balance between children and adults, and also limits the privileged discursive practices of the state agencies. I have argued that many of the cultural changes in contemporary society, including the changing construction of the subjectivity of the child and the changing rules of sexual behaviours, owe much to media discourses; that their technological power which enables the media to reach vast audiences within their private spaces has blurred the boundaries between the public and the private.

In chapter 4 I have discussed the concept of privacy and the hegemonic power of the state, vested in its agents, to intervene in the private space of the family. I have argued that our society perceives the protection of children to be the ultimate responsibility of the state. I have considered the discourses and discursive practices of the agents to whom that power is delegated, and some of the implications for their practices inscribed in the rules and the

discourses of the law. I have argued that while the law empowers its agents, its rules also regulate and set limits on their powers.

I have provided a case study in chapter 5 to illustrate the operation of disciplinary power by the agents in the field of child protection under the legislation that preceded the Children Act 1989. The text of the Butler-Sloss Report of the Inquiry into child sexual abuse in Cleveland in 1987 provided the basis for this study of power operating in 'immediate relationship with its field of application.' I have discussed the way meaning was constructed in the specialised discourses of expert speakers, and the operation of privileged knowledge power. I have noted Foucault's references to the general preoccupation in western culture with sex and sexuality, the 'proliferation of sexual discourses,' and the way meaning is ascribed to certain sexual practices. The influence and resources of the media, the 'mediazation process' (Thompson 1990) and the construction of meaning in media discourses leading to a climate of moral outrage, have been discussed. The discourses and discursive practices of the professional agents, the inter-professional power struggles, the privileging of oppositional discourses, and the effects on power relations of strategic oppositional alliances, have been analysed. Specialised knowledge, status, organizational position, have been identified as privileging resources; personal drive, mission, ideology, tactical game-playing and strategic alliances, were shown to be elements operating in this field of force relations.

I have posited the discourse of the Butler-Sloss report as a starting point for a strategy to modify the power of the agents, which became institutionalised in the Children Act 1989. Selected sections of

the text of the Act have been analysed in chapter 6 in order to examine the ways in which the language of legal discourse is open to ambiguous and alternative readings. I have noted how the wording of the Act leaves a wide margin for interpretation and the exercise of discretion by its authorised agents; and that while it promotes 'partnership' between parents and the agents, it requires parents to be 'reasonable' and 'co-operative,' a requirement left to the discretionary and interpretative power of the agents. I note how the law privileges its agents, ascribing to them its authority to operate disciplinary power over subjects; but that its rules also mediate their power by making the agents more accountable to the discursive practices of the courts. The Act addresses the power imbalances between parents/children/the agents/the courts and it asserts the rights of children to be heard and to have their views taken into account. Although not "sovereign," the law is privileged in its universality and in its capacity to prescribe and regulate the disciplinary power of its authorised agents.

In chapter 7 I have returned to the text of the Butler-Sloss Report as a reference point from which to base an analysis of the disciplinary power of the authorised agents, and to draw some general inferences from this model. I have argued that power operates in different forms in specific sites through the agency (mediation) of individual agents (instruments) who own or have access to resources or sanctions, who are privileged by social location, organizational positioning and cultural norms; that knowledge is only one of a range of privileging resources through which they operate disciplinary power over subjects; that the exercise of their power is subject to management discourses and the resource (rationing) power

of local managers and central government; and that the greater or lesser resource power of subjects differentially affords them the capacity to make choices, and is a factor in power relations with professional agents.

I have discussed the discursive practices of the agents within the politics of child protection, the historical background to the emergence of child abuse, and later child sexual abuse, as social problems; and the discursive and technological power of the media in defining these problems for public consumption, the ways in which meaning is constructed through selective media texts addressed to specific audiences.

I have considered the ways in which the social definition of childhood and children's sexuality have been re-constructed through the knowledge-power of professional discourses at different historical periods; and have noted that in contemporary society subjects, including persons defined as children, withhold their consent to the processes of 'normalization' and are not disciplined by the discourses of expert speakers. I have argued that sexual discourses have historically privileged male sexual behaviours within the context of male heterosexuality; that the structural and cultural positioning of men in our society is a significant privileging factor in power relations; and that there are some parallels (but also significant differences) between the oppression of women by men and the oppression of children by adults. I have discussed the changing norms of sexual behaviours; and how the phenomenon of child sexual abuse has been identified through the specialised discourses of

professional agents and has entered into media texts and the discourse of everday speech.

Chapter 8 provides a detailed analysis of disciplinary power operating at the local level in the field of child protection, focussing on the discourses and discursive practices of local authority social workers, the authorised agents of the state. I have traced the historical development of statutory social work and discussed the problematic of the complex positioning of social workers as professional agents and local authority officers; the conflict of interests between the discourses of client need, service provision and resource management. I have identified the discursive practices through which individuals, free subjects, are constituted as cases and defined as clients/consumers/customers/users; and the discursive practices through which services are rationed. Within this context I have discussed the concept of need, the concept of risk, the discourse of "balance of probabilities" and the way meaning is ascribed to the practices of social work through media discourses.

Through a case study and analysis I have illustrated the way "truth" and meaning can be constructed in the specialised discourses of expert speakers; how inter-disciplinary power struggles over meaning among professional agents can be dominated by the status power, institutionalised position power and authority power of privileged players in a complex power-game; and how the specialised discourses of professional agents may be mediated by a variety of personal and organizational agendas and institutionalised rules. I have posited that in this case the power struggles were ultimately dominated and the outcome determined by the institutionalised rules

of the agency whose disciplinary power was authorised in the discursive rules of the law; and I have argued that disciplinary power operates through a complex interaction of discourses, privileging resources (including knowledge), and rules that simultaneously empower the agents and regulate their power.

Meaning is not "fixed" but is constructed in discourse at its point of application, as knowledge-power is exercised to attain the desired outcomes of expert speakers. Foucault perceives discourse as 'a series of discontinuous segments,' (Foucault 1979, p.100); tactical elements directed towards achieving specific aims and objectives. The operation of power is always intentional. Discourse is the medium through which various strategies are brought into play in the field of force relations, within specific sites and situations where meaning is inflected to serve the "mission" of the speakers. Discourses are at once instruments of power and points of resistance. (ibid p.101). In its usage at the conjuncture of multiple contexts, discourse functions as a tactical element calculated to dominate in a complex strategical situation of power relations. (ibid pp.95-102).

In the arena of the case conference, for example, the discourse of the child psychiatrist which had constructed meaning from the child's behaviour in the clinical context became a tactical element in the power struggle. In her missionary drive to ensure the provision of service and protection of the child, and to overcome the resistance of other speakers, the language of agency rules and statutory responsibility permeated the clinical discourse of the psychiatrist, which remained centred on her interpretation of the needs of the child. In the context of their own disciplines, other professional

speakers resisted the truth of her discourse, challenging the ambiguity of her discursive language that spoke of a general category of sexual abuse rather than being able to identify its specific form, seeking alternative meanings for the child's behaviour through their own discourses. The language of agency procedures and resource management, interposed into the professional social work discourse of the teamleader, was a strategic move in the power struggle over meaning and outcomes, countered by the discursive tactical manoeuvres of the psychiatrist.

The discursive power struggle in the closed environment of the child abuse case conference operated within a wider environmental context, the organizational context and beyond. Various influences are always and everywhere present in the external environment, impacting on the relational power of professional agents; the influence of the policies, culture and ideology of the particular organization on its members (Mintzberg 1983), the influence of government policies and market ideology on agency resources and discourses, the influence of emotive media texts and (within this scenario) ambivalent public expectations that professionals will "do something" to protect children at risk but not "abuse" the rights of parents or the privacy of the family. The specialised knowledge-power of expert speakers operates in practice not in some neutral environment but at specific sites and moments permeated by various external influences, regulated by rules and procedures and in relation to particular objectives. 'There is no power that is exercised without a series of aims and objectives.' (Foucault 1979, p.95).

Gary Wickham, in his critique of Foucault, argues that power relations exist only in specific sites; that these 'sites' are formed by 'an intersection of practices around specific operational policies ...'; and that power relations 'are relations of advantage/disadvantage' specifically 'in terms of the objectives within particular operational policies.' The agents involved in the site are the products of the intersection of the practices which constitute a specific site at a specific time. (Wickham 1986, pp.174-176). By focussing on a specific site in a discrete context as in the foregoing case study we can see how the site, the practices, the operational policies, are regulated by discursive rules, rules that privilege the agents and position the agents and subjects in relations of advantage and disadvantage. The agents are privileged by their familiarity with the policies and practices, by the discursive language of their specialised professional knowledge, by their status and resource-power; and often by the physical environment of the site (the hospital, the prison, the town hall etc.) The agents are privileged by the rules which position them as agents and by their knowledge of the rules that govern the practices.

The agents are themselves, however, positioned differentially. In the 'site' of the case conference, the factors which privileged the agents over the parents also privileged some of the professional participants. This particular site privileged the agents who were familiar with the discursive practices of child abuse case conferences and the operational policies of the various disciplines, the strategical use of language and the specialised discourses of the expert speakers. In particular it privileged the institutionalised position and status of the chairperson who "orchestrated" the proceedings according to the

organizational rules of case conference procedures; the rule that each participant must be allowed the opportunity to speak but within the time limits that the chairperson controlled, the rule that the chairperson would interpret the specialised language of her discipline and her agency, and the legal implications, for the benefit of those not familiar with the terminology, the rule that the chairperson would decide when to terminate the discussion and have the privilege of summing up, a possible tactical discursive operation of power to achieve a preferred outcome.

While it is in discourse that knowledge and power come together, power in action is regulated by rules. The discourses and discursive practices of agents who are authorised to operate disciplinary power over subjects are regulated both by the rules of the professional organizations which afford them the status of expert speakers and by the rules of the organizations within which they operate. Rules privilege and empower. As Clegg posits, 'A conception of rules is essential to an adequate understanding of power.' (Clegg 1989). Organizational rules privilege some of the agents; managers and supervisors over social workers, consultants over junior doctors, etc. The rules of the law privilege the agents of the state over subjects. Systems of rules, like power, are everywhere.

"Society" is characterised by organization and, as I have argued in chapter 2, organization signifies rules. Essential to the ordering and orderliness of society, and to the multiplicity of its parts, are rules to which the majority of subjects more or less consent and through which they are more or less disciplined; rules through which the business of the state is carried out and rules that govern (control)

social behaviours; the written canon of rules, the coded language that comprises "the law;" the informal, culturally defined rules of inter-personal relations; the rules that characterise religious faiths and other dogmas, that discipline their adherents and afford them a sense of "belonging;" the institutionalised rules and the discursive rules that regulate and inform the discursive practices of professional experts, who are also "subjects" and subject to the rules; the rules that we make for ourselves in the way we organize our lives within the complexity of formal and informal rules and systems that comprise the social order. To be organized is to be regulated by rules.

Rules provide a framework within which the individual positions him/herself and knows where (s)he stands. Rules are discursive constructions, both prescriptive and descriptive. They describe what is acceptable, what is expected, what is required. They demand certain actions, prohibit others, define the norms of social behaviour in particular environments, and prescribe the punishments for transgression. While rules made by others may be perceived as disciplinary and intrusive into the freedom and privacy of the subject, the instruments of what Foucault calls 'bio-power' directed to 'normalization' of the body of the subject, (see chapter 3 above), their purpose is also protective, prohibiting physical violence against persons, protecting against disruption, un-ruliness and disorder. Rules protect the institutionalised cultural norms of society, to which the individual subject may or may not give consent. Rules operate to conserve the stability of the social order, although not necesarily ensuring it. Rules set the boundaries within which the "social" is organized. The operation of power depends on consent to the given

rules which regulate social relationships, and on disciplinary sanctions against those who disobey the rules.

In so far as the given rules satisfy our needs and there is "something in it" for us, we consent and conform. At a time of rapid social change and the emergence of new "truths," many of the traditional cultural rules enshrined in the discourses of expert speakers, the rules that regulate social behaviours, meet with resistance coming from "everywhere." The professional discourses of the human sciences and their truth claims (psychiatry, social work etc.) are called into question in the public arena as they are constantly debated in and through media discourses. New rules are constructed, not in the professional discourses of the experts but in the everyday discourses and actual practices of subjects resisting 'normalization' and exercising their 'sovereign right' as individuals. (Foucault 1986, pp.241/242).

Society is a complexity of rule-governed inter-related systems, regulated both by the rules of statutory law and by the informal rules of culturally defined interpersonal power relations. Many of the rules are "invisible," we are born into them, a natural order of things we take for granted. As children we are disciplined into the particular rules that structure and regulate the household and the power relations within the family. We resist, we break the rules, we test the power of adults. As Foucault posits, resistance is a characteristic of power relations. But we are conditioned to conform to those rules which give us access to the resources which will meet our needs. We learn the basic rules of language through which we may satisfy our need to communicate, and we learn the rules of

behaviour which will satisfy our various needs to win acceptance and approval as well as our material needs.

We are subject to the rules constructed in different discourses within different environments, some of which we may not recognise as rules but simply as given behaviours to which, as a matter of course, we conform. We are distanced from and subject to the power of professional experts by the rules through which we gain access to them, by their institutionalised status and the rule of "difference" between them and us, by the specialised language of their discourses and the rules of who make speak that language. The modes of address we use to medical specialists when we are sick and need their expert knowledge, for example, are generally different from those we use with familiars from whom we need approval or affection rather than knowledge and expertise. The language of the "experts" is not the language of everyday speech; and it puts us in our "place." Our acceptance of this subjective positioning lies in our need for their resources of specialised knowledge and technology. The rules of social exchange vary with the pre-determined inter-personal power relation of the participants. These unequal power relations are determined by the rule systems of the social and professional groups which confer privilege on their members and exclude those who do not speak their specialised language, the professional "clubs" which separate them from us - the Judges, the police, the doctors, the social workers etc. Knowledge is one of their privileging resources, but it is one of a multiplicity of resources - status, social location, organizational positioning, alliances, sanctions - that come into play in the operation of power.

We learn and conform to the rules of language and behaviour to satisfy a basic human need to belong, to be identified with and accepted into the groups or institutions which are our "bits" of society; social groups, professional groups, work groups, religious groups. Intersecting with the formal rules of the organizational groups to which we belong are the informal cultural rules that regulate interpersonal relations - the rules of sub-groups who construct their own rules, which may be in conflict with the institutionalised organizational rules. Even "unruly" groups are regulated by rules of language use, and by rules of dress and behaviour that construct identity and determine membership. In relation to the wider society they may be perceived as undisciplined, "out of control," as they make their own rules and struggle against 'normalization' and the rules and the disciplinary power of the authorised agents of the state. But they are "disciplined" by the rules through which they achieve their identity as members of the group. Those who do not conform are ostracised or excluded, they do not "belong." To be organized and regulated as a group, as a movement, as a gang, is to be disciplined and controlled by a system of rules.

Society functions as a complex organism, its control mechanisms incorporated in the systems of rules that regulate its disparate but intersecting parts; rules that have been constituted and re-constituted throughout its historical past. Over time the rules change. Rules are always in process, intersecting and often conflicting, subject to the continual changes in the external environment; an accelerated process in the late twentieth century as sophisticated technology "shrinks" time and space and ubiquitous

media texts disseminate new ideas and insights. The discourse of privilege enters into everyday speech as subjects become increasingly aware of the privileging effects of both the statutory rules and the informal rules; among them, the rules that have traditionally ordered power relations between men and women, between children and adults, between professional agents and subjects.

While some of the fundamental rules that govern ordered societies remain constant, for example, that the rules inscribed in the statutory law must be obeyed and punishment visited on those who transgress, many of the rules that govern power relations are in process, as with gender positioning and the norms of sexual behaviours for example. As the environmental context changes, through scientific and technological advances, major catastrophes such as war, demographic changes and movements of population, ideas coming from many points circulate as though under their own impetus to challenge the rules derived from the received values and meanings of the past. Characteristic of each 'post-modern' generation in the contemporary world of 'flux, discontinuity, intrigue and illusion' (Clegg 1989. see chapter 1 above), is its questioning of the received truths that it has inherited, its challenge to the rules that perpetuate perceived inequalities, its construction of new concepts to describe power relations. So for example, the concept of "marginalised" subjects and theories of institutionalised discrimination (against ethnic groups, women etc.) have entered into media discourses and, largely through them, into the discourses of everyday speech. The media play a significant part in the processes of change. The ideas of intellectuals and 'external influencers' (Mintzberg 1983) filtered through the media, enhancing public awareness of social issues, serve to modify the

climate of public opinion and have even resulted in some changes to the rules of law (in relation to the age of consent to homosexual behaviour for example).

To the extent that the rules that constitute the law, the statutory framework of the state, "must" be obeyed, incorporating enforceable penalties against those who transgress, they are instruments of state power; instruments operated by authorised agents through the institutions that comprise the state apparatus, (themselves often withholding "consent," operating unlawful discrimination, against women, homosexuals, ethnic minorities, the disabled). The statutory rules define "the state," its territory and its autonomy, reflect the ideology of the political party in power, construct the subjectivity of subjects as law-abiding citizens, and prescribe the sanctions against those subjects who transgress the rules. The statutory rules prescribe the apparatuses and mechanisms of surveillance, the mechanisms which authorise and empower the agents of the state to operate disciplinary power.

The disciplinary power of the state, operated through its agents, lies in the hegemonic acquiesence of the majority population to the statutory rules, together with the mechanisms of control exercised by authorised agents against those who are found guilty of breaking the statutory rules; or those who are constructed in the specialised discourses of expert agents to be guilty. The rule of "presumption of innocence until found guilty" is sometimes suspended through the discursive power of the agents, as it has been in cases of child sexual abuse. The agents can operate disciplinary power against transgressors or suspected transgressors only within the limitations

imposed or sanctioned by the rules of law. But within those limitations the agents retain a margin of discretionary power, both to interpret the rules and over the management of their resources - in the field of child protection for example, their support services for children in need, their placement resources, their financial support to children leaving care etc.

Disciplinary power operates by consent of the subject or through the resources available to enforce the rules and the management of the resources by the authorised agents. To the extent that the resources of enforcement are inadequate or ineffective, disciplinary power does not "work." Discriminatory practices continue, children continue to be abused by adults. Knowledge-power is not enough. The knowledge-power of the psychiatrist in the site of the given case study, faced with the resistance of the parents, could only operate through the organizational resource of the child protection register backed by the enforceable rules of the law.

Points of resistance to the operation of power are present "everywhere" (Foucault, 1979 p.95); and oppositional power, a force more dynamic than resistance, operates everywhere in the field of power relations, even against the law itself, privileged although it is by its status as the hegemonic instrument of the state. Operating through consent and through coercion and its power of sanctions, the law has no absolute sovereignty. It meets not only with resistance but with multiple forces of oppositional power. It is engaged in perpetual power struggles with political dissenters and special interest groups (environmentalists for example) seeking to change the rules, with organized criminal groups who make their own rules,

(drug-trading cartels for example), and with individual transgressors who break the rules. It is engaged in occasional ideological power struggles with large numbers of dissident subjects who withhold consent to a particular unpopular rule, the poll tax for example. When a universally applicable rule does not receive majority consent, is interpreted by large numbers of subjects as not "fair" or as not making "sense," the public voice in alliance with the media, as with the poll tax, is a powerful counter-force against the disciplinary power of the state and its privileged agents, those agents whose discourses influence the formulation of the rules and whose discursive practices are directed towards their implementation. As Foucault argues, we cannot reduce the operation of power to the state and the mechanisms and apparatuses of the law. We cannot do so even though the rules that constitute the law are privileged as the primary rules through which society is organized and controlled.

In any specific site, however constituted by particular objectives and operational policies, the rule of law is always there. The agents who are privileged by their specialised knowledge-power to operate disciplinary power, who are empowered by statute to act upon the actions of others, must operate within the rules of the law. But the law, although a dominant instrument of power, and privileged by majority consent to its statutory framework of rules and disciplinary sanctions, is not the sovereign locus of power. While its rules permeate every aspect of the state and the lives of all its subjects, it not only meets with oppositional power and the environmental forces of change, but its mechanisms of surveillance are constrained by the insufficiency of its resources and are subject to the discretion and fallibility of its agents; its rules are open to the interpretative power

of lawyers and judges and other experts empowered with the authorised right to act as its agents and to interpret the rules.

Rules that empower may simultaneously disempower. The "charters" of the 1990s, the Citizens' Charter, the Patients' Charter etc., seeking to empower the users and consumers of services are at the same time techniques of disempowerment, their discourses making the authorised agents of the state more publicly accountable (even if the charters are not notably effective in their declared aim of improving services). The less visible and less accountable the agents, as in a totalitarian state, the greater is their repressive and disciplinary power and the more enforceable and intractable are the rules. In our relatively more liberal/democratic state, our relatively more open society, no agency or agent is above the rule of law. In their interactions with subjects, the agents although privileged by their statutory positioning and their knowledge of the law are in the last instance accountable. But, although accountable to the courts and to their supervisors and managers, the public accountability of professional agents is problematic; the language of their 'serious speech acts' (Dreyfus and Rabinow 1982, p.48) is often incomprehensible and mystifying, their discursive practices are often protected from public scrutiny through the rule of confidentiality inscribed in their professional discourses.

The discursive language of the rules, open to interpretation, is a two-edged instrument of power. As I have argued in chapter 6, the collection of rules that constitute the Children Act 1989 simultaneously empower and disempower its agents. The construction of meaning from the ambiguities of language allows the privilege of discretion to agents who do not make the rules but who are ascribed the statutory

power to ensure the compliance of subjects to the rules as they, the agents, interpret them. This discretionary power of interpretation mediates the accountability of the agents; social workers for example whose rules of confidentiality and "the child's best interests" – as the social workers define it – exclude those who are not privileged to speak the language of their specialised discourses, those "outsiders" who would seek to understand their practices but, lacking their specialised knowledge and theoretical understanding, would misrepresent them. Many social workers would argue that the exercise of their discretionary power against public accountability for their actions, through the media for example, is premised both on the record of unacceptable media intrusion into the privacy and private space of subjects, and on the lack of understanding of their practices which leads to the predominantly negative representations of social work in media discourses. The professional agents operate their privileged discretionary power to protect their discursive practices, and they offset their public accountability against the subject's right to confidentiality and privacy.

This privileged discretionary power of the agents and their expert knowledge power is being called into question, resisted and actively opposed, as the traditional "divide" between the experts (them) and subjects (us) disintegrates, albeit slowly, in many spheres of 'postmodern' society. Through mutual alliances and alliances with external influencers – special interest groups, media personalities and other cultural "stars," politicians, charismatic dissidents – the discourses of marginalised groups and subjects have entered into the political arena. "Clients" of health and social services, ethnic minority groups, women, homosexuals, the disabled etc. mobilise media power to

challenge the "true" statem... .s of expert speakers; in late 1993, over social workers' criteria of eligibility (in relation to ethnicity) to become adoptive parents for example. Special interest groups having their own knowledge-power and resource power, operate through the media to question the truths of expert discourses and the rules that privilege the agents of the state. Subjects, aware of their subjectivity, no longer willing to "know their place," mobilise media power, the discourses of investigative journalism, to challenge the knowledge and authority of the experts and the agents of the state. The status of the human sciences and their disciplinary power is unstable in post-modern British society. Their discourses and the serious speech acts of those who are charged with saying what counts as true are subject to controversy and reconstruction as myth. Media power is a crucial factor in the struggles over the relational power between subjects and expert agents.

Increasingly in the 1990s the agents of the state and the expert speakers of serious speech acts are being called to account, Judges, Ministers of State, doctors, social workers, police officers etc., as their interpretations and their actions and their operation of disciplinary power are brought into the public domain, made the subject of debate in the press, radio and television. Through the technological power of the media the public voice has found expression and a mechanism and strategy for the exercise of oppositional power, both over those who make the rules and those who interpret and activate them. The agents, even those historically most privileged by status and hierarchical positioning are themselves subject, through the media, to the critical surveillance of the public gaze.

The operation of disciplinary power by Judges, the agents and arbiters of the law, their sentencing in cases of rape for example and their direction of juries, have been brought into question through media discourses, making "them" more accountable to "us." The media have opened up an ongoing dialectic on power relations in our society, "translating" the discourses of professional intellectuals into the more accessible everyday language of media discourses, inflecting meaning through the selective use of language for a targetted public. An informed public has been made aware through media discourses of the issues around power inequalities and the fallibility of the experts; a public given a "voice" through the media to enter the debate. Media discourses remind subjects of their empowerment through the statutory rules that accord each subject the right to complain, to challenge and "discipline" the experts. And the media are not immune from the critical gaze of the public and the rules of law. The media are accountable and subject to disciplinary action by subjects, through the processes of the law, in cases of libel or serious mis-representation. While the media are singularly privileged by their technological resources and their discursive power to influence, in the complex field of force relations they too are subject to the rules of law.

Members of Parliament, privileged by position and status, have the institutionalised power to frame the rules that constitute Parliamentary law. But Members of Parliament and "the government" itself are subject in the last instance to the power of the law, to the discourses and discursive practices of the courts and the statutory power of its most senior agents, those privileged by position and

status and expert knowledge to definitively interpret and enforce the rules. So, for example, in a ruling in July 1993 against a former Home Secretary who had 'ignored' a High Court order to return a deported refugee to Britain, five Law Lords, 'the most senior judges in England and Wales' rejected the government's claim that it was above the law and ruled that Ministers of State could be forced to obey a court order and an instruction from a judge, and said that courts had the power to enforce sanctions if necessary. (The Independent 28.7.93). This juridical power, the power invested in the judges, is not "owned" by them but derives from the institution within which they operate, a form of institutionalised power which they exercise in local and specific contexts. The power of the institution, itself statutorily prescribed in law, is privileged above the power of the most privileged individual agents of the law. But the power of the institution is regulated and limited by the statutory rules through which it is constituted and its powers prescribed. Even though power operates in many forms and we cannot reduce the operation of power to the mechanisms and apparatuses of the law, the law is privileged in its universality. All are subject to the rule of law.

The law accords authority to its agents, privileging them to exercise surveillance and to operate disciplinary power over subjects who break the statutory rules. Their resources of specialised knowledge and their positioning within a category of experts makes them eligible to be so privileged; but it is the additional resource of the authority of the law that positions them as its agents that empowers them, that accords them an enforceable right to act upon the actions of others, to operate disciplinary power within the framework of the statutory

rules. The truths of their expert discourses may influence the rituals and practices of everday social interactions and become the common-sense rules of inter-personal relations, they may (or may not) influence the discourses of the law makers and their construction of the rules; but influence is not the same as authority, which is 'the enforceable right to command others...(while) Influence, by contrast, is much more subtle. It is the ability to manipulate the social situation of others, or their perception of it, by the exercise of one's resources and rights, thereby increasing the pressure on others to act in accordance with one's own wishes.' (Lenski 1986 p.250). In the field of child protection the serious speech acts of the experts construct meaning from the "signs" and influence the rule-makers; but it is their statutorily ascribed authority, the rules of law, that empower the agents to act upon the actions of others.

The specialised knowledge of expert speakers may influence the behaviour of subjects; but subjects are not necessarily disciplined into the rules of behaviour inscribed in the expert discourses. 'Free subjects' who face 'a field of possibilities' (Foucault 1982, p.221) have discretionary power, the freedom of choice within the law, whether to believe or reject the "true" statements of expert speakers and whether to be disciplined by them into their prescribed behaviours; sometimes not necessarily resisting but simply withholding consent. The knowledge and the theories of expert speakers about transmission of the HIV virus, for example, or about the effects of smoking, excessive alcohol consumption or over-eating, have influenced social norms but have not necessarily disciplined subjects into conforming to the rules of prescribed behaviours of safe sex, moderate drinking or non-smoking.

There are different rules about rules, about the serious rules which are inscribed in universal moral codes, and those inscribed in the cultural norms of different social groups.   But even the serious implicit rules inscribed in the moral codes and those made explicit in the rules of law, rules that "must" be obeyed, such as those that prohibit and punish murder and acts of violence against persons and property, have not disciplined subjects.   The truth of child abuse and the laws for the protection of children have not disciplined adults into obedience to the rules, transgressions of which are often not readily visible.   The serious rules of law do not effectively discipline subjects who are driven by their personal needs and the drive to satisfy them into breaking the rules that "must" be obeyed, risking the sanctions if they are discovered and made accountable. Despite the rules designed to protect the children and despite the surveillance and knowledge power of the professional agents, the oppression of children within the privacy of the family, and even within the public systems designed to protect them, continues.

As public awareness grows, largely through media discourses, of continuing oppressions and power inequalities and the insufficiency of the rules, new rules are formulated based on new concepts - partnership between agents and subjects, children's rights, parents' rights and responsibilities, the subject's right to complain.   The 'sovereign rights of the individual' (Foucault 1986 p.242) intersect with the disciplinary power of the state and its agents - 'sovereignty on the one hand' and 'normalization on the other' in the mobile field of force relations.

In the context of change at an unprecedented rate - widespread demographic changes, technological developments, cultural and religious "pluralism" and the decline in the disciplinary power of the religions - the rules that formerly regulated the family, (married parents, dominant father, obedient children, veneration of the old), that formerly regulated gender relations and sexual behaviour, have drastically changed over the past five decades. The rules have changed, the "truths" have been re-constituted, language has new meanings, (unmarried women are no longer "spinsters," for example); the meaning of partnership has been re-constructed. The sanction of stigma and social ostracism of those who break the traditional rules of the family has ceased to be effective, as 'free subjects,' opposing the disciplinary power of traditional experts, exercise their power of choice; although the struggle over meaning and the concept of the "ideal" nuclear family form continues. Even the ultimate sanction of death has failed to discipline subjects at risk of dying from heart disease or Aids into preventive behaviours and life styles. Free subjects, resisting the "true" discourses of the experts and effectively rejecting their disciplinary power, exercising their power of choice, construct their own common-sense discourses and make their own rules.

At the micro-level of inter-personal relations, between individuals, in the context of social and domestic interaction, behaviour is regulated by rules, unwritten, unspoken but implicit and culturally determined by social class, ethnicity, gender, age. These rules are always in process, subject to the influences of wider societal movements. The rules that regulate social behaviour are influenced by "fashion," largely promoted through media discourses; influenced by changing

values and new meanings coming from "everywhere" that in turn may influence the rules of law - those regarding sexual behaviours for example. And as the controversial "truths" of the expert speakers are disputed among the experts themselves and are re-constituted from time to time, the population becomes more knowledgeable and articulate, more aware of uncertainty and the fallibility of the expert "truths," distrustful of the obscure and mystifying language of specialised discourse. The influence of the expert speakers of the human sciences and their knowledge-power is being increasingly challenged by the common-sense discourses of the people, by oppositional alliances resisting 'the privileges of knowledge' and constituting an oppositional force against 'secrecy, deformation and mystifying representations imposed on people.' (Foucault 1982, p.212). The serious speech acts of those who are charged with saying what counts as true are the sites of controversy and re-construction, largely through the agency of media discourses which place the dissident acts of individual subjects and groups into the public arena and onto the map of everyday reality.

The statutory rules, the rules inscribed in law, predominate and are thus privileged over other organizational and cultural rules, the implicit rules that regulate social behaviour and interpersonal relations. The effectiveness of these secondary rules as instruments of disciplinary power is relative to the context within which the individual or organization operates and to the sanctions that can be applied to those who resist, oppose or ignore the rules. In the context of the family the rules applied to the rearing, disciplining and education of children vary according to the norms of the cultural/ethnic/religious group to which the parent(s) belong or to

whose ideologies they subscribe. For example, there are different norms (implicit rules) among different cultural groups for educating their children. In some groups it is the norm for children to be sent to boarding school at an early age, or to be sent to religious denominational schools, or to be entered for prestigious fee-paying schools, or to be allowed to truant or attend school irregularly. Different cultural and religious pressures influence these practices and have the effect of disciplining subjects into the norms of the particular social or religious group of which they are "members." (see Chapter 2 for discussion of the notion of 'organization' and 'membership'). But some of the secondary rules of cultural groups are dominated by the statutory rules, and may be overriden by the discursive practices and strategies of authorised agents who formulate, interpret and implement the statutory rules. For example, the agents who regulate the number of school places locally are able to deny the right of choice to parents who lack the resource power (wealth, assertiveness, alliances with external influencers) to ensure that their children will attend their preferred school. Subjects who resist the power of the agents but lack resources or effective oppositional strategies are unable to exercise free choice over their children's schooling despite the rule of subjects' "rights." These subjects, lacking resource power, are disciplined through the authority power of the agents. But the power of the agents, their "enforceable right," has its limitations in the multiple field of force relations where power, multi-directional, comes from "everywhere." All the knowledge power of the experts, (the educational psychologists, psychiatrists, social workers), the authority power of the agents, the statutory power of the law, has not found an effective strategy or effective resources through which to discipline persistent

truants or "disruptive" or "delinquent" children or children who smoke, drink, use drugs; children who disobey the rules of law and the rules of the dominant social groups in society.

The rules that regulate social groups are rooted in history, in the handed-down traditional rites, religious beliefs, superstitions and moral codes, and the discourses of expert speakers of earlier ages. The rules have evolved over time, have become institutionalised in the cultural behaviours, practices and rituals received by each generation. But they are always in process, always in tension as the discourses and truths of expert speakers, contemporary soothsayers, shamans and medicine-men, intersect with the discourses of everyday speech and are measured against the experience and the common-sense discourses of the new generation. So, for example, the rules that inform "good" parenting have been formulated at different historical periods by expert speakers who at one time prescribed swaddling of infants, rigid disciplines of child-rearing, strict regimes of feeding and sleeping, childen to be seen and not heard and the benefits to the child's development of severe physical punishments. Rules that become institutionalised as the contemporary norms are re-constructed from time to time, both in the discourses of the professional experts and, significantly, in the common-sense discourses of subjects with the drive to challenge the expert "truths" and change the rules; women, for example, with the drive to resist and oppose the rules that have subjected them to the domination of men and the oppressions visited on them and on their children by the traditional rules of gender relations.

The oppositional power of subjects, developed through the spread of literacy and knowledge and, significantly, by the opening up of public debate on child-rearing practices in media discourses, has begun to alter the unequal power balance between experts and parents. The uncertainties and revisions of the "true" statements of the experts, the demystification of their discourses, has empowered parents. So, while a new generation of expert speakers constructs all forms of physical punishment as an abuse of adult power which will lead to a continuing cycle of violence, many parents discount this expert discourse and continue to smack their children. While the knowledge power of the expert speakers and their discursive construction of meaning has influenced child care law and extended the disciplinary power of its instruments, its agencies and agents, many of the practices of parents remain beyond the reach of the influence and disciplinary power of the experts. Their practices are ordered by their own cultural rules, and by the power of their privileged status as adults. Moreover, parents are learning the discursive language of the experts – the language used to describe the condition of dyslexia for example. Parents are forming alliances and learning how to overcome the mystifying language of expert discourse and how to operate their non-specialist knowledge to demand access to resources that will meet the special needs of their children.

At another level of power relations the agents are subject to governmental and organizational resource limitations as the policies and practices of public service resourcing form another site of power struggles. Yet in the unequal and complex field of force relations in different sites and on different experiential planes, the agents remain privileged over subjects, empowered by their 'social location'

(Thompson 1990. see chapter 3 above), by their privileged access to or control of resources, by their privileged status as agents and their enforceable right to act. Privilege and resources are essential factors in power relations. Knowledge is a privileging resource; not only the specialised knowledge that informs the discourses of the human sciences that privileges the professional agents but also knowledge of the rules of the game. For example, the Children Act 1989, which 'runs to more than 200 pages' (Department of Health 1991, (ii)(a) p.5), the rules of which have implications for all children and parents, is supplemented by explanatory resource documents issued by the Department of Health for the professional agents. They contain detailed notes of guidance on the rules for the agents; and they allow for discretionary interpretation of the rules at the point of application where the agents operate their authorised right to exercise disciplinary power. Additional training directed to their understanding of the rules and the discourses of the Act has further supplemented the knowledge resource of the agents. The agents have the privilege of access to other specialised resources for consultation, advice and guidance, as well as the resource of cumulative experience and precedent. On the other hand, the knowledge resource of subjects, their understanding of the rules which regulate parenting and of the sanctions which may be applied by authorised agents, may be no more than the information about the Act made available to subjects in two brief explanatory booklets, which they may not have read. Even if read, subjects may not have understood the rules and the implications for their particular circumstances. The language of the legal discourses, concepts such as "need," requiring detailed explanatory notes for the agents, is not translated into everyday speech to enhance subjects' understanding of the rules. Moreover,

the language of the professional discourses of the authorised agents, social workers and lawyers, doctors and psychiatrists, magistrates and judges, is often obscure and mystifying to subjects who are dependent on them for an explanation of the rules and for the objectivity of their interpretations. The dependence of subjects is a contributory factor to the resource power of the agents.

Status, position, authority, rights, knowledge, are inter-linking resources that privilege agents in their operation of disciplinary power over subjects. Power and privilege reinforce each other. Lenski argues that although the forms of power change, power continues to be the determinant of privilege. (Lenski 1986, p.249). As I have argued in chapter 7, the agents are privileged by their resources of specialised professional knowledge and the status this affords; by their institutionalised positioning and the authority this affords; by their knowledge and understanding of the rules that authorise their actions; by their right to interpret the rules and by their right to construct meaning from certain behaviours, (to determine what constitutes neglect, abuse, etc.); and by their enforceable right to adminster sanctions against subjects who contravene the rules as they, the agents, have interpreted them.

But privilege is not solely the prerogative of agents. While subjects are generally disadvantaged by the authority power and resource power of the agents, subjects themselves are variously privileged through ownership, control of or access to resources that can be used to influence and bring pressure to bear on others and on the professional agents; resources of status, wealth, education, alliances, and personal qualities of drive and assertiveness. Ownership of

such resources both empowers and privileges; privileges parents to purchase the education of their choice for their children; empowers parents to oppose, not simply resist, the power of the experts and the rule-makers. For example, an alliance of articulate and assertive parents, teachers and sections of the media resulted in changes to the ability-testing of children proposed in 1993 by influential educational experts in alliance with the Minister of State. The resource power of the parent/teacher/media alliance pre-dominated over the knowledge power of the experts and over the disciplinary power of the principal agent, the Minister of State. The agents of change and speakers of truth in an informed and educated population are not necessarily the professional experts who speak the language of the human sciences. It is disadvantaged subjects, lacking resources, – children, inarticulate minority groups, the poor, the illiterate – who are more susceptible to the disciplinary power of the authorised agents and the rule-makers than those who are privileged and empowered by their ownership of and access to resources.

Not necessarily ownership but control of resources is a strategic privileging factor in power relations; for example, between the rule-makers who manage (control) the resources and the professional agents who provide the services in the increasingly privatised public sector, education, health, social welfare. A political party having a majority in Parliament is privileged by its resource power. While it has no sovereignity of power and is subject to the resistance and oppositional power of its political opponents, the advantage of its majority privileges the "ruling" party in the power struggles over the rules relating to the resourcing of public services. The discourses of resource management based on the market ideology have

been privileged by the Conservative government above the public service ideology and the discourses of the professional experts. The rules have changed as the authorised agents are disciplined by market forces through the privatisation of public services, through compulsory contracting out and rationing at the local level, and through the centralised control of resources by government. Management discourses of economy and rationalisation predominate over the professional discourses of doctors and educationalists whose specialised knowledge and authorised position privilege them to operate disciplinary power over subjects at one level but who are powerless against the political strategies that lead to the closure of hospitals and schools. The historically privileged status power and knowledge power of doctors may still predominate in the doctor/patient relation; but the doctors are dominated by the agents who are privileged to make the rules and control the resources that regulate the services within which the doctors operate.

Privilege, like power, has many forms, it has no absolute sovereignty but confers advantage, both on individuals and institutions. Privilege characterises the "haves," distinguishing them from the "have-nots," those who know and who are "in the know" from the ill-informed and the ignorant. It "allows" relative licence to the advantaged person or institution and access to other privileged resources of persons and institutions. Privilege may be inherited, acquired or ordained by statute. It is appropriated through property (material or cultural, including specialised knowledge), and through membership of groups and institutions which constitute their own rules of inclusion and exclusion, - the monarchy, Parliament, the church, the major professions, the police and judiciary. It is

ordained through the enforceable right of statute and the acquired right of organizational authority. The "recognition" by subjects of this authority and right privileges the agents who operate disciplinary power. Professional experts, unless they have the right inscribed in statute which gives them the status of authorised agents, the statutory right of local authority social workers for example, do not have an enforceable right to operate disciplinary power.

But the operation of disciplinary power does not necessarily require an "authorised" right. The experts in the human sciences who are not privileged by statutory right continue to operate disciplinary power over subjects in many spheres through the influence of their discourses on policy-making; and on the need of subjects for access to their specialised knowledge and to the resources they do not own but over which they have some control. Their power lies also in the recognition accorded to them by subjects as "authority;" in their institutionalised positioning and the bureaucratic procedures through which subjects gain access to them and to other resources they control or to which they have privileged access; supportive services, hospital beds etc. Their resource power, their own resources and those they control, enables them to exercise sanctions or to provide something of value to individual subjects; to punish or deny or provide services that will heal, instruct, support etc. They are privileged by the bureaucratic rules and procedures that protect them, and by the discretion to ration or make available to those in "need" both their own knowledge resource and other resources which they control or to which they have access. Their power is relative to the extent of the dependence of others on these resources; the dependence of the patient, disempowered by pain, anxiety, fear of

death, on the doctor for his expert knowledge and also on the material resources (drugs, hospital beds etc.) to which he has access; the dependence of the pupil/student on the teacher not only for "knowledge" but for grading and advancement; the dependence of frail elderly persons on social workers for residential "placements;" the dependence of "believers" on the expert speakers in whom they place their faith, the missionaries and the priests whose truths and discourses meet their needs for comfort, support or direction in their lives, and on the psychiatrists and counsellors for the healing powers of their "confessionals." Even though the status of the experts and "respect" for their knowledge are in decline as the imperfections and failures of their discourses and truths are opened to public scrutiny and common-sense debate through various media forms, they continue to exercise disciplinary power over subjects in need.

Along with the decline in the status and discourses of the secular experts, the influence of religious discourses and the institutionalised disciplinary power of their appointed agents has declined in the last decades of the twentieth century; even the discourse of the sovereignty of God the father, even the existence of God, is disputed among the experts themselves. But, although in decline, religion as a disciplinary force is not dead. While Freudian discourses and psychoanalytic language have entered into everday speech and into media representations and have opened up new (and disputed) truths and added to the 'proliferating discourses of sex and sexuality' (Foucault), the speakers of religious truths are engaged in the contemporary power struggles over the rules that regulate sexual behaviours, sexuality, and gender, their discourses part of the public debate. For the committed disciples of the evangelical movements and

sects such as Jehovah's Witnesses, the ideologies of their religious discourses promote a truth more powerful than the secular ideological truths of expert speakers; the disciplinary power of their agents has a greater force than that of the agents authorised to uphold the secular law. The status of their agents is privileged above the status of secular experts; their status is as agents of God. And yet, the highest level of agency, instrumentality, in the person of the Pope, meets with resistance from subjects who question the absoluteness of God's "truth" and withhold their consent to some of the rules, the rules on contraception, abortion, extra-marital sex etc. For such dissident subjects, the sanctions of hell and damnation have lost their force. Even "divine" power vested in its primary authorised agent is dependent on the consent of the subject and on effective sanctions, as much as is the statutory secular power of the state and the knowledge power of the human sciences.

Power balances are constantly shifting as subjects withhold their consent to the received moral absolutes, the rules and the discourses of the traditional expert speakers, discounting their truths and resisting their disciplinary power. And yet, influenced by new truths, subjects voluntarily submit themselves to new forms of disciplinary power; to psychoanalysis for example which, as Foucault argues, has provided an alternative to the religious confessional in Western societies. The truths and discursive practices of expert therapists and counsellors, liberating subjects from their subjectivity to the disciplinary imperatives of the traditional discourses, at the same time construct a new form of unequal power relations, a new form of subjectivity to the expert other.

The greater the personal resource power of the subject, constituted through wealth, property, cultural capital, drive, status, alliances, knowledge of "the system," the less is his/her total dependence on the expert other and the greater his/her discretionary power to circumvent the rules, and to resist the disciplinary power of the experts and the authorised agents. The power of choice, personal resource power, enables privileged subjects to take their custom where they will, to purchase expertise, to form alliances; to change the power imbalance between the dominance of the expert and the dependence of the subject. Knowledge of their rights and of the rules of the game is one constituent of the resource power of privileged subjects through which the truths of expert speakers are challenged and their disciplinary power resisted, circumvented or opposed.

Knowledge is one of a range of privileging resources that are always in play in the operation of power. It privileges those who possess it above those who do not. Foucault argues that knowledge and power are inter-connected in a mutually generative fashion: 'power produces knowledge ... power and knowledge directly imply one another ... there is no power relation without the correlative constitution of a field of knowledge, nor any knowledge that does not presuppose and constitute at the same time power relations.' (Foucault 1977, p.27). As subjects become better informed, acquire a broader range of "knowledges," become more aware of their rights and the power of alliances with each other and with external influencers (the media for example), they are better "positioned," less disadvantaged, in relation to the experts and the authorised agents.

Subjects who lack resource power, whether through ignorance, isolation, poverty, low status or lack of drive, are likely to be dominated by the rules formulated by others and by the operation of their disciplinary power. These "others" are not necessarily the expert speakers of the human sciences whose 'serious speech acts' define a field of specialised knowledge through which meaning and truth are constructed. The disciplinary power of "others" over acquiescent subjects who lack resources derives from the power of the "truths" inscribed in their discourses, promoted through the strategies and the missionary drive and charismatic leadership of often self-appointed agents; the leaders of evangelical religious movements, minority political movements, revolutionary movements. Leadership qualities, drive, charisma and sense of mission are powerful personal resources in all power relations, at the inter-personal level of social interaction and in organizational relations. Power operates among the experts themselves through the higher status of privileged professional discourses, (for example the dominant status among medical professionals of the consultant); but partly through the personal drive and charisma of "natural" leaders who dominate their professional peers as well as dependent subjects – the power that 'resides in the person.' (Handy 1985. see chapter 2 above).

Charisma is a discursive construction, postulating a quality more easily recognised than defined. Owing much to media discourses, especially film and television, it is recognisable in the everyday discourses of inter-personal relations at the micro-level and within groups and organizations. It is a privileging resource in a culture that venerates and rewards "star" quality and looks for it in its

leaders. The charismatic leader does not possess sovereign power, is still subject to the statutory rules that regulate subjects, and to the "rule" that in a democratic state no individual power is allowed to be absolute; but the charismatic leader driven by a sense of mission can influence the cultural values of an organization or even of the wider society and discipline subjects into obedience to the rules of his/her discourses.

So, for example, the (cultivated) charismatic leadership and missionary drive of Margaret Thatcher in her latter years as prime minister dominated the power struggles within her own political party as well as those with the oppositional parties; and her political discourses dominated the discourses of the expert speakers of the human sciences who unsuccessfully resisted her mission to market and privatise public services. Through her drive and assertive leadership she operated disciplinary power over her colleagues and disciplined individual dissident Ministers by exercising her power of sanctions. Her ascribed resources of status, position, authority as the elected principal agent of the state were supplemented by her personal resources of drive, assertiveness and sense of mission and the personal charisma that dominated her disciples. Resistant forces among her colleagues and individual challenges to her power were ineffectual – until a strategic alliance within her own party, helped by media discourses constructing and reflecting "public opinion" and the implicit rule against "sovereign" power, operated effective oppositional power to bring her down.

The charisma of public figures is subject to the privileged resource power of the media and its strategies for according a high profile to

favoured individuals; and its strategies for constructing a negative image of those it does not favour. As never before in history, the technological resource power of the media, the power of print reinforced by images and sound, mediates our view of the world and of the privileged agents who are authorised to exercise power. Media discourses form part of our experience of the world as they speak to us directly, bringing the news and events of the day into the domestic domain, so that we can see and hear for ourselves, we can recognise and know, the "grey" men and the "stars" – as various media forms construct them in their "true" discourses.

There is no meta-discourse which overrides all others, no sovereign power, as Foucault argues. Many forms of power operate in and through a range of discursive practices, strategies and technologies. Disciplinary power is a labyrinthine concept operating through the structures, rules and discursive practices of institutions, through the influential discourses of privileged speakers, through the informal rules of social groups and the received moral codes of society and through the statutory rules and sanctions inscribed in law. The 'field of force relations' is complex and unstable;   but among the more privileged discourses and the most influential are those of the media in their various forms and with their vast technological power, and those of the law with its enforceable right of sanctions.   The personal drive, charisma and sense of mission of individual agents are factors in power relations and in promoting discursive truths; but these agents are not necessarily the professional experts who speak the language of the human sciences.   Although privileged by their multiple-resource power, the status of these experts is unstable in post-modern British society. While Parliamentary law may be informed

by the specialised knowledge of the experts in the human sciences, the truths and serious speech acts of their discourses are subject to re-construction by the more privileged agents of the state who formulate the policies and the statutory rules and control the resources. The discursive practices of the professional experts are regulated by the agent-managers as the discourse of market forces predominates as the new "truth" of our times.

Power, taking many forms, coming from everywhere, multi-directional, operating at different levels, with different degrees of serious effect, remains a difficult and elusive concept. Specialised knowledge and the discretion to interpret the rules, institutionalised authority, access to sanctions, and professional alliances are privileging resources in the field of force relations. But even the most privileged individuals or institutions through which various forms of disciplinary power operate are themselves subject to the operation of disciplinary power in different contexts and at different historical moments. While some groups in society have the capacity to *influence* the actions of others through their specialised knowlege and the recognition accorded to their truth claims, their capacity to *act* on the actions of others, to operate disciplinary power, is regulated by the institutionalised rules and discursive practices of the organizations through which they operate and by the discourses of the law.

Complex networks of organizational structures and discourses intersect with the specialised discourses of professional experts. While we can analyse the rules, the organizational structures, the specialised discourses and discursive practices that inform power

relations in a specific site in a discrete context at a given moment in time, there is no simple way of saying what are the determining factors in the operation of power. As external forces impinge on the specialised discourses of expert speakers the balances of power shift. Foucault focussed on the specialised knowledge of the human sciences as a significant constituent in the complex technologies of power; but he recognised also the effects of institutionalised power and the effects on power relations of the increasing intervention of the state and its agencies into the private space of individuals.

This study has identified many forms of power and a diversity of intersecting discourses, sometimes mutually re-inforcing sometimes in opposition, in which knowledge and power were joined together. It has illustrated the discursive practices, strategies and technologies that operate within complex and unstable fields of force relations. It has illustrated the ways in which agents are privileged within specific contexts; and the ways in which institutions, notably the law and the media, are privileged but not sovereign. The 'major mechanisms of power' can be seen to operate in the unstable environment of a society undergoing an accelerated process of cultural change amidst ideological uncertainties and struggles over rights and responsibilities in which, as subjects and as "agents," we are all involved.

As I have identified the particular dilemmas for social workers caught up in complex power networks, I have reflected uneasily on the low regard in which social work is often held and the mis-representation of the actions and the power of social workers in media and popular discourses. Social workers are aware of power issues, of what is perceived as power coming from the top, of power inequalities around

gender and ethnicity, and of their own expert/authority power in relation to their clients; but by analysing the discourses and discursive practices, the rules and tactics that regulate the power games, I have opened up a new discourse on power relations for social work.   If social workers are to use the 'privileges of knowledge' for the benefit of the clients/users of services they must recognise how the 'mystifying representations' they impose on people effectively disempower them.   They must recognise the rules and tactics of strategic game-playing that disempower the clients, the tactic of interpreting unmet need as 'unmet choice' for example; and as they enter into 'partnership' with the users of services, the agents who are privileged to interpret and implement the rules must be wary of colluding with a strategy of notional empowerment which does nothing to change the balance of power.

Studying power at its point of application through a methodology derived from the ideas of Michel Foucault has enabled me to recognise more clearly than before the complex power games and the elements at work in the 'multiple and mobile field of force relations' in which we are all enmeshed.   While I have applied the theoretical ideas to a particular site and the discipline of social work, the theory and the methodology used for this investigation may be applied to other sites and other disciplines where useful lessons may be learned from a clearer understanding of the strategies and tactics through which 'disciplinary power' is exercised.

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