

**Exploring How Experts Define and Translate Knowledge in the  
'Risk Society': The Case of Child and Family Social Work**

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by

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## **Abstract**

Evidence based practice (EBP) has asserted itself as the best way to respond to risk and uncertainty in child and family social work, a relatively new profession with a constantly shifting knowledge base. Informed by a social constructionist approach, the thesis asks: (1) what types of knowledge do social workers use and what meanings do they attach to these; and (2) what strategies do they use when sharing knowledge within their epistemic community?

Based on semi-structured interviews and research diaries with child and family social workers, I detect two types of knowledge the participants reported using, namely gut feeling and evidence. I identify the social element of gut feeling and that it is central to the response to uncertainty. I also reveal that the knowledge social workers associated with evidence is narrower than the EBP approach. I argue that these findings show that there is a gap between research and practice, and that the extent to which social workers are 'comfortable' with uncertainty is related to how they conceptualise the fact/ value distinction.

I also identify two knowledge sharing strategies, conceptualised as (1) standard knowledge filtering (SKF) and (2) dynamic knowledge filtering (DKF). Users of SKF aimed to render gut feeling and the associated uncertainty invisible, whilst users of DKF aimed to keep uncertainty visible and share gut feeling with others. The thesis reveals why some types of knowledge are shared and others are not, the differences between social workers, as well as the causes of frictions and frustrations associated with knowledge sharing. The dominance of EBP, however, conceals such complex processes and differences. By uncovering and conceptualising them effectively, the thesis makes an original contribution to a better understanding of gut feeling, evidence, fact and value which are central components of constructing and translating social work to co-workers.

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## List of Abbreviations

|          |                                                                       |
|----------|-----------------------------------------------------------------------|
| (COS)    | Community Organisation Societies                                      |
| (CTK)    | Collective tacit knowledge                                            |
| (DKF)    | Dynamic knowledge filtering                                           |
| (EBM)    | Evidence-based medicine                                               |
| (EBP)    | Evidence-based practice                                               |
| (HCPC)   | Health Care Professions Council                                       |
| (ICS)    | Integrated Children's System                                          |
| (LAC)    | Looked After Children                                                 |
| (NSPCC)  | National Society for the Prevention of Cruelty to Children            |
| (Ofsted) | The Office for Standards in Education, Children's Services and Skills |
| (Q)      | Qualified                                                             |
| (RCT)    | Randomised-controlled trial                                           |
| (SKF)    | Standard knowledge filtering                                          |
| (UN)     | United Nations                                                        |
| (UQ)     | Unqualified                                                           |
| (WHO)    | World Health Organisation                                             |



## Chapter One – Introduction

The shift towards late modernity has been characterised as a time where the response to uncertainty moved from being one predominantly based on fate to one predominantly based on risk (Ewald, 1991), although it is acknowledged that ideas related to fate and destiny still exist (Giddens, 1990; 1991; Lupton, 1999). During this time, risk moved from being narrowly associated with probability to being more broadly associated with danger (Douglas, 1990). Risk 'can be used both to describe the threat posed by uncertainty and the response to such threats' (Alaszewski and Coxon, 2009: 201). Although Mary Douglas (1985; 1990; 1992) was the first theorist to identify the importance of social context in relation to risk and uncertainty (Culpitt, 1999; Lupton, 1999), it was Ulrich Beck (1992) whose risk society thesis proposed that risk is now central to the organisation of society in a way it has never been before, and that there are new risks due to new technologies and the reflexivity inherent in late modernity. Further, as part of 'reflexive modernisation', scientific knowledge is questioned in a way it has not been before (Beck, 1992; 1994), with Giddens (1990) arguing that the decreasing confidence in experts and weakening of the institutional traditions of modernity has led to greater individualisation alongside increased anxiety and uncertainty.

Child and family social work is an interesting case study in relation to the response to risk and uncertainty because child and family social work is dominated by discussions about child abuse (Hall, 1997). Hilgartner (1992) uses the term 'risk object' to refer to the development of how a thing, situation or activity is associated with danger. What is now called 'child abuse' can be viewed in these terms. The medicalisation of child abuse in the mid-20<sup>th</sup> century led to evidence-based medicine (EBM) becoming the dominant model used to respond to the constantly changing definition of what constitutes child abuse (Hacking, 1991; Lonne et al, 2009). Child and family social work took the opportunity to attach itself to these ideas in the form of evidence-based practice (EBP) in the 1990s, in part to improve its status as a profession (Silverman, 1997). Concurrently, child and family social work policy has been shaped by inquiries into prominent child deaths (Corby, 2006; Fawcett

et al, 2004; Parton, 2012; Payne, 2005; Webb, 2006), which have led to a quest for certainty, including a 'preoccupation with risk factors, "dangerousness" and predicting who is likely to abuse' (Taylor and White, 2000: 9). This preoccupation with risk is 'new', with risk not being referred to in relation to social work in the 1960s and 1970s (Munro, 2002) for example. It also relates to a heavy auditing culture (Parton, 1996), resulting in 'actuarial practice', where there is an attempt to provide the precision – and certainty – requested by policy makers (Broadhurst et al, 2010; Webb, 2006). Consequently, risk is now the primary response to uncertainty within child and family social work (Kemshall, 2016; Stanford, 2010; Tanner, 1998; Webb, 2006), although Kemshall (2016) points out that it is important not to over-emphasise the role of risk in this and other areas of social policy, where alternative approaches can be found.

Such approaches are often informal, and remain central to child and family social worker's responses to uncertainty despite the dominance of standardised, techno-rational approaches to risk management (Broadhurst et al, 2010). This is in part because 'there is often no measurable, forensic or medical evidence to prove conclusively whether a child has or has not been abused...and even when there is clear medical and forensic evidence, this will need to be carefully weighed and evaluated' (Taylor and White, 2000: 9-10). Part of this expert 'weighting and evaluating' involves different groups of experts sharing knowledge with one another. Thompson (2013: 189; 2016) describes information sharing within child and family social work as a 'moral and political imperative', highlighting just how central this practice has become to the profession. White et al refer to information sharing as "'information practices", namely the way professionals handle and present information in particular ways to serve particular purposes' (White et al, 2015: 33), and whether to share knowledge with other experts in health and social care has been described as a risk decision itself (Carson and Bain, 2008).

There is a vast amount of literature within child and family social work (and beyond) on the complexities involved when different groups of experts share knowledge with one another, or multi-agency working as it is commonly known (for example, Ferguson, 2011; Hood, 2016; Horwath, 2007; Horwath and Morrison, 2007; Hudson, 2000; Laurence, 2004;

Lyon, 2003; Reder et al, 1993; Reder and Duncan, 2003; Thompson, 2010; 2013; 2016; White, 2009a; White et al, 2015). More recently, research on ‘information filtering’ has begun to complicate the assumption that knowledge sharing within child and family social work is straightforward (Huuskonen and Vakkari, 2015; Lees, 2017; Thompson, 2010; 2013; 2016). However, despite increased interest in risk and child and family social work over the last twenty years, there is still insufficient empirical research on assumptions about risk in practice (Warner and Sharland, 2010). There remain gaps in our knowledge on how child and family social workers define knowledge they consider important in their practice; the meanings they attach to different knowledges; how they receive knowledge from their colleagues; what strategies they use to share such knowledge with others (if they can) and why; and what the consequences of these understandings and strategies are.

The thesis explores these questions using a social constructionist approach, focusing not on what the ‘truth’ is about child abuse and the way in which knowledge is defined and shared with others, but rather, as Brown (1994) emphasises, how specific knowledges come to dominate over others. We know from the sociology of scientific knowledge (SSK) literature that formal rules and guidance used by experts are based on a finite number of past exemplars (Bloor, 1997). Thus, when making a decision on a new case, experts must ‘make the next step’ (Bloor, 1997) and go beyond these formal documents – but how do they do so? For example, how do child and family social workers respond to the formal, risk-orientated approach when uncertainty is little tolerated and fear, blame and emotional politics shape wider society’s understanding of such issues (Carson and Bain, 2008; Corby, 2006; Stanford, 2010; Warner, 2013; 2015)? Existing research on the knowledge ‘work’ of experts, particularly within the sociology of scientific knowledge (SSK) literature, is built on to explore the gap in knowledge outlined above. Insights from the translation studies literature are used to explore these questions and are extended in two ways: 1) by exploring the use of translation where sharing knowledge is not only advisable, it is mandatory; and 2) by focusing on translation within one ‘epistemic culture’ (Knorr-Cetina, 1999).

## Structure of the thesis

**Chapter 2** provides an outline of child and family social work in England today. It starts with an exploration of the (constantly changing) 'risk object' (Hilgartner, 1992) child abuse, which is the primary concern of this profession (Hall, 1997). A summary of the intertwined history of child abuse and child and family social work tracks historical changes in the way society views children, including the shift from the concept 'cruelty to children' to 'child abuse'. Child and family social work is traced from its origins in the 19<sup>th</sup> century to more recent developments which have resulted in an artificial separation between 'child protection' and 'family support'. Debates around whether child and family social work is a profession, as well as why the term child and family social work is used to refer to this epistemic culture (Knorr-Cetina, 1999) are explored. Finally, a critique of evidence-based practice (EBP) and its underlying approach to knowledge is provided. That this approach to knowledge is so influential in this field is relevant because it affects how knowledge is defined, what knowledge is considered 'acceptable', and thus what knowledge is shared (or not) with others in the epistemic community.

**Chapter 3** outlines the sociological approach underpinning the thesis, including a brief discussion of the history of knowledge, the development of social constructionism and the social constructionist approach to risk and uncertainty. Insights on expert knowledge from the SSK literature are outlined, followed by an identification of the gap in the literature on knowledge sharing within one epistemic community. Finally, it is argued that insights from the translation studies literature have the potential to aid identification of hidden processes and meanings associated with knowledge sharing within child and family social work.

An overview of the methodology is provided in **chapter 4**, where the epistemological stance taken is outlined, which provides a theoretical grounding for the qualitative research methods chosen. Access and sampling are discussed, followed by the reason why research diaries and semi-structured interviews were conducted. A separate discussion of research ethics is provided, although ethical concerns permeate the whole chapter. This is followed by an outline of the pilot study and the experience of data collection. Finally, an overview

of how data analysis was carried out is provided to make explicit the theoretical underpinning of subsequent research findings.

**Chapters 5, 6, and 7** outline the empirical research findings and provide discussion of such findings. One informal type of knowledge was mentioned repeatedly by participants and they referred to it as 'gut feeling'. **Chapter 5** provides a summary of existing literature on the subject and identifies the social element of gut feeling, explaining why sociological theory is useful here. The complex question of how participants defined gut feeling is separated into three parts and includes the meanings attached to this form of knowledge. Firstly, drawing on the SSK literature, in particular the work of Harry Collins, it is argued that gut feeling as described by participants was a form of collective tacit knowledge (CTK) and was thus inherently social. Secondly, two broad, communal themes associated with this form of CTK are outlined: uncertainty coming to the fore that was previously hidden, and incongruence between the current situation and past experience. Thirdly, it is identified that participants reflected on CTK differently depending on the extent to which they separated fact and value. This is sociologically important because it renders visible what had previously been hidden: that participants' reflections on particular knowledges affected the strategies they reported using to share that knowledge with others. Four main ways of reflecting on CTK are identified: 1) binary; 2) ambivalent; 3) pragmatic; and 4) reconciled. It is identified that what participants call gut feeling, which, it is argued, is a form of CTK, is a central type of knowledge participants used when responding to uncertainty. Further, these findings suggest that whether social workers are not just comfortable with uncertainty, but whether they also incorporate uncertainty into their reflections on different forms of knowledge, depends on the extent to which they separate fact and value. Finally, how participants conceptualised the fact/value distinction related to how at ease they were with the use of gut feeling, and how – indeed if – they shared that knowledge with others, which is discussed in chapter 7.

**Chapter 6** explores evidence, a formal type of knowledge. Here, the question of how participants defined evidence, including the meanings they attached to the term, is explored in two sections. Firstly, this chapter identifies what knowledge participants

associated with evidence. Three main types of knowledge associated with evidence by participants are outlined: physical and environmental observation; the child's voice; and parental engagement. What was missing from discussions about evidence – research – is also explored. A surprising finding is that the knowledge participants associated with evidence was narrower than the EBP approach, and reasons for this are explored. The findings identify a gap between research and practice, thus contributing to existing debates on the relationship between research and practice within child and family social work.

Having identified the knowledge participants associated with evidence, the second part of the chapter identifies and explores four different ways of reflecting on the term: binary; ambivalent, pragmatic; and reconciled. As with participant reflections on CTK, differences were based on the extent to which fact and value were separated. Through a subsequent discussion of both CTK and evidence, it is argued that these differences between participants are easily missed because the focus is usually on what knowledge is associated with evidence, rather than social worker reflections on the term. Further, the impact of the EBP approach means that, despite such differences, including reflections on whether uncertainty should be part of evidence, all were constrained by the quest for certainty prevalent in the epistemic community. The strong impact of EBP and the wider epistemic community on individual reflections on knowledge imply that any attempt to individualise debates about uncertainty in child and family social work are misguided.

In **chapter 7**, two knowledge sharing strategies are identified, which are conceptualised as 1) standard knowledge filtering (SKF); and 2) dynamic knowledge filtering (DKF). Broadly, participants who reflected on knowledge in a binary or ambivalent way employed the former, while participants who reflected on knowledge in a pragmatic or reconciled way employed the latter. An important note to make is that participants are referred to as either employing SKF or DKF as a shorthand. This refers to the finding that participants reported sharing particular strategies that have been conceptualised here as SKF or DKF. Therefore, it cannot be said that participants definitely employ SKF or DKF in their practice, but that these were their reflections and thoughts behind their knowledge sharing, which is an original contribution to the literature on the subject. The difference in the extent to which

participants separated fact and value underpinned both methods, and the various strategies used in both groups are outlined. Venuti's (2008) analysis of literary translation is utilised to identify that users of SKF aimed to render gut feeling and the associated uncertainty invisible, whilst users of DKF were more comfortable with uncertainty and could share gut feeling with others. The extent to which what Venuti (2008) calls foreignisation can be achieved – in other words, whether CTK can be rendered more visible – is also discussed. This is sociologically important because the findings identify that complex knowledge translation occurs within, as well as between, epistemic communities. The consequences of the differences between SKF and DKF are explored, including frustrations resulting from differing expectations of knowledge sharing strategies. The concept of retranslation is employed to explain what could be seen as 'meaningless' repetition when sharing knowledge with others, including the positive and negative side of this process. Further, participants' ambivalence about collective authorship against a background of increased individualisation (Giddens, 1990) more broadly and 'blame culture' (Carson and Bain, 2008: 8) in child and family social work is explored. However, it is argued that the dominance of EBP conceals such complex processes and differences, thus making it harder to understand the causes of frictions and frustrations participants reported as outlined above.

**Chapter 8** concludes the thesis and outlines the original contribution to knowledge, reflects on the strengths and limitations of the study as well as exploring implications for future research based on the findings here. It is argued that the thesis makes an original contribution to a better understanding of gut feeling, evidence, fact and value which are central components of constructing and translating social work to co-workers.

## **Chapter Two – Risk, Uncertainty and Child and Family Social Work**

### **Defining child abuse**

When exploring risk and uncertainty in child and family social work, a pertinent question is: risk of what? And why risk? The second question is explored later in the chapter. A simple answer to the first question is harm to children. Once we start to explore this sociologically, it becomes clear that the concepts ‘children’ and ‘harm’ are contingent and contested. Garrett (1999) argues that there can be a tendency within the Looked After Children (LAC) discourse within child and family social work to be rather impatient with critical inquiry. Garrett (1999: 28) argues that this is because such inquiry might destabilise the status quo, thus there is an emphasis on ‘improving outcomes’ and ‘getting on with the job’ instead. Whereas, as Howe (1996) argues, it is vital not to simply describe events for performance-orientated reasons, but to gain a deeper understanding of how social workers construct those events and attach meaning to them. This makes it even more important to clarify what is meant by the terms used in the thesis. Below, what constitutes ‘child’, ‘child abuse’ and ‘family’ are explored to clarify what risks are pertinent to child and family social work.

The term family is ‘emotionally charged and contested’ (Dominelli, 2004: 99) and it is also a ‘flexible, fluid and contingent’ (Jagger and Wright, 1999: 3) social construct. In late modernity, there is a perception that notions of family in England ‘are characterised by increasing pluralism and tolerance of multiple family values and practices’ (Forsberg, 2013: 206). However, a perceived increase in choice does not mean underlying, if constantly changing, ‘moral codes’ affecting ways of ‘doing’ family life have disappeared (Forsberg, 2013; Smart, 2004). In recent years, family has been theorised as a set of practices (Morris et al, 2017; Williams, 2004), with Williams (2004) identifying significant changes in the way family is practised and making associated recommendations for policy-makers who must respond to such shifts. However, both these changes and the way of theorising such changes is not always acknowledged within child and family social work itself, with Morris et al finding ‘limited engagement with “family” as an active, dynamic



entity' (Morris et al, 2017: 59). This lack of engagement with family as practice is reflected in the child-centred approach in UK child and family social work today which artificially separates 'child' and 'family' (Featherstone et al, 2014a; Featherstone et al, 2014b; Morris et al, 2015). The term family has limitations, and yet it helps theorists respond critically to political discourse and policy developments on the subject (Edwards et al, 2012). Here, when the term family is used, it refers to '*extended* network of a child and it is recognised that this may include significant others that are both related and unrelated' (Morris, 2012: 907).

It is important to recognise that when the term child is used, particularly in social policy, it is not an individual that is referred to but the structural site, as well as the collective and institutional space, that is childhood (James and James, 2004). Ariès (1962) first emphasised the social construction of childhood, arguing that childhood (beyond infancy) did not exist in Medieval England, as beyond the age of 5 people were treated as adults (Pilcher, 1995). This argument has been contested, with Pollock (1983) arguing that a concept of childhood did exist in the Middle Ages – it is simply different to the present definition. However, there is 'widespread agreement that modern conceptions of childhood differ from those in the past and that the particular forms that childhood take vary according to historical context' (Pilcher, 1995: 37). In England, Ennew (1986) argues that cultural practices reinforce a rigid age hierarchy and childhood is seen as a stage of incompetence and incompleteness with children having special, separate needs (Pilcher, 1995). For Ennew, because of this focus on 'lack of', children need their own separate, regulated world, which means they can be viewed as legitimately vulnerable and dependent (Pilcher, 1995). In this way, through what Archard (2004) calls the 'caretaker thesis', adults exert control over children, thus making children dependent, leading to full personhood being denied (Hockey and James, 1993). This links to the children's liberation movement, proponents of which broadly argue that children should have the same rights as adults (Archard, 2004; Pilcher, 1995). Here, Archard's (2004) evaluation is adhered to. Archard (2004) argues that, just as not all children are incompetent, not all children are capable of self-determination, although the debate continues. To make the picture more complex, researchers define childhood

differently (for example whether a child can be 16, 17 or 18) and legal definitions vary in different countries (Smallbone et al, 2008). In England, the UN Convention on the Rights of the Child definition has been ratified, which means anyone under the age of 18 is considered a child (NSPCC, 2016).

In relation to harm to children, 'there is no clear consensus among researchers or practitioners about exactly what constitutes maltreatment, nor among legislators about where to draw the line between illegal and legally tolerated actions involving children' (Smallbone et al, 2008: 2). Hilgartner (1992) uses the term 'risk objects' to refer to the development of how a thing, situation or activity is associated with danger. What is now called 'child abuse' can be viewed in these terms. Historically, a dominant view in the UK (and later in the US) was that parents had absolute rights over the child (Stanley and Goddard, 2002). For example, 'young daughters were loaned to adult acquaintances as gestures of kindness' (Kite and Tyson, 2004: 308). Thus, cruelty to and neglect of children is not new – indeed, references to it have been found throughout written history (Stanley and Goddard, 2002). However, Kite and Tyson argue that a cultural shift took place in 1874, where the US courts had to use the Cruelty to Animals Act to remove an adopted child, Mary Ellen, who was being physically abused by her caregivers (Kite and Tyson, 2004; Lonne et al, 2009). In fact, the idea that children were associated with animals in the court (or more widely) is a myth (Watkins, 1990). The courts treated Mary Ellen as a child in need of protection, although the case was extremely influential in the US and the UK (Watkins, 1990). Further, the idea that there was no legislation or concern for the welfare of children prior to the 19<sup>th</sup> century has been contested (for example Pollock, 1983; Watkins, 1990), although enforcement of relevant legalisation in the UK and US was limited and, even when enforced, children's circumstances tended not to improve (Watkins, 1990).

Following the Mary Ellen case, parental rights over the child (Stanley and Goddard, 2002) were in the spotlight, and, importantly, organisations such as the including the National Society for the Prevention of Cruelty to Children (NSPCC) in 1889 were formed to enforce legislation and keep cruelty to children in the spotlight (Clapton et al, 2013; Watkins, 1990). Thus, cruelty to children, which has always existed, began to be associated with danger and

was therefore constructed as a social problem requiring a social response (Hacking, 1991). This 'child-saving era' lasted until World War 1 (Lonne et al, 2009; Scott, 2006) and occurred alongside the shift towards children being viewed as vulnerable individuals, which was linked to women becoming more prominent advocates for children and their families (Lonne et al, 2009). However, after 1918, these concerns disappeared from public life and were left to individual groups on a local basis (Lonne et al, 2009).

It was not until the mid-1940s that the medical profession turned its attention to the subject, when medical practitioners in the US investigated bone fractures in children (Stanley and Goddard, 2002). This research came to public attention when in 1962 a group of physicians, led by Kempe, published the article 'the battered-child syndrome' (Kempe et al, 1962), with the 'editors [speculating] that more children died of battery from parents or guardians than from leukaemia, cystic fibrosis or muscular dystrophy' (Hacking, 1991: 266). One of the reasons the Kempe paper was so influential was because it asserted that the problem existed across all classes, therefore it was not a social problem but the responsibility of the medical profession to deal with it (Hacking, 1991). Thus, in subsequent years, 'cruelty to children' became 'child abuse'; the difference between the two being that child abuse was medicalised to the extent that medical practitioners were viewed as the primary experts who conceptualised and responded to this problem (Hacking, 1991; Lonne et al, 2009).

The definition of child abuse is constantly changing, including how frequently this form of abuse occurs; who are the perpetrators; and 'new' categories being incorporated into the term, such as incest (Corby, 2006; Hacking, 1991; Stanley and Goddard, 2002). Following an increased interest in standardising definitions and terms since the 1980s, physical abuse, sexual abuse, emotional abuse and neglect are four prominent categories in England (Devine and Parker, 2015) and are also used by the World Health Organisation (WHO) (Butchart et al, 2006). Within those categories, issues that have received widespread attention in recent years in England include 'the sexual exploitation of children, forced marriage, female genital mutilation, online abuse, bullying and trafficking' (Jones et al, 2016: 2). Child abuse and child maltreatment are both used as shorthand's to refer to all

these examples of abuse and are often referred to interchangeably. However, Butchard et al (2006) and Radford et al (2011) differentiate between 'child maltreatment' and 'severe child maltreatment'. Therefore, because the definition of child maltreatment uses the same four categories as the definition of child abuse (for example Butchard et al, 2006; Radford et al, 2011), as well as the sub-categories outlined by Jones et al (2016), child abuse will be the term used throughout the thesis.

That we, as a society, are constantly clarifying our ideas about child abuse does not mean we are getting close to 'the truth' (Hacking, 1991). For Hacking, this is because once something is counted as a truth, this very knowledge itself changes the individuals it impacts on. Thus, knowledge changes people and can therefore never remain static (Hacking, 1991). It is also because, as Douglas's (1985) socio-cultural analysis tells us, 'dangers are culturally selected for recognition – not all dangers, but some' (Douglas, 1985: 54). For some social constructionists, who argue that those dangers themselves are also socially constructed (Lupton, 1999), the idea of child abuse as social construct is challenging, and, indeed, awareness of the issue has been valuable (Hacking, 1991). However, it is nevertheless the case that 'no one had any glimmering, in 1960, of what was going to count as child abuse in 1990. It is not as if we went in with a clear idea of evils to be ferreted out and found far more than we had bargained for' (Hacking, 1991: 257).

How we define child abuse, of course, shapes the response to the phenomena (Connolly et al, 2006; Lonne et al, 2009). Child sexual abuse, which Cohen (2002) argues is the focus of public perceptions of child abuse, has now been categorised as a 'national threat' (Home Office, 2015). Further, White et al's (2015) ethnographic research on knowledge sharing between hospital services and children's social work found that a change in definition from 'safeguarding' to 'patient safety' had a significant impact on the way agencies responded to safeguarding concerns. These changing definitions and categorisations also mean it is notoriously difficult to identify the prevalence of child abuse in England (Fawcett et al, 2004). The government provides figures on the number of children referred to and assessed by children's services (DfE, 2016), with one of the key indicators of child abuse being referrals to children's services (Parton, 2012). However, Parton (2012: 155) argues that

there is no evidence that the number of referrals (cited as 621,470 in 2015-2016 [DfE, 2016]), give us 'any idea' about the prevalence of child abuse. Different methods of research, of course, have different findings. For example, Radford et al (2011) found 5.9 per cent of under 11s, 18.6 per cent of 11–17s and 25.3 per cent of 18–24s self-reported experiencing 'severe maltreatment' in the UK.

Having discussed the terms child, family and child abuse, child and family social work is explored below.

### **Child and family social work: a 'new' 'profession'?**

As stated in chapter 1, child and family social work is a social construction (Payne, 2005). It is constructed every day by actors interacting in what Payne (2005) refers to as a circular process - service users, managers, policy creators, social workers and interest groups create social work by interacting with one another (Payne, 2005). There is, and always has been, widespread disagreement about how to define child and family social work because it is created through such social interaction, and thus one definition will not reflect the constantly changing nature of the profession (Moriarty et al, 2015a; Payne, 2005; Silverman, 1997). Social work is one of many occupations, such as nursing, midwifery, and teaching, that have attempted to 'professionalise' over the last 80 years (Silverman, 1997; Williams, 1993), attracted to the apparent status that such a term brings. This attempt is affected by debates on what the knowledge base of social work is (Taylor and White, 2006; Trevithick, 2008). However, even the term profession is contested, with Evetts (2006) arguing that a distinction between profession and expertise is not useful. Whether social work is a profession and whether social workers are 'experts' will be explored further below.

Payne states that there are three 'arenas of social construction' (Payne, 2005: 17) within social work: 1) the political-social-ideological arena, where policy is formed which sets the agenda for agencies; 2) the agency-professional arena, where employees and professional

collectives, such as unions and the Health Care Professions Council (HCPC), debate on more specific aspects of social work; and 3) the service user-worker-agency arena, where these specific social roles interact with one another to create the most important relationships in social work (Payne, 2005: 17-19). Who is ascribed the role of 'service user' is based on people's perceptions and can be associated with specific groups, such as those living in certain areas or from specific social groups (Payne, 2005). Service users have a central role in shaping what we now call child and family social work (Payne, 2005) but the complexity of power relations in the above arenas must also be acknowledged. For example, institutional power allows child and family social work workers to exert control over service users (de Montigny, 1995; Dominelli, 1997; Harris, 1997), although paradoxically that power also limits the workers' ability to define social work as a whole (Dominelli, 1997). The most common day-to-day work of child and family social workers themselves, beside recording knowledge, is the 'private space' of home visiting (visiting children and their families in their home environment) (Winter and Cree, 2016).

The history of child and family social work is inextricably linked to the construction of the social problem 'child abuse', which has been discussed above. The history of child and family social work is briefly explored, from its origins in the 19th century to more recent developments, which have resulted in an artificial separation between 'child protection' and 'family support'. Debates around whether child and family social work is a profession, as well as why the term child and family social work is used to refer to this 'epistemic culture' (Knorr-Cetina, 1999) are explored. These debates are important because they affect the knowledge work of child and family social workers today.

### **A brief history of child and family social work**

The notion of protecting children from cruelty in what Lonne et al (2009) term 'Anglophone' countries came into existence because of the 'fundamental shift in the relationship between the state and the family' (Scott, 2006: 5) in the late 19<sup>th</sup>, early 20<sup>th</sup> century. The establishment of Community Organisation Societies (COS) in response to changing notions of cruelty towards children is generally regarded as the roots of child and family social work

in North America and the UK (Lonne et al, 2009; Stanley and Goddard, 2002). Their role was to promote enforcement of legislation to prevent cruelty against children (Watkins, 1990). This often took a moralistic, individualistic tone (Stanley and Goddard, 2002), with some philanthropist and welfare agencies actively encouraging 'moral panics' to create a demand for new legislation (Clapton et al, 2013). It was not until the Children Act 1948 first introduced local authority children's departments that the state began to take on a role recognisable today, which was based on an attempt to strengthen the white, middle class, 'natural' idea of the nuclear family (Lonne et al, 2009). In 1971, broader local authority social services departments replaced these children's departments (Lonne et al, 2009).

Following the medicalisation of child abuse from the 1950s onwards, protecting children moved from the public sphere (in the form of education and labour laws, for example) to the private sphere (protecting children in the family) (Stanley and Goddard, 2002). In 1973, Maria Colwell, was beaten to death by her stepfather (Corby, 2006). The subsequent press attention, inquiry and recommendations is one of the first examples in England of child and family social work policy and public perception being shaped by extreme, individual events (Lonne et al, 2009; Warner and Sharland, 2010) and this process continued throughout the 1980s. For example, in 1985 alone, the media directly apportioned blame to social workers for the deaths of Jasmine Beckford, Tyra Henry, Charlene Scott and Reuben Carthy, who were all known to local services (Denney, 2005). So began the 'process of tragic death, public inquiry, sense of outrage, new policies, and (sometimes) new legislation, [which] has been replicated across North America, Australasia, and the United Kingdom' (Lonne et al, 2009: 18).

This focus on child protection was tested when, in 1988, the Cleveland Inquiry (Department of Health, 1988) was published as a response to an unprecedented number of child sexual abuse diagnoses by two medical practitioners in Cleveland (BMJ, 1988). The method of diagnosis was contested, and it was argued that there should be a better balance between child protection and family support (Fawcett et al, 2004) which the Children Act 1989 and Department of Health (1995), supported (Fawcett et al, 2004; Lonne et al, 2009). However, in the mid-1990s, it was argued that the 'spirit' of the Children Act 1989 – balancing child

protection and family support – was, in practice, not being adhered to, as well as broader issues such as the impact of poverty and gender being ignored (Fawcett et al, 2004). During this time, there was a shift in social policy and social work in the UK, ‘with risk prevention a critical driver rather than the alleviation of need’ (Kemshall, 2016: 283).

### **Present-day child and family social work: from safeguarding to child protection**

Alongside this move towards risk-orientated social policy (Kemshall, 2016), under New Labour there was also a shift from child protection to safeguarding (Featherstone et al, 2014b; Parton, 2011), with a broader remit on tackling child poverty (Stewart, 2011) and child health and wellbeing as well as identifying children at risk of harm (Parton, 2015). Prominent child deaths continued to shape policy, with the death of Victoria Climbié in 2000, who was tortured and murdered by her Great Aunt and her Great Aunt’s partner, leading to the influential Victoria Climbié Inquiry in 2003 (Laming, 2003). The emphasis of the inquiry was on improving multi-agency working and knowledge sharing, which is discussed below. For Ferguson, ‘despite its strengths, [the inquiry] presents rational and naive solutions to what must be understood as often irrational and inherently complex psycho-social processes’ (Ferguson, 2005: 781). The process continued with the death of Peter Connelly in 2007, whose mother, mother’s partner and mother’s partner’s brother were all convicted of causing or allowing the death of a child (BBC, 2013). The subsequent media attention and political response, for Parton (2014; 2015), are examples of placing blame on individual as well as institutional failures as a convenient way to ignore wider social, political and cultural elements of child abuse.

The Munro Review (Munro, 2010; 2011a; 2011b) was commissioned by the Coalition government in 2010. The review is divided into three parts, with part 1, entitled ‘A Systems Analysis’, setting out the main problems Munro identified in child protection practice in England (Munro, 2010). The second report, ‘The Child’s Journey’, argued that social work had become too focused on following formal procedures rather than asking if children were being helped (Munro, 2011a). The final report, ‘A Child-Centred System’, recommended placing more emphasis on professional judgement; acknowledging uncertainty in child



protection practice; reducing overly complicated guidance and procedures; and prioritising early interventions with children and their families (Munro, 2011b) (Mitchell, 2016). The review placed social work at the centre of the response to child maltreatment and was broadly well-received by the child and family social work community and beyond (Parton, 2012). However, Parton (2012) outlines several key criticisms of the review: it did not outline exactly what 'child protection systems' means, and therefore the relationship between child protection and family support is left unscrutinised; it refers to parental care of children rather than protecting children from abuse in society as a whole; and it does not fully acknowledge the wider social, political and cultural factors that influence whether its recommendations are fully implemented or not.

In fact, the Coalition placed a lower priority on child poverty and children (Stewart, 2011) and it appears this stance has remained in years since, with the idea of system and professional failure dominating the narrative of child protection (Parton, 2015). When this research began, the coalition was a year old and the final report from the Munro review was just being published. Today, the consequences of 'austerity' have been deeply felt, with local authorities facing funding cuts and increasing levels of poverty and deprivation (Ofsted, 2014). This agenda has been underpinned by similar themes behind New Labour policy, where a small group of families are seen to have a 'responsibility deficit', both 'having' problems and 'causing' problems in the community (Hayden and Jenkins, 2015: 459). 'Austerity' has been characterised as a simplistic solution to a complex problem, particularly due to the emphasis on changing behaviour rather than the social, political and cultural context behind that behaviour (Hayden and Jenkins, 2015).

During this time, attempts to reduce bureaucracy have failed, with policy documents such as Working Together (HM Government, 2015) remaining at over 3600 pages in length (including appendices) despite claims the document has been simplified (Parton, 2015). Meanwhile, child protection policy and public understanding of child protection issues continue to be informed by high-profile deaths of children in horrific circumstances, with reports on such tragic events undermining public trust in the profession (Legood et al, 2016). Two recent examples are Daniel Pelka and Hamza Khan, as well as the 'discovery' of

the extent of child sexual exploitation in communities across England (Sidebotham et al, 2016). Since the death of Peter Connelly, 'children who are referred [to children's services] are more likely to receive assessments or be subject to further action compared with 5 years ago, resulting in increased activity in child protection services' (Ofsted, 2014: 9; Sidebotham et al, 2016). More broadly, for Hacking (1991), the changing concept of child abuse and subsequent legalisation over the last 60 years has created the greatest reason for state intervention with families. Such legislation arguably functions not to protect children but to increase state power (Hacking, 1991).

### **Are child and family social workers experts?**

When debating whether child and family social workers are experts, there must first be consideration of what the term 'expert' means. Bogner and Menz (2009) argue that what they call the social-representational approach to expertise – that is, an expert is someone who is seen by others as such – risks uncritically accepting normative assumptions about who is an expert and who is not, thus further reinforcing a strict dichotomy between experts and lay people (Bogner and Menz, 2009). Further, if an expert is defined by their knowledge on a subject a researcher wishes to investigate (Walter, 1994; cited in Meuser and Nagel, 2009: 18) then everyone can be defined as an expert in their own life and the term is rendered meaningless (Meuser and Nagel, 2009). Instead, a 'modern' definition of expertise is useful, which is that an expert is someone who 'possesses an institutional authority to construct reality' (Hitzler, Honer and Maeder, 1994, cited in Meuser and Nagel, 2009: 19). Further, according to this perspective, an expert is someone who has 'special' knowledge in relation to problems defined as 'special' problems (Sprondel, 1979, cited in Meuser and Nagel, 2009: 19). Linking this definition of expertise directly to professions, however, is problematic if changes in knowledge production in late modernity (Meuser and Nagel, 2009) outlined by Beck (1992) and Giddens (1990; 1991) are not recognised.

One of those changes is the challenge to the strict dichotomy between lay people and experts, where individual professions find it more difficult to lay claim to their relevance for addressing specific social problems (Giddens, 1991; Meuser and Nagel, 2009). Child and

family social workers, then, are defined as experts here because they possess 'institutional authority to construct reality' (Hitzler, Honer and Maeder, 1994, cited in Meuser and Nagel, 2009: 19), although it is recognised that, in late modernity, where experts themselves find it difficult to keep up with new developments in increasingly specialised areas (Giddens, 1991; Bogner et al, 2009), this debate shapes child and family social work in specific and contested ways (Silverman, 1997). In particular, it is shaped by debates on what constitutes the knowledge base of child and family social work (Taylor and White, 2006; Trevithick, 2008). What is most important here, when expertise is contested, is that the existing literature on the subject, explored in chapter 3, can aid understanding of how this group defines and translates knowledge. This includes the arguments that although expert and 'ordinary' knowledge are both social in the same way (Kusch, 2002), experts account for their reasoning differently (Horlick-Jones, 2005a: 269).

Making a distinction between experts and professions is not useful because there are more similarities than differences between the two (Evetts, 2006). Moreover, a focus on defining these terms is a diversion from understanding why being considered a profession is appealing in late modernity, as well as diverting attention away from better understanding the power of professional groups (Evetts, 2006). How we might define child and family social work as a 'profession' has been explored above, although it is useful to add that one way to categorise professions 'is to see them as the structural, occupational and institutional arrangements for work associated with the uncertainties of modern lives in risk societies' (Evetts, 2006: 135). Overall, 'profession' is a useful term to refer to child and family social workers, but there is a recognition that this is a controversial, contested term which has more similarities than differences with the term 'expert'.

Overall, child and family social work in England can be described as having broad commonalities with what Lonne et al (2009) call 'Anglophone' countries, which include the US, Canada, UK, New Zealand and Australia. Commonalities include: the term child protection is used; a focus on assessment of risk; services have managerialised structures and legalised procedures; mandatory reporting systems; family support is secondary (and separate) to child protection (Lonne et al, 2009: 3-4); and there is a strong press influence

on child protection in English-speaking countries (Scott, 2006). Particularly problematic for Warner and Sharland (2010) is the way in which child protection policy and guidance is based on the response to the deaths of children known to local services. These extreme events do not reflect everyday practice and thus do not reflect the everyday experience of those working in child and family social work (Warner and Sharland, 2010).

A key detail here is that social work has become synonymous with child protection (Featherstone et al 2014a; Featherstone 2014b; Parton, 2014; Parton 2015). A more detailed overview of the artificial split between family support and child protection, and why the thesis explores both, is provided below.

### **Family support and child protection: a false dichotomy**

As outlined above, over the last 60 years, child and family social work has shifted between an emphasis on a reactionary, child protection response to child abuse and a more preventative family support model (Walker, 2012: 613), with the language of child protection currently dominating (Featherstone et al, 2014a; Featherstone et al, 2014b; Parton, 2015). At the same time, poverty and deprivation have been affecting the daily lives of children, with levels of child poverty expected to rise rather than fall (Ofsted, 2014), broader family support services such as children's centres being decimated in some areas, and their remit changed from universal support to targeting 'hard to reach' or 'troubled' families (Featherstone et al, 2014a; 2014b). This side-lining of family support in favour of child protection is part of the emergence of what Parton calls 'an authoritarian neoliberal state' (Parton, 2014: 2052) where the government promotes intervention on a scale similar to the 1970s and 1980s (Featherstone et al, 2014a; 2014b). Child protection, in this context, means an individualistic approach to social work, with children being viewed as separate from the family, which Featherstone et al (2014a; 2014b) argue is both impractical and unethical. A consequence of this approach is a focus on adoption (Featherstone et al, 2014b). Adoption fits well with a neoliberal, new managerialist perspective as a largely privatised, individualist solution to a broader social problem. It also fits with the idea that

it is primarily individual parents who are to blame for harm to children (Featherstone et al, 2014b). In England, adoption can occur without consent. Featherstone et al (2014b) argue that the consequences of this are difficult to overstate, particularly in relation to a willingness to provide family, rather than child-centred support. So, what is it that has been side-lined in favour of a child protection approach? The term family support first came into use following the Children Act 1989 (Featherstone et al, 2014a). It 'can be defined as self-help or volunteer help with little statutory involvement, or it can mean a continuum of advice, support and specialist help geared to provide early preventative intervention' (Walker, 2012: 615). Such work has not received as much attention from policy makers and researchers as statutory services (Walker, 2012), although Devaney and Dolan (2017) have explored the characteristics of family support as defined by those working in that area (although not current practitioners). Family support has been described as a set of values (Devaney and Dolan, 2017), and those values are ones that are Lonne et al (2009) and Featherstone et al (2014b) have advocated incorporating into child and family social work as a whole.

Adding to the complexity are the terms safeguarding and child protection. Devine and Parker (2015: 5) define safeguarding as 'child welfare provision' and child protection as 'abuse prevention'. These are often conflated which creates inherent tensions when providing both support and identifying abuse (Devine and Parker, 2015). Making such distinctions can be useful in order to identify the meanings behind specific social policies, thus challenging any attempts to narrow the definition of child and family social work (Featherstone et al, 2014a; 2014b). However, in practice, the distinction is harder to make when families do not simply follow a linear pattern of starting with universal support, then going on to specific preventative services and then statutory child protection teams. For example, only a small number of children in serious case reviews had a current child protection plan (meaning statutory intervention) at the time when they were seriously harmed or died, whereas there has been a sharp rise in the number of child protection plans in recent years (Sidebotham et al, 2016: 11). Further, over two thirds of those children have previous involvement with children's services (Sidebotham et al, 2016). Sidebotham et al

point to “‘pressure points’ at the boundaries into and out of the child protection system, where ‘cases are “stepped up” from universal and targeted services and “stepped down” from child protection and children in need’ (Sidebotham et al, 2016: 11). This demonstrates how closely intertwined the supposedly separate worlds of family support and child protection are and how child protection work goes far beyond statutory social work. Moreover, just how ‘voluntarily’ families work with various family support services is questionable if the next stated step is statutory intervention.

Under New Labour, family support was not completely side-lined. Rather, it was ‘subsumed within a broader language of intervention and prevention’ (Featherstone et al, 2014a: 1741). Language since the Coalition government has moved from safeguarding to child protection (Featherstone et al, 2014a; 2014b; Parton, 2011) and the lack of debate on family support, or even a mention of it in public policy, is stark (Featherstone et al, 2014a). Further, the child has been separated from the family with dangerous consequences for certain communities (Featherstone et al, 2014a; 2014b). Instead, as Featherstone et al (2014a; 2014b) argue, a broader definition of child and family social work is more useful, which focuses on families as well as children and the centrality of relationships to a definition of child and family social work (Ward et al, 2010). This approach also challenges what Parton (2014: 2052) calls the ‘authoritarian neoliberal state’, or, more specifically, a ‘child-centric risk paradigm’ (Featherstone et al, 2014b: 16) that unjustly targets specific social groups. As befits a sociological analysis of any topic, the definition of child and family social work here promotes a critical questioning of dominant ideas of what constitutes this epistemic community – in particular, the response to uncertainty. In line with this understanding, the term child and family social work is used to refer to a spectrum of work, where child protection and family support work often overlap. Indeed, one reason for this is that families tend to be categorised as either ‘the subject of intervention or the partner for change’ (Morris, 2012: 906), when family life is too complex for this simple categorisation. This definition of child and family social work includes qualified and unqualified social workers, which will be discussed further in chapter 4. This approach also

reflects my experience of working as both a qualified and unqualified social worker, where families did not fit neatly into requiring 'family support' or 'child protection'.

Having outlined my position on this debate, the rise of EBP and how it has come to dominate child and family social work is discussed below.

### **The rise (and dominance) of evidence-based practice**

Social work, throughout its short history, has been intermittently preoccupied with whether it is like science or art.

(Shaw, 2003: 130)

Presently, the emphasis is on science, rather than art, due to the dominance of evidence-based practice (EBP). Below, a definition of EBP is provided, followed by a brief overview of how it came to dominate child and family social work. That such an approach to knowledge is so influential in this field is relevant because it affects how knowledge is defined, what knowledge is considered 'acceptable', and thus what knowledge is shared (or not) with others in the epistemic community.

EBP has developed from evidence-based medicine (EBM), which has its origins in the 19<sup>th</sup> century (Sackett et al, 1996). Gordon Guyatt coined the term 'evidence-based medicine' in 1991 (Guyatt et al, 1992). Straus et al (2005: 1) describe EBM as 'the integration of the best research evidence with our clinical expertise and our patients' unique values and circumstances'. Thornton (2006) points out that this definition is quite surprising, considering a common emphasis on research evidence. However, it is the underlying assumptions that are under scrutiny here, with best research evidence being defined as 'valid and clinically relevant research' (Straus et al, 2005: 1). Here, what is considered valid is a particularly important point. Within the EBM framework, there is a hierarchy of evidence, with the 'gold standard' being randomised-controlled trials (RCTs) at the top and qualitative research at the bottom (Gray et al, 2009; McNeece and Thyer, 2004). McNeece and Thyer's (2004) hierarchy does not mention practice experience, practice wisdom or

intuition, although they are generally considered to be at the bottom of the list (Gray et al, 2009).

As what Silverman describes as an 'emerging profession', child and family social work has utilised EBP as a way of laying claim to a specific, high status body of knowledge (Silverman, 1997: 6). Gray and McDonald (2006) argue that, as well as enabling social work to associate itself with scientific knowledge, EBP is a way of making child and family social work better 'fit' the neoliberal context in which it exists (Gray and McDonald, 2006). This partly explains EBP's dominance in England and elsewhere, culminating in what Webb (2006) describes as 'actuarial practice'. EBP's ascendancy can also be explained by the neoliberal context itself. Over the last thirty years, the primary aims in relation to welfare services, including child and family social work, have been 'economy, efficiency and effectiveness' (Harlow, 2003: 30). It was presumed that market place principles would help achieve these aims. People receiving social work intervention were re-imagined as 'customers' and, alongside the generally increased importance of management, administrators became managers, tasked with achieving the best service for as little money as possible (Harlow, 2003). Consequently, private sector approaches to management were transferred to the public sector. Although child and family social work has always been influenced by private sector approaches to management, 'new managerialism' refers to the extent to which they are now utilised and the positivist perspectives which underpin these approaches (Harlow, 2003). This includes rational objectivity, standardisation and quantitative measurement of performance (Harlow, 2003). Overall, it is 'the social and-economic context together with the managerialist principles described above, [that] are determining the work of [social work] practitioners' (Harlow, 2003: 34).

However, Rose (2000) argues that, although actuarial practice might be the aim of 'control agencies' such as social work, in practice, such practices are not possible, and instead, it is better to understand such agencies as taking on a particular way of 'risk thinking'. This involves 'bringing possible future undesired events into calculations in the present, making their avoidance the central object of decision making processes, and administering individuals, institutions, expertise and resources to the service of that ambition' Rose, 2000:



332). For Rose, the failure of risk management does not threaten such an approach. Instead, it merely prompts more interventions and systems to 'tame' uncertainty that are underpinned by the same logic (Rose, 2000: 333).

Despite such criticisms, Gray and Schubert (2012) argue that a critical alignment with EBP is essential to make social work more sustainable, in part because it presents a solution to social work's ongoing 'identity crisis' (Trinder, 2000). EBP, which has been described as a social movement by Drisko and Grady (2013), supports a positivist definition of a profession, which is that the profession builds its expert knowledge, and an individual's understanding of that knowledge defines whether or not they are a member of that profession (Payne, 2005). EBP also shares EBM's underlying assumptions about knowledge, including the hierarchy of evidence (Gray et al, 2009). Payne (2005) usefully creates a distinction between EBP and broader evidence based views, including the evaluation of service programmes as a whole rather than component parts; practitioner research as a way of making practice more research-minded; and practice guidelines as a method of transferring evidence to practice. These approaches overlap, and the term EBP is used to describe the approaches outlined above, with a focus on the EBP approach to knowledge and how EBP is translated into practice.

Proponents of EBP (for example, Corcoran, 2007; Gambrill, 2006; Magill, 2006; Muller and Streiner, 2006; Sheldon, 2001) argue that EBP is a way to 'handle uncertainty in an honest and informed manner' (Gambrill, 2006: 340). Further, the challenge of implementing EBP can be resolved with more time and better understanding from practitioners (Corcoran, 2007), and EBP helps mitigate the excesses of 'common sense' judgements in medicine and social work (Mullen and Streiner, 2006). EBP is often presented as the ethical approach to social work (Gambrill, 2006), which implies that not following EBP is unethical. These and broader positivist assumptions underlying EBP have been extensively criticised. What many scholars consider problematic is not whether practice should be evidence-based – but the uncritical definition of evidence (Taylor and White, 2000; 2001). EBP takes a technical rational approach to knowledge, which separates fact and value, thus only some forms of knowledge are considered legitimate (Webb, 2001). Due to this approach to knowledge,

EBP as a whole assumes certainty exists, and is thus one of its goals (Taylor and White, 2000; 2001). The underlying assumption is that if a social worker digs deep enough, they will uncover 'the truth' about a child and their family (Taylor and White, 2000; 2001). Even those, such as Sheppard, who have adapted this approach to advocate searching for the 'best fit' or 'alternative least likely to be wrong' (Sheppard, 1995: 286) still assume that only one explanation can be 'most true' at one time (Taylor and White, 2001: 49-50). Whereas Taylor and White (2000; 2001) argue that when working with children and families – and in other contexts – many versions of reality can be 'true' at any one time. Overall, there is no 'gold-standard for the diagnosis of child abuse' (White et al, 2015: 29).

Despite the wealth of research critiquing the positivist assumptions underpinning new managerialism and EBP, the impact of these developments has been felt in 1) moral discourses in wider society, the media and child and family social work itself; and 2) the development of actuarial risk assessment tools. Regarding the former, the development of an individualist, child-centred discourse which artificially separates 'child' and 'family' (Featherstone et al, 2014a; Featherstone et al, 2014b; Morris et al, 2015) has been noted above. This is linked to 'a process of "othering" families and individuals in adversity' (Featherstone et al, 2014b: 22). This can be seen most clearly in the 'Troubled Families' programme, which was created in response to the idea that such families had a 'responsibility deficit' in relation to paid work and anti-social behaviour (Hayden and Jenkins, 2015: 459). Rather than respond to poverty and inequality systemically, individual families are targeted and 'othered' in an attempt to provide a low-cost, efficient solution to the problem (Featherstone et al, 2014b). The programme also reflects the shift away from a moral imperative to support others in society that underpinned support for welfare states previously (Culpitt, 1999; Featherstone et al 2014b). Instead, children and families who face adversity were to blame for their own problems, and poverty became a sign of risk towards others or themselves (Culpitt, 1999; Featherstone et al, 2014b: 23).

The response to this 'risk' was a new moral narrative based on the individual reconstruction of an 'active citizen'. This is underpinned by ongoing moral panics about risk of harm to children, dangerous individuals (including parents) and the failure of professionals

(particularly social workers) to respond to these risks effectively (Featherstone et al, 2014a; 2014b; Lonne et al, 2009). This narrative focuses on 'technical fixes which have distracted us from, and masked, the moral nature of the work' (Featherstone et al, 2014b). This focus on individuals and risk, rather than society as a whole and need, has led to the above narrative driving policy and practice (Featherstone et al, 2014b; Lonne et al, 2009). What is required, according to Webb (2006) and Featherstone et al (2014b) is a new ethical framework that confronts, rather than masks, the moral nature of social work.

As stated above, the dominance of a techno-rational, risk-orientated approach to uncertainty has also led to the use of actuarial risk assessment tools, although they have unintended consequences (Broadhurst et al, 2010; Gillingham and Humphreys, 2010; Peckover et al, 2011). Unintended consequences also result from the much-maligned Integrated Children's System (ICS) introduced in child and family social work in England and Wales in recent years (Broadhurst et al, 2010; Peckover et al, 2011; White et al, 2010). Moreover, the argument that predictive risk modelling straightforwardly supports the prevention of child abuse (for example, Wood, 2011) has been contested (Gillingham, 2016; Wald and Woolverton, 1990). Structured assessment tools, informed by an apparently evidence-based, risk-orientated approach, also have unintended consequences, in part because they neglect the informal strategies social workers use (Peckover et al, 2011). It is important to note that a strict dichotomy between 'formal' and 'informal' strategies does not exist. For example, actuarial risk assessment tools where scores are created are often based on limited information, informed by tacit knowledge and moral judgements (Peckover et al, 2011). Overall, what Broadhurst et al (2010) call the techno-rational or Harlow (2003) refers to as the managerial-technicist approach does not exist in practice (Broadhurst et al, 2010; Kemshall, 2010; Webb, 2001). However, because social workers must always make judgements, these judgements are made based on factors other than an objective notion of 'truth', such as emotion (for example, Ase Wagli, 2010, cited in Ericsson, 2010, and White, 2010; Ferguson, 2005; 2009; 2011; Forsberg, 1999; Helm, 2011; 2016; Lees, 2017; O'Connor and Leonard, 2014; Thompson, 2010; 2013; 2016); moral judgement (for example, Clifford and Burke, 2004; Stanford, 2010; Taylor and White, 2000; 2001;

White, 2011); and professional relationships (Roesch-Marsh, 2016). This research, and the way in which the thesis builds on these findings, is explored further in chapter 3. Here, it is important to point out that the EBP emphasis on outcome measures and how knowledge is used excludes useful analysis of how knowledge is constructed by social workers (Taylor and White, 2000; 2001). Thus, any attempt to implement EBP will be thwarted unless the complexity of judgement and decision making in this context is acknowledged (Hood, 2016).

Instead, Parkhurst and Abeyasinghe (2016) argue that what constitutes 'good' evidence should be based on 'appropriateness', which acknowledges the social, political and cultural context, rather than a strict hierarchy of evidence currently in place in EBP and EBM. Proponents of EBP also tend to underestimate how complex and time-consuming interpreting research is, as well as the broader problem of the application of knowledge from research to practice that the knowledge transfer literature has identified (Adams et al, 2009). For example, although surveys tend to suggest that social workers in what Lonne et al (2009) term 'Anglophone' countries generally support EBP (Gray et al, 2014; 2015), more detailed analysis has found that social workers in Australia have an unsophisticated understanding of what incorporating research into practice means (Gray et al, 2014; 2015). Therefore, it is unclear whether EBP really has been incorporated into practice or whether social workers are of the view that research is simply one type of information source for decision making (Gray et al, 2014; 2015). Further research by Avby et al (2014) has argued that EBP is defined differently in various levels of the social work hierarchy as well as within various organisations, and there is general confusion about what the terms evidence, expert and EBP mean (Barratt, 2003).

In addition to a lack of clarity on such terms, it is often argued (for example by Adams et al, 2009; Webb, 2001; and Parkhurst and Abeyasinghe, 2016) that EBM is fairly unproblematic because medical problems are more easily defined and individualised than in social work. However, there is a body of research that shows this is not the case, with EBM as described above not being observed in medical practice (Bazarian et al, 1999; Gabbay and le May, 2004; Patel et al, 1999; Timmermans and Angell, 2012; Ulvenes et al, 2009; Wood et al, 2003; Zwolsman et al, 2013). Regarding EBP, limitations include methodological biases,

where approaches with the 'best' evidence are those that are more easily tested using 'gold standard' RCTs (Adams et al, 2009); and bias towards researching social problems that reflect the values of influential stakeholders (Adams et al, 2009). Further, 'what works', which is a loaded term (Howe, 2004), is privileged over theory and thus critical thinking is not encouraged under this model (Adams et al, 2009).

## **Conclusion**

What constitutes 'child', 'child abuse' and 'family' have been explored to clarify what risks are pertinent to child and family social work. It has been argued that the history of child and family social work is inextricably linked to the construction of the social problem, or risk object (Hilgartner, 1992), child abuse. The history of child and family social work has been briefly explored, from its origins in the 19th century to more recent developments, which have resulted in an artificial separation between child protection and family support (Featherstone et al, 2014a; 2014b). The critique of EBP provided in this chapter aligns with Wittgenstein's rule following and finitism (Thornton, 2006) which will be discussed further in chapter 3.

Overall, it has been argued that EBP simply does not meet its own criteria in its present form in child and family social work (Gray et al, 2009). More research is required into the implementation of EBP (Gray et al, 2009) as well as social workers' general perspective on knowledge, in order to interrogate the assumptions underpinning EBP that are influential within present-day social work in England. These questions are explored in chapters 5, 6 and 7. Next, the theoretical framework underpinning the thesis is outlined, followed by an exploration of existing literature on the expert response to risk and uncertainty, including in child and family social work. The gap in the literature on what knowledge social workers themselves view as important, how they reflect on such knowledge, and the strategies they use to share knowledge with others within their epistemic community is identified.

## **Chapter Three – A Social Constructionist Approach to Knowledge: Insights from the Theoretical and Empirical Literature**

### **Knowledge as social construction**

Since Ancient Greek times, the notion that humans could create a theory of ‘everything’ through viewing the world in a detached, objective way has been popular in Western thinking, including the idea that all thoughts and ideas can be explicated (Dreyfus, 1979; 1991). The associated (Cartesian) approach that mind and body are separate (Taylor and White, 2001); a distinction can be made between rationality and non-rationality; and rationality is privileged over all else remains popular (Dreyfus, 1979; 1991). This includes the Platonic idea that if knowledge cannot be explicated, it is ‘mere’ belief (Dreyfus, 1979). Berger and Luckman (1966) state that, within Western thought, the sociology of knowledge in a narrow sense developed during the enlightenment and continued through to the mid-20<sup>th</sup> century. However, the focus was on theoretical thought rather than common sense, everyday knowledge (Berger and Luckman, 1966) and it was Schutz (1964) who first proposed – through his theory that knowledge is socially distributed – that common sense, taken for granted knowledge should also be studied sociologically. This theory went on to inform Berger and Luckman’s (1966) social constructionist approach, which proposes that sociology should study a) the differences between the various knowledges in different cultures/societies; and 2) ‘the processes by which any body of “knowledge” comes to be socially established as reality’ (Berger and Luckman, 1966: 15).

More recently, Hacking (1999) has argued that the term social construction has become ill-defined and overused, which is useful because it encourages specificity when outlining a social constructionist approach. A social constructionist approach is based on the idea that ‘all truths are constrained and shaped by their historical, social and linguistic contexts’ (Brown, 1994: 12). Defending against criticisms of relativism and an ‘anything goes’ approach, Brown (1994) argues that it is not useful to try and overcome the tensions between political reconstruction and rhetorical deconstruction (Brown, 1994). Instead,

social constructionists aim to emphasise these conflicts, and ask not what is the truth – here, in relation to child abuse, and the way in which knowledge is defined and shared with others – but rather, as Brown (1994) emphasises, how specific knowledges come to dominate over others. In defence of this perspective, Brown (1994) and Morgan (2016) argue that a greater danger is the idea of certainty or dogma, because it shuts out much debate and privileges some voices over others. Overall, no ontological claims are made here. Rather, epistemological concerns relating to how child abuse is defined, as well as the response to that definition, is under scrutiny (White and Stancombe, 2003).

Further, through this approach, the taken-for-granted dichotomy between rationality and non-rationality can be explored. For example, the neuroscientist Damasio (1994) argues that there is no separation between reason and emotion because we cannot have cognition without emotion. Therefore, common distinctions made between realism and relativism, for example, do not make sense, because they are based on a dichotomy between reason and emotion (Latour, 1999; Taylor and White, 2001). Here, it is recognised that although the two cannot be separated in theory, the consequences of this artificial separation in child and family social work must be explored. Moreover, judgements can still be made in relation to this epistemic community using this approach, but the social context underlying such judgements is not ignored (Taylor and White, 2000; 2001).

When using the term knowledge, information is also referred to. Knowledge can be defined as ‘a property and resource that provides a capacity for action’ (Ericson and Haggerty, 1997: 84). Although Bell (1973) distinguishes between information and knowledge (Ericson and Haggerty, 1997), arguing that knowledge is a ‘set of organised statements of facts or ideas’ which he distinguishes from ‘news and entertainment’ (Bell, 1973: 175), the social constructionist position taken here regards knowledge and information as too similar to be artificially separated. This is because it is not possible to remove the interpretation of information and subsequent meanings attached to that information from a particular context (Ericson and Haggerty, 1997). Further, Ericson and Haggerty (1997: 84) argue that knowledge is that which has been ‘given an objectified, real meaning that is used in action and has social consequences’. Thus, the important point about knowledge and information

here is that they are both socially constructed and thus warrant sociological examination. Indeed, according to Kusch, sociology's most important contribution to epistemology is the finding that 'knowledge is a social institution' (Kusch, 2002: vii). Thus, in the case of child and family social work, the aim of the thesis is not to query the reality of child abuse, but rather to highlight the underlying social processes which determine both the definition and response (Burningham, 1998: 559-560) to child abuse.

As identified above, child abuse can be understood as a risk object (Hilgartner, 1992), therefore the approach to risk and uncertainty taken here is outlined below.

### **A social constructionist approach to risk and uncertainty**

A social constructionist approach critically questions, rather than taking for granted, the dominance of risk as a response to uncertainty within this epistemic community. Below, various approaches to risk and uncertainty are outlined, and it is argued that social constructionism is the most useful perspective to study such a topic.

In pre-modern times in the UK, the dominant response to uncertainty was fate (Ewald, 1991; Giddens, 1990; 1991) and it was only in the late 17<sup>th</sup> and early 18<sup>th</sup> century that the concept of risk as a response to uncertainty began to develop (Zinn, 2008). This approach originates in the development of the insurance industry, where what had been seen as random events, such as accidents in the mines, were by the mid-19<sup>th</sup> century viewed as calculable and avoidable (Ewald, 1991; Lupton and Tulloch, 2002b) by using statistical probabilistic tools (Zinn, 2008). Thus, an objective conception of risk began to replace fate as the primary response to uncertainty (Ewald, 1991), although ideas of fate and destiny have not disappeared (Giddens, 1990; 1991; Lupton, 1999). During this time, risk was associated with 'technical calculations of probability' (Douglas, 1990: 2) rather than danger. However, because insurance is calculated on financial implications based on past knowledge and an artificially constructed population, it is not enough to manage uncertainty and other strategies are required to do so (Zinn, 2008: 441). These strategies include trust (Alaszewski and Coxon, 2009; Gambetta and Hamill, 2005; Zinn, 2008),



intuition (Zinn, 2008), emotion (Zinn, 2008) and hope (Brown, 2013; Zinn, 2016). These responses to uncertainty will be discussed further below, but despite the limitations of insurance and probability-based approaches to uncertainty, the underlying idea of risk as objective remained the dominant response to uncertainty into the 20<sup>th</sup> century (Clarke, 1992).

Concurrently, economic theory, which was underpinned by the rational choice model, became popular (Alaszewski and Coxon, 2009; Clarke, 1992; Horlick-Jones, 2005a). The rational choice model is based on the idea that individual preferences are not context-dependent (Clarke, 1992) and uses probability measures to predict the level of risk associated with a particular activity (Alaszewski and Coxon, 2009). Within this model, 'risk and uncertainty are linked concepts relating to expectations of the future' (Alaszewski and Coxon, 2009: 201), based on the concept of the 'home economicus'. This model has been extensively critiqued, including within economic theory itself (Alaszewski and Coxon, 2009). For example, Granovetter (1985) casts doubt on the rational choice assertion that economics, through the process of modernity, has become independent of social structures and relations. Despite such criticism, the rational choice model has remained so powerful because economic decision theory provides reassuring, if flawed, clarity about how to respond to uncertainty (Clarke, 1992).

In relation to risk and uncertainty, the rational choice model has been strongly critiqued by psychometric studies, particularly those that focus on experts' perceptions of risk (Clarke, 1992; Lupton, 1999; Slovic et al, 1985). Such studies, Lupton (1999) argues, portray a more complex picture of risk, with gender, race and ethnicity identified as all playing a part in risk perception (Barke et al, 1997; Finucane et al, 2000; Flynn et al, 1994). However, psychometric research is underpinned by 'weak' constructionism, where objective risks are perceived in different ways according to various social, political and cultural processes (Lupton, 1999). Moreover, such research still refers to 'biased risk judgements...within expert populations' (Finucane et al, 2000: 1600) and therefore present social reasons for differences underpinned by the idea of objective, 'true' understandings of risk (Badbury, 1989). This perspective explains why research in this area has traditionally focused on the

‘problem’ of the public understanding (or misunderstanding) of risk (Horlick-Jones et al, 2003).

More recently, these binary oppositions, such as lay/expert, fact/value, are increasingly contested (Horlick-Jones et al, 2003; Braun and Kropp, 2010; Zinn, 2006; Zinn, 2008), and in later years, Slovic (2000) admitted that expert judgements are just as prone to bias as lay people. Extending this view, Slovic et al recognised that ‘the rational and the experiential systems operate in parallel and each seems to depend on the other for guidance’ (Slovic et al, 2004: 311). Although this extension is welcome, what Badbury (1989) describes as the realist assumptions underpinning many psychometric studies on risk perceptions, as well as broader risk research, remain (Zinn, 2006). Overall, psychometric research has been useful in terms of interrogating many of the assumptions of the rational choice model (Lupton, 1999). However, despite psychometric findings highlighting the importance of social context in relation to risk perceptions, by often posing abstract problems to participants in experimental settings, it neglects the context it identifies as so important (Clarke, 1992; Horlick-Jones et al, 2003).

The first theorist to identify the importance of social context in relation to risk and uncertainty was Mary Douglas (Culpitt, 1999; Lupton, 1999). In the 20<sup>th</sup> century, risk moved from being narrowly associated with probability to being more broadly associated with danger (Douglas, 1990). For Douglas, who is inspired by structuralism (Arnoldi, 2009) the dangers are real, thus ‘the argument is not about the reality of the dangers, but how much they are politicised’ (Douglas, 1990: 8). Douglas’s work has been criticised for being ‘static’ and lacking insight into why perceptions of risk change (Lupton, 1999). Further, some social psychologists have used Douglas’s work to explain why lay views on risk are ‘contaminated’ by culture while portraying expert views as objective (Lupton, 1999). However, the emphasis on studying institutions rather than the danger itself (Douglas, 1985), including ‘what kind of institutional structures support what kind of perception of danger’ (Douglas, 1985: 55) has been critical in emphasising the social context of risk. This includes understanding how, in order to protect the ‘public good’, danger is defined in a certain way, and in order to maintain this social order, blame is attached to those who operate outside

of this sphere (Douglas, 1992). For Douglas (1990), although new technology seemingly creates 'new' risks, some 'old' risks have reduced, such as morbidity or mortality rates, and what is required is a focus on the social processes that lead to certain risks being prioritised over others (Douglas and Wildavsky, 1982).

This contrasts with Beck's (1992) analysis, whose work on risk is powerful and influential, albeit at times problematic (Culpitt, 1999). One of the main differences between the two theorists is that Beck emphasises the 'new' risks in late modern society – for example new technologies - and views risk as a 'social fact' from which we cannot escape (Culpitt, 1999). Whereas Douglas emphasises the 'cultural, essentially political nature of risk as a way of creating seemingly stable social relations against a background of inherent uncertainty' (Turner, 1994, cited in Culpitt, 1999: 92). Thus, Beck's (1992) insight that risk is political (Lupton and Tulloch, 2002b) is not new, but his risk society thesis proposes that risk is now central to the organisation of society in a way it has never been before, and that there are new risks due to new technologies and the reflexivity inherent in late modernity. Further, as part of 'reflexive modernisation', scientific knowledge is questioned in a way it has not been before (Beck, 1992; 1994). Giddens (1990) focuses on the individual level using the concept of reflexivity. He argues that individuals are aware of their role in society and that the decreasing confidence in experts and the weakening of the institutional traditions of modernity has led to increased anxiety and uncertainty and greater individualisation (Giddens, 1990). Overall, Giddens argues that late modernity is a circular process, where 'anticipations of the future become part of the present, thereby rebounding upon how the future actually develops' (Giddens, 1990: 177-8). However, Giddens disagrees with Beck that the number of risks are increasing, arguing that it is our sensitivity to risk that has increased (Giddens, 1991; Lupton, 1999).

The centrality of risk in the literature is illustrated by the fact that Foucauldian theory has been used to analyse risk in terms of discourses, strategies, practices and institutions, even though Foucault did not write about risk himself (Lupton, 1999). Foucault argues that there has been a 'governmentalisation of the state' (Foucault, 1991: 103) from the Middle Ages to the present, where power has been exercised 'in the form and according to the model

of the economy' (Foucault, 1991: 92). In contrast to Beck and Giddens, Foucault argues that expert knowledges are not a way of engaging in reflexivity (Lupton, 1999). Rather, they are utilised in different technologies of government as part of the 'normalisation' process, whereby expert knowledge defines what is normal, and thus what is considered deviant behaviour, which affects some populations over others (Arnoldi, 2009; Lupton, 1999). Further, the risk society thesis and governmentality perspective differ because they have contrasting concepts of power (Mythen, 2004). Beck argues that current political power operates in top-down managed institutions and should be replaced by a bottom-up model (Mythen, 2004). Whereas Foucauldians argue that power is dispersed much more widely, including through self-regulation (Mythen, 2004). Thus, 'Foucauldians favour a circular and networked notion of power' (Mythen, 2004: 170).

The Foucauldian perspective has been criticised, as has the risk society thesis, for not paying attention to how actors respond to these discourses in everyday life (Lupton, 1999). More relevant here, due to the focus on risk as a response to uncertainty, are criticisms of reflexive modernisation and the risk society thesis. These include that both Beck and Giddens do not have the empirical data to support their claims (Lupton, 1999) and their work is too Anglophone-centric, ignoring the role of, for example, gender, class and ethnicity (Furlong and Cartmel, 1997; Lupton and Tulloch, 2002b; Mythen, 2004; Pilkington, 2007; Santha et al, 2014). It has also been argued that insufficient attention is paid to aesthetics as well as cognitive processes (Lash, 1994) and their theories do not acknowledge the communality of the response to uncertainty and are too individualistic (Furlong and Cartmel, 1997; Lupton, 1999; Pilkington, 2007). Regarding expertise, their representation of the response to expert knowledge in modernity is too simplistic (Lupton, 1999) and lacks recognition of the social, political and cultural factors which underpin scientific, as well as lay knowledge, thus further reinforcing a dichotomy between the two (Wynne, 1996). For Farrugia (2015), a central problem that results in many of these criticisms is that both Giddens and Beck incorrectly associate reflexivity with emancipation from social constraints. Acknowledging that reflexivity does not automatically lead to emancipation

and that social structures are not so easily overcome makes reflexive modernisation a more useful concept (Farrugia, 2015).

Despite these criticisms, Beck and Giddens's work remains influential due to the valuable insights they provide on the centrality of risk in late modernity and developments that led to this focus (Culpitt, 1999; Lupton, 1999). This has meant that subsequent work on risk has taken on some of the criticisms of their work and has enabled the development of their insights at the micro as well as macro level (Lupton, 1999). The development of Beck's work thus acknowledges the criticisms and develops and reformulates the thesis, which has useful components (Elliot, 2002). As part of this development, one of the key criticisms of the risk society perspective in relation to the thesis is the underlying contradiction regarding objectivity and subjectivity in Beck's work (Lupton, 1999; Mythen, 2004; Pilkington, 2007). Beck (1992) argues that there is such a thing as objective risks, but that our perception of them is coloured by social and political factors. As a result, Beck often portrays expert knowledge as objective and lay knowledge as subjective, thus privileging one over the other (Mythen, 2004).

Badbury (1989) argues that most people would accept that their judgements on risk cannot be value free or objective. However, using the example of social policy, Badbury suggests that the subjective nature of risk judgements is often overlooked by treating risk as a phenomenon independent of social life. Thereby risk continues to be viewed as objective, despite cursory acknowledgements of its inherent subjectivity (Badbury, 1989). Another incentive to treat risk as 'objective fact' (Badbury, 1989: 382) is that the technical discourse of risk enables specific groups of experts (such as social workers) to account for their informal risk related practices, thereby justifying decisions that are made based on the social context using objective, technical discourses (Ericson and Haggerty, 1997; Horlick-Jones, 2005b). This means that, returning to Douglas, what is important is the way in which these truths are created, rather than the nature of risk itself (Lupton, 1999).

Here, a social constructionist approach to risk is taken. As stated above, this approach is based on the idea that we can never know 'risk' outside of our social belief systems, with

varying approaches towards whether risk does exist objectively outside social systems at all (Lupton, 1999). Within this approach, 'a risk, therefore, is not a static, objective phenomenon, but is constantly constructed and negotiated as part of the network of social interaction and the formation of meaning' (Lupton, 1999: 29). More specifically, Hilgartner's (1992) term 'risk objects' is used to convey that risks themselves, not just our response to them, are socially constructed. In relation to child and family social work, using this approach does not eliminate the need, in the context of finite time and resources, to make judgements and decisions against a background of inherent uncertainty (Pielke, 2007: 56). What is required is the recognition that expert judgements relating to risk and uncertainty can be made, but the social processes underlying these judgements are not ignored (Taylor and White, 2000; 2001).

Arguably, most studies of expertise 'in practice' which reference learning to at least some small extent owe their existence to the concept of 'communities of practice' first developed by Lave and Wenger (Hughes et al, 2007). It was Lave and Wenger (1991) who first problematised a separation between 'knowledge' and 'practice', arguing that knowledge cannot be acquired without 'doing' – indeed, learning is doing. What might now be taken for granted as a legitimate starting point for research – how a group of professionals, after formal learning such as gaining a qualification, move from novice to expert (such as Fook, 2000) – would, prior to the interrogation of the pre-existing individualist paradigm of learning (Hughes et al, 2007), be bizarre. The contribution the concept of communities of practice (and subsequent, broad research on situated learning) has made is to help us understand how reliant learning is on time and space, that knowledge is not static, and that learning is a social, as well as a psychological, process (Hager, 2005; Hughes et al, 2007).

Despite this contribution, the communities of practice literature has been criticised for emphasising cohesion and agreement and not acknowledging conflict and disagreement present in many communities (Fuller, 2007; James, 2007). Hager (2005) describes this as a conservative position, which overlooks the constructed nature of the social world (Fuller, 2007; Hager, 2005). Here, knowledge sharing, not learning, is the primary focus of the thesis, and the research takes place outside any particular organisation. Therefore,

although insights from the communities of practice literature are useful, the thesis is underpinned by an emphasis on social construction which reflects the constantly changing, uncertain nature of child and family social work. In order to understand and theorise knowledge sharing by experts in this epistemic community, this approach utilises findings from the SSK literature.

### **Expert knowledge: insights from the Sociology of Scientific Knowledge (SSK)**

The sociology of knowledge literature provides useful insights into the response to risk and uncertainty (Horlick-Jones et al, 2003). Drawing on Berg and Luckman's (1966) argument as to why sociology should study knowledge, the SSK literature in particular provides insights into why some forms of knowledge are privileged over others. Child and family social workers are 'experts' in the sense that they have, as a group, access to knowledge that has the power to impact on the actions of others (Bogner and Menz, 2009). Child and family social workers 'practice' in the same way laboratory scientists 'practice' (Star, 1989). Thus, the SSK literature aids the exploration of the social nature of the knowledge child and family workers are sharing, as well as how and why they share it in specific ways. It is underpinned by an understanding of the situated, collective nature of the response to risk and uncertainty (Horlick-Jones et al, 2003). When responding to uncertainty in the form of whether a child is 'at risk of harm', for example, child and family social workers must follow specific rules as part of their response. Drawing on Wittgenstein's collectivist theory of rule following, rules are social institutions or social customs or social conventions (Bloor, 1997). This is because we are not physically forced to, for example, follow the sequence 2,4,6,8. So, why do we? We do because if we do not, we would do it incorrectly (Bloor, 1997). Right and wrong involve moral necessity, which Bloor argues underpins rule following. Bloor calls this process 'the normativity of rules' (Bloor, 1997) and how we follow those rules, and how we experience the world, depends on our prior beliefs (Barnes et al, 1996).

Finitism is an essential component of Wittgenstein's approach to rule following, which underpins the thesis. Finitism is a concept which was developed in the 1970s by Bloor and

his contemporaries who studied the sociology of scientific knowledge. Bloor (1997), again using a collectivist interpretation of Wittgenstein's analysis of rule following, argues that there can never be certainty in relation to judgements or decisions because the terms our judgements are based on are conceptualised with reference to a finite number of exemplars. Thus, we can never say 'I am certain this judgement is correct due to evidence from the past' because the next case – in the future – will never be exactly the same as events in the past. This 'renders the problem of moving to the next step ineradicable' (Bloor, 1997: 11). For Bloor, then, it is not evidence that leads to a decision being viewed as 'correct' – it is whether our interpretation of this evidence is communally sanctioned (Bloor, 1997; Demir, 2008). Decisions often feel unproblematic where there is widespread agreement between experts, but they remain underdetermined – the underdetermination is simply less visible here (Demir, 2008).

Followers of finitism avoid descending into relativism by using what Bloor (1973) calls 'symmetry'. That is, they do not say 'false' and 'true' beliefs are equally valid, only that how they come to be viewed as valid is sociologically interesting (Kusch, 2011). Theorists within SSK draw on Kuhn's (1962/1996) work, but also criticise his conception of 'normal science' as unproblematic (Barnes, 1982; Demir, 2008) because of its underlying assumption that 'false' and 'true' beliefs should be treated differently. Rather, 'everyday' or 'normal' science is underdetermined in the same way as occurs during paradigm shifts (Demir, 2008). Therefore, both disagreement and agreement should be placed under sociological scrutiny for SSK, rather than simply disagreement for Kuhn (Demir, 2008).

Overall, how knowledge comes to be viewed as valid has a social component, and studying this component is underpinned here by what Kusch (2002; 2011) conceptualised as communitarian epistemology. This approach works from the perspective that the community comes prior to the individual. Individuals and their actions can therefore only be understood through their membership of communities (Kusch, 2002). Therefore, the question asked here is not 'how does the individual social work expert impact on the social work community?' but rather, 'how do the social work community, and the social interactions and translations of those interactions, impact on the knowledge of the



individual?’ Although the focus here is on a particular group of experts, it is important to note that Kusch (2002) does not differentiate between scientific and ‘ordinary’ forms of knowledge in the sense that they are both social in the same way. What is different in this context is how experts account for their reasoning (Horlick-Jones, 2005a: 269). Feminism has contributed to the SSK literature by breaking down differentiations between the natural sciences and social research (Ramazanoglu and Holland, 2002). ‘Rationality has been reconsidered, and it is now perhaps more widely recognised that technology is not neutral, certainty is unattainable, and that politics, resources and the personal enter into the production of scientific knowledge’ (Ramazanoglu and Holland, 2002: 165). However, within the child and family social work sphere, it is not clear that this ‘reconsideration’ has gained much ground, particularly in EBP based models (White and Stancombe, 2003).

Barnes (1977) refers to the contemplative account of knowledge, which argues that ‘knowledge is best achieved by disinterested individuals, passively perceiving some aspect of reality, and generating verbal descriptions to correspond to it’ (Barnes, 1977: 1). Despite an increased reflexivity being achieved in some institutional contexts (Braun and Kropp, 2010), this is the approach underpinning dominant forms of EBP, as described in chapter 2. This ignores the messy, often contradictory nature of research, most notably outlined by Harry Collins (for example, 1974; 1992; 2001). Further, social research has been described by White and Stancombe (2003: 155) as ‘intrinsically contestable’. Despite finitism clearly identifying that all decisions are underdetermined, and uncertainty will always exist, EBP suggests that judgements and decisions about the future should be based on information (or exemplars) gathered from the past. This is made even more relevant when considering that child and family social work policy, rules and guidance over the last 40 years have developed on the basis of high-profile child deaths (Corby, 2006; Fawcett et al, 2004; Payne, 2005; Parton, 2012; Webb, 2006) – in other words, existing exemplars. Thus, it is important, through the concepts of finitism and communitarian epistemology, to explore the networks and processes involved in child and family social work when the use of past evidence is clearly not enough to inform judgements involving uncertainty.

Having outlined the social constructionist approach to knowledge taken here, and its relevance for exploring risk and uncertainty in child and family social work, a review of existing literature on the expert responses to risk and uncertainty is provided below.

### **The expert response to risk and uncertainty**

In chapter 2, it was argued that the dominant, formal response to uncertainty within child and family social work is now risk (Kemshall, 2016; Stanford, 2010; Tanner, 1998; Webb, 2006). Concerns raised about this development include positive aspects of risk-taking not being acknowledged (Stanford, 2010; Tanner, 1998; Titterton, 2011) and fear driving judgement and decision making (Stanford, 2010). For Kemshall (2010), this analysis does not include the possibility that social workers might try and resist this way of working and Stanford (2010) has identified that social workers sometimes resist the 'politics of fear' by taking risks in order to empower service users. The debate itself reflects that risk is often viewed as either dangerous or life-affirming, when it can be both at the same time (Baker and Wilkinson, 2011: 14).

The extent to which social workers may resist the risk-orientated approach is also linked to the amount of freedom social workers and other experts have to make decisions, or discretion (for example Evans and Harris, 2004; Lipsky, 1980; Östberg, 2014; Schram, 2012). Here, it is the strategies used to share knowledge, rather than the level of freedom a social worker has to make a decision, that are the focal point. Moreover, as Evans and Harris (2004) have argued, discretion implies that in some cases, rules are followed to the letter and there is no need to apply individual judgement and that discretion either does or does exist in each circumstance, and that it is inherently positive. However, from the SSK literature, particularly finitism, based on Wittgenstein's rule following, all situations are underdetermined (Bloor, 1997). In other words, every case requires going beyond rules, because every case is unique and slightly different. Therefore, conceptualising situations as either having or not having discretion is not particularly useful (Evans and Harris, 2004).

More useful is existing research which has confirmed the use of informal responses to uncertainty in child and family social work (Broadhurst et al, 2010). For example, child and family social workers use intuition, or practice wisdom (Cook, 2017; Helm, 2016; Munro, 1999; Saltiel, 2016), which is explored further in chapter 5. Much of this research is informed by the psychology literature, for example on how cognitive processing and heuristic processes inform social work judgement and decision making (Keddell, 2014; Helm, 2011; Munro, 1999; Saltiel, 2016; Webb, 2001). Regarding emotion, the concept is often referred to as a 'general principle', although Zinn (2016) argues that this is misleading because such a term refers to many different emotions which have varying consequences in relation to the response to risk and uncertainty (Zinn, 2016: 353). In child and family social work, there is a sense, from an EBP perspective, that 'feelings' or emotions are not sufficient knowledge to act upon (Lees, 2017; Thompson, 2010; 2016), despite some researchers in neuroscience (for example, Damasio, 1994) arguing convincingly that emotion and rationality cannot be separated (Taylor and White, 2001).

Existing research has explored the role of emotion in response to uncertainty when making judgements and sharing knowledge with others (for example, Ase Wagli, 2010, cited in Ericsson, 2010, and White, 2010; Ferguson, 2005; 2009; 2011; Forsberg, 1999; Helm, 2011; 2016; Lees, 2017; O'Connor and Leonard, 2014; Thompson, 2010; 2013; 2016). 'Social work often operates in the moral domain' (White, 2011: 176) and the link between emotion and morality has also been identified (Haidt, 2001; Taylor and White, 2000; 2001; White, 2011). Existing research has highlight the role of moral judgements or 'dilemmas' in social work (for example, Clifford and Burke, 2004; Stanford, 2010; Taylor and White, 2000; 2001; White, 2011), with Clifford and Burke (2004) arguing that this is not fully acknowledged by policy makers. Rather than focus on the type of judgements social workers make about children and their families, the thesis extends this research by exploring how social workers themselves define knowledge central to their practice, and the strategies they use to share such knowledge with others.

### **Expert knowledge sharing: just do it?**

White et al refer to knowledge sharing as “‘information practices”, namely the way professionals handle and present information in particular ways to serve particular purposes’ (White et al, 2015: 33). Klein argues that ‘mind reading’ and ‘communicating intent’ (1998: 232) is a key part of communication between experts. However, in the same way that Reder and Duncan (2003) emphasise clarity when sharing knowledge with others, Klein’s (1998) assertion that communicating intent is a key response to knowledge sharing between experts simplifies this area when all other aspects of knowledge sharing and decision making are acknowledged as complex. This research investigates just what clarity or communicating intent mean for social workers, and the extent to which this is straightforward when sharing knowledge within the same epistemic community.

However, Klein’s (1998) influential research on ‘naturalistic’ expert decision making, including nurses and fire fighters, does identify the informal skills required to make decisions in the context of inherent uncertainty where rules and guidance will not – indeed, cannot – be followed by the letter. This, of course, includes knowledge sharing because, as Klein (1998: 6) argues, it is rare for a decision maker to act alone. Further research within social work has supported Klein’s findings on:

the power of intuition, mental simulation, metaphor, and storytelling. The power of intuition enables us to size up a situation quickly. The power of mental simulation lets us imagine how a course of action might be carried out. The power of metaphor lets us draw on our experiences by suggesting parallels between the current situation and something else we have come across. The power of storytelling helps us consolidate our experiences to make them available in the future, either to ourselves or to others

(Klein, 1998: 3)

Language and the use of metaphors have been identified as a powerfully shaping perceptions about risk and uncertainty (Baker and Wilkinson, 2011), affecting the way we think and act, as well as what we say (Lakoff and Johnson, 1980). Pithouse’s (1987) influential work on the extent to which social workers rely on individual accounts of ‘unobserved interventions’ (Pithouse, 1987: 64) demonstrates the power of co-worker to co-worker talk. Thus, social workers ‘do not merely relay information, they create representations’ (Pare, 2004: 83). Such research identifies what has been described as the

narrative nature of social work (Baldwin, 2013), informed by concepts from narrative theory such as rhetoric, characterisation and plot (Baldwin and Estey-Burtt, 2013). For example, Hall (1997) explores the power and consequences of storytelling for this group of experts, and Taylor and White (2000; 2001) identify that how a child and their family's circumstances are categorised then goes on to define what evidence is deemed relevant or appropriate to inform expert judgement and decision making. Certain readings of events become 'buried' through professional talk, resulting in messy reality becoming ordered in particular ways (Taylor and White, 2000: 15). Thompson's (2010; 2013; 2016) work builds on this analysis to explore how and why particular knowledge – including what Thompson calls 'emotion information' - is 'buried'. In the case of emotion information, for example, Thompson argues that 'rational-bureaucratic determinism renders emotions as inadequate grounds on which to act' (Thompson, 2016: 176), implying that this process is negative by focusing on what is rendered less visible through this process.

Extending this analysis, Lind and Lindgren (2017) explore how, within adoption assessments in Sweden, parental suitability is defined very narrowly and is 'displayed' in three layers, identifying the importance of display as well as categorisation when sharing knowledge with others. In terms of both display and categorisation, Helm (2016) has identified that the initial 'frame', or way in which the initial statement a social worker makes about a child and their family is very important, emphasising the social nature of this activity. This links to the expectation that judgements about children and their families should, and could, be made very quickly (Reimann, 2005; White 2009b; 2011). Therefore, in a multi-agency context, 'talk and writing about cases is strategic action, not merely reporting' (Hall and Slembrouck, 2009: 283). Such research disputes the assumption that communication is straightforward and unproblematic, which underpins the requirement of agencies involved in child protection to work together (Buckley, 2000). Indeed, in his influential second report, Laming states, in relation to multi-agency knowledge sharing, that he is tempted to advise professionals to 'just do it' (Laming, 2009: 10). Such assertions are also based on the assumption that knowledge sharing is inherently positive (White et al, 2015) and it has been described by Thompson (2013: 189) as a 'moral and political imperative'. Instead, Reder

and Duncan (2003) argue that more training is required on the way experts think and attribute meanings to knowledge they receive. White and Featherstone (2005) have extended this call to argue for better understanding of the moral and emotional complexities of such work.

Research has responded to this call, and there have been numerous studies on ‘sense-making’ within child and family social work (for example, Cook, 2017; Helm, 2011; Kettle, 2017; Lees, 2017), with Kettle (2017) emphasising the role of organisational and individual social worker changes on how a child and their family’s lives are categorised and constructed. Lees (2017) uses a psychosocial approach to study knowledge sharing between 3 social work teams in the same local authority. Lees distinguishes between ‘facts’ and ‘feelings’ when sharing information, and although she acknowledges some overlap, there is an underlying reinforcement of a dichotomy between the two. Lees (2017) argues that the emotions of practitioners are filtered out in order to focus on ‘facts’, described as rational processes. Lees (2017) usefully highlights the way in which feelings must be ‘cleaned up’ (Lees, 2017: 901) and turned into evidence for informational systems – in other words, filtered out, and the subsequent tensions and frustrations this created for practitioners. Huuskonen and Vakkari (2015) focus on social work case note recording, and argue that tacit knowledge such as intuition is ‘filtered out’ in these formal contexts. Thompson’s work (2010; 2013; 2016) supports this analysis, but identifies the difference between senior social workers, who were more confident about the role of what Thompson (2016) calls ‘emotion information’ informs their judgement, and other professionals, who do not think such knowledge is a legitimate reason for making a referral, for example.

However, there remains a gap in knowledge on why senior social workers may accept ‘emotion information’ as part of their judgement, and others do not. This filtering out of knowledge is described in terms of loss, yet analysis of potential positive consequences could be extended. Moreover, the way in which social workers define various knowledges and how this impacts on strategies they use to share such knowledge with other social workers has not yet been sufficiently explored. The thesis aims to explore this gap and build on existing research by 1) exploring knowledge sharing within child and family social work;

2) exploring how social workers themselves define particular knowledges and the impact this has on the strategies they use to share knowledge with others; and 3) utilises findings from the translation studies literature to provide new insights on the gains, as well as losses, that such strategies might provide.

To do so, the thesis draws on insights from the translation studies literature. Social work research is familiar with the concept of translation in terms of ‘translating’ research to practice (Gray and Schubert, 2012). This is a broad topic, and includes insights from research into translating research to practice in health and social care (Grimshaw et al, 2012; Heaton et al, 2015; Julian, 2014/2015; Kellogg, 2014; Lomas, 2007; Morris et al, 2011; Straus et al, 2009) as well as the knowledge management literature (Oborn et al, 2013; Rouse, 2004). Within this body of literature, there is recognition that translating research to practice involves more than simply sharing information: it is complex, shaped by social, cultural and political factors, and there is insufficient qualitative research on this topic (Bottorff, 2015).

Despite such research, insights from the translation studies literature have not yet been fully utilised when exploring the complexity of knowledge sharing between experts. Thompson (2010; 2013; 2016) has referred briefly to the term translation, referring to the way in which various professionals must ‘translate’ their emotions or feelings into something more tangible to effect change for children and their families (Thompson, 2010: 239). This research, based on child protection work in different agencies and professions, acknowledges that a ‘move’ must be made. Thompson is specifically focusing on emotion – when using the term ‘translation’, she is referring to the translation from emotion information to non-emotion information (Thompson, 2010: 240-1). As Thompson (2010; 2013) acknowledges, the emphasis on a techno-rational response to child abuse ignores these processes and inhibits our understanding of this form of knowledge ‘work’. For Thompson:

the process of translation blurs what the original issue was, and transforms it into something that is organisationally relevant, but also something that is very different to how the issue may have started out (e. g. as a feeling). A process of further

translation also takes place by the receiver of the information, and thus the origins of the issue and what it means, may become even further removed or diluted.

(Thompson, 2010: 254-5)

Thompson hints at the complexity involved in sharing different forms of knowledge, and the data here extends this by exploring gut feeling as defined by participants, rather than emotion alone. Thompson (2010) implies that translation is negative, referring to an 'original issue' that is somehow disguised through the process of knowledge sharing. Here, the data illustrate that there can be both negative and positive consequences to the inevitable translation processes involved in knowledge sharing and uses literary translation studies to identify and explain the processes participants described.

### **Translation studies: dominant themes**

What does the term translation refer to when it is, and will continue to be, contested (Tymoczko, 1998; 2005)? As outlined above, the concept of translation is used in various fields, including sociology (Callon, 1986; Latour, 1999). For example, Latour (1987) identified specific translation strategies used by scientists to achieve their aims, the most important of which is the transformation of a claim into a matter of fact (Latour, 1987: 108). Scientists must use these strategies because for this transformation to occur, we need the support of others, and we do this by appealing to their interests (Latour, 1987). Here, the term translation is used to refer to what Demir (2011) calls an 'epistemic tool' that helps promote understanding across, and, as Rouse (2004) argues, within, disciplines. Within the translation studies literature itself, which tends to analyse literary translation, is the classic, broad definition by Jakobson:

We distinguish three ways of interpreting a verbal sign: it may be translated into other signs of the same language, into another language, or into another, nonverbal system of symbols. These three kinds of translation are to be differently labelled:

- 1) Intralingual translation or rewording is an interpretation of verbal signs by means of other signs of the same language
- 2) Interlingual translation or translation proper is an interpretation of verbal signs by means of some other language



3) Intersemiotic translation or transmutation is an interpretation of verbal signs by means of signs of nonverbal sign systems' (e.g. words to music)

(Jakobson, 1959/2012: 127)

Regarding all three types of translation Jakobson identifies, translation is not simply interpretation, or information sharing. This misses a key point Nonaka (1994) identified: when sharing knowledge, more than transfer must occur – this knowledge must also be converted (Nonaka, 1994; Nonaka and Takeuchi, 1995; Rouse, 2004). This process always involves loss (Demir, 2008). Within the translation studies literature, traditionally a 'scientific approach to translation was preferred (Nida and Taber, 1974; Venuti, 2008), which was incredibly influential (Venuti, 2008). Particularly influential in the 1960s and 1970s was the concept of equivalence (Venuti, 2012: 135). Nida (1964) argued that, although there can be no complete correspondence between languages, there are two types of equivalence that aim to get as close as possible to correspondence: formal and dynamic, which exist on a spectrum (Nida later replaced the terms with dynamic and functional [Venuti, 2012]). Formal equivalence involves an attempt to 'reproduce as literally and meaningfully as possible the form and content of the original' (Nida, 1964: 144). Dynamic equivalence involves an attempt to recreate the message shared in the source-language in the most understandable way to the culture receiving the translation, so removing colloquial references, for example, if they would not make sense in the receiving culture. Underpinning both types, however, is the aim to get as close to correspondence as possible (Nida, 1964).

Although there was recognition at that time that literary translators had the ability to consciously use specific translation techniques to produce desired effects in their audiences, it was not until the early 1990s that what Bassnett and Lefevere (1990) call the 'cultural turn' in translation studies began (Gentzler and Tymoczko, 2002). Bassnett and Lefevere (1990: 3) provide a robust critique of more positivist linguistic theories of translation, arguing that standards such as 'equivalence' are not static and unchanging, but inherently shaped by culture. In this way, translation transforms knowledge (Pösö, 2014). Venuti (1998; 2008) has also been central in debunking traditional notions of equivalence,

identifying the social factors essential to the act (and research) of literal translation. Rather than accepting the traditional view that a literary translation is objective and value-free, Venuti convincingly argues that such a translation reproduces certain narratives, for example, privileging written records over oral traditions, and reproducing specific cultural prejudices (Venuti, 1998). There is thus no such thing as the 'perfect', 'equivalent' literary translation (Zethsen, 2009; Arrojo, 2002). Rather, an aim for Nida's 'dynamic equivalence', for example, simply makes the prejudice appear 'natural', or obvious and in this way translation can expose and has explanatory power (Venuti, 1998). Thus, the social factors impacting on literary translation were beginning to be explored (Wolf, 2007).

Venuti (2008) also argues that the reader plays a role in maintaining this status quo. This is because of 'the general tendency to read translations mainly for meaning, to reduce the stylistic features of the translation to the foreign text or writer, and to question any language use that might interfere with the seemingly untroubled communication of the foreign writer's intentions' (Venuti, 2008: 1). This is linked to debates in the literature around the role of the 'reader' or 'receiver'. Benjamin (1996) originally argued in the 1920s that the reader should not be considered in any form of writing. This idea of the translator being a blank page, passively receiving information from the author and translating it has more recently been disputed because the translator becomes a reader simply through the act of translation (Boase-Beier, 2004). Further, they create their own version of the author's intentions in their mind (Boase-Beier, 2004; Fisher, 2010) which gives the translator a much more active role in creating their own interpretation of the text, which they then transfer to others (Fisher, 2010: 72). Therefore, the emphasis within more recent translation theory is that it is a (two-way) 'act of communication...which forces us to look at what is being communicated, how, why, and by whom' (Boase-Beier, 2004: 26).

As Gentzler and Tymoczko (2002) state, scholars in many fields have recognised the central role translation plays in various power structures. By using the insights from translation studies, and recognising that translation is an epistemic tool (Demir, 2011) that can be used in other contexts, new insights can be identified in child and family social work. There are three main concepts within translation studies that are relevant to this study: fluency,

domestication and Venuti's (2008) concept of foreignisation. Venuti (2008) explores the history of translation from the 17<sup>th</sup> to the early 21<sup>st</sup> century and explains how fluency became the dominant strategy used by translators when moving to a dominant language such as English from a less dominant language. Fluency is an emphasis on rendering the translator invisible, excluding any indication that the translation is not the 'original' (Venuti, 2008). It involves domestication, which is 'an ethnocentric reduction of the foreign text to receiving cultural values, bringing the author back home' (Venuti, 2008: 15). Thus, according to Venuti, visibility of difference is sacrificed for the translation to 'fit' with the values of the dominant language. Venuti (2008) refers to this as the violence of translation: texts are often domesticated, with the foreign culture excluded for the text to become more 'familiar' to the reader. Thus, what is excluded is just as important as what is included in literary translation (Gentzler and Tymoczko, 2002; Venuti, 1998).

These concepts are utilised here to analyse the way in which child and family social workers share knowledge relating to uncertainty with each other when a risk-orientated approach dominates the profession (Kemshall, 2016; Stanford, 2010; Tanner, 1998; Webb, 2006). Initially, it may seem that insights from translation studies may not apply to knowledge sharing within one epistemic community. However, referring to Jakobson's (1959/2012) definition above, translation includes intralingual as well as interlingual translation. In the interlingual translation literature it is the movement back and forth between two languages that is explored. Rather than use the insights of translation studies solely for this purpose, Demir (2011) extends this and refers to 'systems of knowledge', which can be moral frameworks, cultures, disciplines or ideologies. In social work, a particular system of knowledge or epistemic culture (Knorr-Cetina, 1999), the emphasis on including intralingual as well as interlingual translation is important because it highlights what the traditional translation literature ignores – the complexities of sharing words, language and overall meaning within one community (Pösö, 2014; Zethsen, 2009).

There is little research on intralingual translation and it is very much on the margins within translation studies (Zethsen, 2009). Yet 'the differences between intralingual and interlingual translation seem to be more a question of degree than of kind' (Zethsen, 2009:

795). Both interlingual and intralingual translation involve the concept of 'transfer' (Zethsen, 2009), and because transfer involves many of the same mechanisms in all cases of translation, the same theoretical framework can apply (Weissbrod, 2004; Zethsen, 2009). Even what Jakobson originally termed rewording – 'an interpretation of verbal signs by means of other signs in the same language – in fact raises issues of the same order as translation proper' (Steiner 1975, cited in Zethsen, 2009: 797). The influential theorist Even-Zohar (1990) applies his version of polysystem theory to argue that the reason specific forms of knowledge 'transfer' – for example, adaptation - are not seen as worthy of in-depth analysis using concepts and assumptions from translation studies is because of the culture making this case, not the inherent nature of translation studies (Shuttleworth, 2009; Weissbrod, 2004). Weissbrod (2004) separates what she terms 'transfer' rather than intralingual translation and interlingual translation, and argues that the same mechanisms underpin both. Whereas Zethsen (2009) more usefully utilises this argument to bring intralingual translation under the translation studies umbrella, thus challenging the marginalisation of intralingual translation within translation studies. This supports the idea that lessons can be learned from translation studies when exploring knowledge sharing within one epistemic community.

Why is the translation studies literature useful for child and family social work? Because it has the potential to aid identification of less visible processes and meanings occurring when child and family social workers share knowledge with one another. For example, Venuti identifies that dominant, linguistic-orientated approaches to literary translation promote 'objective', 'value-free' research and do not consider the social factors involved in the study of, as well as the act of, translation (Venuti, 1998: 1). Parallels can be drawn with the dominant model of EBP in child and family social work and reluctance to fully acknowledge, and engage with, the social factors and inherent uncertainty underpinning both practice and research. To gain new insights into knowledge sharing within child and family social work, findings from the translation studies literature are utilised in two ways: 1) by exploring the use of translation where sharing knowledge is not only advisable, it is

mandatory; and 2) by focusing on translation within one epistemic culture (Knorr-Cetina, 1999).

## **Conclusion**

In this chapter, the social constructionist approach to knowledge underpinning the thesis has been explored. Various approaches to the study of risk and uncertainty were outlined, and it was argued that the social constructionist approach, based on the idea that we can never know 'risk' outside of our social belief systems (Lupton, 1999) is the most useful way to answer the research questions. This is because Hilgartner's (1992) term 'risk objects' is used to convey that risks themselves, not just our response to them, are socially constructed. In relation to child and family social work, using this approach does not eliminate the need, in the context of finite time and resources, to make judgements and decisions against a background of inherent uncertainty (Pielke, 2007: 56). What is required is the recognition that expert judgements relating to risk and uncertainty can be made, but the social processes underlying these judgements are not ignored (Taylor and White, 2000; 2001).

Insights from the SSK literature were explored, including the adherence to finitism and communitarian epistemology. Taking such an epistemological position means the question asked here is not 'how does the individual social work expert impact on the social work community?' but rather, 'how do the social work community, and the social interactions and translations of those interactions, impact on the knowledge of the individual?'. Existing research on the expert response to risk and uncertainty, including in child and family social work, was discussed, followed by a focus on the literature on knowledge sharing within this epistemic community. It was argued that the way in which social workers reflect on various knowledges and how this impacts on strategies they use to share knowledge with other social workers has not yet been sufficiently explored.

The thesis aims to explore this gap and build on existing research by 1) exploring knowledge sharing within child and family social work; 2) exploring how social workers themselves

reflect on particular knowledges and the impact this has on the strategies they use to share knowledge with others; and 3) utilising the translation studies literature to explore whether there may be positive, as well as negative, consequences of 'information filtering' already identified in existing literature. An overview of the translation studies literature was provided, and, drawing on the work of Venuti (1998; 2008), five concepts from the translation studies literature – fluency, domestication, foreignisation, retranslation and authorship – will be used to aid exploration of the strategies participants reported using when sharing knowledge within their epistemic community.

Having provided a summary of the literature and outlined the theoretical framework informing the thesis, chapter 4 discusses the methodology used to answer the research questions.

## **Chapter Four – Methodology**

### **Introduction**

The purpose of the study is to explore the way in which child and family social workers, as experts in the late modern 'risk society', define and translate knowledge relating to uncertainty. The epistemological stance taken will be outlined and provides a theoretical grounding for the qualitative research methods chosen. Access and sampling will be discussed, followed by the reason why research diaries and semi-structured interviews were conducted. A separate discussion of research ethics is provided, although ethical concerns permeate the whole chapter. This is followed by an outline of the pilot study and the experience of data collection. Finally, an overview of how data analysis was carried out is provided to make explicit the theoretical underpinning of subsequent research findings.

My interest in how experts share knowledge began as a result of working in child and family social work. I had previously read the literature on multi-agency working, judgement and decision making, and how to assess risk, but the literature often did not match my experiences 'in the field'. As a child and family social worker, I saw that sharing knowledge was an essential part of judgement and decision making in relation to child abuse, particularly when managers relied on social worker accounts of meeting children and their families because they might never have met those families themselves. I also noticed that social workers would share their experiences of home visits, for example, very differently. From these experiences, I began to doubt whether it was simply the case that, if official guidance and rules were followed and experts communicated 'properly' with others, then the system would 'work' and children would be protected from harm. I began to widen my interest into other areas of expertise, but child and family social work seemed to be such a relevant case study because the way these experts make judgements and decisions, including multi-agency working, has been under such scrutiny. Yet, despite such scrutiny,

the same recommendations appeared to be made repeatedly which were underpinned by assumptions associated with particular ways of knowing.

## **Research questions**

Following an extensive literature review I arrived at my research questions:

- 1) What meanings do child and family social workers attach to both formal and informal knowledges relating to uncertainty within child and family social work?
- 2) How do child and family social workers share knowledge relating to uncertainty with others within their epistemic community?
- 3) To what extent, if any, do social processes impact on the way child and family social workers share knowledge within their epistemic community?
- 4) What differences and similarities exist in terms of the way in which child and family social workers share knowledge relating to uncertainty?

It is important to acknowledge here that the terms 'formal' and 'informal' are not used uncritically. Trevithick (2008) identifies different types of knowledge in social work, ranging from what can be described as more formal or 'formalised' (Trevithick, 2008: 1215) knowledge, associated with a technical-rational approach to knowledge, and informal knowledge, which is 'gained through action and experience' (Trevithick, 2008: 1216). Such terms are therefore used as a shorthand to refer to a spectrum of more formal and less formal knowledges relating to uncertainty, and it is also understood that they are interlinked. For example, Thornton (2006) identifies the tacit knowledge underpinning all judgement in medicine. Further, Greenhalgh et al (2008) found that medical professionals' use of standardised outcome measures necessarily involved the use of tacit knowledge to inform subsequent judgement and decision making – standardised outcome measures were not sufficient because they did not provide essential context to work with patients.

## **A qualitative approach**



A social constructionist perspective is best supported by a qualitative approach, which allows the researcher to explore the values and meanings of participants which are shaped by the social, cultural and political contexts in which they live (Bryman, 2008). Values and meanings are prioritised here due to the adherence to the interpretive epistemological approach, based on elements of phenomenology and symbolic interactionism. It is argued that objectivity is not possible in social research because both the researcher and the participants are shaped by the social context in which they live (Bell and Newby, 1977). Therefore, this project cannot be described as an objective exploration into the formal and informal responses to uncertainty in child and family social work when a risk-orientated approach dominates the profession (Kemshall, 2016; Stanford, 2010; Tanner, 1998; Webb, 2006). Of course, the epistemological foundation on which it rests acknowledges this and refutes the idea this is even possible. But more personally, I initially struggled to reconcile my epistemological position – that all knowledge is constructed, and any sense of right or wrong is dependent on time and space – with my various roles in child and family social work. Following extensive reading (and re-reading) on the subject, I now know I was confusing epistemological and ontological debates. As Brown (1994) argues, social constructionism makes no claims about ontology (whether the world exists independently of our perception of it, for example). Social constructionism is only concerned with epistemology – how we know what we know (Brown, 1994). Therefore, a social constructionist perspective on child and family social work – and thus child abuse – does not argue that child abuse does not exist. Rather, it questions all taken-for-granted assumptions about what child abuse is and our response to it across time and space. Thus, I concluded that a social constructionist approach to knowledge, including robust interrogation of taken for granted terms such as ‘evidence’, was the only way I could honour those children and their families’ experiences. e

### **Social worker: a complex term**

The overall sample of this study is child and family social workers. This consists of both qualified and unqualified social workers who either hold a caseload or manage those who

do. Child and family social work is defined as covering the spectrum between child protection and family support (see chapter 2 for further discussion of the artificial separation between family support and child protection in child and family social work) where the focus is on the response to the risk object (Hilgartner, 1992) child abuse. For example, this does not include youth offending or youth justice work, but does include fostering and adoption. The reason unqualified social workers in family support roles are included as well as qualified social workers in various forms of social work, such as 'child protection', fostering and adoption, is because I wanted to avoid the artificial distinction between child protection and family support that has been reinforced by policy makers and successive governments over the last forty years (Featherstone et al, 2014a; 2014b; Parton, 2014; Walker, 2012). Thus, not including unqualified social workers, despite an attempt to go beyond dominant distinctions between family support and child protection within child and family social work, would simply reinforce taken-for-granted positions and hierarchies which I seek to explore.

This approach is also informed by my practice experience. I worked in both statutory and non-statutory settings, in what would be termed 'child protection' and 'family support' work respectively. In practice, the line was blurred. As a manager of family support workers, I regularly supervised staff who worked with families who had on and off involvement with statutory services, and who remained involved with family support services regardless: child protection concerns did not disappear because statutory social workers were not involved. Similarly, as a social worker in a statutory team, I worked with children categorised as being privately fostered. What the above had in common is a focus on the prevention and identification of child abuse. The distinction is that most unqualified child and family social workers tend to occupy family support roles, whereas qualified child and family social workers often occupy child protection, fostering and adoption roles, although there is some overlap in terms of qualified workers occupying unqualified roles. Studying both qualified and unqualified workers therefore enables access to those working across the spectrum of child and family social work, rather than just child protection, fostering and adoption.

Overall, by including unqualified child and family social workers, I challenge what Bogner and Menz (2009) call the social-representational approach to expertise – that is, an expert is someone who is seen by others as such. This, as Bogner and Menz (2009) acknowledge, risks uncritically accepting normative assumptions about who is an expert and who is not, and further reinforcing a dichotomy between experts and lay people. Because the research is focused on accessing specific knowledge, rather than specific people with specific qualifications, there is a recognition this can be explored with participants who do not necessarily have normative attributes of ‘expertise’ in the social work community.

This definition of child and family social work, incorporating both family support and child protection, leads to the question: what are the boundaries of this sample? Although the above definition is rather broad, there is a focus on intra-agency rather than multi-agency knowledge work, which means that the focus of the research is on knowledge work within a participant’s team, rather than, for example, sharing knowledge with workers outside it. The aim was to gain a cross-section of levels of hierarchy, rather than focusing on which sub-section of child and family social work participants worked in. It is important to note that although the thesis focuses on knowledge sharing within child and family social work, part of this knowledge work within specific teams involves written documents about children and their families that are constructed within those teams, but are later read by other professionals. Thus, knowledge work within child and family social work often references a wider audience, even if such work is only seen or discussed with colleagues within a team at the time it is carried out.

Scope of decision making is important to reference when sampling because it enables various levels of seniority to be represented. This will create a more representative picture of the processes involved in defining and translating knowledge relating to uncertainty, although the complexity of such decision making is acknowledged. No figures on the proportion of managers to workers with no managerial responsibilities in child and family social work as a whole exist due to the mix of local authority, private and voluntary sectors. The most up-to-date and representative data (Department for Education, 2017) only includes staff employed (indirectly and directly) by local authority children’s services

departments, who are qualified social workers working exclusively with children and families. Data from Department for Education (2012) was used to inform the methodology, and this analysis included data from seventy-one local authorities in England – over half of the total – and therefore claims a limited level of representability. From this data, 15 per cent of staff had managerial and supervisory roles (Department for Education, 2012). This was a general guide for the sample here, although more recently 54.2 per cent of workers were reported as case holders, and approximately 32 per cent having managerial or supervisory responsibilities (Department for Education, 2017), although this data is also problematic due to issues around categorisation.

Data on ethnicity and gender within local authority employed qualified child and family social workers is poor, with only 23 out of 152 local authorities completing voluntary data returns (Department for Education, 2017). From this data, 53.8 per cent of this group had an ethnicity of white, 8.5 per cent had an ethnicity of black, 4.3 per cent had an ethnicity of Asian, and 2 per cent had a mixed ethnicity. However, 30 per cent had an ethnicity of 'unknown' or the data was not provided (Department for Education, 2017). Regarding gender, 78.8 per cent of workers were female, 13.9 per cent were male, and 7.3 per cent did not provide such information. I hoped to access both male and female workers with a variety of ethnic backgrounds, although this was not central to the study and there are no claims of representativeness relating to these factors here. The length of time participants had worked in child and family social work is also an important part of the initial purposive sampling, which is not always directly linked to a child and family social worker's place in the management hierarchy. Although the data should be treated with caution, 51.6 per cent of workers had been in service for less than 5 years, and approximately 40 per cent had been in service between 5-20 years (Department for Education, 2017). Overall, to answer the research question, emphasis was placed on seniority and length of experience when sampling.

### **Sampling methods**

Explicit discussion of the choices made regarding sampling is vital because these choices impact on the way the study can be interpreted (Curtis et al, 2000). Miles and Huberman provide a list of criteria for effective qualitative sampling, including relevance; likelihood of generating rich information; generalizability (in terms of analytic boundaries); believable descriptions; an ethical approach; and feasibility (Miles and Huberman, 1994, cited in Abrams, 2010: 540). However, Curtis et al (2000) have critiqued the idea of 'believable descriptions', arguing that this is aligned to the notion of the existence of one 'truth', although the criteria overall are useful as a general guide. The key aim of sampling here, and in qualitative inquiry more widely, is to achieve 'theoretical depth' (Abrams, 2010; Curtis et al, 2000). The abductive approach to analysis informs the choice to use convenience/purposive and snowball sampling. This is because, unlike in grounded theory, there is an acknowledgement that the research is informed by existing literature and is conceptually driven by the theoretical framework (Timmermans and Tavory, 2012), which has informed the study from the outset (Curtis et al, 2000: 1002). Sampling methods chosen are outlined below.

Although snowball sampling is often used with vulnerable, marginalised or elite groups (Abrams, 2010), it can be an effective sampling method to access hidden or hard to reach groups who do not fit into those categories (Atkinson and Flint, 2001). There are three reasons why the sample is considered a 'hard to reach group'. Firstly, regarding qualified social workers, it has been argued that they are portrayed as 'folk devils' in the media (Cohen, 2002; Parton, 2014; Warner, 2013) and thus may not be willing to take part in any research at all. Further, there is no comprehensive, nation-wide data on how many unqualified social workers exist in England, which is in part because there is no agreed definition of what constitutes this group, particularly since there are no mandatory qualifications required to be an unqualified social worker as it is defined here. Finally, gaining access through one organisation was avoided (for example a charity or local authority), meaning that the sample was located across the country. This method had the advantage of ensuring I did not have access to identifying information about children and their families, which was not relevant, and it also ensured the study did not become

evaluative and avoided (as much as possible) focusing on local issues not relevant to child and family social workers elsewhere. Most importantly, accessing the sample outside one or more organisations promoted a focus on informal, non-procedural knowledge alongside personal reflections from participants.

Instead, I used my previous experience as a social worker to access this group, using convenience/purposive sampling and snowball sampling. Brewis (2014) describes her research with friends as 'convenience sampling', and my initial sampling can be described as a mix between convenience and purposive sampling. It was 'convenient' in terms of the fact I had access to this social group because of my previous experience. But it was also purposive because the people I chose to contact initially were a selected sample of those I knew in social work. Purposive sampling is used in qualitative research to ensure the sample is relevant to the research question (Bryman, 2008). The criteria were that participants worked in child and family social work as defined above, held their own caseload or supervised/managed those who did, and were either qualified or unqualified. A central aim of the sampling was to access participants in all levels of hierarchy, from family support staff to senior managers. Many more acquaintances and friends could not be included because they did not meet these criteria.

Following initial convenience/purposive sampling, the snowball sampling method was chosen to contact more participants peer to peer, which, as Seidman (2006; 2013) notes, is the most equitable approach. It is also useful 'when the potential subjects of the research are likely to be sceptical of the researcher's intentions' (Sturgis, 2008: 180) which was anticipated due to the often-hostile coverage of social work in the media (Cohen, 2002; Legood, 2016; Parton, 2014; Warner, 2013), associated moral panics (Clapton et al, 2013; Cohen, 2002; Warner, 2013) and subsequent defensive practice (Baker and Wilkinson, 2011) as a response to these emotional politics (Warner, 2015). From the outset, I aimed to mitigate the lack of representativeness associated with snowball sampling by initiating 'several discrete chains with fewer links' (Atkinson and Flint, 2001: 1-2) rather than relying on a linear progression of snowballing from one or two contacts. This approach does mean that 'isolates' not belonging to particular networks may be ignored (Atkinson and Flint,

2001) and those who participate in such a study may not represent the views of those who do not wish to be involved. Nevertheless, the aim of the sample was to reach various levels of hierarchies in the sector, and I do not claim it is representative of the sector as a whole. The research aims to obtain more comprehensive data on the meanings behind knowledge sharing in child and family social work, and this is prioritised over representativeness. Although it remains the case that qualitative inquiry can often be assessed using quantitative criteria, such as the number of interviews achieved (Abrams, 2010), the number of participants included was not predetermined. As Abrams (2010) acknowledges, this is usually the case in qualitative studies because it is rarely known in advance when data saturation will occur.

## **Interviews**

The overall methodological approach, as stated above, is interpretivist. Actors' actions are based on the meanings they place on social life; therefore, to understand their behaviour, the object of study should be these meanings. Consequently, I am interested in what social workers think about what they do, rather than what they actually do, a distinction that Silverman (2005; 2011) applies to whether interviews or observation is appropriate in social research.

Ethnographic research on social work knowledge has a high status within qualitative social work research, although is too easily avoided by what can be risk adverse research ethics committees (Ferguson, 2016; Murphy and Dingwall, 2007). Ferguson has argued, through ethnographic research with social workers and service users, that being present during 'child protection encounters' (Ferguson, 2016: 165) does not have to have negative consequences and can be done ethically. Whilst I agree, I would argue that this form of research, where the researcher is privy to information about service user's lives and vulnerabilities, should be completed only where essential to the aims of the study. To answer the research questions this knowledge was not necessary. The focus is on experts

themselves, and the meanings and values behind their knowledge 'work', rather than specific judgement and decision making.

Interviews are a popular method of data collection in qualitative research because they allow the researcher to explore the values and meanings of participants (Bryman, 2008), although it is acknowledged that the knowledge created in the interviews is shaped by the interaction between the interviewer and respondent (Bostock, 2002). This interaction is in turn influenced by the gender, ethnicity, class, sexuality, disability and age of both parties (Archer, 2002; Hill-Collins, 2000). The interaction allows the researcher to clarify areas which are unclear and ask participants to expand on theoretically interesting points. The management of this interaction and the ability to create rapport is dependent on the 'soft skills' of the interviewer (Bryman, 2008; Flick, 2009), which I had the opportunity to develop in my previous roles in child and family social work. An important point to make regarding interviews is that in interviews, we cannot simply take participants' comments at face value, thinking they represent some 'objective truth' (Les Back 2012, cited in Baker and Edwards, 2012: 12-14). The knowledge shared will be affected by, amongst many other factors, the context – the interview itself. Therefore, it is acknowledged that interviewing is a creative process in which 'ideas and beliefs are created not just collected' (Hall and White, 2005: 384).

### **Interviews with experts**

Child and family social workers were defined as experts in chapter 2, and this means that consideration of methodological issues associated with research with experts is required. There is no 'right' way to conduct interviews with experts - rather, it depends on the object of research itself (Bogner and Menz, 2009; Trinczek, 2009). Platt (1981), who carried out research on her peers, argues that unstructured interviews are appropriate here because of the similarity of knowledge base between the researcher and participants – that is, the social context of the interviews (Burgess, 1988). However, I chose to use semi-structured interviews, where I asked the same broad questions to all participants but chose to ask them in different sequences and probed for more information, depending on the dynamics



of that interview (Fielding and Thomas, 2008). Social workers are used to being in situations where they must justify their work and decision making to others, for example in case conferences, supervision and so on. There was a concern that if the interviews were unstructured, the participants may be on autopilot and share what they feel they 'should' be doing, rather than reflecting more deeply on their practice.

I used interviews with this group of experts, as Gilbert and Mulkay did with scientists, to identify how they 'construct and deconstruct their actions and beliefs in diverse ways' (Gilbert and Mulkay, 1984: 188). Although it is impossible to provide one definitive account of the social world, 'interpretative regularities [same meanings/interpretations] could be discerned' (Gilbert and Mulkay, 1984: 188). Although discourse analysis is not used here, I agree with their emphasis on researching social workers' accounts of what they do, rather than attempting to uncover the 'truth' about how they work (Silverman, 2011). This includes how child and family social workers predict how others might react – the 'invisible colleague' in their mind, although Meuser and Nagel (2009) argue that this implicit knowledge of experts is not easily accessible. Thus, simply asking directly 'how do you share knowledge with your manager', for example, is likely to elicit only explicit, formal knowledges, such as formal procedures.

To access informal knowledges, two semi-structured interview guides (see appendices 9.3 and 9.4) were prepared through a review of existing literature, and with the research aims in mind. Two were prepared due to the differences between participants who held managerial responsibilities and those who did not. I followed Fielding and Thomas's (2008) guide and created an outline of the interview guides first, writing down sections to be explored, such as sharing knowledge with managers, writing up home visits and so on. I then wrote down questions for each section in an informal manner, listing 'probes' underneath each question, recognising that some topics would emerge during the interviews (Fielding and Thomas, 2008). Specific questions and topics were prepared in advance which were informed by the literature review, including documentary analysis, so that 1) there could be an attempt to ask questions that took social workers away from autopilot or 'ideal practice' answers, something that Stanford (2010) also refers to; and 2)

it did not waste their time by collecting data which is not useful, which is also unethical (Flick, 2009).

## **Research diaries**

Research diaries are a form of solicited documents (Flick, 2009). The aim was to track the thoughts of social workers at three different stages of knowledge work. The solicited nature of the documents meant that the use of research diaries aimed to provide data on the way participants 'translated' formal knowledges without requiring access to confidential information (all research diaries did not refer to any identifying information about service users). The aim was to give participants an opportunity to reflect immediately after an event, providing an effective contrast with the interview data because it acknowledged the limitations of human memory (Foddy, 1993). My perspective is that the research diaries complimented interviews and that neither method was any less valid than the other, rather they simply offered different perspectives. Participants were asked to write their thoughts three times over the course of one-two weeks for the same case. A time limit was given because although it limits the data received (for example, some of the most interesting cases could be 'translated' over a period of months) it was viewed as far more practical for participants, who were already dealing with a huge amount of paperwork in their practice.

To promote the completion of the diaries, participants were asked to write rather than audio record the diaries because 1) they had to record their practice anyway, so I suggested they write the diary at the same time with a few modifications to fit the research purposes; and 2) audio recording the data was explored, but felt to have too many potential pitfalls to be practical, for example recording equipment not working and how it would be stored and passed on to the researcher. Participants were given a guide on what information to give as part of the research diaries to make it as straightforward for them and as relevant to the research questions as possible. The guide asked participants to record what happened and their thoughts on three scenarios for the same case: 1) after completing a home visit, 2) following a discussion with a colleague or manager, and 3) after writing a report/written piece of work about a case. Research diaries were worded slightly differently for managers

and non-managers (see appendices 9.5 and 9.6). Participants were provided with a stamped addressed envelope to return diaries, which were numbered to protect confidentiality. Reflections and analysis of research diaries changed substantially following data collection and initial data analysis. This is discussed in detail later in the chapter.

## **Access**

### **Access and the insider/outsider debate**

The way I presented and navigated various identities as a researcher, student and previous social worker directly influenced access to participants and subsequent knowledge that was available to me (Archer, 2002; Feldman et al, 2003, Roesch-Marsh et al, 2012) and co-constructed during interviews. The interrogation of the insider/outsider dichotomy is not a new phenomenon (Kusow, 2003). Merton (1972) problematises the idea of insiders being members of a group and social status that have access to knowledge that outsiders, simply being non-members, do not. Thus, the non-members would not have access to the knowledge of particular groups on the basis of one social status or category, such as ethnicity. Merton (1972: 22) argues that 'individuals have not a single status but a status set'. He argues against insider/outsider 'doctrines', where insiders are members of a group and social status that have access to knowledge that outsiders, simply being non-members, do not, and the outsider doctrine, that only the outsider can study a particular group without bias. More recently, Kusow (2003) argues that the distinction between insider/outsider analytical categories is not empirically supported. Insider/outsider status is not predetermined – it is constructed and negotiated by the researcher and participants during the research and within the social context the research takes place. Kusow (2003) challenges normative assumptions about who is ascribed outsider/insider status. In this

case, it may be argued I am an 'insider' – but not according to many of the participants, as in each interview, I was 'constructed' somewhat differently (Savvides et al, 2014).

Adler and Adler (1987) distinguish between peripheral, active and complete member-researchers. Using their typology, I could be described as a 'complete member-researcher'. Adler and Adler (1987) acknowledge that researchers in this group are on a continuum, with those who have left the field to conduct research included. This brings up various questions about the extent to which I am an 'insider' or 'outsider' of child and family social work, and whether this dichotomy is even useful. At the beginning of the study, I more closely associated myself with being an 'insider', having left a role working with children and their families in a statutory setting before starting the PhD. Reflections on being an 'insider' in the social work literature often focus on practitioner or action research (for example Gould and Shaw, 2001; Humphreys, 2007; 2012; Kanuha, 2000; Shaw and Lunt, 2012). This study cannot be considered 'practitioner research' in the traditional sense, the main reason being that I am not 'practising' and researching at the same time. Nevertheless, I cannot ignore the fact that I am a qualified social worker researching social workers, some of whom were ex-colleagues. In this sense, Shaw and Lunt's (2012: 207) analysis of practitioner research is useful, because they argue that this form of research occupies an 'uncomfortable' space on the margins of both research and practice. Occupying this space creates uncertainty about one's role in the research, and categorising those engaged in practitioner research as either insiders or outsiders is unhelpful (Shaw and Lunt, 2012).

A more useful analysis than the insider/outsider dichotomy is to recognise the ability to occupy the 'space between' (Dwyer and Buckle, 2009), as well as 'activating the insider-outsider hyphen' (Humphreys, 2007). This includes recognition of the complexity of positionality in qualitative research, where different lenses, such as the 'outsider-within' (Collins, 2000: 11) can access different forms of knowledge. Overall, there is no 'right' or 'wrong' place to be in terms of insider/outsider in relation to qualitative methodology, only that we be open and honest about our position and the limits as well as the advantages of researching from this perspective (Anderson et al, 2007). This refusal to accept a strict dichotomy between insider/outsider is particularly helpful in relation to this research. My

previous experience in child and family social work meant that I was an 'insider' in terms of sharing a socio-cultural experience with the participants (Shah, 2004). This had advantages in terms of access, 'shared cultural experience', and knowledge of where participants may try to hold back information or opinions, and where this is important (Shah, 2004). But I am also an 'outsider', because I am no longer a practising social worker, having moved into the academic sphere.

I agree with Mullings that we must name these uncertainties (Mullings, 1999: 337) in order for others to be able to assess the rigour of qualitative research. Overall, 'the insider-outsider question cannot be fully resolved, but...we can try to work creatively within its tensions' (Acker, 2000: 1) in order to conduct rigorous qualitative inquiry (Dwyer and Buckle, 2009).

### **Rendering connections visible: sampling**

The methodology outlined above is only possible due to my 'insider' status as a qualified social worker with previous experience in statutory and non-statutory settings, as well as qualified and unqualified positions. In this section, my relationship with participants and the impact this had on the knowledge accessed is discussed.

As stated above, I used a combination of purposive/convenience sampling and subsequent snowball sampling to recruit participants. In the planning stages, I was expecting to have a combination of acquaintances and strangers as participants in the study, knowing that I would initially gain access to participants through acquaintances. Initially, I found it difficult to find peer-reviewed analysis of research with acquaintances in qualitative methodology. On finding a working paper by Blichfeldt and Heldbjerg (2011) on the subject, I realised that the topic is implicit in much of the literature on practitioner research; the insider/outsider debate; and action research across various fields, which Blichfeldt and Heldbjerg do not cover. As the methodology of the study changed due to changes in the research question, I was concerned about the validity of research with acquaintances. For example, Seidman

(2006; 2013) advises against research with acquaintances under the headline 'easy access'. I dispute the idea that research carried out in this way is the 'easy option'. Seidman's argument seems to be based on what Blichfeldt and Heldbjerg (2011) criticise as positivist ideas of 'objectivity', and renders all practitioner research problematic. In qualitative research, objectivity is not the goal (Blichfeldt and Heldbjerg, 2011) and researchers have completed research with acquaintances (for example, Robinson, 2014; Brewis, 2014). Further, the insider/outsider debate within qualitative research tended to place researchers strictly in one group or the other, rendering researchers as either objective and credible or subjective and biased (Savvides et al, 2014: 414).

This does not mean to say that research with acquaintances is unproblematic. Rather, it requires critical reflection throughout (Humphreys, 2012) to reflect on what type of knowledge is being accessed, as well as openness and honesty about sampling to be considered rigorous (Curtis et al, 2000; Dwyer and Buckle, 2009). Ethical dilemmas to be considered in research with acquaintances include 'not only reflecting on the research question at hand but also reflecting deeply about how our positionality becomes a lens through which we view reality' (Anderson et al, 2007: 10). This means recognising the need to separate my own experiences of working in social work from participants (Kanuha, 2000). An issue Brewis (2014) draws attention to is what she calls 'ex ante' data, or the need to be particularly careful about using the existing knowledge we have about acquaintances prior to the commencement of the research. When interviews took place with acquaintances, I realised that my prior knowledge was not part of the study and made a strong attempt to avoid using it in my analysis. It is, however, difficult to know where the line is drawn in my analysis and interpretation, but the response to that, as is the case throughout the research, is to be open and honest about the lens I am viewing the data through to carry out rigorous qualitative inquiry that highlights, rather than renders invisible, the inevitable subjectivity involved when collecting and analysing data.

Particularly relevant to the thesis is the interrogation of my own tacit knowledge prior to data collection (Anderson et al, 2007). Anderson et al (2007: 130) suggest asking: 'what is it I already know, and how do I know it? How might this knowing limit or bias the way I am

considering or asking my research question?’ Conducting the literature review, critical feedback from my supervisors and joining relevant research networks aided this endeavour.

There are many benefits of research with acquaintances. In terms of developing rapport, trust and going beyond standard phrases and formal (as well as recognising where they occur) communally accepted knowledges, research with acquaintances benefitted this, and has indeed been described as very positive by participants in previous research (Brewis, 2014). Moreover, those participants who I did not know prior to interviewing had the benefit of the researcher having already been ‘approved’ by someone they likely trusted, since they had chosen to be involved in the study.

The specific research methods chosen have been outlined above. I now turn to the ethical considerations these methods and the research questions created.

### **Ethical considerations**

I received ethical approval for the research in May 2012 and the research was conducted under the University of Leicester Research Code of Practice and the British Sociological Association (BSA) Code of Ethics. As Bostock points out, ‘the BSA guidelines were never designed to be exhaustive or indeed prescriptive’ (Bostock, 2002: 276) and planning put in place prior to data collection aims to limit the likelihood of unexpected ethical issues. For example, informed consent is a key ethical issue, and when developing the information sheet for participants, a balance was made between participants being adequately informed (Flick, 2009) and providing so much detail so that the participant would not attempt to provide answers ‘wanted’ by the researcher (Platt, 1981).

Ethical considerations regarding access are discussed in the sampling and access section in this chapter. Overall, What Roesch-Marsh et al (2012) call the ‘protectionist’ stance often taken by social work organisations with regards to research calls for a variety of methods of access to obtain different knowledges as appropriate to the research question. I specifically did not want to research a particular organisation or site, and therefore did not

need approval from specific authorities or other organisations (Seidman, 2006; 2013). This approach has been taken in previous social work research (for example, Legood et al, 2016; O'Connor and Leonard, 2014; Moriarty et al, 2015b; Robinson, 2014). I did not require access to confidential information about service users to answer the research question.

Confidentiality of participants was central to this study. Participants often mentioned that they only said something because they knew they would not be identified. Bell (2010) makes an important point about confidentiality in terms of researching an organisation. A person may not be identifiable to an outside reader, but this may change if read by another participant. Due to the nature of snowball sampling, people in various networks may be able to identify participants more easily than an outside reader, therefore extra precautions have been taken to ensure confidentiality. These include removing colloquialisms and sayings that participants used regularly and not providing specific information regarding age, ethnicity and so on which I have already argued is unnecessary. I have also provided only very basic information regarding each participant's role to protect confidentiality and have used broad categories for length of experience.

Connected to this matter is how participants are presented in the thesis. There is a tension between representing a 'true' picture of the participant (Burgess, 1988) and ensuring they cannot be identified from the research. In this case, I would argue that confidentiality is more important. The multi-layered issue of confidentiality also includes confidentiality of participants and confidentiality of the children and families they work with. The study does not research children and their families and I do not know any of their personal details, therefore it is not necessary to gain their consent. With regards to confidentiality of participants, they were fully informed of the confidentiality procedures, including how the data will be stored (securely, and only on encrypted software). They were also informed of who may have access to the data and what would happen to it at the end of the study.

Developing this matter of informed consent, within the information sheet I chose to provide a brief overview of the project which would enable participants to make an informed choice as to whether to participate or not, whilst avoiding participants being directed towards a



particular theoretical stance by the researcher. This meant that emerging from these interviews was analysis that participants may not agree with (Flick, 2009) which is directly connected to a criticism of what Fontana and Frey (2005) call 'empathic interviewing'. However, I argue that it would be rather patronising if I assumed that the social workers I interviewed had the same perspective as the researcher. Therefore, to deal with the problem of disagreements about analysis, there was an attempt to ensure the analysis is 'grounded in the data and...should not include judgements on a personal level' (Flick, 2009: 41). It was important to give participants plenty of time to read the information sheet and consent form before signing and agreeing to the research, to ensure they did not feel pressured in any way to participate (Bell, 2010). No claims were made regarding anonymity, because this would mean that even I, the researcher, did not know who the participants were (Bell, 2010), which in this case would not be possible. Instead, it was made clear to participants why anonymity could not be guaranteed, and that confidentiality was prioritised over all other issues.

### **The pilot study**

Bell (2010) points out that a pilot study is required to ensure that the questions chosen meet the purposes of the research, adaptations can be made to the coding of data if necessary and that any practical difficulties which were not anticipated can be resolved before the data collecting in its entirety begins (Bell, 2010). Five participants made up the pilot and were interviewed and asked to complete the research diaries. At the end of each interview, they were asked for their view on how the interview went and whether there were any questions they would add. For example, Mia made the following suggestion:

What if you wanted something to happen and your manager didn't, but you felt really, really strongly that it should happen? Do you feel that you could, what would be your course of action? I think that would be a useful question to ask people.

(Mia)

This was incorporated into subsequent interview schedules, albeit worded in a different way and focusing on challenge and disagreement more generally. Mia also stated that she

would not complete a research diary because 'it wasn't relevant' to her role. I changed my approach when describing the research diaries with subsequent participants and made sure I linked them to their role specifically. Three out of five of the pilot participants completed research diaries.

Following the pilot study and initial transcription and analysis, I realised there were occasions where I thought I should have probed further at particular comments. For example, in my interview with Barbara, she gave lengthy examples which, in hindsight, I should have interrupted when they were not relevant to the study. I tried to incorporate this into subsequent interviews, whilst at the same time allowing participants to share their thoughts in line with the aims of a semi-structured interview.

### **Out in the field: the experience of data collection**

Below, there is an outline of how participants were accessed, followed by a brief discussion of my experience of occupying 'the space between' (Dwyer and Buckle, 2009) the insider-outsider dichotomy. There is an overview of how interviews were conducted and how many research diaries were completed. Finally, there is a description of how data saturation was achieved.

#### **Access and sampling**

Data collection began in March 2013, concluding in January 2014. I began by contacting 11 people I had previously worked with. I chose these people because they represented qualified and unqualified social workers with varying levels of experience and seniority. They were contacted via social networks (private message) and email. This initial convenience/purposive sampling supported the aim of getting a spread of these variables to answer the research question. Two of those did not reply, and one initially replied but did not respond after two further attempts. Interviews and research diaries began, and participants shared contact details of people they thought might be interested in taking

part, hence the beginning of snowball sampling. Contact was made to these participants predominantly by email, although occasionally in person. I also attended a small social work conference in one area and another informal meeting of social workers and their colleagues, but these did not yield any participants. I found email an excellent method of contact with participants. It was non-intrusive, and allowed participants to read the participant information sheet (appendix 9.2) and consent form (appendix 9.1) and consider in their own time whether to take part (Bell, 2010). It was particularly useful where potential participants were expecting contact, for example, when a previous participant had told them about the research and asked if they could share their contact details. Only one participant wished to ask permission from her manager to take part. I gave her all the relevant details about the study, emphasised that I was not studying any particular authorities or sites, and informed her I would be happy to meet with her manager if necessary, but, following Seidman (2006; 2013) I was not seeking permission from management or organisations to involve participants in the study. The participant spoke to her manager about it, but the manager did not contact me.

Overall, 62 people were asked to take part, with 27 of those either declining to take part or not responding. Three attempts at contacting potential participants were made and if no response was received, no further correspondence was sent. 35 interviews were carried out, and 12 research diaries were completed. Unfortunately, the data from one interview in the study could not be included because the participant's role did not meet my own criteria. Their clear wish to be involved in the research led to me avoiding asking more detailed questions about their role, which would have prevented the interview taking place. Relevant details of participants are provided in appendix 9.7. The only details necessary to share are whether participants were qualified or not, the length of their experience (in rough figures) and the level of their seniority. As Morse (2008) argues, this ensures confidentiality, but also excludes details that are not pertinent to the study. 6 participants were unqualified, 2 were qualified but worked in unqualified roles, and 26 were qualified. Of the 34 participants, 22 were acquaintances and 12 were strangers. 11 were contacted and recruited by me, the rest through snowball sampling.

David and Sutton (2004) state that snowball sampling can lead to participants identifying people the researcher had not thought of, leading to new insights and this occurred here. I had the opportunity to interview qualified social workers who review and assess child and family social work. Although this did not meet my initial criteria exactly, I felt it was an excellent opportunity to gain insight on knowledge sharing from those who must review it both within and between teams. The analysis focused on knowledge work within their team, although there was overlap in the interviews. David and Sutton argue that 'a sample would be sufficient when the current round of theory building provides sufficient insights as such that subsequent sample members' identities and responses/behaviours are predictable' (David and Sutton, 2004: 80). By the 34<sup>th</sup> interview, I was experiencing repetition and new insights from participants were not forthcoming. A judgement had to be made, and I decided that carrying on attempting to recruit participants would not add to the data already collected.

### **Occupying the 'space between'**

The way in which I presented and navigated various identities as a researcher, student and previous social worker directly influenced access to participants and subsequent knowledge that was available to me (Archer, 2002; Feldman et al, 2003, Roesch-Marsh et al, 2012) and co-constructed during interviews. During the research, I took Bogner and Menz's (2009) advice and 'played' with these identities in different ways depending on the participant I was interacting with. I noted that different participants received my identity as a previous social worker in different ways, and, as Sandfort (2003) argues, I was 'tested' every time I contacted or met someone new. Relationships had to be constantly maintained (Jamal and Lin, 2003) to ensure access continued. I therefore occupied the 'space between' (Dwyer and Buckle, 2009) the insider-outsider dichotomy. It seemed I was viewed as an insider by some participants, which allowed me to access informal knowledge more quickly although I had to work at encouraging those participants to share knowledge they may have assumed I already knew. On the contrary, others seemed to view me as an outsider, which seemed to prevent those participants assuming I had knowledge of informal processes, although I

had to work at overcoming their scepticism and encouraged reflective debate rather than standardised, non-reflective responses.

I also had to work hard at avoiding conflating my experiences with the experience of participants, simply because I had worked in child and family social work (Archer, 2002; Reay, 1996). However, as Ganga and Scott point out, ‘, interviewing within one's own "cultural" community—as an insider—affords the researcher a degree of social proximity that, paradoxically, increases awareness amongst both researcher and participant of the social divisions that exist between them’ (Ganga and Scott, 2006: 2). This reflects my experience of the research amplifying difference in experience and perspective between me and participants, particularly in the early stages of data collection. Overall, I would argue that my status as an ‘expert’ was not consistent with participants, and their view likely affected the knowledge they shared. However, by being honest about information I did not have, demonstrating genuine curiosity in their way of thinking, emphasising a lack of normative judgement on my part and asking questions that promoted reflection, I was able to access fascinating data.

## **Interviews**

Semi-structured interviews took place in public areas such as café's, a private room chosen by participants, my home or the participant's home. The information sheet (appendix 9.2) and consent form (appendix 9.1) were discussed, and the consent form was signed before recording began. Audio recordings meant that the sequence of the conversation was preserved (Silverman, 2011) and I could remain ‘present’ in the interaction. Interviews were conducted using what Bogner and Menz (2009) call an ‘interaction model’, where what the interviewee shared was based on their view of the interviewer. I was interviewing experts who are used to interviewing themselves, thus I aimed to conduct a type of conversation – to move away from automated answers they provide when evidencing their work to others, therefore reducing the amount of stock phrases and allowing some ‘new’ reflections. This meant that I often moved away from the question order, and occasionally some questions did not get asked due to time constraints. This, however, is very much balanced by adhering

to Morse's (2015: 1218) argument that 'keeping the coding reliable occurs at the expense of interpretive insight'.

My background and my expertise (or lack thereof) affected all the interviews. One interview stood out in relation to this. I had never met Megan before, and at the beginning of the interview she gave short answers and appeared impatient for it to be over. However, once the initial, basic questions were over, the more specific questions I asked – which were, of course, thought through in terms of, in part, how they would communicate that I have some knowledge of social work – Megan's response changed. Her body language became more open, and she articulated that the questions were interesting to her and answered in more detail. The knowledge she shared in the interview was thus based on our specific interaction, as well as how she viewed me as a researcher and my knowledge on social work. It occurred in most other interviews, and Trinczek (2009: 207) describes it as a move from the 'question-answer situation' experts are familiar with in their roles, to the interview situation, which can be more relaxed, although still very much focused on their work. In fact, what Trinczek (2009) describes as a not uncommon event occurred, which is that participants were regularly happy to go over time. After all interviews, I wrote a memo detailing my observations during the interview and initial thoughts and ideas resulting from the interaction.

### **Research diaries**

In discussion with many researchers, Baker and Edwards (2012) emphasise that data obtained through interviews should be recognised as the knowledge participants and the researcher chose to share and construct in that moment, rather than a 'truth' of what participants, in this case, do outside the interview. This is also the case for research diaries. They were jointly constructed by the researcher and the participant – I asked the questions, the participants chose what to share. The results are interesting in terms of what knowledge they include in such a research document, and what they leave out. 12 research diaries

were completed. Part of the reason why more research diaries were not completed is, on reflection, due to a lack of confidence on my part as a student and novice researcher. Seidman (2013) states that this is an important issue for doctoral candidates and it led to me not 'selling' the research diary as strongly as I could have done. This was an important lesson to learn, because the research diaries that were completed made a useful contribution to the overall research, if in a different way than intended.

I asked participants to complete the research diaries over the course of a week, but it is fairly clear that they were completed at one time. Initially I was disappointed by this, but following analysis, recognised the benefit of having a formal document of participants' thoughts and reflections on their work. I began looking at what they included, what they excluded, and once I started to identify the four categories of participants, recognised that the research diaries supported interview data in terms of the filtering 'out' or 'in' of informal knowledges. It also had the benefit of not being an official form of evidence – in a way, it is the pre-evidence stage, so that the differences between participants' knowledge filtering strategies have not yet been erased by dominant forms of EBP. Further reflection and analysis of research diaries is provided later in the chapter.

### **Data saturation**

Glaser and Strauss (1967) first coined the term theoretical saturation, and in correspondence with Baker and Edwards, Ben Baumberg defines saturation as:

sufficient depth on the full range of the phenomenon [the researcher is] interested in... The trouble is that before starting your research, you know neither how many interviews you need to get 'sufficient depth', nor what the scope of the 'full range' of variation is.

(Ben Baumberg 2012, cited in Baker and Edwards, 2012: 37)

Therefore, I could not predict how many participants were required to reach 'data saturation' prior to data collection. Instead, I followed Wolcott's advice, which is to keep collecting data as long as different answers are being provided (Wolcott, 2012, cited in

Baker and Edwards, 2012: 2-3). The reason for ending data collection was a mixture of data saturation and practical considerations, which Baker and Edwards (2012) acknowledge is also important in qualitative research. I had reached the end of a network and was facing repetition in the interviews, to the extent that I could predict future participant's responses (David and Sutton, 2004; Silverman, 2011). In fact, the practical considerations probably stopped me carrying on with interviews for the sake of numbers, which would have been unethical. Interviews were transcribed during and after data collection.

## **Data analysis**

### **Thematic analysis: an abductive approach**

Data were interpreted using thematic analysis. This is a wide, umbrella term that Bryman (2008) argues does not have much meaning in and of itself, because it can be used within so many different research strategies. Therefore, it is important to define the specific strategy used. I used Timmerman and Tavory's abductive approach, where abductive analysis is constructed 'from a grounded theory foundation to foster theoretical innovation' (Timmerman and Tavory, 2012: 169). This approach presumes an informed theoretical approach, where I had extensive, on-going familiarity with existing literature, but where there is also room for surprise and novel theoretical insights (Timmerman and Tavory, 2012). The meticulous approach of grounded theory is used, alongside the notion of abduction as enabling me to recognise something as surprising, and thus be sociologically creative. This differs from the constructivist grounded theory of Charmaz (2009) because abduction is privileged over induction, rather than induction first then abduction (Timmermans and Tavory, 2012).

This approach avoids the paradox of grounded theory – that one must be at once theoretically sensitive, based on familiarity with existing theories in order to create new ones, but at the same time arguing that creativity is lost once researchers commit to 'preconceived' ideas (Timmerman and Tavory, 2012). It also avoids the problem



Timmerman and Tavory view as central to the limitations of grounded theory – that ‘induction does not generate theory’ (Timmerman and Tavory, 2012: 170) because observation is always theoretically informed. The point of abductive analysis is therefore to find the surprises – the new theories – by going straight to abduction, which ‘starts with consequences, and then constructs reasons’ (Timmerman and Tavory, 2012: 171). This is put into practice by 1) observing something surprising (C); 2) surmising that if A is true, C would be a matter of course; and 3) there is therefore reason to suspect (rather than be certain) that A is true. An example of a ‘surprise’ was two participants stating they did not use ‘gut feeling’. It was important to analyse this further, as it potentially refuted my developing analysis. By doing so, I understood that it was a matter of definition, and incorporated this into my research findings.

The way in which surprises were found, and abductive analysis in general is carried out, is by using grounded theory’s methods of theoretical sampling, coding, memo writing, constant comparing and sorting of memos (Hodkinson, 2008; Timmermans and Tavory, 2012). Constant comparing and revisiting phenomenon allowed me to revisit data in light of new theoretical insights. Defamiliarisation was expected to be achieved through the transcription of interviews and research diaries, and repeatedly reading those transcriptions. Timmermans and Tavory (2012) argue that this creates ‘semantic distance’ from the data, thus increasing the likelihood of generating new theories. Alternative casing combines these two methods and allowed me to look at various cases, or excerpts of data, and view it from different theoretical perspectives (Timmermans and Tavory, 2012). By placing the theoretical background in the foreground, I aimed to create empirical puzzles that provided the best opportunity for creating original sociological insights.

### **Data analysis ‘in practice’**

It was vital to retain a sense of the whole when analysing the data, because there can be a tendency when coding to lose the context when dividing and sorting data (Hodkinson, 2008). I attempted to use Nvivo, but found working on paper and creating various coding and memo Word files more useful. An initial set of codes was created, which combined the

research questions and appropriate conceptual frameworks, and this developed through the ongoing process of analysing the data (Hodkinson, 2008). It was also important to remember that the aim was to explore the various discourses present in the data, rather than view this data as 'inside knowledge' of what is 'actually happening' within child and family social work (Gilbert and Mulkay, 1984; Silverman, 2011).

When analysing the data – going back and forth between new themes that I identified and back to repeat coding of previous interviews – perhaps a barrier to creativity initially was that the interviews were structured in terms of a linear progression from home visit, recording events, discussions with colleagues, and so on. This does not always happen in practice, although it was useful in terms of arranging the research questions. However, when I moved to what Evers (2016) calls 'analytic tactics', I began to connect different groups of data. This meant I began to realise that grouping data by event was not aiding creativity, and that more interesting themes were running across events. For example, repetition of information was occurring at various stages of knowledge sharing, and it was not the stage that was important, but the reasoning behind why participants felt repetition was necessary. Throughout this process, I repeatedly returned to the literature, and in this case, this helped me to use the term retranslation to describe and better understand this process of repetition.

Through memos, coding and re-coding and going back and forth between the literature and my data, I began to create initial, broad themes such as filtering strategies and gut feeling. Attending conferences and gaining feedback on initial analyses meant I was able to incorporate these insights into ongoing analysis. Initially, I found the research diaries 'dry' and frustrating. On reflection, this was because I still had the aim of the research diaries being a 'journey' of risk over time. As stated above, research diaries were very likely completed at one point in time, therefore the initial aim was not met. However, this aim was formulated at the very beginning of the PhD; subsequent reading and data analysis enabled an acknowledgement that this 'journey' was not necessary. The aim was linked to a focus on knowledge sharing rather than knowledge construction, as well as a lack of confidence in my data collecting abilities.

'Filtering out' data and subsequent themes I had attached to the data was difficult. In the middle of the data analysis, I had too many categories and themes and it was not possible to write a coherent thesis based on such a high volume of data. The way I eventually filtered out specific themes, which is important to acknowledge (Ryan and Bernard, 2003), was to explore in even more detail each theme one by one. This lengthy process led to the realisation that definitions were just as important as knowledge navigation and translation. Thus, the study gradually evolved from a focus on the meanings behind what child and family social workers choose to share with others and why, to an in-depth analysis on how they define and translate those knowledges. Identifying that there were broad themes associated with. For example, what participants called gut feeling, and yet participants reflected on the term differently, led to the construction of four key reflections on knowledge, followed by re-visiting how participants reflected on evidence.

A key part of the construction of the four epistemic categories was revisiting the research diaries. Once I had ascertained that how participants defined knowledge was central to the study, what were previously 'dry' and frustrating research diaries became incredibly useful. Going back to research diaries later helped me achieve defamiliarisation – I analysed them with a separateness I had not had before, when I was trying to recruit people and so was invested in them having something 'new' to say to justify asking participants to do them. That lack of immediacy helped me to avoid glossing over this 'dry' data and viewing that as interesting in itself. Subsequently, I identified that research diaries were an example of a more formal document that could be compared and contrasted with interview data, as well as exploring the subtle differences between each research diary. A question I repeatedly asked was: did a participant's research diary confirm or refute my current analysis, and if not, why not?

One example of how interview and research diary data were combined to support original findings was the construction of four epistemic categories. Initially, I had two epistemic categories – one which later became binary and ambivalent, and one that later became pragmatic and reconciled. The first category was quickly divided into two (binary and ambivalent) because it was clear that some participants reflected on the individual

challenges they faced when they distinguished between fact and value, and others did not. The second category was more difficult. When analysing Naomi's research diary, Violet used technical, scientised language, excluding CTK that she had acknowledged she used in her interview:

A plan could not be formulated that allowed the children to remain in their mother's care due to disguised compliance, significant history to the case and mother's lack of engagement and capacity to change.

(Violet)

Whereas Naomi acknowledged using CTK and also included it in her research diary:

I sensed from [parent's] presentation that she had something to hide and therefore insisted we went into the home to check on the welfare of the children.

(Naomi)

This, in part, led to the construction of two epistemic categories (pragmatic and reconciled) to better represent differences between participants in the way, particularly in terms of their distinction between fact and value, which all but those categorised as reconciled made. Thus, research diaries are not explored separately in the findings chapters because they are part of the same analysis and led to the same findings.

Analysis of the research diaries and interviews also incorporated some of the other themes that I thought were separate into larger themes. For example, written recording was incorporated into retranslation. Understanding the extent to which fact and value were separated by participants underpinned my analysis and helped better integrate analysis of how participants both defined and translated knowledge relating to uncertainty when a risk-orientated approach dominates the profession (Kemshall, 2016; Stanford, 2010; Tanner, 1998; Webb, 2006).

An important point to make here is that the four epistemic categories and associated knowledge sharing strategies were not mutually exclusive. For example, Gwyneth on the whole had an ambivalent approach to knowledge. However, she used one of the strategies used by participants who employed DKF: strategic filtering (this is explored further in chapter 7). In the findings chapters, it will be stated that the more senior a participant, the

more likely they were to employ DKF and have a pragmatic or reconciled approach to knowledge. Therefore, that some participants overlapped in terms of the knowledge sharing strategies they used is unsurprising, considering this is likely to change over time. With regard to the epistemic categories, the data illustrate that some participants had (understandably) mixed thoughts about the distinction between fact and value. The categories reflect this ambivalence through the 'ambivalent' and 'pragmatic' categories. However, some participants overlap between categories more than others. For example, Lesley used similar language to describe CTK as those with a reconciled approach to knowledge, but 'scientised' CTK when specifically justifying her use of this form of knowledge in practice. Overall, the categories and associated knowledge sharing strategies are a useful way of identifying the expert response to uncertainty in a risk-dominated profession, but there is overlap and movement between these categories as will be explored in the following chapters.

## **Conclusion**

In this chapter, the way in which the methodology enabled access to specific knowledges and effectively and rigorously answered the research questions has been explored. The epistemological stance taken was outlined and provided a theoretical grounding for the qualitative research methods chosen. Access and sampling was discussed, followed by the reason why research diaries and semi-structured interviews were conducted. A separate discussion of research ethics was provided, although ethical concerns permeate the whole chapter. This was followed by an outline of the pilot study and the experience of data collection, in particular the researcher's experience of occupying the space between the 'insider-outsider' dichotomy (Dwyer and Buckle, 2009). Finally, an overview of how data analysis was carried out was provided to make explicit the theoretical underpinning of subsequent research findings.

## **Findings and Discussion Chapter Five – A Sociological Analysis of Gut Feeling**

### **Introduction**

In this findings and discussion chapter, a summary of existing literature on the subject of gut feeling will be provided. Drawing on the SSK literature, there are four main original contributions to knowledge in this chapter. Firstly, it is identified that gut feeling was a form of knowledge central to participants' response to uncertainty when a risk-orientated approach dominates the profession (Kemshall, 2016; Stanford, 2010; Tanner, 1998; Webb, 2006). The complex question of how participants defined gut feeling is separated into three parts and includes the meanings attached to this form of knowledge. It will be argued that gut feeling is a form of collective tacit knowledge (CTK), thus it is social, warranting a sociological analysis. Two broad, communal themes associated with this form of CTK are identified: a) uncertainty coming to the fore that had previously been hidden; and b) incongruence between the current situation and past experience. Gut feeling therefore referred to general uncertainties rather than a specific emotion or judgement and is a central part of the response to uncertainty created by participants. Finally, it is identified that participants reflected on the term in different ways. These differences are important because they underpin the strategies participants used to share (or not) knowledge with others, which is explored further in chapter 7. Four different types of reflections on CTK are outlined: 1) binary; 2) ambivalent; 3) pragmatic; and 4) reconciled. The way in which participants reflected on CTK was underpinned by the extent to which they separated fact and value, and this influenced how at ease participants were with the use of CTK. It is argued that these subtle distinctions can aid understanding of knowledge construction and knowledge sharing within this epistemic community.

### **Why gut feeling?**

Semi-structured interviews explored both formal and informal knowledges so participants themselves could identify what strategies and types of knowledge were useful when responding to uncertainty. Therefore, gut feeling was not included in the primary interview questions, although there was a note to ask further if they mentioned gut feeling themselves (see appendices 9.3 and 9.4). Rather, participants brought up the term unprompted during pilot interviews and it became apparent that this form of knowledge was central to their response to uncertainty against the background of a dominant, risk-orientated approach to knowledge (Kemshall, 2016; Stanford, 2010; Tanner, 1998; Webb, 2006). Gut feeling was the most common term used, and although some participants used gut instinct or intuition, they used all three terms to describe the same type of knowledge. As the data were analysed, it was interesting to see how often participants referred to gut feeling in similar ways. Holly was asked how she started to form her views on a case following an initial home visit:

Well I go on a lot of a gut feeling.

(Holly)

Sharon also brought up the term unprompted:

My manager says that that's really important as well. She says you've got to go with your gut feeling.

(Sharon)

Megan referred to the difference she observed between her and student social workers:

It's back to [the] experience of a social worker, because...I've got students...and it's quite interesting because they will often come out with me when they're on placement and I've given them this case and I'll say "right, what do you think?" and they go through all [the] techniques they've used at university, but they never use gut instinct. And I think gut instinct counts for an awful lot and I will say that to them and they will say to me 'well we can't use gut instinct' and I say 'but you can, you need to. You need to use gut instinct because it's human nature.

(Megan)

Identifying the repeated use of the term gut feeling and subsequent similarities in how it was described led to a focus on this one form of knowledge, rather than informal knowledges more generally.

### **Defining gut feeling**

Gut feeling is a slippery term that defies easy definition (Mitchell, 2016). As part of an attempt to provide clarity on the concept, other terms associated with gut feeling such as intuition and practice wisdom will be explored, followed by a more detailed discussion of gut feeling.

The Collins English Dictionary (2014) defines gut feeling as ‘an instinctive feeling, as opposed to an opinion based on facts’. This definition reinforces a dichotomy between fact and value (Webb, 2001), and although this definition is not explicitly negative, a general assumption in the dominant EBP literature is that gut feeling is biased (more so than other forms of reasoning), inherently bad at worst and dubious at least (Helm, 2010). Gut feeling and intuition are often conflated (Helm, 2010), along with practice wisdom (Mitchell, 2016). Scott (1990) was one of the first scholars to argue for more research into practice wisdom. Scott (1990) states that practice wisdom is often experienced by practitioners as intuition and takes a psychological approach to the term, arguing that qualitative research can help identify the ‘cognitive schema’ that make up practice wisdom. Scott (1990) also associates practice wisdom with tacit knowledge, although O’Sullivan (2005) argues that practice wisdom and tacit knowledge should not be conflated, and supports a broader definition of practice wisdom provided by Sheppard (1995). Sheppard defines practice wisdom as a combination of knowledge gained through everyday living and interacting with others; knowledge gained from research; and knowledge gained through practice (Sheppard, 1995: 279). Here, O’Sullivan’s (2005) approach is supported, meaning that practice wisdom is a broad term that includes both explicit and tacit knowledge which is constantly changing. Gut feeling is the focus of this chapter, and is the term used because it is the one that participants used the most and identified with (Mitchell, 2016), although the close association with practice wisdom is acknowledged.



Regarding intuition and gut feeling, these terms were often referred to interchangeably by participants, although gut feeling was used much more often. Gut instinct was used at times by participants, although they used the term interchangeably with gut feeling, which reflects the literature on the subject. Gut feeling has been described as the physical manifestation of intuition (Helm, 2010: 125), although Gigerenzer uses the terms gut feeling and intuition interchangeably to refer to 'a judgement that '1) unconscious intelligence that appears quickly in consciousness; 2) whose underlying reason we are not fully aware of; and 3) is strong enough to act upon' (Gigerenzer, 2007: 16). Again, gut feeling will refer to both a way of thinking and the embodiment of that way of thinking because it is the term participants used the most and identified with (Mitchell, 2016). Drawing attention to physical responses to information that participants may have had was a useful way of exploring the 'inexplicable' – to put into words in the interviews what was being explored, without pre-defining exactly what participants thought of this way of thinking.

This study focuses on the communal aspect of gut feeling, both in definition and what strategies are used to share it with others. Here, the Strong Programme's principle of symmetry (Bloor, 1973) is used to analyse gut feeling. In short, this means 'the same kind of empirical curiosity' (Bloor, 2014: 403) is employed to study all forms of knowledge. Moreover, what Sennett (2008) calls craftsmanship must be subject to scrutiny. For example, it cannot simply be said that gut feeling is a part of practice wisdom, thus those who use it must be trusted to practice this mysterious art (Sennett, 2008) because this enables critics to dismiss it as 'unscientific'. Overall, there must be a wariness of what Brown and Calnan (2010) call the 'dark side' of trusting professionals to do their job. That gut feeling is viewed as inherently difficult to share, and thus explore, should not be an obstacle to attempts to gain a better understanding of this form of knowledge.

### **Tacit knowledge**

As stated above, the important element of gut feeling in relation to the thesis is that it is deemed difficult to share. In other words, it is a form of tacit knowledge (Reber, 1995; Zinn, 2008). The focus here is on knowledge making and sharing within child and family social

work – expert to expert. The SSK literature is useful in helping to understand this phenomenon and adheres with the social constructionist approach to knowledge making and the development of child and family social work underlying the thesis. Fundamentally, the SSK literature aids a move away from individualist and psychological approaches to tacit knowledge and explore gut feeling from a sociological perspective. Below, Collins's (2010) typology of tacit knowledge, is outlined, and it is argued that this typology has the potential to help form a sociological understanding of gut feeling. It is argued that gut feeling is a form of collective tacit knowledge, using participant examples. This form of collective tacit knowledge is then described in more detail by exploring common sense and gut feeling. Two broad, collective themes associated with this form of collective tacit knowledge are identified: uncertainty and incongruence.

### **Collective tacit knowledge**

Within the EBP knowledge hierarchy, randomised-controlled trials (RCTs) are privileged over qualitative research (Gray et al, 2009; McNeece and Thyer, 2004). In fact, McNeece and Thyer's (2004) hierarchy does not mention practice experience, practice wisdom, intuition or 'gut feeling' at all, although they are generally considered to be at the bottom of this hierarchy (Gray et al, 2009). For the purposes of this research, what is important about these forms of knowledge is that they are considered difficult or even impossible to share. This makes them a form of tacit knowledge. Collins has written extensively on tacit knowledge and scientific expertise (for example, Collins, 1974; 1985; 2001; 2010 and Collins and Evans, 2007), although it is in Collins's influential book, *Tacit and Explicit Knowledge*, that Collins first shares his typology of tacit knowledge. Collins (2010) acknowledges that the definitions of tacit knowledge he used in his earlier work were too vague and although he draws on Polanyi's (1966) original creation of the term, he extensively reworks it (Mitchell, 2016).

Collins (2010) asserts that the term tacit knowledge has previously been used to lump different forms of knowledge together, which implies all tacit knowledge is impossible to share. However, the foundation of his typology is that there are three different types of

tacit knowledge, and only one of those is impossible to explicate (Collins, 2010). Briefly, the three types of tacit knowledge Collins refers to are relational (weak), somatic (medium) and collective (strong). Relational knowledge is tacit because of the nature of social relations in any given context. It is difficult, but possible, to explicate if social relations change. Somatic knowledge is tacit because of how the human body and brain is constituted, and is also difficult but not impossible to explicate. Collective tacit knowledge is fundamentally impossible to explicate, according to Collins (2010) and is the type of tacit knowledge that is most relevant here.

As stated in Mitchell (2016):

We all have collective tacit knowledge which we learn through socialization as 'social parasites' (Collins, 2010: 138). As social workers are part of one 'epistemic culture' (Knorr-Cetina, 1999) or community, they share much of this collective knowledge, thus they have what Collins calls 'social fluency' in this group (Collins, 1998). Moreover, social workers in England are in the process of mastering (due to its fluid, ever changing nature, it can never be fully mastered) the collective tacit knowledge of this community. This form of tacit knowledge is located in the collective, rather than the individual (Collins, 2010). Thus, psychological explanations of gut feeling will only take us so far. We need to acknowledge the vital role social context plays in determining why we might get a gut feeling in response to a situation in the first place. Within this epistemic community, individuals will acquire certain types of collective tacit knowledge which allow them to perform the role of social worker. Importantly, this knowledge is contingent, therefore we cannot say 'do this when x happens' because every situation is different and requires a unique response.

(Mitchell, 2016: 148)

Collins's work on tacit knowledge is useful because it provides a sociological analysis of tacit knowledge, helping to understand gut feeling in this context from a sociological standpoint (Mitchell, 2016). This is not to deny individual tacit knowledge exists; it does, but this should be the focus of psychologists rather than sociologists (Collins, 2013). Further, tacit knowledge is often viewed as rather static and impossible to share, which makes any reluctance about the use of gut feeling in social work understandable (Mitchell, 2016). Yet, Collins's (2010) work illustrates that, rather than being static, tacit knowledge is fluid and constantly changing, and rather than not being shareable, is either difficult or impossible to

explicate. Moreover, the single point that all tacit knowledge shares is that it has not been made explicit – whether it can or cannot is another matter and forms the basis for Collins's typology (Mitchell, 2016). Collins thus sets his typology apart from previous work on the subject because he argues that previous work – by himself, as well as others – either confuse all three or only refer to one type when claiming to cover tacit knowledge in its entirety. For example, he argues Dreyfus's work only covers somatic tacit knowledge, and Nonaka and Takeuchi's (1995) work was narrow because it only focused on relational tacit knowledge (Collins, 2010).

Collins's work has been criticized (see Solér et al, 2013, for a thorough critique of Collins's typology, and Collins's response), and he acknowledges that it is a work in progress (Collins, 2013). Here, it is argued that, just as Beck's (1992) risk society thesis has both laid the foundation for future exploration of risk and uncertainty and has been criticized for being too speculative and individualistic (Lupton, 1999), Collins's typology lays the foundation for a sociological analysis of tacit knowledge, yet is not immune to criticism. For example, Pinch (2013) usefully highlights the inherent tension in Collins's work between his relativist notion of the experimenter's regress (Collins, 1992) (there is no independent way to measure the 'success' of an experiment because it depends on how we measure success) and the more realist typology of tacit knowledge (in simple terms, we either have tacit knowledge or we do not) (Pinch, 2013). Collins (2013) does not view this as problematic because he argues it is a matter of compartmentalization, or shift in attention. We cannot focus on flexibility and affordance at the same time, so we choose which to focus on (Collins, 2013). Here, this focus on affordance – which in this case, might explore who has 'genuine' tacit knowledge and who does not – is not useful. More useful is Pinch's (2013) argument that a more interesting, sociological debate lies in the 'tacit knowledge regress'. In this context, this means: what meanings do participants attach to the form of collective tacit knowledge being studied? Does this have an impact on how they share it with others – indeed, if they can at all?

To summarise, the criticisms of Collins's (2010) typology do not outweigh the power of his work in terms of emphasising the social nature of gut feeling, which has typically been

viewed, at least from the influential dominant EBP perspective, through a rather individualistic lens (Mitchell, 2016). As stated above, it is argued that gut feeling, as participants described it, is a form of collective tacit knowledge (Mitchell, 2016). Before examples are provided, there are two points to make. Firstly, that Collins argues that collective tacit knowledge is not explicable is important, but will be discussed in chapter 7. Secondly, a piece of collective tacit knowledge can also be relational, somatic, or all three (Collins, 2010). What is important here is that that gut feeling as participants described it was always a form of collective tacit knowledge – in other words, it was located in the collective, rather than the individual (Collins, 2010).

### **The social element of gut feeling**

31 out of 34 participants stated that they used gut feeling in their practice, and was a central form of knowledge participants reported using when responding to uncertainty in a profession dominated by risk (Kemshall, 2016; Stanford, 2010; Tanner, 1998; Webb, 2006). 22 participants brought up gut feeling unprompted and 10 participants were asked about their thoughts on gut feeling by the interviewer. One participant stated he did not use gut feeling and is discussed below, and two did not mention it and were not asked. This was due to interviewer error. Gut feeling was a topic that came up in the pilot interviews and was not originally part of the interview schedule. However, by the time of these (15<sup>th</sup> and 20<sup>th</sup>) interviews this topic had been incorporated into the interview questions and therefore participants should have been asked about it. Instead, too much time was spent establishing rapport and gaining trust, which led to the two participants talking at length about other topics when it would have been preferable to interrupt and ask about gut feeling.

Below, it will be argued that gut feeling, as participants described it, was a combination of a physical response to a situation and the collective tacit knowledge that created that response. The focus here is on the collective tacit knowledge component. This is not to dismiss the individual component of gut feeling more generally, which has been referred to

when discussing the psychology literature above. Rather, it is argued that, in order to contribute to existing knowledge on gut feeling in child and family social work, there is a need for a sociological analysis on the subject. This discussion is divided into two sections. Firstly, it is argued that gut feeling as participants described it, is not 'common sense', as some participants argued. Rather, it is collective tacit knowledge that belongs to the specific social work community, although there are at times overlaps between this community and the wider society to which this group belongs. Secondly, two broad, collective themes associated with this form of CTK are identified: 1) uncertainty coming to the fore that has previously been hidden; and 2) incongruence between past experience and the current situation. Firstly, common sense will be discussed.

### **Common sense and gut feeling**

Geertz argues that we should treat:

common sense as a relatively organised body of considered thought, rather than just what anyone clothed and in his [sic] right mind knows...[although] it is an inherent characteristic of common sense thought precisely to deny this and to affirm that its tenets are immediate deliverances of experience, not deliberated reflections on it.

(Geertz, 1983: 75)

Holly spoke about her response to a specific child and their family and made the kind of assertion Geertz refers to above:

I knew it was wrong. I just, I mean – common sense. I knew that this was not – I don't think you even need to be a social worker to know that's not right.

(Holly)

On occasion, a situation may present child abuse so severe that knowledge gained from social work practice experience overlaps with wider societal norms and values. Morality is not the subject of this thesis, although moral judgements are made by social workers (Clifford and Burke, 2004; Stanford, 2010; Taylor and White, 2000; 2001; White, 2011) Collective tacit knowledge in this case is a mix of wider societal norms and values and specific social work knowledge gained in practice.

Mia, a qualified social worker with more than 15 years' experience (see appendix 9.7) referred to knowledge that 'everybody would know':

I always feel I need to challenge myself and check things out with other people if I'm not very sure, but I think...in the past [in a different social work role] I don't think it would just be me having those gut feelings about things. I think, you know, there was nothing guttural about it, you could just see it, you know, and everybody would know it. But I think when you're dealing with more subtle issues and difficulties, that's where maybe somebody else it - wouldn't be a problem for them or it wouldn't be setting off any worries for them.

(Mia)

Mia made a false distinction between what 'everybody would know' was wrong and 'more subtle issues' that require specialist knowledge (Mitchell, 2016). It has been identified within the SSK literature that everything is underdetermined and, importantly, that underdetermination is visible to greater and lesser extents in different circumstances (Demir, 2008). Mia made the false distinction because she only saw the more visible underdetermined knowledge and did not view 'common sense' in the same way because the underdetermination was less visible. The idea that 'everybody would know it' – that everybody would interpret a situation in the same way – is false. Our ideas on what constitutes 'harm', who is a 'child' – these are dependent on time and space (Hacking, 1991).

This perspective, informed by social constructionism, can be accused of relativism. If judgements are always context dependent, do we end up saying there is no such thing as a 'right' or 'wrong' judgement? As stated in chapter 3, Morgan (2016) has argued that accusations of relativism in this context are often illusory. There is no need – and no call for – endless steps to be taken beyond the current argument that ends up at the idea that, in this case, social work knowledge cannot be critiqued. However, as Brown (1994) and Morgan argue, the main point is that:

Far graver danger comes from dogmatic assertions of social truth that claim to have somehow secured access to non-contingent arenas of knowing, forestalling ongoing conversation, and tying future discovery to the limits of current perspectives.

(Morgan, 2016: 1)

It has been argued that gut feeling is not simply common sense, as some participants suggested, but a form of CTK. Participants shared further thoughts on gut feeling and four main reflections on this form of CTK are outlined below. Firstly, however, two broad, collective themes associated with this form of CTK are outlined. The first is uncertainty that had previously been hidden coming to the fore, and the second is incongruence between the current situation and past experience.

### **Uncertainty**

An important theme underlying all participant descriptions of gut feeling was uncertainty. Gut feeling, as a form of collective tacit knowledge, brought to the fore the inherent uncertainty relating to work with children and their families that had previously remained hidden:

I said, I'm really worried about this [case] I just feel [scenario x] isn't going to happen. [I] got a phone call today, can I go ring this person... [because scenario x] isn't now going to happen. So, was it intuition? I would say no because I think it comes on past experiences for me. There were enough flags there, little warning signs that I'd seen previously, thinking, the delays too long, there's no open communication... there's all these little things, and for a while you can go with things and you can think yeah OK, and after a bit you think no no no. And I think it's that, to me, it's unconscious again... that's how I started off this doesn't feel right - but everybody was reassuring me.... Intuition? Where does intuition come from? It comes from life experiences I think and picking up signals and feelings that you've seen in the past.

(Lesley)

Of course, Lesley could never know for certain if a specific scenario was going to happen or not. That is the inherent uncertainty underlying all child and family social work practice; to avoid getting lost in uncertainty it remained in the background. Gut feeling brought it to the fore, and was a tool participants used to decide when to ask questions and when to explore further. This was not possible in every case – it was gut feeling that helped them to make a distinction between 'comfortable' and 'uncomfortable' certainty. Moreover, this was a skill that developed over time. Sharon was asked whether gut feeling was related to past experience:



I think it is there in that moment but I also think your past experiences develop your gut instinct as well. I thought I was quite streetwise when I started...and very quickly realised that I absolutely wasn't. I just thought everybody was the same as me. So, my gut instinct used to be "oh my god" all the time, and then [I] learned over time that just because I thought that was wrong, it wasn't necessarily wrong. So, you do move on and things that shocked me [then] I wouldn't bat an eyelid over now. But I still do have that gut instinct and I don't think that'll ever go away.

(Sharon)

Emily reflected on the difference between her and less experienced colleagues:

I think [specific example of an issue she and colleagues were not familiar with] is a good example of something we hadn't come across until very recently...I think it's that lack of understanding sometimes and that real fear factor of something that you haven't come across before, everybody's blue lights started flashing, everybody's alarm bells were ringing and we suddenly needed to have really urgent [meetings] and a lot of that was about because we don't understand, whereas the impact for this [child] probably was no different to [other more familiar issues]...there was this real need from all of us I think to actually get together, share this and I guess sort of share the decision making, share the risks and try and learn from one another. And that just really made me think, if that did that to us as [senior staff] how must it feel sometimes to a much less experienced social worker who is experiencing something for the first time that we just take for granted. I can understand much more now why workers perhaps do panic, do become really anxious, do need that reassurance, so that was really interesting.

(Emily)

Although Emily did not mention gut feeling specifically (which she did in other parts of her interview), she referred to an example where she did not have previous experience to rely on and how much that affected her and her colleagues' reaction to that case. Emily and her colleagues convened meetings where they shared their knowledge and because this was unusual for Emily, this example implies how much Emily relied on collective tacit knowledge. Emily will have developed collective tacit knowledge over several years and this shows how different her knowledge that she took for granted was to less experienced colleagues who had not yet built up those experiences and would thus require explicit advice on how to proceed in situations that were unfamiliar to them. In other words, the underlying uncertainty participants were 'comfortable' with changed over time, which supports Fook et al's (2000) research. Therefore, what is important and the focus here is

not, for example, what emotion or judgement a gut feeling might refer to, but the overall bringing to the fore of uncertainty that this form of CTK represented.

Extending this argument, how participants reflected on these broad themes differed depending on the extent to which they separated fact and value, which will be explored further in the next section. Here, what is important is that 'gut feeling' identified uncertainty, rather than a specific judgement – it could form the basis for further exploration. This, of course, could be associated with what is called confirmation bias in the psychology literature (Taylor and White, 2006), for example if a feeling that 'something's not right' is acted upon together with disregarding other knowledges that may support another viewpoint. Cook (2017) utilises a psycho-social approach to what she terms 'intuition', arguing that intuition should be a tool social workers use rather than a judgement in and of itself. The data here illustrate this is what many participants aimed for, although Cook goes further and argues that intuition should be used 'as an aid, rather than substitute for analysis' (Cook, 2017: 12). Generally, there is agreement with this perspective here, although there is an emphasis within the analysis here that all forms of judgement, including formal types of analysis, should be subject to equal amounts of scrutiny. Additionally, other research has explored the social element of such biases in child and family social work (for example, Östberg, 2014). In other words, as has been stated above, gut feeling, as a form of CTK, is fallible, and warrants as much scrutiny as any other form of knowledge.

The second theme relating to this form of CTK that 28 out of 34 participants mentioned was incongruence. This is explored in more detail below.

### **Incongruence**

Knowing when something was incongruent was a skill participants shared they learned through practice. Incongruence was firmly placed in the social, rather than in the individual, because it was based on the collective tacit knowledge of this epistemic community. An individual who has little knowledge of how a home visit might be carried out, for example,

would not know what might be considered 'out of place' in this type of work. Violet gave an example of the disparity between what was said and unsaid, which led to a gut feeling:

I suppose sometimes you'll just walk into a home and you'll know by the atmosphere or you'll know how a child and a parent interact with one another. A child might be saying they're really happy but you can tell by the interaction that there's something not right.

(Violet)

Grace also linked getting a gut feeling with a difference between verbal and non-verbal cues when working with a family:

I think I always got a feeling that there was something...like we said before about what the family's telling you and what you actually observe, you think that they don't match up, and you think that maybe what the family's telling you, you feel that it's not true and that they are lying to you. That's what I always felt there.

(Grace)

Mia referred to what led to 'little early warning indicators beeping away':

Sometimes it's straightforward because what people are saying and the way they're saying it—sort of like the non-verbal way they're saying it—actually there's no incongruence with that. But then occasionally I'll visit families where I feel as if what they're saying and the way they're saying it is not congruent and that's when I probably, my little early warning indicators kind of like start beeping away...because I start noticing things that don't seem quite right. And that's when I'll probably ask more questions, but maybe still come away not feeling one hundred per cent confident with the information I've been given. And think about whether that's going to be something that's going to be problematic later or not.

(Mia)

Mia only knew something was 'incongruous' through her practice experience and knowledge. This supports Collins's (2010) point about the social nature of tacit knowledge. Thus, in this context, gut feeling is not 'natural' or located in the individual—it is learned through language and practice in specific epistemic communities (Collins, 2011). Moreover, collective tacit knowledge is infinite and constantly changing, so the mechanisms of why a social worker might get a specific gut feeling in any given context are not explicable. Thus, collective tacit knowledge can be acquired through emersion in the social work sphere, but Collins argues that it cannot be fully explicated due to its fluid, contingent nature.

Simon also shared the signals that might trigger a physical response:

You would look at your interactions within the family, the home conditions...you'd bear in mind is it an announced visit is it an unannounced visit, take it from there, and your gut reaction for me is quite important, because I'm immediately thinking is this as bad as they [referrer] make[s] out? What are the things that are going wrong here, what are the positives, what are the negatives, you know, what needs to change, or does anything need to change?

(Simon)

Olivia was quite specific about signals that she looked out for when working with children and their families:

I think it's how they [service users] relate to you. Eye contact. How relaxed they are in your company. How often they keep distracting you from a certain question. Or they repeatedly answer in the same way and will not move off of a topic and sort of like stay with what they think are safe topics. They will disclose something quite minor so you don't look at the major thing.

(Olivia)

Olivia would not have known that 'staying with safe topics' was meaningful without her emersion into the social work sphere through practice. This is what all the examples of signals leading to collective tacit knowledge had in common – they were only considered signals and prompted a physical response because those participants had built up experience in this epistemic community. Again, it is the collective tacit knowledge that led to the physical response that is the focus here. As Lesley articulated, she collected these signals over time and used them to inform her response to uncertainty. It is important to note that normative judgements are not being made about whether the use of such signals that prompt a physical response that participants call 'gut feeling' or 'intuition' is 'good' or 'bad' and might lead to 'right' or 'wrong' judgements. Rather, it is just as fallible as any other form of knowledge.

It has been argued that incongruence is only viewed as such because participants described responding to verbal and non-verbal signs in such a way due to their immersion in the social work community. This is not to completely dismiss the individual, psychological nature of a feeling, or 'early warning indicator', as Violet put it. Rather, an emphasis is placed on the

social nature of this knowledge, and sociological theory is used to understand their reflections on such knowledge and how such knowledge might be shared with others.

Even Stuart, who, as stated above, was the only participant to say he did not use gut feeling and did not agree with its use in practice, referred to incongruence:

Listening to the families themselves, kind of picking out key information and whether that matches the picture that I've got...Say for example I'm doing a parenting assessment or I'm doing a piece of work, I build up a series of assessment sessions with that member of the family. So, this will be making sure that as we're going through that process what they're saying to me fits with what I've already got and if it's not, speaking to them about that. Starting from a position of querying information.

(Stuart)

Incongruence helped Stuart decide what knowledge to pursue further. Although Stuart was not comfortable with the term gut feeling, he used the same techniques other participants used but responded to the term 'gut feeling' and its associations differently. Again, incongruence brought uncertainty to the fore. And how did participants assess what is incongruent, and whether this is problematic or not – in other words, why did they get a 'gut feeling' about one piece of knowledge over another? Because of their immersion in the social work community. Further, the way they did so depended on their level of immersion.

It is also interesting to note here that sometimes risk was referred to when these broad themes were discussed, other times not. It has already been identified in chapters 2 and 3 that risk is the dominant response to uncertainty in child and family social work. Simply because participants did not mention risk every time they referred to uncertainty coming to the fore or incongruence does not negate the importance of risk in this epistemic community. What it does suggest is that gut feeling is a central form of knowledge used when responding to uncertainty in a profession dominated by risk (Kemshall, 2016; Stanford, 2010; Tanner, 1998; Webb, 2006).

Participant reflections on gut feeling are discussed below. It has been identified that gut feeling is a form of collective tacit knowledge, therefore it will be referred to it as CTK from this point onwards.

## **Participant reflections on collective tacit knowledge**

It has already been established that 'novice' and 'expert' decision making is different within child and family social work. For example, Drury-Hudson (1999) found that student social workers drew on different types of knowledge when making judgements and decisions. Fook et al's (2000) influential study distinguishes between 'experienced' and 'expert' social workers, highlighting that length of service does not necessarily equate to being an 'expert' as they define it. Here, the focus is not on how one acquires knowledge, or even how one learns to share knowledge, but how differences in the meanings attached to knowledge impacts on the strategies used to share that knowledge with others. Therefore, although it is identified below that participants reflected on this form of CTK in different ways depending on their level of seniority and nature of their professional experience, this is not surprising. What is original, and important, is that differences between participants were underpinned by the extent to which they separated fact and value. Participants have been grouped into four main ways of reflecting on CTK. The four types of reflection are 1) binary; 2) ambivalent; 3) pragmatic; and 4) reconciled. These are also referred to as participant approaches to knowledge, due to the importance of the conceptualisation of fact and value by participants here. As stated in chapter 4, the categories are not mutually exclusive.

### **Binary reflections**

7 of the 32 participants who discussed gut feeling are categorised as reflecting in a binary manner on this form of CTK. Of these 7, 5 were unable to articulate what they meant by 'gut feeling', although all 5 felt it was a significant part of their practice. Of these 7 participants, 3 were unqualified social workers, and of the 4 who were qualified, 2 worked in roles that did not require a social work qualification. As will become clear, the more senior a participant, the more likely it was that they reflected in pragmatic or reconciled way to CTK. Moreover, the nature of professional experience was more important than the

length of experience. For example, all unqualified participants had over 10 years' experience, yet most of these participants reflected on CTK in either a binary or ambivalent way. Although the small numbers in this study prevent wider claims being made on the basis of the data, it is clear that the more senior a participant's place in the social work hierarchy, the more likely they were to reflect to CTK in a reconciled way in this study, and vice versa. As stated above, this is unsurprising considering existing literature on the subject, and it is not a central feature of the analysis due to the focus on knowledge sharing rather than knowledge learning.

Two of the participants in this category (Peggy and Stuart) stated they did not use this form of CTK in their practice. This will be discussed in more detail below, but what all participants in this category had in common was a strict fact/value distinction that influenced their reflections on CTK. First, the 5 participants who did use CTK but, understandably, found it difficult to articulate what they meant by 'gut feeling' are discussed:

I think you just get a feeling from talking to people, I think it's just hard to quantify really. But obviously, you get a lot from the way they talk to you - some people get quite emotional and upset so you know there's a lot going on for them to affect them that way. I don't know what else to say really.

(Adam)

Ava, when asked directly, said she had only used her gut feeling 'once', and gave an example:

I've had one gut feeling and it was regarding ...Yeah it was quite bizarre that. And I did feel a bit unsettled about that and I remember reporting that back... So yeah that's the only time. I just felt something.

Ava later said:

I've always gone with my gut feeling.

(Ava)

Ava used 'gut feeling' to mean different things. In the first case, she linked it to uncertainty about a case that did not get resolved. In the second, she used 'gut feeling' to refer to a general response to working with children and their families. Ava thus had conflicting views about this form of knowledge, although it was linked to the broad themes outlined above.

Further, Ava and other participants placed in this category sometimes referred to a lack of confidence in their own judgement, relying on others to guide them.

Another point to make about those reflecting on CTK in a binary way is that they had complex expectations about what this form of knowledge could achieve. For example, sometimes it was associated with certainty, at other times, uncertainty. This demonstrates a lack of clarity on the meanings they attached to this form of knowledge. For example, Ava, above, used 'gut feeling' to refer to two things, one of which was general unease and uncertainty. Molly, on the other hand, gave an example where she seemed to equate gut feeling with a level of certainty:

I think it [gut feeling] is quite central yeah...I've worked a domestic violence case and my gut feeling was that the mum was still seeing the partner and letting the partner in the home, that was my gut feeling, and she was. Yeah.

*Interviewer:*

Can you think of what made you have that feeling?

*Molly:*

The way mum was minimising. Minimising the DV [domestic violence] ...little masculine things around the home. But mainly I would say mum minimised thing[s]. Because I knew how bad the DV had been and it might have been that she had no choice to let him in, you know, maybe bullied his way in but I knew, something was telling me he was coming in that house.

(Molly)

Molly was referring to the link critics of this form of CTK may make between this form of knowledge and being 'right' or 'certain'. Therefore, whilst the participants in this group made a stark distinction between fact and value, they were less clear about whether this form of CTK referred to 'knowing' something – being certain – or a general sense of unease and uncertainty. That is not to say participants did not refer to the broad themes associated with CTK that have been outlined above. Rather, their expectation of whether CTK should be 'right' or 'certain' at some point was underpinned by this distinction between fact and value.



This is a criticism Stuart, who was one of only two participants who said they did not use CTK, made about this form of knowledge. Although it has been identified above that Stuart's views on CTK are based on his definition of the term 'gut feeling', Stuart's and Peggy's (who also said she did not use this form of knowledge) reflections are explored further here. This is because even though they defined CTK in a different way to other participants, they did in fact reflect on this form of CTK in a binary way. Peggy reflected on the term 'gut feeling':

It [gut feeling]'s not something I follow, really. No, it's not something I follow gut feelings because sometimes they're wrong, sometimes you're sure that it's completely different...you may...suddenly get some more information it, puts a whole twist on it. So

*Interviewer:*

So, what do you follow instead? You know, some people talk about – 'oh yeah I use my intuition, my gut feeling', what do you work on? -

*Peggy:*

I suppose yeah you could call it gut feeling but it's information, and it's the people, it's the way they are, how they tell you things, what they've told you, it's listening to what the other person tells you and making a connection with that and finding out - not who's telling the truth but who's putting a bit of a bias on it for their own ends and things like that and the reasons why...keeping an open mind. Because I worked with a family once and it appeared that [parent] was really controlling, and that I remember once when I was leaving [parent's partner] was saying to them "I told [Peggy] this and I said this" as if to say, look this is what I've said to [Peggy] and this is the story I'm telling and so I thought oh that's fine. I went to see [relative] and it's completely different, [parent's partner] was the one who controlled everything and [parent] was clarifying what they said was ok...so no, you can't use, gut feel- you have to have facts don't you?

(Peggy)

Initially, Peggy stated she did not use 'gut feeling' and then went on to describe what she did use. She referred to similar themes other participants used when reflecting on this form of CTK. Peggy defined CTK as a type of knowledge that was fallible and this for her was a failing, whereas 'facts' were not fallible, they were objectively 'true' and were thus an acceptable form of knowledge. Thus, Peggy was making a distinction between fact and value that led her to minimise what she considered to be value-laden knowledge, such as

CTK. However, her presumption regarding which family member was in 'control' in the above instance was related to deeper complexities surrounding how domestic abuse is defined and related stereotypes. To summarise, Peggy still reported using CTK. However, due to her (understandable) reluctance to acknowledge the role values played in her judgement, she minimised this form of knowledge. Therefore, CTK had the potential to be less visible in her practice, particularly in terms of knowledge sharing. Visibility will be explored further in chapter 7.

Stuart was also critical of CTK:

You do hear it [gut feeling] bandied about a lot...I'm not really so sure because I don't know if it's, something I really act on a gut feeling... I might be troubled by something I see in a house but I would be able to sort of rationalize it and investigate it you know if I think there is something going on or if I had any concerns I would come back and talk to my manager try to get more information, look at all the evidence we've got but...I think gut feeling is one of those things that people talk about but perhaps it only comes true for them maybe like one in ten cases when there really was something and that's not really for me a very efficient way of working...so I think myself I'm not really a person that goes along with gut feeling.

(Stuart)

Again, what was of primary importance for Stuart was whether 'gut feeling' was 'right' or 'wrong'. Stuart implied that rational thought was superior and that CTK was 'unscientific'. Casting a critical eye on this form of reasoning is, of course, vital and Stuart's reference to hindsight bias is useful. However, Stuart was critical of this form of CTK because of his emphasis on a divide between 'rational' and 'non-rational' thinking. Stuart voiced concerns about accepting 'gut feeling' at any cost, and not subjecting it to scrutiny. But dismissing it entirely, and defining one form of reasoning as inherently 'wrong' and other ('rational') forms 'right', meant he may have found it difficult to understand what others mean when they shared knowledge with him.

Stuart and Peggy's examples illustrate that whether or not participants stated they used this form of CTK was a matter of definition. Stuart and Peggy's view of CTK was based on whether it was inherently 'right' or 'wrong' or biased or unbiased. Therefore, they shared the same trait as the other participants in this category. That is, they created a strict divide

between fact and value, which either led to, as in Stuart and Peggy's case, thinking CTK was not fit for practice, or, as for the four other participants in this category, lack of clarity on what CTK meant to them and whether they should use it at all. Both reflections render this form of knowledge less visible, the consequences of which will be explored in chapter 7. Ambivalent reflections on CTK are explored below.

### **Ambivalent reflections**

8 participants are categorised as having an ambivalent response to CTK. Out of those, 2 were unqualified. Of the 6 qualified social workers, 5 were level one social workers and one was a level one manager (see appendix 9.7). Like those with a binary response, they found it difficult, understandably to articulate what they meant by 'gut feeling'. However, these participants reflected on this form of CTK and the place it had in their practice. From the examples participants gave, they acknowledged the inherent uncertainty of their work and used CTK in practice whilst recognising that this knowledge was also fallible. However, they could not yet reconcile this with their view of what constitutes evidence, which they viewed as different. Therefore, they were still making a fact/value distinction but were more ambivalent about this than those in the first category. Grace questioned what she meant by the term 'gut feeling':

Does that gut feeling come from all the other bits of information that you've been fed about the family and then from your previous visits is that where you're getting that gut feeling from, or is it because you're uncertain about things, so you just think 'I can't pin it down, there isn't like evidence, but I just get that feeling because of all the other bits of info that you've been given?

(Grace)

Grace understood that 'gut feeling' is not straightforward but was unclear about how she thought she should respond to it. This was reflected in her uncertainty about her judgement:

I was a bit worried about a family smoking cannabis and I thought can I smell it or can't I smell it or is that cannabis? One time on a visit I saw a needle and it wasn't a drug needle it was for [medical use] but I initially thought it was a drug needle you know, so you, you question yourself and think is that or...

Grace was aware of the inherent uncertainty underpinning her practice but did not go further than this acknowledgement. Holly also shared what she meant by 'gut feeling':

I don't know; you just know it in yourself. If you walk out that house thinking I don't want to leave them there, I don't feel that's safe or they don't look happy today. I mean in one case I had I could see it in the girl's eyes I could see the sadness I could just see it and I thought that isn't right. And your gut feelings are - there's got to be something more I can do, there's got to be, she's not a happy child, and you can see it. And you get that feeling. I think if you don't feel safe either how can they feel safe in that house. It's just a feeling.

(Holly)

What is interesting here is the marked difference, for Holly, between this and evidence:

I think direct work with the children is a good piece of evidence. Actually getting the child's views and feelings and wishes, I think that's a strong piece of evidence...I mean that's a tiny bit of it but I think if they say, I don't know, for an example - I hate living at home because my daddy, he's always beating up my mum - well that's a massive piece of evidence...I think to bring their voice into your statement's massive I think that's really important. I mean evidence, I don't know, from the police, how many times they've been called out to an address...evidence to say that the kids haven't attended school for... I think it's having your concerns supported by other professionals, do you know what I mean? To say that school have reported that they have not been in school for de de de, they're unkempt, they smell, they've got head lice...obviously a really good piece of evidence is the chronology to submit with that, along with your statement.

Evidence is explored further in chapter 6. Here, what is important is that Holly seemed clear that gut feeling was part of her practice and she was happy to use it. But when it came to evidence, she gave examples that did not have anything in common with her view on gut feeling, which she reported using to form judgements in her practice. CTK was viewed as a 'grey', uncertain area whereas evidence was clearer and more certain. It was not only this apparent contradiction that made her response ambivalent. It was that she did not acknowledge this contradiction, or reflect upon it. This is not a value-based criticism of Holly. Rather, this was the way she reflected on a complex term.

Overall, participants with an ambivalent response to this form of CTK could articulate what this form of knowledge meant to them to an extent. However, understandably, they often contradicted themselves and made a significant distinction between evidence and this form of CTK, which will be discussed further in the next chapter. This distinction also reinforced the dominant EBP hierarchy of knowledge in a similar way to those with a binary response. The pragmatic response to this form of CTK is explored below.

### **Pragmatic reflections**

9 participants had a pragmatic response to CTK. They could articulate what they meant by the term 'gut feeling' and identified some differences between how they viewed CTK and evidence, but, importantly, they did not think this was problematic. Moreover, they all used 'scientific' language to describe this form of CTK and emphasised that CTK often highlighted uncertainty, rather than being a judgement in and of itself. Of the 9 participants, 1 was unqualified and of the remaining 8, 4 were level one social workers and 4 were level two managers (see appendix 9.7).

Mia articulated what she meant by 'gut feeling' using 'scientific' language:

I kind of do know what it means now...In our lives generally we have so much sensory information that we're receiving all the time that what we do is completely filter out all the stuff that's regular and normal, because we couldn't cope with everything. And what happens when we see or hear something that's slightly abnormal or out of the ordinary, it sets off a stress reaction in our body. And what we do - hence the term gut instinct - because one of the first things you might feel is like a little flutter or something like that that's not quite right. And that really kind of makes me feel as though there's some scientific basis to having a gut instinct, because what you're noticing or hearing is that something is incongruous. And I think that's really useful thing for social workers to know. That what they're noticing is that something isn't quite right with what they're seeing or hearing and that's what I think gut instinct is about.

(Mia)

Mia thought it was acceptable to use CTK because there was 'some scientific basis' to it. She also emphasised incongruence, which has been explored above. Moreover, even though Mia referred to the 'scientific' nature of CTK, it does not mean she thought of it as

a cure for uncertainty. Rather, it was viewed as something to take note of – a tool, amongst others, to explore a situation further. Margaret could also articulate what she meant by ‘gut feeling’:

*Interviewer:*

Some people talk about gut feeling or gut instinct in social work. What do you think it means, is it important for you and do you think it has a place in your work?

*Margaret:*

Yeah, I do actually because I don’t think it’s a gut feeling, it’s, you’re responding, maybe physically, certainly mentally, to kind of unconscious information that’s coming into you. So, when you go out of a house and go mmm, something not right, and you might in the back of your mind come up with something and say yeah that was a bit odd, what was that room with that shut door you know, could I hear a dog in there or what was it, and you think right next visit I’ll check that out or I’ll ask about that. But sometimes you literally don’t know and you’re pretty certain that things are not as they seem. Particularly in very tidy nice houses, where there’s been lots of in and out [of being involved with statutory services] and concerns.

(Margaret)

Margaret stated that gut feeling was a response to ‘unconscious information’. This is a question of labelling. Margaret did not want to label this response as a ‘gut feeling’, but what she described is the same form of CTK other participants were happy to call ‘gut feeling’. Lesley also used ‘scientific’ terms:

You’ve got to go beyond that [past experience] because you can’t always rely on your past experiences, and it’s almost like there’s predictions that you know and then finding out whether those predictions then come to fruition. And if they don’t, then I would need to know – oh - I was offline. But then if it has, then... obviously, the little red flags that I’d thought about and analysed were correct. So, it’s like having a theory isn’t it, and you’re proving it or disproving it.

(Lesley)

The key difference between the first two groups and those who had a pragmatic response to CTK is that this group had a less rigid view on differences between fact and value. However, although participants in this group did not make as rigid a distinction between fact and value as those with a binary or ambivalent response to CTK, they did use ‘scientific’ language to ‘justify’ their use of gut feeling – to themselves as well as others. CTK for these

participants was acceptable because it was as scientific as, for example, rational thought. Thus, although viewing CTK as an acceptable form of knowledge might be interpreted as a challenge to EBP, it reinforces the sense of some knowledge being more acceptable than others based on the EBP hierarchy of knowledge. It is only those with a reconciled response to CTK who did not adhere to this hierarchy.

### **Reconciled reflections**

8 of the participants are placed in this category. That a significant number of participants were more comfortable with uncertainty and ambiguity is perhaps unsurprising, considering they were willing to take part in reflective, one-to-one research on their practice. All 8 were qualified and 7 of those were social work managers. Those with a reconciled response to CTK acknowledged the overlap between fact and value. They were clear about the meanings they attached to the term 'gut feeling', had reconciled their use of this form of CTK in their practice and did not expect CTK to provide certainty. Moreover, they viewed all forms of knowledge as fallible – questioning both 'evidence' and CTK. Beatrice explained why she was cautious in her use of CTK:

I think the only thing you've got to be careful of is the more experienced you get you don't judge on everything else you've seen. And I think that can be one of the mistakes to make in that, ooh it's just like this, it's just like this, I've done [this] before...you can't just go on that, just because you get that feeling, it doesn't mean it's like every other time you've had that feeling before. You've got to do a lot more than just [that], but it might make a difference between going back on another visit and not though.

(Beatrice)

Beatrice defined CTK as another 'tool in the box' – it was not viewed as sufficient alone and she did not equate it with certainty. Simon also talked about the fallibility of CTK, using broader examples:

*Interviewer:*

What do you think causes you to have a gut instinct, what is it that you're drawing on that brings that gut instinct to the fore?

*Simon:*

I think you draw on your own experience, you draw on your own values, draw on the culture of your organisation, which if you've been in an organisation long enough, value becomes quite embedded in you, as that sense of...what is right and what's wrong, what's acceptable and what's unacceptable, that brings in the notion of thresholds, what is acceptable to me would be different to somebody else going into a family. They say well no, I disagree, I think, I might say home conditions are OK, another social worker might say...I think we should go to a legal meeting.

(Simon)

That those with a reconciled response to CTK were comfortable using this form of knowledge in their practice did not mean they were uncritical of this form of knowledge. They were critical of CTK, but there was a difference between them and Stuart and Peggy, who were also critical of CTK. The difference is they applied this critique to evidence as well as this form of CTK, and just because a form of knowledge was fallible, did not mean it could not be used critically. It was this acknowledgement of the uncertainty inherent in all forms of knowledge that was a key feature of the reconciled response to CTK. For example, Emily thought it was important to explore 'gut feeling':

Sometimes it's exploring with people why they had that feeling, because...when you explore it with people sometimes they can explain what - there are things that they can think about that actually caused that gut feeling. And sometimes you just do have to explore it a little bit further but sometimes you have to find the evidence to either back up your gut feeling or not. As the case may be really. But I don't think you can ever dismiss it out of hand but it has to have some evidence to go alongside it before you can progress. But sometimes it's that work on your gut feeling can be what you need to do. But not to do it in that kind of way where everything you do confirms that because sometimes you can go along on that conformational bias can't you and just look for your evidence to confirm your feeling. So, it's about using those discussions, using supervision to just explore that and reflect on that and encourage workers to do that.

(Emily)

Making less of a distinction between fact and value did not mean those with a reconciled response viewed CTK and evidence as the same thing. These differences will be explored further in the next chapter. Further, whether what participants said they would like to happen in practice occurs when social workers are short on time and resources is a separate



issue. Nevertheless, the meanings attached to CTK that those with a reconciled response to CTK reported were very different to those with a binary response, for example. The main difference between participants with a reconciled response to CTK was underpinned by their lack of distinction between fact and value, which led to them questioning and exploring all forms of knowledge, as Emily did above. This approach is thus the only one that challenged the EBP hierarchy of knowledge, where fact and value are separated. This means that, when discussing informal knowledges, such as this form of CTK, clarity is required on what exactly is meant by terms such as 'gut feeling'. Further, the data imply that there may be commonalities – and differences – in how child and family social workers respond to such terms depending on the extent to which they separate fact and value. This is important because the meanings participants attached to this form of CTK then affected how and if they shared this knowledge with others, which is explored further in chapter 7.

## **Conclusion**

Extensive literature exists on gut feeling and expertise. For example, drawing on Dreyfus and Dreyfus's (1986) account of knowledge acquisition, Fook et al (2000) argue that intuition is a key part of expertise in social work and that the move from novice to expert involves the development of intuition. However, Collins (1990) criticises Dreyfus and Dreyfus for not acknowledging the social context of intuition, arguing that the shared meanings or the 'knowledge context' intuition is based on are ignored (Fook et al, 2000). Moreover, research on gut feeling that focuses on the individual, for example Gigerenzer (2007), has been used by some to argue that it is inherently biased and therefore not a form of knowledge that should be used in social work (Helm, 2010). However, it was clear from participants that 'gut feeling' was a form of knowledge they used regularly and therefore warranted further exploration.

The complex question of how participants defined gut feeling has been separated into three parts and includes the meanings attached to this form of knowledge. Firstly, a sociological analysis has identified that 'gut feeling', as participants describe it, is a form of what Collins (2010) has called collective tacit knowledge (CTK). This analysis is underpinned by Kusch's

(2002) communitarian epistemology in the sense that CTK can only be understood in relation to participants' membership of the social work community. This is important because it adds a sociological dimension to our understanding of informal knowledges in child and family social work, arguing that 'gut feeling' should not be dismissed simply as individual bias, as well as better understanding when and why participants draw on such knowledge in the first place. It therefore builds on the influential work of Klein (1998) by moving beyond Klein's rather individualistic approach and emphasising the social nature of what participants called 'gut feeling'. This analysis also provides much needed detail on exactly what is meant by such a term, identifying that this form of CTK cannot be dismissed as 'common sense' – something that 'everyone' in England would know. Defining CTK as 'common sense' renders invisible the knowledge specific to this epistemic community that constitutes this form of CTK.

Secondly, two main themes associated with this form of CTK were identified as uncertainty and incongruence. CTK brought to the fore the inherent uncertainty relating to work with children and their families that had previously remained hidden; it was a tool participants used to decide when to ask questions and when to explore further. The second theme associated with this form of CTK was incongruence, and the data illustrated that knowing what is incongruent can only be learned through practice. Thus, in this context, gut feeling is not 'natural' or located in the individual—it is learned through language and practice in specific epistemic communities (Collins, 2011). Participants identified gut feeling, conceptualised here as a form of CTK, as a central form of knowledge used when responding to uncertainty in a profession dominated by risk (Kemshall, 2016; Stanford, 2010; Tanner, 1998; Webb, 2006).

Finally, the four main ways in which participants reflected on CTK have been identified. Participants' reflections were differentiated by the extent to which they separated fact and value. It has been identified that it was these reflections on this form of CTK that affected the way participants shared such knowledge with others, which is discussed in chapter 7. 5 of the 7 participants who reflected on CTK in a binary manner found it difficult to articulate what they meant by the term 'gut feeling' and all 7 made a strict distinction between fact

and value. Although sharing the common themes associated with this form of knowledge identified above, the 5 participants in this group who stated they did use this form of CTK had conflicting expectations of whether certainty could, at some point, be achieved through gut feeling. The 2 who stated they did not use this form of knowledge were referring to their concern about the fallibility of CTK, reflecting their strict distinction between fact and value.

The 8 participants who reflected on CTK in an ambivalent manner also found it difficult to articulate what they meant by 'gut feeling'. These participants had the ability to reflect on this form of CTK, its fallibility and the place it had in their practice but struggled to reconcile this with EBP's narrow definition of evidence. Again, they made a distinction between fact and value but reflected on this divide and CTK itself in a different way to those with a binary approach. The 9 participants who reflected on CTK in a pragmatic way were more detailed in their reflections, providing clarity about what they meant by the term 'gut feeling', stating that it was a tool that highlighted uncertainty rather than a certain judgement. Interestingly, underpinning this type of reflection was a divide between fact and value. This was because this group used 'scientific' language to justify their use of CTK thus reinforcing the existing EBP knowledge hierarchy. It was only the 8 participants who reflected on this form of CTK in a reconciled manner who did not make a distinction between fact and value. They were clear about their reflections on 'gut feeling', had reconciled their use of CTK in their practice and did not expect certainty from CTK. Crucially, they viewed all forms of knowledge as fallible – questioning both 'evidence' and CTK.

Overall, the extent to which participants separated fact and value underpinned their interpretations and expectations of gut feeling, identified as a form of CTK. It has already been identified by Fook et al (2000) that level of seniority and nature of professional experience affects how 'comfortable' social workers are with uncertainty. Sternberg (1999) has also identified that individuals at different levels of hierarchy have different tacit knowledge. Therefore, it is unsurprising that this was also the case here. However, the thesis focuses on how knowledge is defined and the strategies used to share knowledge, rather than knowledge learning. Participants with a binary or ambivalent response to CTK

did not acknowledge the uncertainty inherent in all their work with children and their families, and had conflicting expectations about whether this form of knowledge could lead, at some point, to certainty. Whereas those with a pragmatic or reconciled response to CTK – to lesser and greater extents respectively – acknowledged that any type of knowledge that is a response to the lives of children and their families is inherently uncertain.

Therefore, an important contribution to existing literature is that the extent to which participants separated fact and value linked to whether they were more at ease with the use of CTK, and associated uncertainty. Moreover, participants who did not make a clear distinction between fact and value were not just comfortable with uncertainty, but aimed to incorporate uncertainty into their very definition of gut feeling, including the meanings they attached to this form of CTK. Therefore, the findings not only reinforce that social workers act differently, as Fook et al (2000) have identified, but that they attach different meanings to knowledge depending on the extent to which they separate fact and value. These differences also form the basis for the analysis of how they share knowledge with others, which is the subject of chapter 7.

A different question relates to the debate resulting from White (2009; 2011) and Spafford et al's (2007; 2009) work is whether the uncertainty included in the meanings some participants attached to CTK remained visible when sharing knowledge with others, which will also be explored in chapter 7.

## **Findings and Discussion Chapter Six – Constructing Evidence: Key Features and Reflections**

### **Introduction**

In this findings and discussion chapter, evidence, a formal type of knowledge, is explored. What is meant by the term evidence will be explained by referring to existing literature on the subject. There are three main original contributions to knowledge in this chapter. Current research on evidence in social work explores the term in relation to EBP and

whether this is implemented in practice. The first contribution is that how participants defined evidence more generally, rather than in relation to the implementation of EBP, is identified, which adds to existing literature on the subject and helps provide clarification on what is meant by an abstract, ill-defined term. Secondly, the complex question of how participants defined evidence is explored in two ways. Firstly, it is identified that evidence was used as an umbrella term to refer to any knowledge that had the potential to promote change for children and their families. Three main examples of such knowledge provided by participants are physical and environmental observation; the child's voice; and parental engagement. Knowledge associated with change was viewed as closer to certainty and objectivity. What was missing from participants' discussions about evidence – research – is also explored. An initially surprising finding identified here is that participants provided a narrower definition of evidence than the EBP approach, and reasons for this are explored. Finally, participants' reflections on the knowledge associated with evidence are identified. The four main ways of reflecting on knowledge outlined in the previous chapter are used to explore how participants reflected on evidence and are differentiated by the extent to which participants separated fact and value. It is argued that the findings a) add to existing literature on how evidence is defined by social workers themselves; and b) identify a particular gap between research and practice relating to the meanings attached to the term evidence.

Firstly, there is a summary of existing literature on the subject provided in chapter 2.

### **EBP and evidence: a summary of the literature**

In chapter 2, the wider debate in Anglophone countries on the nature of expertise and society's changing response to experts in late modern society was described. This was linked to current debates in child and family social work on what constitutes evidence in this epistemic community, with dominant (EBP) narratives supporting a narrow, homogenised view of knowledge, with the power relations inherent in who decides how evidence is defined often being ignored (Taylor and White, 2000; 2001). EBP is extensively

debated in the literature in relation to many different occupations, such as medicine (Batista et al, 2016; Rosemann and Chaisinthop, 2015), nursing (Scott-Findlay and Pollock, 2004); probation (Trinder, 2000) and education (Hammersley, 2000). In the social work literature, (for example, Drisko and Grady, 2012; Gray et al, 2009; 2014; 2015; Sheldon, 2001; Trinder, 2000; Webb, 2001), debates centre around how to define EBP, how to implement it and whether it should be implemented at all. For example, Parkhurst and Abeysinghe (2016) argue that what constitutes 'good' evidence in public health and other areas of social policy should be based on 'appropriateness', rather than the hierarchy of evidence currently in place in EBM and EBP.

While there is agreement here that presenting a dichotomy between EBP and what might be called practice wisdom is not particularly helpful (Evans, 2015), there does seem to be a consensus in the literature that social workers do not implement empirically-based approaches into their practice (Gray et al, 2014; 2015) and organisations generally do not facilitate the use of EBP in practice (Barratt, 2003; Gray and Schubert, 2012). However, whether this is viewed as a fundamental problem with EBP (Webb, 2001) or a difficulty that can be overcome with improvements to practice (Gambill, 2006; McCracken and Marsh, 2008; Sheldon, 2001) is contested. Moreover, social workers define EBP in different ways (Avby et al, 2014) and what constitutes evidence is itself contested (Gray et al, 2009; 2014; Webb, 2001). Indeed, claims about misunderstandings are made on both sides, with some proponents of EBP arguing that critics of EBP misrepresent both practitioner thinking and EBP itself, as McCracken and Marsh (2008: 301) emphasise the importance of 'practitioner expertise reflection and critical thinking' when implementing EBP. This is a misunderstanding of the main criticisms of EBP, which are based on the nature of evidence, the knowledge hierarchy and the wider social context, including power relations, that impact on who decides what is 'good' or 'bad' research and overall what constitutes what is 'good' or 'bad' practice (Taylor and White, 2000; 2001).

There seems to be a tension, then, between debates and recommendations in the literature and what then gets relayed to practice. This is a common problem which the knowledge management literature explores (for example, Rouse, 2004; Spyridonidis and Currie, 2016)

and research also exists on the gap between research and practice in child and family social work (Gray and Schubert, 2012). That how we define evidence is political is also clear from the *Re B-S (Children)* [2013] EWCA Civ 1146 judgement, where social workers were criticised for not presenting evidence ‘correctly’. The question here is: how did participants respond to these complexities in terms of the meanings they attached to the term ‘evidence’? It has been argued that participants reflected on CTK differently depending on the extent to which they separated fact and value. Was how they defined evidence, and their response to it, similarly complex?

In order to explore these questions, the meanings social workers attached to the term evidence were explored more deeply, rather than observing what impacts practice and asking the question in the explicit context of the implementation of EBP. Barratt, for example, found that ‘evidence from published research, locally collected data and the accumulated views of service users were the three examples of evidence that had the greatest influence on decision making in their agencies’ (Barratt, 2003: 145) and that some practitioners questioned what constitutes an expert. However, Barratt defines the three examples as evidence herself – but what do social workers think? Further, Barratt (2003) and Avby et al (2017) have identified that social workers use different types of evidence to support their judgement and decision making, with Avby et al (2017: 51) finding that ‘research-based, practice-based and ordinary [often tacit] knowledge’ were used by participants, with practice-based knowledge privileged over other forms of knowledge, such as research. How do social workers respond to these complexities? Do they define all three types of knowledge that Avby et al (2017) describe as evidence? These are some of the questions this chapter explores. Firstly, how participants define evidence is discussed.

### **What knowledge did participants associate with evidence?**

#### **Evidence and change**

For participants, the overall theme related to evidence was change. Evidence was used as an umbrella term to refer to any knowledge that had the potential to promote change for

children and their families. If a piece of knowledge met certain criteria (outlined below) it could be placed in this category. Evidence was associated with movement between levels of decision making, such as 'up' to a referral to statutory children's services teams, or simply any knowledge that warranted a discussion with a senior colleague:

I said right, I'm [taking this child and their family to a higher level of decision making] because we went out and did that, she engaged with this but didn't do that and she's now got a black eye and the health visitor said this and I've been to try and see her. She won't let me in twice, I can't get through. Right, that's absolutely fine...absolutely no problem because it has all been covered.

(Gilly)

Well there's the obvious things – if the child isn't thriving or has injuries that moves it up definitely.

(Salima)

These two examples, which are discussed further below, demonstrate that evidence for participants referred to any knowledge that could move knowledge potentially more smoothly between levels of decision making when shared with others. Gilly shared her view that the knowledge she referred to would be 'absolutely no problem' because it met the criteria for being deemed by others as 'evidence'. Defining evidence was not only about the individual participant's definition of evidence, but the assumptions they made about how other social workers defined it. Thus, the data illustrate that defining evidence is a social process based on constant assumptions about the meanings others attach to evidence, and how they respond to those meanings.

Below, the three main examples participants gave of evidence are discussed. This will demonstrate in more detail what knowledge was deemed to have the potential to promote change for children and their families. The three main examples participants provided are physical and environmental observation; the child's voice; and parental engagement. All participants discussed the meanings they attached to evidence, either through being asked directly or through broader reflection as a result of other questions. In the same way that communal themes related to gut feeling were identified, with participants reflecting on the



term in different ways, communal themes relating to evidence were identified. Firstly, knowledge associated with evidence is discussed.

### **Physical and environmental observation**

When asked to share their thoughts on the term evidence, all participants referred to physical and environmental observation; it was the form of knowledge participants used most when providing examples of what knowledge they deemed to be strongly associated with change, and thus a form of evidence.

Below is a typical example:

Well, evidence to me is things that can back up what you're saying about a family. So, if you're saying the house is dirty, OK, what's your evidence? Well, the evidence is that you stick to the carpet when you walk in, there's no pots washed, they're all strewn all over the side, there's piles of paper here, it smells dirty, there's dog faeces...

(Fiona)

In his research diary, Stuart wrote:

On home visits I assess the home conditions – level of hygiene, and (potential) hazards such as open fires, electrical equipment or pans that are within reach of children etc. I also note how “homely” the environment is, including children's bedrooms, assessing if they are age-appropriate, personalised.

(Stuart)

In her research diary, Grace wrote (in relation to a home visit):

There were no age appropriate toys available and the parent did not interact with the child...The home environment was poor. There was rubbish on the floor and dirty pots everywhere.

(Grace)

For Fiona, Stuart, Grace and other participants, generic statements such as ‘the house is dirty’ or whether it is ‘homely’ had to be ‘backed up’ with detailed, physical observations to be considered as evidence. This is important because of what is not included, such as moral judgements, emotion and CTK, which, as stated in previous chapters, impact on social work judgement and decision making. Further, the broader context relating to why a house

might be considered 'dirty' – for example the time of day, school holidays, the number of children in the household – was not mentioned when participants defined evidence and was not mentioned in this section (home visit) of the research diaries. An important point to make here is that it was the expert's observation that was referred to, whether first-hand or by other professionals:

Facts and being able to back it up with something. So, yeah, its proof and facts isn't it. You've seen it you've heard it.

(Peggy)

Peggy's statement reflects the distinction between fact and value that will be discussed below. Further, physical observation was viewed as an 'obvious' component of evidence:

Well there's the obvious things - if the child isn't thriving or has injuries that moves it up definitely.

(Salima)

Again, physical, observable examples such as injuries were viewed as evidence that could then 'move' knowledge about children and their families to different levels of decision making – such as from a child in need level 'up' to child protection level. Quantifying this kind of observation was also important to participants:

I mean evidence, I don't know, from the police, how many times they've been called out to an address... I mean evidence to say that the kids haven't attended school - their attendance is poor and every time they turn up to school...they're unkempt, they smell, they've got head lice...

(Holly)

When referring to evidence, Holly was in part referring to numbers – how many times police had visited an address, for example. Other participants referred to this kind of quantification, although Stuart was the only participant who referred to statistics:

I think in a case where you've clearly spoken to children and parents and their views have been recorded and also you've suppose been able to kind of quantify where possible what whatever the concerns whether it's harm or you know poor school attendance, health issues so it could give kind of a clearer indication of say how much children are missing out on education or if you're able to express that in some kind of figures you know percentage of this attendance or missed

appointments and even things like say failure to thrive or if a child isn't making sufficient progress in terms of their health development, I think probably there's a need for some kind of statistics whether it's just the percentiles that show how a child's developing.

(Stuart)

The focus on physical observation and the environment reinforced the fact/value dichotomy present in the EBP hierarchy of knowledge, illustrating the influence of this model on participants' definitions of knowledge. Participants were referring to knowledge 'out there', that could be witnessed objectively, excluding any subjectivity and the social context involved. Drawing on work in the SSK literature, observation, however, has been identified as complex. This includes the setting of child and family social work, where so many different things can be observed, and so many different interpretations of those observations can be made (White and Stancombe, 2003). However, as White and Stancombe (2003) argue, science (or here, observation) does not necessarily lead directly to uncertainty. On the contrary – observation here was much more closely associated with certainty.

That physical and environmental observation was viewed as a primary example of evidence is also interesting in terms of what this does not include. That is, all other forms of knowledge, such as emotion, moral judgement and heuristics, which have been identified in chapter 3, that also contribute to social work judgement and decision making. It also does not include gut feeling, identified here as a form of CTK.

### **The child's voice**

When discussing evidence in the abstract, it was seen as 'obvious' that the child's voice was central to any definition of evidence:

Obviously if a child's saying they're not safe, if a child's saying they're frightened, if that's the assessment of the worker that that child isn't safe...then obviously that will be classed as a priority.

(Cathy)

Holly also thought the child's voice was 'a good piece of evidence':

I think direct work with the children is a good piece of evidence. Actually getting the child's views and feelings and wishes, I think that's a strong piece of evidence so if you-

*Researcher:*

Do you think the court feels the same way?

*Participant:*

Yeah, I do. I mean that's a tiny bit of it but I think if they say, I don't know, I hate being – for an example – I hate living at home because my daddy, he's always beating up my mum – well that's a massive piece of evidence. We're there to look after the children, we're there to protect the children [and] I think to bring their voice into your statement's massive.

(Holly)

The child's voice was often brought up alongside other components that made up the definition of evidence for participants. Prior to Stuart sharing his preference for quantifiable knowledge when it came to evidence, he stated:

Where you've clearly spoken to children and parents and their views have been recorded...

(Stuart)

It is interesting to note that some existing research suggests the child's voice is often not heard in child and family social work (Helm, 2011). That this is considered a component of evidence by participants does not mean a child's views are central to judgement and decision making. It does, however, mean it was privileged as a form of evidence over other knowledge by participants, such as CTK. White and Stancombe (2003) discuss the privileging of the child's voice in relation to the role of clinical judgement in the health and welfare professions. White and Stancombe (2003) argue that:

While social workers normally privilege the child's voice, a child's account is less likely to be believed if they are asserting that all is well at home, when social workers' suspicion has been aroused that it is not, either by a referral or by a previous statement by from the child.

(White and Stancombe, 2003: 152)

Thus, the role of the child's voice in judgement and decision making is complex. Here, what is important is that it was privileged as a form of evidence by participants, and aids

understanding of how child and family social workers define evidence. Parental engagement was the final component of participants' abstract definition of evidence.

### **Parental engagement**

Whether parents 'engaged' with professionals is the final component of what constituted evidence for participants. It is already known that parental engagement is a key concern in child and family social work against a background of often contradictory social policy in the UK (Morris, 2012). Kemp et al (2009) argue that in the US, parental engagement with child welfare services is low and uneven, highlighting the point that child and parent interventions tend to be separated (Kemp et al, 2009). Kemp et al (2009: 103) go on to describe the myriad reasons why such engagement is low: parents might not be living with their children, there may be instability around housing, and parents may struggle with their mental health and/or addiction. These issues are further complicated by child and family social work with parents being gendered, where women are over-scrutinised, and men are not engaged with (Scourfield, 2003), as well as a disproportionate number of minority ethnic families being involved in child protection services (Arruabarrena et al, 2017; Barn, 2007). A small qualitative study on parents' experiences of child protection found the majority had a negative experience of the English child protection system, often considering it harmful to themselves and their children (Smithson and Gibson, 2017). Additionally, in the U.K., what has been described as child-centred practice dominates (Featherstone et al, 2014a; 2014b; Morris et al, 2017) – which, again, separates child and family – and parental engagement is interesting in terms of, as Morris (2012) points out, what it leaves out – the wider family. Parental engagement is thus a complex issue, rooted in broader social, cultural and political contexts. Here, it was provided as an example of evidence.

Stuart referred to assessing parental engagement in his research diary:

In this visit I felt more able to gain an idea of parents' likely level of cooperation with me and other professionals.

(Stuart)

Stuart was referring to an initial home visit with a family, which was something he wanted to ascertain quickly.

As well as giving physical examples to support her definition of evidence, Salima referred to 'the parent's cooperation':

I suppose it is the parent's cooperation and what they're doing. If they're not doing anything that's evidence to me they don't want to move on. No matter what you try, it does not work and they don't - to me that's again evidence and you can evidence that they haven't attended any meetings, they haven't done this, they haven't done that...

(Salima)

Gilly spoke about the evidence required to move a child and their family into a higher level of decision making:

I said right, I'm [taking this child and their family to a higher level of decision making] because we went out and did that, she engaged with this but didn't do that and she's now got a black eye and the health visitor said this and I've been to try and see her. She won't let me in twice, I can't get through. Right, that's absolutely fine...absolutely no problem because it has all been covered.

(Gilly)

'She won't let me in twice' – this lack of engagement with Gilly was, in part, the evidence Gilly used to describe why she took a particular case to a higher level of decision making. It is important to note, as with all examples participants gave, context-specific detail was required – lack of engagement alone was not sufficient. Further, participants generally referred to all three examples together – it was the combination of all three examples, and the link between evidence and change, that constituted this part of how participants defined evidence. Jemima provided an example of how participants defined evidence overall:

Observations, things that a child's said, things that have been witnessed by other professionals...first-hand information rather than word of mouth...behaviours that you've observed and listening to the child, you know, listening to the children if they're of an age to be able to speak, or observing you know, evidence. The mum that I was talking about...baby had a chronic nappy rash and she admitted to it being quite a long time since she'd previously bathed child so you know those kind of

things to me is evidence towards neglect. So, I think things that you're seeing, and also things that are witnessed by you and other people as well, so it is not just your own opinions and your own views, I think the more robust the evidence the more people are able to see that and agree.

(Jemima)

A strong theme throughout all three examples of evidence participants provided was a lack of ambiguity. In other words, although uncertainty always underpins knowledge work with children and their families, at the heart of evidence for participants was clarity and the removal of doubt. The less ambiguous a piece of knowledge was, the more likely it was to be considered 'good' evidence. For example, regarding parental engagement, the reasons why a parent might not be working with a professional was often referenced by participants – but it was not considered evidence. That is because the reasons why a parent does not work with a professional can be complex, ambiguous and difficult to ascertain. Whereas the 'fact' that a parent did not attend social work appointments, for example, was evidence because it was viewed as objective, quantifiable and closer to 'certainty'.

Overall, the focus on parental engagement and the lack of discussion or focus on the rest of a child's family reflects the literature on child-centric orientations to work with children and their families in the U.K. and US (Featherstone et al, 2014a; 2014b; Kemp et al, 2009; Morris, 2012; Parton, 2015). This focus excluded primary carers who were not parents, reflecting that complexity and ambiguity were not associated with evidence for participants. It also reflects Morris's assertion that, within child welfare policy in the UK families tend to be viewed as 'either the subject of intervention or the partner for change' (Morris, 2012: 906). Parents were either engaging – or not. The narrow definition of evidence provided by participants did not have the capacity to incorporate more complex factors, such as the contradictory nature of policies child and family social workers must follow (Morris, 2012). It also reflected the lack of practitioner engagement with the family beyond the child, parents or vulnerable adults (Morris, 2012: 913). Therefore, because evidence, as participants defined it, necessarily excluded uncertainty and ambiguity, it did not reflect the broader context participants work in, nor the wide range of knowledge they drew on when working with children and their families.

The consequences of how evidence was defined, including the meanings attached to the term, will be explored later in the chapter. Firstly, however, what is missing from this definition is discussed, followed by an exploration of the different ways in which participants reflected on what knowledge was most closely associated with the potential to promote change for children and their families.

### **Research: the missing piece?**

What was missing from participants' discussions on evidence was just as interesting as what was included. Research, in the main, was not included in participants' discussions about evidence, and the data adds to existing understanding of the barriers of implementing research into practice (Julian, 2014/2015 provides a useful summary of such barriers). The term 'evidence-based practice' is often used to refer to a preference for social workers to use and be aware of (preferably empirical) research to support their actions (Payne, 2005). If evidence, for participants, was knowledge that had the potential to promote change for children and their families, did research fit into this definition? 24 participants did not mention research at all in their interviews or research diaries. Of the 10 participants who did mention research, 6 mentioned it when referring to a perceived knowledge 'gap', rather than specifically knowledge that promoted change:

I suppose one of the things I do is go and do some reading around that to look and see whether there's any - I don't do that loads, but I'm just thinking about some occasions over recent years where I have gone away and actually done some kind of reading about the kind of research and theory of, you know, a theoretical basis and what my thoughts are about that.

(Mia)

These participants linked research to their practice overall, rather than evidence specifically, and all 6 participants made a point of saying this was not something they did very regularly. The remaining four participants linked evidence to research but in a rather abstract way. Cathy was discussing the knowledge she associated with evidence, including:



If you've got concerns in respect of neglect and there's evidence of physical conditions of the home, emotional state of the child if they're frozen awareness...I think the attachment; the interaction is key really between the carer and the child. There's been a lot of research recently particularly between the 0 to 2 age group and brain development and what that means for a child...

(Cathy)

Leaving aside Cathy's interpretation of research on attachment, which has been the subject of analysis itself (for example, Pylypa, 2016; Taylor and White, 2006), evidence was 'frozen awareness' – a psychological term. It has been identified that psychological theory is malleable and often 'over-simplified' in child and family social work (Taylor and White, 2006: 940). Here, what is important is that, following the use of psychological language, however, Cathy became more abstract in her discussion about research, and this reflects all participants in this group. Research was mentioned alongside evidence but was not directly associated with change in the same way as physical and environmental observation, the child's voice and parental engagement. Emily reflected on research when discussing knowledge she looked out for when receiving written reports from other social workers:

The ages of the child, the research about what works for families what doesn't, but also the research about the impact of long term neglect on children and how can you justify letting that continue, but you know balance that out with some of the research about the outcomes for older children who've become looked after, so there never is really an easy answer.

(Emily)

Emily's response reflects that research is messy, contradictory and social research has been described by White and Stancombe (2003: 155) as 'intrinsically contestable', which has been discussed in chapter 3. It does not, therefore, fit into the examples participants gave of knowledge that has the potential to promote change for children and their families which were based on apparent certainty and objectivity.

The relationship between research and evidence as explored by participants is complex because most participants did not mention research being part of their definition of evidence. Moreover, those who did, did not directly link research to promoting change for children and their families. There is a question of how research is defined – is it simply

looking up the current research online, for example, or does it include working within mandatory rules and guidelines? Are mandatory rules and guidelines based on research at all (Payne, 2005)? The important point to make from the data is that evidence was used as an umbrella term to refer to any knowledge that had the potential to promote change for children and their families. Research was not associated with the potential to promote change. Gray et al (2014; 2015) suggest it is unclear whether EBP is incorporated into practice or whether research is simply seen as another information resource for decision making. Avby et al (2017) argue that the latter is the case and the data here support this view. It was not bound up in participants' definition of evidence – it was considered separate, if considered at all.

That research was not included in these broader themes about evidence initially appears to contradict some existing research. For example, Barratt found that 'evidence from published research, locally collected data and the accumulated views of service users were the three examples of evidence that had the greatest influence on decision making in their agencies' (Barratt, 2003: 145). The data here adds to Barratt et al's work by exploring evidence without EBP being the focus of the topics explored with participants. That research was not included in participants' definition of what knowledge constitutes evidence does contradict Barratt's (2003) research. The contradiction could be explained by the different methods used, for example different sampling, and the way in which EBP was not a main part of the interviews, thus perhaps was not in the forefront of participants' minds. Avby et al (2017: 51) found that 'research-based, practice-based and ordinary [often tacit] knowledge' were used by participants, with practice-based knowledge privileged over other forms, such as research. Findings from the data here further define what 'practice-based knowledge' and 'ordinary knowledge' mean in detail for participants, as well as supporting Avby et al's (2014; 2017) assertion that research is not privileged by social workers.

Moreover, the data here aids a move toward providing an explanation of why this is the case, and adds to the wealth of existing research on the translation of research to practice, as described above, by exploring in more detail what constitutes evidence for social workers

and, importantly, why. For example, the way in which the SSK literature has identified that scientific knowledge - including research – is messy, contradictory and provide more questions than it answers has been explored in chapter 3. If research is not seen to be providing certainty, the data suggest social workers might use research in other ways (such as filling a perceived knowledge gap) but not directly associate it with evidence because this term is so closely associated with certainty.

Brown (1994) argues that a social constructionist approach to knowledge explores how specific knowledges come to dominate over others. Informed by this approach, this section has identified one of the consequences of the dominance of EBP perspectives on knowledge within child and family social work, illustrating that a social constructionist approach to exploring assumptions underpinning terms such as 'evidence' can aid further understanding of why research is not implemented into practice. The SSK literature (as discussed in chapter 3) has illustrated that research is messy, contradictory and social research has been described by White and Stancombe (2003: 155) as 'intrinsically contestable'. Therefore it cannot provide the certainty that the EBP perspective – and the knowledge associated with evidence by participants – require. This lack of acknowledgement by the EBP perspective of uncertainty and the social, political and cultural factors involved in both carrying out research and being a child and family social worker appears to contribute to such a narrow definition of evidence. It also contributes to the finding that there is no 'space' for research to be part of that term for child and family social workers themselves. It is ironic that, despite the promotion of research in practice by EBP based rules and guidelines, the data imply that it is, in part, the assumptions underlying this perspective, as well as the consequences of this way of thinking dominating child and family social work, that contribute to the difficulty in achieving such a goal.

The broad, communal themes around evidence have been identified and discussed. Next, participant reflections on these themes are identified and explored. These are also referred to as approaches to knowledge, because of the relevance of the conceptualisation of fact and value by participants here. . As stated in chapter 4, the categories are not mutually exclusive.

## Reflecting on evidence

### Binary reflections

The 7 participants who reflected on CTK in a binary way reflected in the same way about evidence. That is, they separated fact and value and privileged evidence over CTK. They did so because knowledge placed under the umbrella term evidence was considered objective, less ambiguous and therefore closer to certainty. Stuart was the most extreme example of this perspective:

My own personal view is I would be inclined more to towards that end of the spectrum than the individual, you know relying solely on your experience and your practice and your life skills. I think personally there is a need for the profession to be more informed by evidence and rule- although it sounds quite boring - rules and guidance so I do think that we need that. And also just to evidence decision making as well and you know we do have to stand up in court and explain decisions to other professionals so I do think we need that kind of rigorous you know almost scientific background.

(Stuart)

Comparing Stuart's reflections on CTK and evidence, although he stated there should not be a 'sole' reliance on individual experience and 'life skills', he viewed evidence, rules and guidance as 'rigorous' and CTK in much less positive terms:

I don't know if it is, something I really act on, a gut feeling... I might be troubled by something I see in a house but I would be able to sort of rationalise it and investigate it you know if I think there is something going on or if I had any concerns I would come back and talk to my manager try to get more information, look at all the evidence we've got but...I think gut feeling is one of those things that people talk about but perhaps it only comes true for them maybe like one in ten cases and that's not really for me a very efficient way of working...so I think myself I'm not really a person that goes along with gut feeling.

Evidence was very much privileged over CTK – there was a big difference between them for Stuart. This was the same for other participants who reflected on evidence in a binary way. Peggy started by stating her definition of evidence:

Facts and being able to back it up with something. So, yeah it is its proof and facts isn't it. You've seen it you've heard it.

*Researcher:*

So, that first-hand experience rather than second hand, do you think?

*Peggy:*

Yeah definitely.

*Researcher:*

And do you ever think opinions are relevant to create a piece of evidence or do you think it should just be, solely, facts?

*Peggy:*

I think I – well for me I think it should be just solely facts. And then obviously, the experts can put their opinions on to that but I think it is just facts and you can say well so and so said this and such and such did this on such and such a day and that's it.

Although Peggy reflected in this way when referring to this form of CTK in the abstract, her response was more complex when reflecting on specific work she had completed in the past. Here, however, the important point is that Peggy distinguished herself from experts – as did Adam and Ava. Although they had the same definition of evidence as other participants, they did not see evidence as part of their role – it was not their responsibility. This is important because, as will be made clear in the next chapter, it affected the strategies they described using to share knowledge with others. The overall point to make about the binary way of reflecting on evidence is that evidence was viewed as separate from opinion or other informal, less 'objective' knowledge, such as CTK.

### **Ambivalent reflections**

8 respondents reflected in an ambivalent way on evidence in the same way they reflected in an ambivalent way to CTK. They reflected in a similar way to participants categorised as having a binary approach to knowledge, but the difference was that they were more uncertain – they did not take their reflections for granted, in the same way they questioned the separation they made between fact and value:

Well that's the bit where they say to you've got to be clear because is it your judgement is it your analysis or is it actual concrete evidence that this is the case. So, the good evidence is whether it is professionals or other people have observed it and said the same thing as you have...It is harder when you're trying to look at a plan for change and you're trying to put a plan in that's going to work that's going to support the family because, I do think then the multi-agency group will have all different ways and ideas of how to fix things if that's the right word.

(Tabitha)

Tabitha made a distinction between fact and value – between judgement and 'concrete evidence' – but also acknowledged the complexity involved. Gwyneth had a similar response:

[Judgement] is just a lot of different things. Your observation, your intuition, obviously sometimes you need evidence if you've got police reports coming in and then you talk to [service users] about domestic violence- oh no everything's fine everything's fine, so it is like well obviously it is not because why have we had four police reports in the last four months. And obviously, you've got to work with the evidence that you've got... I don't think you can ignore it ['gut feeling'] but obviously, you've got to work on evidence hard you know facts you can't just say oh well I don't think this you know I think this or I think that... this is why I think it is so difficult in this job sometimes [laughs slightly] because, there is no black and white there is no straightforward answer for anything.

(Gwyneth)

Gwyneth made a distinction between 'hard facts' and 'gut feeling' but also acknowledged uncertainty, which was characteristic of the ambivalent way of reflecting on evidence. An important point about this group is that they questioned their definition of evidence and the distinction between fact and value only in terms of their individual practice. For example, Tabitha mentioned how difficult it was to implement a plan of change for a family but the example related to her own practice, rather than broader questions about child and family social work as a whole. Pragmatic reflections on evidence are discussed below.

### **Pragmatic reflections**

11 participants had a pragmatic approach to evidence. Unfortunately, as stated in the previous chapter, Celia and Gilly were not asked about gut feeling but they shared their

thoughts on evidence and are thus included in this group. Participants with this approach viewed the line between fact and value as blurred but still separate, and their response to this was to use 'scientific' language to legitimise all forms of knowledge, including evidence:

I think sometimes, people, all they do is they manage the rules and regulations...Because everything is about – again, it comes back everything is evidenced, you know everything. And sometimes you're so busy thinking you've got that to do, this to do, that to do that actually it stops you thinking about what you should be thinking about, i.e. what is right for this child and this family. Does not mean that you don't do all of those because you have to do them all, but I think sometimes, too many people focus on all of that.

(Lesley)

Lesley stated that 'everything' had to be 'evidenced' and procedures had to be followed. But she acknowledged the negatives associated with focusing on knowledge that met the criteria for 'evidence' alone. Overall, she was pragmatic – 'you have to do them all'. Cathy used psychological terms as examples of evidence:

If you've got concerns in respect of neglect and there's evidence of physical conditions of the home, emotional state of the child if they're frozen awareness...

(Cathy)

As stated above, when Cathy referred to the 'emotional state of the child' – something inherently complex and uncertain – she gave an example of a psychological term – frozen awareness – to use as an example of evidence. Celia referenced her lack of status as a social worker when reflecting on evidence and the use of psychology in social work:

I think in social work evidence is very much, the facts and I don't always think that uses our reflection skills [or] all the other disciplines we draw on. But I think, we're weak at, hypothesising and backing that up with, observations of, of justifying what we're trying to say.... Like psychologists have things to draw on don't they within psychology. Whereas social work you draw on everything...and I don't think people trust our judgement either, I think we've still, the way we're perceived is very do-goodery, old fashioned, so I think our whole professional status, does not help us in any way around our evidence. Because I think good evidence can come from a social worker taking the stand, saying what they've been doing, saying what they've seen and drawing a conclusion from that because there's no, what's the word I'm looking for, there's no firm conclusion.

(Celia)

For Celia, the use of this kind of 'scientific' language ('hypothesising') was partly a way to mitigate against the low status of social work as a profession, which is discussed below. Overall, participants within this category had started to question the nature of evidence and the consequences of the communal definition of the term. Although they viewed the line between fact and value as blurred, there was still a small level of distinction between the two. Thus, their questioning of the nature of evidence led them to try and portray other forms of knowledge as just as 'scientific' or 'objective, as evidence. This was the difference between the pragmatic and reconciled approaches, because although both viewed the line between fact and value as blurred, those with a pragmatic approach to knowledge responded to this by using 'scientific' language for all to justify the use of different forms of knowledge. Whereas those with a reconciled approach responded slightly differently.

### **Reconciled reflections**

8 participants reflected on evidence in a reconciled way. These participants questioned evidence in the same way they questioned CTK; nothing was taken for granted. That they did not make a clear distinction between fact and value led to this questioning of evidence as well as CTK. For those with a reconciled approach, they responded to this not by using scientific language to justify their use of all types of knowledge, but viewed all types of knowledge as inevitably influenced by values and the wider social context. Megan found the distinction between fact and value problematic when discussing evidence:

Facts. It is got to be facts. It can't be opinions. It is got to be factual... [the courts] won't listen to opinions. They want facts, which I think really can be a downfall sometimes because what does annoy me in court...is I work with that family week in, week out, yet my opinion counts for nothing in the court at all. I have a real issue with that.

(Megan)

Megan was responding to the work required to translate her views on the lives of the children and families she worked with into 'institutionally manageable forms' (de Montigny, 1995: 188). The findings demonstrate that, although many participants were assigned this



task (and unqualified participants also referred to presenting evidence to court), they reflected on it in different ways, which had an impact on the knowledge sharing strategies they described. For example, having a reconciled approach to evidence did not mean participants with a reconciled approach ignored the definition of evidence that all participants gave. It meant they recognised that there may be negative consequences to it, but they still stated that they had to work within the system if they wanted to change outcomes for children and their families. They could not dismiss how they defined evidence and the associated assumptions they made about how others defined and responded to the term, but they acknowledged the complexities associated with such a narrow definition. Simon linked his questioning of all forms of knowledge to risk management:

If we look at harm we can say well, say for example, sexual harm... we don't know that. We often don't know. That's a difficult one. Physical harm, could be easy to spot, but then again not. As we know with many cases that we've had, if someone is intent on harming a child physically, will inflict injuries that, not saying a green paediatrician would miss, but then again, they did with Baby P. And you have emotional harm. How do you quantify that? So, it becomes difficult, it becomes very subjective, it becomes very value led, it becomes scary. So, to actually safeguard children, the basic premise of doing it means that you have to have some level of managing risk. So therefore, we need to acknowledge that yes, we might have a family whereby both parents are heavy cannabis smokers, but where do you manage the risk with that. If the risk had been that both parents get so stoned out of their head they fall asleep, okay, so you manage each case individually.

(Simon)

Simon was putting uncertainty to the fore when it came to any form of knowledge. Through this questioning, he articulated how difficult and 'scary' it could be to question both subjectivity and objectivity. Emotion is beyond the remit of the thesis, and has already been explored in existing research (for example, Ase Wagli, 2010, cited in Ericsson, 2010, and White, 2010; Ferguson, 2005; 2009; 2011; Forsberg, 1999; Helm, 2011; 2016; Lees, 2017; O'Connor and Leonard, 2014; Thompson, 2010; 2013; 2016) as well as within existing research on moral judgements in child and family social work (for example, Clifford and Burke, 2004; Stanford, 2010; Taylor and White, 2000; 2001; White, 2011). However, part of Simon's response was to 'manage risk', or, to put it another way, manage uncertainty.

It is interesting to note that both qualified and unqualified participants referred to the legal profession (the 'courts') when discussing evidence. Even when reflecting on defining and sharing knowledge within this epistemic community, outside influences, of course, had an impact. The role of imagined audiences will be discussed further in chapter 7, but here, it is relevant that 'the courts' were associated with the narrow definition of evidence participants provided. This definition was associated with objectivity and certainty, when it is known that the legal profession also operates in the moral sphere (Ericsson, 2010). The differences between participants, based on their reflections on this definition, was that those with a binary approach viewed this as unproblematic, whereas those with a reconciled approach found this frustrating. Ericsson (2010) suggests that more honesty on all sides about the role of gut feeling in judgement and decision making is required. These findings suggest that gut feeling is not included in definitions of evidence, in part, because of assumptions made about whether the associated subjectivity and uncertainty is 'palatable' to others.

Having identified and explored the differences between the communal definition evidence provided by participants, and their reflections on this definition, the relationship between CTK and evidence will be discussed.

### **Collective tacit knowledge and evidence: mind the gap?**

It has been argued that all participants associated evidence with change, and although what types of knowledge had the potential to promote change for children and families were the same for all participants, they reflected on this association between evidence and certainty very differently. These reflections were differentiated by the extent to which participants separated fact and value, which is important because it is this conceptualisation of fact and value that affected how they shared knowledge with others, which is explored in chapter 8. However, before moving on to the strategies participants reported using to share knowledge with others, it is useful to compare both the communal themes associated with

evidence and CTK provided by participants and their reflections on those themes. Two important findings are explored in this section: 1) the knowledge participants associated with evidence was very narrow, and excluded much of the knowledge they reported using in practice; and 2) participants reflected very differently on evidence, but these differences were rendered less visible because of the dominance of the EBP perspective within this epistemic community. It is argued that these findings identify a gap between research and practice that adds to existing knowledge on the subject.

Evidence was defined, overall, as knowledge that had the potential to change outcomes for children and their families. Note the use of the word potential – there can be no certainty regarding whether a piece of knowledge will effect change. It is simply the case that participants called a piece of knowledge ‘evidence’ if they thought it had the potential to do so. Specific types of knowledge were repeatedly given as examples of what had the most potential to effect change. Physical and environmental observations, such as physical injuries to a child or specific home conditions were by far the most common example of evidence provided by participants, as well as the child’s voice and parental engagement. Research was not a central component of participants’ definition of evidence. All these types of knowledge were viewed as more ‘objective’, less tainted with subjectivity and closer to the forms of knowledge that constitute the top of the knowledge hierarchy in EBP. Research was not included in this definition.

On the contrary, CTK was defined as uncertainty coming to the fore that had previously been hidden and incongruence between past experience and the current situation. Both components were not part of participants’ definition of evidence, yet 32 of 34 participants stated they used this form of knowledge in their practice. This means a large part of their knowledge was excluded from being considered ‘evidence’. Add to this existing research which highlights the role of moral judgements (Clifford and Burke, 2004; Stanford, 2010; Taylor and White, 2000; 2001; White, 2011) and emotion (for example, Ase Wagli, 2010, cited in Ericsson, 2010, and White, 2010; Ferguson, 2005; 2009; 2011; Forsberg, 1999; Helm, 2011; 2016; Lees, 2017; O’Connor and Leonard, 2014; Thompson, 2010; 2013; 2016)

and the participants' definition of what knowledge constitutes evidence begins to look rather narrow.

This definition was even more narrow than the abstract EBP definition, which is based on EBM. EBM is described by Straus et al as 'the integration of the best research evidence with our clinical expertise and our patients' unique values and circumstances' (Straus et al, 2005: 1). Although in EBP, gut feeling, intuition and practice wisdom are either not mentioned (for example, McNeece and Thyer, 2004) or are at the bottom of the knowledge hierarchy (Gray et al, 2009), participants did not associate such informal knowledges with knowledge that had the potential to change outcomes for children and their families at all. That participants' definition of evidence was narrower than the abstract EBM definition is perhaps not surprising. Although existing research shows that medical professionals do not conform to abstract EBM standards and underpinning assumptions (Bazarian et al, 1999; Gabbay and le May, 2004; Patel et al, 1999; Timmermans and Angell, 2012; Ulvenes et al, 2009; Taylor and White, 2006; Wood et al, 2003; Zwolsman et al, 2013), they do have a higher status than child and family social workers. This can be seen in attempts to professionalise social work and other professions over the past 80 years (Silverman, 1997; Williams, 1993).

Further, research by Batista et al (2016) and Greenhalgh et al (2008) illustrate that the improvisation and tacit knowledge medical professionals use to navigate both the macro (EBM, standardisation) and micro (unique cases) actually reinforced EBM and their professional standing. For Greenhalgh et al (2008), this includes the way in which tacit knowledge is rendered invisible through encoded knowledge in a neurorehabilitation team. The data here imply that, without such status, child and family social workers define evidence more narrowly than EBP guidelines as a strategy – purposefully or not – to mitigate against their low status, with participants with a pragmatic approach additionally using 'scientific language' to further present specific knowledge as objective and certain.

How participants defined evidence was linked to the assumptions they made about how others – including colleagues, managers, those they supervise, as well as other agencies –

defined evidence. Those who reflected in a binary way did not critically reflect on these assumptions – facts were seen as the truth, values were viewed as subjective, uncertain and therefore inferior to facts. Those who reflected in an ambivalent way discussed these assumptions and articulated how difficult they found it to meet these criteria in their practice. Whereas those who reflected in a pragmatic way emphasised the ‘scientific’ nature of CTK, thus subtly reinforcing the divide between fact and value. It was only participants who reflected in a reconciled manner who critically reflected on both evidence and CTK in the same way, reflecting their view that the line between fact and value is blurred.

Reluctantly or not, however, all participants accepted that this association between evidence, objectivity and certainty was what had the potential to affect change for children and their families. Therefore, the differences between participants in terms of the way they reflected on evidence and CTK could easily be missed. This is important because it was the way they reflected on communal themes and knowledge associated with evidence and gut feeling, and the conceptualisation of fact and value underpinning those reflections, that impacted on the strategies they used to share knowledge with others, which is explored in the next chapter. Related to this association between evidence and certainty, Barratt (2003) found a degree of uncertainty by social workers about whether expert opinion could be considered evidence. Here, the data add to our understanding of why there is uncertainty about this in terms of CTK – because, in part, evidence was defined so narrowly and so strongly associated with uncertainty, whereas expert opinion (e.g. CTK) did not have the same association. Despite the differences in the way participants reflected on this definition, all participants were of the view that uncertainty or ambiguity did not have the potential to change outcomes for children and families. In this way, they were all constrained, regardless of their approach, by the (admittedly appealing) quest for certainty prevalent in the epistemic community. Thus, the data suggest that any attempt to individualise debates about uncertainty are misguided.

An example of this drive to individualise such debates is the updated Standards of Proficiency document by the HCPC (2017) which all qualified social workers must adhere

to. This includes 'be[ing] able to work effectively whilst holding alternative competing explanations in mind' (HCPC, 2017: 8). The onus here is on the individual social worker to be 'comfortable' with uncertainty. Existing research, as discussed above, suggests that many individual social workers are already doing this, and the data here show that some participants can also incorporate uncertainty into their knowledge. This is a skill developed over time, thus having a standard guideline for all social workers, including newly qualified social workers, to achieve is ill-considered. The narrow definition of evidence provided by participants, associated with certainty and objectivity, also suggest that implementing such a guideline would require a communal shift in attitudes to knowledge and an increase in the status of child and family social workers. This looks unlikely to happen in the near future when the social context to such guidelines are currently being ignored. Further, these guidelines only cover qualified social workers and the differences and similarities between unqualified and qualified child and family social workers, who often work with the same children and families and the same concerns around child abuse – are ignored.

## **Conclusion**

It has been argued that all participants viewed evidence as knowledge which had the potential to promote change for children and their families. Participants were consistent in terms of the knowledge they thought could be included in this category, which included physical and environmental observation; the child's voice; and parental engagement. The finding that research was not included in this definition was discussed in detail. It was argued that objectivity and certainty were associated with change for children and their families. Therefore, it was unsurprising that research was not included in participants' definition of evidence because research, as discussed in chapter 3, is messy, contradictory and social research has been described by White and Stancombe (2003: 155) as 'intrinsically contestable'. Thus, it provides little certainty for child and family social workers. It has been described as ironic that, despite the promotion of research in practice by EBP based rules and guidelines, the data imply that it is, in part, the assumptions underlying this perspective, as well as the consequences of this way of thinking dominating child and family

social work, that contribute to the difficulty in achieving such a goal. Thus, a particular gap between research and practice has been identified, contributing to existing research on the subject.

Participant reflections on the knowledge generally associated with evidence were identified and explored. Four different ways of reflecting on evidence were identified in the same way that participants had four different ways of reflecting on CTK. Participants who reflected on evidence in a binary manner separated fact and value and privileged evidence over CTK. Because fact and value were considered separate, privileging evidence over CTK was viewed as unproblematic by participants in this group. Participants who reflected on evidence in an ambivalent manner made the same distinction between fact and value, but the difference was that they were more uncertain: they questioned that response, in the same way they questioned the separation they made between fact and value. Importantly, that questioning only related to their individual practice. Participants who reflected on evidence in a pragmatic way viewed the line between fact and value as blurred but still separate, and their response to this was to use 'scientific' language to legitimise all forms of knowledge, including evidence.

It was only those who reflected on evidence in a reconciled manner who questioned evidence in the same way they questioned CTK – nothing was taken for granted. That they did not make a clear distinction between fact and value led to this questioning of evidence as well as CTK. For those with a reconciled approach, they responded to this not by using scientific language to justify incorporating a wider variety of knowledge into what constitutes evidence, but viewing all types of knowledge as inevitably influenced by values and the wider social context. These differences are important because participants' categorisation of fact and value was linked to the strategies they reported using to share knowledge with others, which is explored in the next chapter. These differences also highlight that just because participants all associated particular knowledge with evidence does not mean assumptions can be made about the way they reflect on this subject.

It is not necessarily problematic that participants included some forms of knowledge in the category 'evidence' and others were excluded. Child and family social workers must make judgements about children and their families and those judgements must be considered by others in the community and beyond. However, what is included and excluded, and for what reason, is clearly important in terms of understanding not only the actions of social workers, but the assumptions behind those actions. Moreover, exploring participants' critical reflections on what is included and excluded from the category 'evidence' is important for two reasons. Firstly, such explorations have identified a particular gap between research and practice, thus adding to existing research on the subject. Secondly, these differences, which it was argued were often hidden by the dominant EBP approach to knowledge, were linked to the strategies participants reported using to share knowledge with others. Knowledge sharing is the subject of the next chapter.



## **Findings and Discussion Chapter Seven – Knowledge Filtering Strategies and Their Consequences**

### **Introduction**

Knowledge sharing is not just advisable within child and family social work, but is underpinned by statutory guidance (White et al, 2015) in the form of Working Together (HM Government, 2015). Whether to share knowledge has been referred to as a risk decision itself (Carson and Bain, 2008), particularly when it has been described as a ‘moral and political imperative’ (Thompson, 2013: 189) within child and family social work. As stated in chapter 3, existing research on knowledge sharing and child and family social work tends to focus on the complexities of multiagency knowledge sharing, although more recently, research on information filtering has begun to complicate the assumption that knowledge sharing within child and family social work is straightforward (Huuskonen and Vakkari, 2015; Lees, 2017; Thompson, 2010; 2013; 2016). Existing research supports Pithouse’s assertion that the ‘act of telling the case cannot be treated simply as some verbalisation of past events such as the actual encounter with clients but is itself an entirely new act’ (Pithouse, 1987: 108). This act is work in and of itself (Pithouse, 1987), and here, the fascinating, complex strategies participants reported using to share knowledge with others; the differences between participants; and the consequences of such differences are identified.

The original contributions to knowledge in this chapter are as follows: 1) participants reported using two main ‘knowledge filtering’ strategies in order to share knowledge with others, which are conceptualised as standard knowledge filtering (SKF) and dynamic knowledge filtering (DKF); 2) which strategy participants reported using was underpinned by the extent to which participants separated fact and value; 3) broadly, the aim of SKF was accuracy and domestication and the aim of DKF was adequacy and foreignisation, with the former rendering CTK invisible; and 4) frustrations when sharing knowledge with others can, in part, be explained by the use of such differing knowledge filtering strategies. An

important note to make is that participants are referred to as either employing SKF or DKF as a shorthand. This refers to the finding that participants reported sharing particular strategies that have been conceptualised here as SKF or DKF. Therefore, it cannot be said that participants definitely employ SKF or DKF in their practice, but that these were their reflections and thoughts behind their knowledge sharing, which is an original contribution to the literature on the subject.

In this findings and discussion chapter, five concepts found in the translation studies literature – fluency domestication, foreignisation, retranslation and authorship – are used to aid exploration of the strategies participants reported using when sharing knowledge within their epistemic community. These strategies are important because they illustrate that, rather than focusing on explicating gut feeling, which has been identified as a form of CTK (an impossible task, according to Collins's [2010] typology), participants instead used strategies that filtered and translated such knowledge (this is explored further in Mitchell, 2016), with some aiming for 'adequacy' rather than full explication (Demir and Murtagh, 2013; Mitchell, 2016). The SSK literature on tacit knowledge often focuses on explication, which can be problematic. This includes Collins's more recent work on the 'imitation game' (Collins and Evans, 2013), which has been extensively critiqued by Robeiro and Lima (2015). Here, however, the data implies that experts who view the separation between fact and value as problematic have sophisticated strategies they use to avoid this epistemological problem.

Participants reported using two main strategies to share knowledge, which are conceptualised as standard knowledge filtering (SKF) and dynamic knowledge filtering (DKF). Broadly, participants who had a binary or ambivalent approach to knowledge employed the former, while participants who had a pragmatic or reconciled approach to knowledge employed the latter. The difference in the extent to which participants separated fact and value underpinned both methods, and the various strategies used in both groups are explored. Overall, drawing on the work of Demir (2011), Demir and Murtagh (2013) and Mitchell (2016), participants who employed SKF aimed for accuracy

and participants who employed DKF aimed for adequacy when sharing knowledge with others.

Drawing on Venuti's (2008) analysis of literary translation, it is also argued that the aim of SKF was domestication and the aim of DKF was foreignisation, with the former rendering CTK invisible. The extent to which foreignisation can be achieved – in other words, whether CTK can be rendered more visible – when participants shared a narrow definition of evidence, is also discussed. Identifying these aims is important if we are to understand why social workers share – or do not share – knowledge with each other, and because the data illustrate that these subtle differences had interesting consequences for participants. Next, the consequences of the differences in approaches to sharing knowledge that participants described are explored. Frustrations participants articulated when sharing knowledge with others are referred to, and it is argued that this exploration of the strategies participants used can add to general understanding of why knowledge sharing is not so simple that social workers can, as Laming states he is tempted to advise (2009: 10), 'just do it'. The concept of retranslation is employed to explain why participants reported sharing apparently the same knowledge in many ways repeatedly, including the positive and negative side of this process. The concept of authorship is also used to explore the ambivalence participants shared about the social nature of knowledge against a background of increased individualisation more generally (Giddens, 1990) and the 'blame culture' (Carson and Bairn, 2008: 8) within child and family work.

### **Why translation?**

As has been explored in chapter 3, social work research is familiar with the term translation, in terms of the difficulties of translating research into practice. Here, insights from the translation studies literature are utilised to identify how and why knowledge transforms when shared within the same epistemic community. Many other concepts could be used to inform an analysis of knowledge sharing within one epistemic community. However, translation is chosen because 1) translation and the associated literature supports a focus on audience, rather than, for example, the development of an organisation; 2) literature on

what happens when one way of knowing meets another (for example, when English meets a less dominant language) is particularly relevant for the thesis; and 3) research and concepts within the translation studies literature support an original contribution to knowledge (including Venuti's (1998; 2008) work on the consequences of knowledge translation).

For example, Pösö (2014) has used insights from the translation studies literature to argue that there should be a balance between 'robust' and 'fluent' translation when translating Finnish social work into English. This research is extended to identify the strategies used by social workers not only within the same epistemic community but also within the same team. Identifying what Zethsen (2009) might call knowledge 'microstrategies' helps us better understand knowledge sharing within child and family social work. Further, translation inevitably involves loss (Demir, 2008). Drawing on this idea, the knowledge most likely to be lost through knowledge sharing and what participants gained from the strategies they employed is identified. Overall, literary translation studies and research which utilises similar concepts helps create a metaphorical 'space' to explore the strategies participants described when reflecting on how they shared knowledge with others. Firstly, standard knowledge filtering (SKF), a strategy used by some participants to share knowledge with others, is discussed.

### **Standard Knowledge filtering**

Just as a literary translator must constantly make choices about what to include, exclude, emphasise and transpose (Gentzler and Tymoczko, 2002: xviii); participants shared that they constantly made choices about the way in which they filtered knowledge when sharing it with others. There is no such thing as a 'single truth' in relation to children and their families (Hacking, 1991; Taylor and White, 2000; 2001) and the idea that 'everything' can be shared is a fallacy. Therefore, knowledge always requires filtering, as Weinberger (2011) acknowledged, referring to the impact of gender on who has access to knowledge and who

decides what knowledge is important – and what is not. Participants described filtering knowledge, albeit in very different ways. Participants with a binary and ambivalent approach employed STK, and were of the view that knowledge sharing ‘should’ be straightforward. Drawing on Demir (2011), Demir and Murtagh (2013) and Mitchell (2016), these participants aimed for accuracy in terms of knowledge sharing, for example often attempting to share ‘everything’. Accuracy was therefore this group’s response to the epistemological problem of explication in relation to tacit knowledge. This contradicted the strategies they described using, which were necessarily slightly more complex. And they did use strategies, albeit often unintentionally. Further, because the strategies they described did not reflect the inherent complexity and uncertainty involved in knowledge sharing, knowledge sharing was often a frustrating process for them. Three main components of SKF are identified: 1) underfiltering; 2) hesitant knowledge filtering; and 3) filtering differently depending on the audience receiving that knowledge. In this discussion, various modes of knowledge sharing are referenced, such as informal conversations with seniors, written reports and supervision. As noted in chapter 4, some participants (such as Gwyneth, discussed below) use components of both strategies, although all participants reported using either SKF or DKF predominantly.

### **Underfiltering**

As stated in chapter 3, what is excluded is just as important as what is included in literary translation (Gentzler and Tymoczko, 2002; Venuti, 1998). When using the term knowledge filtering, there is reference, in part, to ‘strategies of exclusion and inclusion’ (Demir, 2011; 2014) associated with knowledge sharing within this epistemic community. Meuser and Nagel (2009: 30) also refer to ‘strategies of inclusion and exclusion’ when referring to how expert knowledge is produced. Huuskonen and Vakkari (2015) analyse case note recording in statutory social work, and state that their ‘data hint that the longer the work experience, the more economical and the more discriminating recording tended to be’ (Huuskonen and Vakkari, 2015: 800). Here, the data supports and extends this research by arguing that such ‘filtering out’ had both positive and negative consequences when participants responded

to uncertainty. This research is also extended by identifying that the strategy a participant reported using to filter knowledge was linked to the extent to which they separated fact and value.

Participants who employed SKF faced a paradox. They were of the view that their seniors preferred short, concise knowledge sharing, but they often stated that, when writing case notes, or sharing 'child protection' concerns particularly, they included 'everything':

*Researcher:*

How do you decide the information that will go into the [recording] of that visit?

*Olivia:*

I write notes when I'm on my visits and generally I key point everything. I document everything. Whatever's written in my book goes in...so some records can be quite long. But I think it's only fair, otherwise you could leave something out that was important and something you could come back to, a thing you thought wasn't important is, and is the key, the key to everything.

(Olivia)

Olivia was responding to uncertainty by attempting to include 'everything'. Stuart also attempted to record 'everything', but, as illustrated in his research diary, did provide a summary relating to future tasks:

As this was the first visit to the family the case note was very comprehensive, listing everything I'd seen and heard. I included a summary of action points I believed were necessary to progress the case.

(Stuart)

Stuart was distinguishing between a time when it was appropriate to list 'everything' he'd seen and heard, as well as implying this was possible and desirable. However, he also acknowledged the need to summarise future steps to be taken. Kerry, like Stuart, thought it was possible to record 'everything' but that this was only required at specific times:

I think [after] that initial visit I write everything [onto the local database] because I don't feel you know what is important, what isn't important.

(Kerry)

Participants who employed SKF either, like Olivia, attempted to record ‘everything’ all the time, or, like Kerry and Stuart, distinguished between times when they needed to include ‘everything’ and times when they could strategically filter knowledge out. The latter was related to how much uncertainty was at the forefront of their mind. For example, if Kerry had only just met a child and their family, she identified ‘not knowing what is important’. Underlying this statement was the idea that there will be a time when she would know ‘enough’ to be certain about a judgement. It was also taken for granted that it was possible to include ‘everything’ – all knowledge from a visit. Underfiltering therefore involved an attempt to share ‘everything’, or aim for ‘accuracy’, either all the time or just some of the time.

Due to it being impossible to share ‘everything’, participants who employed SKF were filtering, but this filter was difficult to identify because they were either not aware of it themselves, or they were of the view they only filtered knowledge some of the time. This meant that when they did reflect on sharing knowledge with others, there was a lack of awareness regarding the knowledge ‘work’ required to do so:

Sometimes you get a gut feeling really that you just aren’t sure and you need to tell somebody about it. So, in that case, I would first go to my [manager] and say look I’ve just done this visit and I’m not happy about this, this and this and then [my manager] would sort of advise me...so it’s just a matter of passing the information on really and not holding on to it...Because obviously if you didn’t say anything and just sat on that information and something happened, you wouldn’t be able to live with yourself would you? So, you’ve got to be seen to have done the right thing for yourself I think as well as the child really.

(Adam)

Adam, when discussing sharing knowledge with his supervisor, referred to doing so in a very straightforward manner; sharing for the sake of sharing to, in part, defend himself against an imagined future. This was understandable considering research on the defensive nature of child and family social work (Baker and Wilkinson, 2011) against a background of blame, anxiety and fear (Calder, 2015; Morrison, 1996; O’Sullivan, 2011; Stanford, 2010). What was important here was that Adam spoke about sharing for the sake of sharing; it was what he had to do. There was, understandably, no acknowledgement of the knowledge

‘work’ that might have been required for that knowledge to promote change for the child involved. As White et al (2015) have argued, when social workers respond to the risk object child abuse, there exists an imperative to share knowledge at all times. Informed by Carson and Bain’s (2008) assertion that whether to share knowledge with other experts in health and social care has been described as a risk decision itself, the data here suggests that those who employed SKF did not want to risk not sharing knowledge, but that this created two risks they might not have been aware of. Firstly, a risk of rendering invisible the filtering they necessarily engaged in, considering they could not share ‘everything’; and secondly, sharing so much knowledge that those on the receiving end had additional filtering processes to engage in which might otherwise have been unnecessary.

### **Hesitant knowledge filtering**

Participants with either a binary or ambivalent approach shared knowledge as a means to an end – they shared knowledge for the sake of sharing. This related to their reliance on their managers or senior colleagues to direct the knowledge filtering they did engage in. Jemima identified a difference between her and her managers:

They can sift very quickly and that’s what they’re very good at, is sifting – filtering out the unnecessary information to give me clarity on what it is that I need to do.

Jemima went on to give an example:

[The decision about where was best for a child to live] was purely based on the fact that we’d [the team] left the child there for a long amount of time. And I really struggled with that because that was placed before I came into post. And I was told to do an assessment, I’ve done one, and I don’t feel it’s a very positive one and I’m being told, well, make it a positive one then. So, that’s a very direct - but on the other hand, my manager has got a vast amount of experience.

(Jemima)

To reiterate, making value judgements about decision making is not part of the thesis. Rather, the data illustrated that, to extend existing research on the role of confidence in the form of ‘professional voice’ (O’Connor and Leonard, 2014), an element of this voice is the extent to which participants felt able to influence the way knowledge was filtered. In



this case, Jemima shared that she felt reliant on her manager's knowledge filtering and her own filtering was secondary.

Grace, who had two managers, reflected that the knowledge she included or excluded was reliant on each manager's approach:

Well, I think with the [manager] where it's just very much go through the paperwork I feel like I don't really tell them that much about the family work because I don't feel like, they don't ask the questions to get things out. I just give them a little quick overview, so yeah, I think I do give different information [depending on which manager she is talking to].

(Grace)

Grace had some awareness that the knowledge she shared was different in each case, but related this solely to the individual managers rather than her own filtering strategies. Kerry also described her reliance on her manager 'picking out' what was important during supervision, but also recognised the significance of her own knowledge filtering:

I sit down and I think I waffle at her...I feel sometimes I can probably go in there like a bit of a whirlwind, if it's been building up, and then I think she picks out, you know, but then you don't just sit there and tell them this and dah dah dah, you tell them what's important, why are you concerned.

(Kerry)

Participants who employed SKF were thus on a spectrum, relying totally on their manager's knowledge filtering at one end, to relying on that but also recognising their own filtering (to an extent) on the other. Jemima's statement 'make it a positive one' most clearly outlines the lack of power participants employing SKF referred to in terms of how knowledge was filtered in association with a family. However, it appears that these participants did not want this level of power or responsibility – they did not feel 'qualified' to explicitly impose their own filter on work with a child and their family. This perceived lack of power had the potential to render invisible the inevitable knowledge filtering that did occur as well as making it difficult for participants employing SKF (such as Jemima) to challenge their managers.

The third component of SKF relates to the clear distinction between fact and value participants who employed SKF made, and is discussed below.

### **Audience and the ‘facts’**

Participants who employed SKF aimed to focus on ‘facts’ and attempted to filter out value. This finding extends existing literature on the ‘filtering out’ of emotion in child and family social work (Ase Wagli, 2010, cited in Ericsson, 2010 and White, 2010; Huuskonen and Vakkari, 2015; Lees, 2017; Thompson, 2010; 2013; 2016). Firstly, the finding demonstrates that this filtering also occurs when sharing knowledge within child and family social work, co-worker to co-worker. Secondly, it provides detail on why specific participants reported using this strategy, and that this was not the aim of all participants.

For participants who employed SKF, the way they shared knowledge was affected by who they were sharing that knowledge with – their ‘audience’. Experts are, of course, concerned with how others will receive their work (Baker and Wilkinson, 2011), and here the way participants shared knowledge depending on the type of audience is explored. Participants in this group privileged objectivity over subjectivity, at least when reflecting on sharing knowledge with others. Sharon was asked how she shared her opinion with others:

I just say it exactly as it is, basically what it says on the tin, say it as it is.

(Sharon)

When asked whether she shared her opinion with others, Katie went into more detail:

No I think it’s facts I don’t, if I had maybe an inkling I’d maybe think, like we’d said about something’s not quite right I would pass that on, but I’d let them know it’s not a fact. But probably I wouldn’t come up with assumptions or anything like that it is facts that have actually happened really. Unless - if I’ve got some niggling thing that I just think is not quite – but there were loads of things that weren’t quite right, there were people that weren’t supposed to be [in the house], because she had a violent partner who wasn’t supposed to have any contact, and even though I hadn’t seen him, I [had a] feeling he was up there [in the house]

(Katie)

Katie acknowledged that what she called a feeling, or what is conceptualised here as CTK, was part of her judgement. But she attempted to 'filter out' this knowledge, or at least downplay it. In this way, participants who described employing SKF attempted to filter out CTK and uncertainty when sharing knowledge, and the extent to which they attempted to do this was affected by who they were sharing knowledge with. That fact and value were viewed as markedly distinct from one another and CTK was largely excluded could lead to frustration when participants struggled to accept the subjectivity and uncertainty inherent in this type of work:

Understanding how decisions are made, the thresholds I really struggle with that all the time...Because I think yeah you have thresholds but I think a lot of decisions are made around manager's personal values. And I really, really struggle, because I think there's no real blueprint is there? So, I really struggled...and my [manager] makes you unpick everything and I used to really struggle. I've got two cases [that are] really similar [but outcomes were different] ...I found that really difficult.

*Researcher:*

Can you think of what made the difference?

*Molly:*

No. I think it was just [related to] personal values and when they looked at the thresholds what they thought was a reasonable decision for that case.

(Molly)

Molly struggled with this apparent subjectivity and lack of a 'blueprint' when it came to working with children and families: her view was that the problem was too much subjectivity in terms of individual values impacting on decision making in a negative way. As Arrojo (2002) states, there is no such thing as a 'perfect' literary translation, and here, there is no such thing as 'perfect', objective, 'factual' knowledge sharing. To aim to share solely 'facts' and expect objectivity of everyone could therefore lead to frustration, which is explored later in the chapter. Molly could have accepted that this subjectivity is part of child and family social work operating in the 'moral domain' (White, 2011: 176), and that this apparent subjectivity is underpinned by inherently social moral judgements (Clifford and Burke, 2004; Stanford, 2010; Taylor and White, 2000; 2001; White, 2011). However, this does not necessarily mean Molly would have uncritically accepted all 'personal values'

impacting on judgement and decision making: acknowledging something does not mean it is automatically accepted. So, how was this strategy participants reported of 'filtering out' CTK and uncertainty affected by audience?

Within literary translation studies, Venuti (2008) argues that the reader is diverse, constantly changing and an active part of the translation process. When filtering knowledge, did participants have an image of 'a reader' or audience in their mind? Huuskonen and Vakkari (2015) argue that social workers viewing children and their families as potential readers of case notes influenced the way they filtered information. Here, it was difficult to answer this question because participants who employed SKF had a complex, ambivalent response to this issue. They both reported changing how they filtered knowledge depending on who their audience was – for example, one individual in an informal conversation, or a broader audience in a court report – but also referred to an imagined future audience that remained the same. Kerry gave an example of changing the way she shared knowledge, including knowledge she included or excluded, based on the mode of knowledge sharing:

I suppose it's dependent on what the report's for as well...your court report would be very different to your parenting assessment. You try your best to find positives, you do for your case conferences, you do for your reviews, you do for everything, whereas your court, you're going to court because most of the time there aren't the positives. So, you're showing more the reasons why you feel that those children can't live with the families, you know, that's massive. You'd put in information from other professionals and that's on your [case notes], but that should definitely be in the reports as well because it would be very concerning if the social worker had all these concerns yet there were several agencies also involved with the family and they had no concerns whatsoever...Your family's views. I mean, that would be in your [case notes] but I suppose for your reports, that's in there more because you've gone out purposely to show them and say, 'what do you think of this', whereas that might be in your [case notes] but in a completely different way because that's just in conversation.

(Kerry)

Kerry began by saying that reports for different purposes were written differently and included different information, which would seem obvious and straightforward. However, as Kerry went into more detail, she repeatedly stated that the points she made should also

be included in other modes of knowledge sharing, such as case notes. Understandably, an informal conversation may involve different knowledge to a written case note, for example. However, as will be demonstrated later in the chapter, this was problematised by participants who employed DKF, whereas participants who employed SKF took this for granted. Therefore, in the abstract, Kerry stated that different reports should include different knowledge. But when providing examples, she emphasised similarities in knowledge included rather than differences. Overall, Kerry represented the views of participants who employed SKF because Kerry thought it was best for knowledge filtering to differ depending on audience, but was more ambivalent when giving examples. In other words, she had a strategy in her mind, but shared finding it difficult to do this in practice.

Poppy shared what she viewed as the downsides of changing the way knowledge was filtered depending on who might receive it:

You do find sometimes that [colleagues have] missed key pieces of information, or they're too afraid to put it on the system because of what the child will read when they're older. So, when you have a personal conversation, they'll be more honest about the case. That's what I've found. Not in all situations though.

(Poppy)

Poppy had experienced this difference in knowledge filtering depending on audience. This audience, as Poppy and many others shared, was often an imagined future audience – a child as an adult, or a magistrate if legal proceedings were initiated in the future. Kerry reflected on the positive and negative consequences of these differences:

I think if you speak in person, although their opinion might still be professional, they may be a little bit more forthcoming about where they think that family will go, or they might say, 'watch that grandma, there was something about their relationship that needs looking into', which they wouldn't say at a case conference when they've only just met mum and grandma and they shouldn't because that wouldn't be fair. But you might get a bit more of that, which I think is helpful because, at that point, I wouldn't have met mum and grandma. So, yeah, on the phone or in person has that benefit, but then if they're wrong, then maybe that isn't as helpful but at the initial meeting I suppose you need to look at everything anyway so that can only be helpful.

(Kerry)

It's difficult because when you're reading somebody else's case notes you don't get that full picture of what the worker knows about that family...because you don't have time to write it in the way that – and it's about how workers write that story for that family and each worker's different and they kind of hold it as maybe a feeling and an understanding because they've got a much more broad understanding of that, and if you sat down and spoke to them about [it] but you don't very often get that luxury.

(Jemima)

As can be seen from the quotes above, there was an ambivalence about the extent to which knowledge filtering should change depending on the audience receiving that knowledge. How to explain, then, Ava's response when asked whether she recorded knowledge differently depending on the mode of knowledge sharing?

It stays the same. Because I think if ever I had to go to court for whatever reason it's in black and white there in my [case notes]. And [it's] exactly how they've said it, how they've done it.

(Ava)

Participants who employed SKF assumed that 'the courts' wanted objective, 'black and white' knowledge. Ava's assertion reflected the ambivalence participants who employed SKF shared regarding the way audience affected their knowledge filtering: some participants stated they shared knowledge differently according to audience, some participants (such as Ava) said audience did not affect the way they shared knowledge with others. The commonality in approach, despite this ambivalence, was their response to uncertainty. Ava's assertion was an example of a 'just in case' mentality – just in case a written summary of a visit was requested by the courts at a future date, for example. This example, and the examples given above, were underpinned by a paradox between trying to include 'everything' 'just in case' and being uncomfortable incorporating uncertainty into knowledge they shared with others. In a sense, this group of participants were describing a 'risk' – that one day, in future, their knowledge may be used in court. Their response to this risk was to reinforce their distinction between fact and value, and was also underpinned by a paradox: they described aiming to either record 'all the facts', 'just in case', but also described only sharing less formal knowledge associated with value (such as CTK) in informal contexts (if at all) and knowledge associated with fact in formal contexts. This

paradox existed because it is, of course, impossible to share 'everything', and thus some form of knowledge filtering was required. However, because of this professed aim of 'sharing everything', the filtering they described was rendered less visible, therefore potentially making it harder for others to understand the knowledge that informed their judgement and decision making.

The role audience played in shaping knowledge filtering also related to uncertainty. Participants who reported employing what is conceptualised here as SKF were less comfortable with uncertainty and attempted to 'filter out' CTK – either in just formal settings, or both formal and informal settings – despite underfiltering. To an extent, this was practical; including all one's thoughts on what might happen in the future, or a dislike of a person, for example, is not possible or necessarily desirable. However, because CTK was part of their judgement and decision making, participants who employed SKF (such as Kerry and Jemima above) reflected that it was often shared with others to get support and promote understanding of what was happening for children and their families. This was why participants who employed SKF shared a strategy of filtering knowledge differently when having conversations with colleagues compared to case notes, for example. The data did not identify whether they did this or not in practice: what is important is that the data did identify what they aimed to do and the meanings behind their knowledge sharing. In a sense, it was 'risky' to incorporate uncertainty into knowledge in a broader culture which emphasises individual responsibility, blame and expects certainty of child and family social workers. Therefore, not only did audience impact on the knowledge shared with others for those who reporting using this approach, but uncertainty itself was rendered less visible.

Dynamic knowledge filtering and its associated strategies are explored below.

### **Dynamic knowledge filtering**

The strategies participants with pragmatic and reconciled approaches to knowledge reported using are conceptualised here as dynamic knowledge filtering (DKF). Drawing on

the work of Demir (2011), Demir and Murtagh (2013) and Mitchell (2016), this group of participants aimed for adequacy rather than accuracy when sharing knowledge with others, thus overcoming the epistemological problem of explication in relation to tacit knowledge. This was their response to the epistemological problem of the explication of tacit knowledge. As part of this aim, DKF involved three main strategies: a 'less is more' approach to knowledge filtering; strong knowledge filtering; and attempting to limit the effect of audience on knowledge filtering. Each of these strategies is explored in turn below.

### **Filtering: less is more**

Participants who employed as DKF were of the view that 'less is more' whatever the mode of knowledge sharing. Again, this supports Huuskonen and Vakkari's (2015) finding that, within child protection, the more experienced a social worker is, the more they filter the information they record in case notes. This research is extended by exploring the strategies participants used to filter such knowledge when responding to uncertainty in more detail, the consequences of those strategies, and identifying that these strategies were linked to the conceptualisation of fact and value.

That participants who employed DKF were of the view that 'less is more' does not mean to say they thought they always achieved this. Rather, it was their aim; what they thought was the most effective approach. When they did not achieve it, they viewed this as problematic:

I have weaknesses in practice, I'm very wordy in reports and things like that, but my strength I feel is [verbal] communication.

(Gilly)

Gilly distinguished between verbal and written communication, stating that she was better at knowledge filtering in the former. Simon described the process he went through when sharing knowledge:

It's about what's appropriate, it's about what's relevant...and that's about you filtering.

(Simon)



Simon went on to discuss filtering when receiving as well as sharing knowledge:

But you'd translate that into what you want. It's about sorting out the wheat from the chaff. What do I need to know? But that's where your analysis comes in...even the way people write analyses is different.

(Simon)

More senior participants shared in more detail how important it was for child and family social workers to be concise in all modes of knowledge sharing. Emily, who had managerial responsibilities, was asked what she thought case notes should include – should the case notes include solely a list of observations or include more information?

'The best ones we would like not to be but in reality, case notes still tend to be a narrative about what has happened. Some people are getting better and we're doing lots of training and lots of work about what is a good case note. So, the case notes [are] about having the purpose of your visit, what you hoped to achieve, what you did or didn't achieve and what you're going to do next time.

*Researcher:*

Do you want the case notes to have some opinions, have some analysis in them?

*Emily:*

Yes. Sometimes it's not possible on every case note because every case note is not an event that sort of leads to that but particularly if they've done an assessment session, you don't have to describe the whole assessment session but even if you just put something about assessment session completed covered a, b, c, d, e, see main assessment for details, but overall this is my view at the end of this session or whatever.

(Emily)

Emily did not want a narrative, an attempt to include 'everything' in case notes, as participants who used SKF often aimed to do. She wanted a strategic filter so that she could access the knowledge she needed quickly. Lesley also referred to wanting a specific filter when it came to risk:

Right. What are the issues. I don't want the story...Tell me what the issues are. You know I can listen to the story later. I want the issues – is anybody at risk, is the child at risk... What are the risks if they are? What have you done to minimise the risks, who have you informed, what are the possible solutions or outcomes that we can

put into place immediately to make this safe. Basically, my decisions are around risk, assessing the safety...it goes in those layers.

(Lesley)

Lesley was directive when it came to what she considered a risky situation; she did not want the 'story' – less was more. This was a point all participants with a pragmatic or reconciled approach to knowledge emphasised. Although a narrative was viewed as welcome – there was a need to tell a 'story' about a child and their family – to be effective in terms of promoting change for children and their families, knowledge within a narrative had to be filtered, highlighting events associated with 'risk' of harm to a child and include opinion. Importantly, although participants who employed DKF did not make such a distinction between fact and value as those who employed SKF, in general discussion they did reference the difference between, to use Emily's example, 'observations' and 'views'. It was when discussing the subject in more detail – when asked, or if they introduced the topic themselves – that they acknowledged the subjectivity involved at all stages, which will be explored further below.

All participants in this group described in some way trying to anticipate how colleagues – whether it was someone they supervised, a colleague, or a manager – would interpret and respond to the knowledge they shared and reflected that this impacted on their knowledge filtering. For example, participants who employed SKF anticipated that 'facts' were what was expected of them by their seniors and were what seniors would like to have received. The data suggest this was not the case, which could potentially lead to misunderstandings and frustrations. Whereas participants who employed DKF anticipated the response to the knowledge they shared in a strategic manner:

I did that recently to my manager, I said right, I'm [taking a specific action] because we went out and did that, she engaged with this but didn't do that and she's now got a black eye and the health visitor said this and I've been to try and see her. She won't let me in twice, I can't get through. Right, that's absolutely fine. Just took it like that. Absolutely no problem because it's all been covered. Otherwise if I say I've got this referral and it was, and she's had a black eye now, they would have said to me well do you think maybe you could go out and ask some more questions. And I did it before they even asked...I knew. Yeah, I knew.

(Gilly)

Part of Gilly's knowledge filtering was including as well as excluding specific knowledge. Gilly was imagining a future in which she shared knowledge in a specific way and received a certain response. Based on that imagined future, she changed her approach. Interviews helped identify this approach because Gilly (and others) were responding to their imagination, rather than something that had happened. This is one of several 'invisible' strategies participants who employed DKF used to anticipate the way others received knowledge. As identified above, these participants emphasised that less was more when it came to knowledge sharing, so what was excluded was just as important as what was included. Filtering 'out' knowledge was thus used to give weight to the knowledge participants employing DKF shared with others.

White et al (2015) have been critical of the consensus in health and social care that information sharing is always a 'good thing'. Participants who employed DKF recognised that if they constantly shared knowledge, they weakened the impact of that knowledge. Therefore, they strategically chose not to share in many instances, so when they did, it was taken 'seriously'. In other words, they filtered the number of times they shared knowledge with their seniors to ensure that when they did share knowledge, they felt listened to. Moreover, they reflected that knowledge was received differently precisely because they filtered specific knowledge out. In other words, through loss (excluding knowledge) came gain (of expertise, and understanding). Gwyneth explained the importance of this strategy:

I think on the whole I've only rung my manager once from outside a house...So in [number] years I think the manager then knows well if she's ringing me from outside the house saying we need the police, that's the first time I'd ever done that so I'm not one to just panic or ring up at the slightest thing, I'll try and get as much information and sort of use my own judgement to some extent...you can't go running to them every five minutes for every little thing because they just couldn't physically respond to everybody.

(Gwyneth)

In every other way, Gwyneth had an ambivalent approach to knowledge. However, she used one strategy those who employed DKF used: sharing less, more purposefully, with the view to be taken more seriously. It is important to mention that although participants who

employed DKF agreed that sharing less – and sometimes not at all – in a strategic manner was important, they also highlighted that sometimes knowledge was not shared due to lack of staff availability. Thus, the data illustrate that the way knowledge is shared is important, but does not individualise the problem or place responsibility solely onto the way individual social workers share knowledge. Broader effects of policy changes, funding cuts and the lack of status of the profession all play a part. Participants also shared that the broader culture in their place of work affected who they shared knowledge with, if at all:

If you're challenged in supervision, not criticised, but challenged and nurtured and have you thought of this and have you thought of that, you'd come away going yeah ok I don't feel bad – we all do things wrong, we all misjudge but actually, being proud to reflect, and being proud to go a different way takes a different type of supervisor I think.

(Celia)

Celia reflected that if she could share mistakes and uncertainty, and incorporate that into knowledge, rather than simply acknowledging its existence, she would share more openly.

Simon also reflected on this:

Informal supervision took place but it was very rare because I worked in such a culture whereby people were so worried about blame and fear, any discussion was immediately recorded on the recording system. And we had reached the point where if you wanted an informal discussion you had to fill in a case discussion form...It's not really informal at all, it becomes totally formal. Because of my experience, I would often have conversations with a manager, but again I'd be very careful about who I'd discuss it with. One manager would just have a quick discussion say is that alright yeah OK. Another one would do that and twenty minutes later it'd be on the system. That's not informal.

*Researcher:*

I suppose some people would argue that that is informal?

*Simon:*

I don't mind it, but the informal supervision, I want a quick chat and a coffee.

(Simon)

Simon wanted space to 'play' with knowledge, test out ideas and make mistakes. In part, this was related to the blame culture which exists in health and social care (Carson and Bain,

2008: 8) and fear of 'getting it wrong'. But it was also linked to the extent to which participants felt able to share uncertainty and stay with that uncertainty, rather than that knowledge being immediately recording on a local database. The Laming (2009: 10) report states it is difficult to avoid asking social workers to 'just do it' – that is, share knowledge with others. The data help explain why knowledge was not shared at times – there was a reason behind the lack of sharing, rather than it simply being individual 'error'. This relates to existing research on 'information filtering' in child and family social work (Huuskonen and Vakkari, 2015; Lees, 2017; Thompson, 2010; 2013; 2016). These findings add more detail to why knowledge is filtered in particular ways, and it is argued that knowledge filtering had positive as well as negative consequences.

### **Confident knowledge filtering**

As O'Connor and Leonard (2014) argue, the practitioner voice is important and links to social worker's level of confidence. Here, it is argued that having a strong knowledge filter was inextricably linked to confidence, and more detail is provided about what constitutes practitioner voice. Participants who employed DKF had a strong knowledge filter in the sense that, although they were aware of how reliant they were on others for their knowledge filtering, they had both awareness of and confidence in their filtering strategies and could use these to challenge pre-existing filters:

Sometimes from meeting [about a child and their family] with your managers they'll say, "there's not so much a concern with this one". So, you pick up on how you need to react I suppose. Also, your manager's viewpoint, because sometimes you feel that some of them have made a decision before you've even gone out, like "Oh this needs a quick assessment, can you close it?" type of thing till you go out and start assessing it and think right, it doesn't. I think some managers will have a preconceived idea. Not all but some. From how they respond and ask you what to do they can relay their views. I think it personalises families if they can give you an overview and talk to you about it.

(Naomi)

Those who employed DKF shared that they could challenge existing filters – for example, Naomi challenged 'can you close it' because she had a strong knowledge filter. But Naomi

also recognised that other people's filters were useful; 'it personalises families'. Strong knowledge filters were thus balanced with the knowledge that pre-existing filters might also have been useful:

I'm very lucky, I've got a very good manager and I always get my [new] cases in supervision. It's on a paper copy and she'll go through it with me, which to me is the way it should be done...I know many managers...who just allocate it on [local database] and that's dangerous I think because I want to be given a background of that family, why I'm getting that case and what they want me to do with it as well.

*Researcher:*

You want that structure of this is where I'm going with this one?

*Megan:*

Yes, yeah, and I think we need that structure.

(Megan)

Megan deemed the pre-existing filter essential because it provided an 'acceptable' structure. The important point is that filters were acknowledged and not taken for granted as 'fact'. Interestingly, one person out of thirty-four stated that talking in person, as well as receiving written information, was not always necessary or even welcome:

I'm making it sound negative I suppose, I if you looked at it on paper you'd think it should be more positive if you get a face to face handover but I think you tend to get a little bit distracted and diverted by detail. So [manager] says we've had a referral in and neighbours have seen child wandering around late at night...we've got a bit of a history with this family at this address, we don't know who the current partner is, and you start saying oh why and what and then you start getting into a bit of a dialogue about it. And before you know it you're jumping the gun so you're anticipating information which might lead you not to read case history so much I think.

(Margaret)

Margaret made two important points that others made but did not link directly to receiving referral information from a manager. That is, 1) overall participants who employed DKF aimed for a balance between too little and too much knowledge filtering; and 2) a pre-existing filter was useful but could also have unintended consequences, such as 'distraction'

and 'anticipating information'. This could then negatively affect their own knowledge filtering based on their work with a child and their family.

Participants who employed DKF both thought that this kind of filtering was necessary, but also that it should not be taken for granted; they shared how important it was to question this if necessary, acknowledging both the complexity and perceived advantages and disadvantages of knowledge filtering. This was, in part, about incorporating uncertainty into knowledge, which has already been identified as a key feature of participants with either a pragmatic or reconciled approach to knowledge. These participants were sharing that they often questioned in their mind why they were told about something or why the knowledge had been shaped in that way. Margaret reflected on the difference between her and newly qualified social workers:

I just think sometimes [newly qualified social workers] don't remember in the back of their minds why you're doing something and the [managers] don't tell you. And you go in there and you say I've got this case blah blah blah and they give you some advice and you go out and you do it. Now I would think - why have they said that, why have they said to do that, why have they told me to speak to that person first? If you know the reason why you're doing something, the next time a similar problem is presented you think, last time we did that because...

(Margaret)

If uncertainty was incorporated into knowledge, challenging existing filters was possible at every stage. At some point a judgement had to be made, but not under the illusion of certainty.

Participants who employed DKF also described being able to influence the structure of other's thinking: in other words, influence the direction of work with children and their families; help others decide 'where to look'. As a manager, Cathy acknowledged the importance of filtering as direction:

It's all unknown. It's about the quality of work, the quality of the assessment, knowing your work, knowing what you're looking for. It's just being able to do a good assessment but it's got an analysis to it as well that can direct where that case is going. And if it comes straight from referral, all you've got is the information on the referral so it's really important that information is correct and right and as much

information on it as possible, because it's not nice when you go out and you don't quite know why you're going, you know, it needs to be very clear.

(Cathy)

Cathy acknowledged the uncertainty inherent in every referral, but highlighted that having a previous analysis could help her 'direct where that case is going'. Of course, this could have positive or negative consequences. But recognising this process and making it visible was viewed a way to help mitigate against negative consequences. The alternative was having no structure – not having a direction – which was viewed as negative and unprofessional. Thus, according to participants who employed DKF, existing filters needed to be challenged, but were also useful – indeed, essential.

That strong knowledge filtering was an important part of DKF did not negate the importance of the communal aspect of knowledge filtering in general. Rather, it reinforced how inextricably linked a participant's own filter was with their colleagues and the wider epistemic community. Further, the data illustrates that participants made different assumptions about others depending on whether they employed SKF or DKF, which is explored later in the chapter. First, the role of audience on DKF knowledge filtering is discussed.

### **The role of audience on DKF knowledge filtering**

All participants who employed DKF aimed to limit the effect of audience on their knowledge filtering. That is, they aimed to share knowledge in the same way regardless of whether they were sharing in formal or informal contexts. However, the key difference between participants with a pragmatic or reconciled approach to knowledge was that participants with a pragmatic approach rendered CTK less visible due to the use of 'scientific' and objective language when sharing it with others, whereas participants with a reconciled approach aimed to keep CTK visible because they applied scrutiny to both evidence and CTK. Participants with a pragmatic approach are discussed first.

Wendy shared how useful and powerful CTK could be and how she used it and aimed to include that in formal knowledge sharing contexts (such as court reports). However, her



pragmatic approach, underpinned by a subtle separation between fact and value, rendered CTK less visible:

You can use feelings and we actually use feelings in court reports and things like that [e.g.] when we went in [to a home], we had a sense that somebody had just been in there, the children looked nervous, there's all that you can use and evidence your gut feeling, but when a social worker's doing an assessment you've got to prove that your gut feeling is right or wrong...Because I think it can be quite powerful if it's used correctly. It's all the wording of how you use it, if you use it factually then it can be quite powerful. If a social worker has used it in a value base, then it'll just say that you're using your own values to make that fit, but if you are saying these were my feelings and this is why it made me feel like that, then you're factually putting why you felt like that.

(Wendy)

Wendy was attempting to overcome values inherent in her knowledge by sharing them using 'scientific', objective language. This was a key feature of the pragmatic approach to knowledge: the role of value was acknowledged, but because their view of knowledge was underpinned by a subtle fact/value distinction, value was rendered less visible. In her research diary, Violet, who reflected on knowledge in a pragmatic way, used formal, abstract language and did not include any reference to CTK:

A plan could not be formulated that allowed the children to remain in their mother's care due to disguised compliance, significant history to the case and mother's lack of engagement and capacity to change.

(Violet)

The separation between fact and value underpinning the pragmatic approach meant that, even though such participants recognised the role of CTK in their practice and aimed to incorporate it into their knowledge filtering, examples such as the one above show that, if anything, it was more likely to be 'filtered out' because of CTK's associated with value. It is also linked to an underlying assumption that 'the courts' wanted objective, 'black and white' knowledge, therefore CTK had to be displayed in a specific way. This explains why sometimes participants with a pragmatic approach shared examples of knowledge sharing

that incorporated CTK but rendered it less visible through language, or ‘filtered it out’ altogether.

Participants who reflected on knowledge in a reconciled way, again, aimed to share knowledge in the same way regardless of audience. Naomi’s research diary reflects this difference:

I sensed from [parent’s] presentation that she had something to hide and therefore insisted we went into the home to check on the welfare of the children.

(Naomi)

Naomi later wrote that she had worked with this family for a long time and had therefore picked up on what she viewed as incongruent for that family, providing physical, concrete ‘evidence’ to support her statement. She was thus able to incorporate both CTK and evidence into a formal piece of writing because underpinning her approach was the view that value and fact – and thus CTK and evidence – were not separate. Therefore, it would not make sense to exclude CTK or describe it as ‘objective’ in some way because they acknowledge that ultimately this is not possible for any type of knowledge. Acknowledging the subjectivity that weaved its way through all their knowledge work meant that evidence and CTK were scrutinised in equal ways:

I don’t know whether or not my respect of the service users get me respect back but certainly from my perspective I write the same [regardless of the type of report]. But like I said if you really feel that you want an action taken you can write your reports to get the action you want which I suppose is where the power imbalance comes in because we put in the reports what we want to happen and if it’s written in that way then it usually does happen doesn’t it? I mean, contact with a dad recently, I didn’t think it was in the children’s best interests for it to happen in that way that it wasn’t in the best interest, so I’d obviously focused on why I was making that decision, because there were a lot of negatives in relation to dad, but the factual information - but again it was agreed that we’d review it in six months and give the dad chance to change and do some work because again. It has to be balanced but you’re still making decisions and recording factual information that’s negative.

(Naomi)

Naomi shared that she wrote in the same way regardless of the mode of knowledge sharing (such as a case note or court report) but also recognised the inherent subjectivity and power involved. Naomi was of the view that rather than simply a list of facts and analysis, reports about children and their families involved subjectivity in terms of the knowledge that might be excluded as well as included. In a sense, Naomi was also challenging the assumption that the legal profession wanted objective, 'black and white' knowledge, because she was of the view this was undesirable.

Emily, another participant with a reconciled approach to knowledge, referred to wanting opinion to be included in case notes and knowledge to be shared in the same way in both formal and informal settings. In this way, it was only those with a reconciled approach to knowledge who were consistent in their application of DKF in all modes of knowledge sharing. Whereas participants who employed SKF were of the view that they should change the way they filtered knowledge depending on the mode of knowledge sharing – for example, whether it was an informal conversation in the corridor or a written assessment, and participants with a pragmatic approach to knowledge ultimately rendering CTK less visible, participants with a reconciled approach found it more useful to treat both types of knowledge in the same way. This included managers with a reconciled approach, who reported frustration when there was a lack of consistency in supervisees' knowledge filtering which is explored further later in the chapter. Overall, participants with a reconciled approach to knowledge stated that balance was important in terms of what knowledge to include when sharing with others. Beatrice spoke about recording on the local database:

If there's been a particular issue at a visit, I'll write that down, and any other referrals and things that have come in, but I do think you've got to be careful on that balance...because it can – especially, in courts, in case conferences, anything like that – it can make you look like you're really against the family when you're actually trying to work with them to make things better so you've got to be careful.

(Beatrice)

Beatrice reflected on the balance required when recording information and how difficult this was, and referred to an imagined court audience, as well as a group of professionals

and a child and their family at a case conference, when thinking about what information she would record – it was not taken for granted that this was a straightforward process. Again, both present and future audiences were taken into account by participants. Huuskonen and Vakkari (2015) highlight the complexity of written recording in statutory social work and argue that tacit knowledge is ‘filtered out’ by social workers in their case notes. This research is built on here by identifying that there are differences between social workers in the extent to which they do this, because some participants aimed to ‘filter in’ gut feeling, a form of CTK. The study also identifies that why some do, or do not, is linked to the extent to which they separate fact and value.

It is easy to imagine misunderstandings and frustrations arising because of the differences described above. Moreover, the causes of this frustration may not be understood due to the subtle differences between participants with a pragmatic and reconciled approach, as well as differences between those who employ SKF and DKF, potentially being rendered invisible due to participants’ narrow conception of evidence informed by the wider, dominant EBP perspective. Gentzler and Tymoczko argue that ‘translators often find themselves simultaneously caught in both camps, representing both the institutions in power and those seeking empowerment’ (Gentzler and Tymoczko, 2002: xix). Thus, they refer to translators as ‘double agents’, constantly trying to balance the two. It is useful to view participants with a reconciled approach to knowledge in a similar way, where they define evidence in a narrow way like all other participants, yet also attempt to incorporate CTK into their knowledge filtering.

An important point to make is that these findings reflect the stated aims of participants. Whether they achieved these aims is a different matter, and is the topic of the next section.

### **Domestication or foreignisation?**

Having outlined the strategies participants who employed SKF and DKF reflected on using when sharing knowledge with others, it is argued that Venuti’s (2008) analysis of the social nature of translation and associated concepts of fluency, domestication and foreignisation

can aid understanding of the strategies participants shared using. Venuti (2008) explores the history of translation from the seventeenth century to the early twenty-first century, and explains how fluency became the dominant strategy used by translators when moving to a dominant language such as English from a less dominant language. Fluency involves an emphasis on rendering the translator invisible, excluding any indication that the translation is not the 'original' (Venuti, 2008). It involves domestication, where 'an ethnocentric reduction of the foreign text to receiving cultural values, bringing the author back home' (Venuti, 2008: 15). Thus, visibility of difference is sacrificed for the translation to 'fit' with the values of the dominant language. Venuti (1998; 2008) refers to this as the violence of translation; texts are so often domesticated, with the foreign culture excluded to become more 'familiar' to the reader.

How does this relate to the strategies participants who employed SKF shared using? All the strategies this group of participants shared – underfiltering, hesitant knowledge filtering and sharing knowledge differently with different audiences – related to fluency. As stated in chapter 6, all participants had a narrow definition of what constitutes evidence, or what knowledge they thought had the potential to promote change for children and their families. CTK, with its association with uncertainty and subjectivity, did not fit into this definition. Because participants who employed SKF separated fact and value, their aim was to 'filter out' CTK because it did not fit with the values of what can be referred to as the dominant language – EBP. Using Venuti's (1998; 2008) terminology, 'visibility of difference' was sacrificed to meet the demands of EBP, the model on which participants' definition of evidence was based. Therefore, understanding how participants defined CTK and evidence and the underpinning meanings linked to those definitions – not just the strategies they reflected on using to share knowledge with others – was important. Through these subtle strategies and meanings attached to different knowledges, participants who employed SKF were, using Venuti's (1998; 2008) analysis of literary translation, reproducing EBP values through domestication.

How different, then, were DKF strategies, employed by participants who did not separate fact and value to the extent of those who employed SKF? When reflecting on filtering

knowledge, participants who employed DKF stated that they attempted to share less in a purposeful, strategic manner. They shared being able to challenge existing knowledge filters, as well as anticipating or 'mindreading' others' responses to knowledge and filtering accordingly. Crucially, it was only those with a reconciled approach to knowledge who shared an aim to incorporate CTK regardless of audience, because participants with a pragmatic approach shared in the same way regardless of audience, but the strategies they used to share knowledge with others rendered CTK less visible.

In this way, despite the similarities in the strategies participants with a pragmatic and reconciled approach shared using, it was only participants with a reconciled approach to knowledge who aimed for what Venuti (2008) calls foreignisation. Foreignisation challenges accepted boundaries, prioritising keeping the culture of the foreign text over fluency (Venuti, 2008). It does not involve keeping an 'essence' of the original – this does not exist. Rather, the aim is to create 'a strategic construction whose value is contingent on the current situation in the receiving culture' (Venuti, 2008: 15). In the same way, the 'original' here is not fixed, it does not have an essence, because there is no original 'truth' to be found in child and family social work (Hacking, 1991; Taylor and White, 2000; 2001). Foreignisation here involved keeping CTK visible – resisting filtering it out to fit the shared definition of evidence described by all participants. Participants with a reconciled approach to knowledge shared their view that opinion was important in case recordings, for example; kept CTK in their research diaries; and talked about the importance of CTK in practice.

White argues that 'it seems the scientific language of technological medicine may provide a vocabulary through which uncertainty can be expressed as competence and savvy' (White, 2011: 176). However, White (2009b; 2011) and Taylor and White (2006) argue that this is not the case in social work, despite Canadian research by Spafford et al (2007) finding that social work students were more likely than medical and optometry students to 'announce' uncertainty to their seniors (Spafford et al, 2007; 2009). This is because White (2009b; 2011) and Taylor and White (2006) argue that social workers move to certainty very quickly, and therefore it cannot be said that the profession as a whole is comfortable staying

with uncertainty. One of the reasons for this is because ‘social work often operates in the moral domain’ (White, 2011: 176) where moral judgements are made quickly and intuitively, and reasoning is then added afterwards (Haidt, 2001; White, 2011).

White’s (2009b; 2011) and Taylor and White’s (2006) assertions presents as a caution against making claims about social work practice from methodologies that (purposefully) take social workers out of context. No such claims are made here. Rather, it is the meanings participants attached to knowledge, what they aimed to achieve, and the constrictions on the strategies they articulated that are identified. As White (2011) states, it is important to know how social workers ‘think’, and a variety of methodologies are required to explore such a complex area. Here, the data supports Fook et al’s (2000) and White’s (2009b; 2011) findings and extends them. Participants who viewed the distinction between fact and value as blurred shared being more comfortable with uncertainty than those who separated fact and value. Crucially, they also aimed to incorporate uncertainty into their knowledge. However, because the EBP perspective provides no space for subtle differences in subjectivity, knowledge and uncertainty, these differences were rendered invisible, and the causes of potential frustrations more difficult to understand. Naomi had a reconciled approach to knowledge, subjecting all forms of knowledge to scrutiny, and made this statement:

I suppose you couldn’t put “gut instinct” on a court statement, could you? And you couldn’t put “gut instinct” in your analysis. But you can put “In my practice knowledge” and you would have to evidence that, where your practice knowledge came from.

(Naomi)

Naomi was referring to ‘gut instinct’ not being sufficient knowledge alone to inform judgement and decision making about children and their families. However, she had reported wanting to incorporate CTK and associated uncertainty into all forms of knowledge sharing, yet was still constrained by the narrow definition of evidence she shared with other participants, which was informed by the EBP approach. Thus, the differences between social workers in terms of the way in which they share knowledge, and

incorporate uncertainty into their very definition of all knowledges, is rendered less visible. The thesis extends existing research from Fook et al (2000), who argues that expert social workers are able to use knowledge creatively, and transfer to it to different contexts. 'Although grounded in specific contexts, they are able to transcend the constraints of these because they respond to a higher calling' (Fook et al, 2000: 197). The data here suggests participants had the potential to be comfortable with uncertainty and use knowledge creatively, but were constrained because the profession as a whole, and wider society, could not.

Further, in relation to these concessions, did participants reinforce or resist the dominant form of EBP? As stated in chapter 2, research on EBM (for example, Batista et al 2016; Rosemann and Chaisinthorp, 2015; and less directly, Greenhalgh et al, 2008) explores whether medical professionals resisted or reinforced EBM and associated standardisation in their practice. Here, although participants who reflected on knowledge in a reconciled way and employed DKF aimed for foreignisation, it was against a background of a shared, narrow definition of evidence that participants reported impacted on the knowledge they shared with others. Therefore, individual strategies were rendered invisible because of the dominance of social factors – such as this shared definition of evidence – that participants reported being unable to overcome. This extends existing arguments about the way in which EBP and associated ways of knowing affect knowledge in child and family social work in unintended, complex ways (for example, Trevithick, 2014; Taylor and White, 2006; White, 2009b; 2011).

Stanford (2010) argues that social workers do resist the 'politics of fear' by taking risks, which involve taking a moral stance to support and empower service users in the context of a neoliberal society where such actions are inhibited. The thesis suggests that, in relation to knowledge work in this field, such risks are extremely difficult to take due to the overwhelming influence of the EBP perspective. This difficulty links to Batista et al's (2016) findings regarding the way in which medical professionals both reinforce EBM and improve their professional standing when going beyond existing rules and guidance when responding to individual cases. It also links to Greenhalgh et al's (2008) finding that tacit



knowledge was rendered invisible through the use of standardised outcome measures in a neurorehabilitation team. Here, the findings illustrate that EBP was subtly reinforced whether SKF or DKF was employed, and that foreignisation was particularly difficult to achieve, in part, precisely because of an existing lack of professional standing and associated inability to challenge the status quo.

Having explored why, despite the differences between participants, foreignisation was not achievable, it is interesting to revisit Nida's work on equivalence. Nida (1964) described two types of equivalence – formal and dynamic – which exist on a spectrum. The differences between the two resulted in different translations, and knowledge was shared in different ways, which ultimately affected the way that knowledge was understood by those who received it. However, both were underpinned by what Venuti (2012) calls the normative idea of correspondence. Although it is noted by Nida (1964) that full correspondence is impossible, it is still a legitimate aim. In a similar way, EBP as a whole assumes certainty exists, and is thus one of its goals (Taylor and White, 2000; 2001). The underlying assumption is that if a social worker digs deep enough, they will uncover 'the truth' about a child and their family (Taylor and White, 2000; 2001). Even those, such as Sheppard, who have adapted this approach to advocate searching for the 'best fit' or 'alternative least likely to be wrong' (Sheppard, 1995: 286) still assume that only one explanation can be 'most true' at one time (Taylor and White, 2001: 49-50). Whereas Taylor and White (2000; 2001) argue that when working with children and families – and in other contexts – many versions of reality can be 'true' at any one time.

In a sense, the way evidence was defined by participants, which was informed by EBP, viewed certainty and objectivity as a legitimate goal, whether this was viewed as possible or not. Therefore, whatever the strategy to share knowledge with others, all participants were constrained by this appealing aim for certainty and objectivity. In the translation studies literature, it was not until what Bassnett and Lefevere (1990) call the 'cultural turn' that these underpinning ideas were interrogated and challenged in detail (Gentzler and Tymoczko, 2002). Yet Venuti (2008) argues that even this shift has not been incorporated into the practice of translation, with domestication dominating. It might take an equally or

more significant 'cultural turn' in child and family social work to change the way knowledge is shared with others.

However, while we wait for this shift (and it does not look likely to happen in the near, or even distant, future) identifying the differences in the way knowledge is transformed depending on the knowledge filtering strategy used and the extent to which fact and value is separated can help us better understand why knowledge is shared in particular ways. For example, regarding the transformation of knowledge, from an analysis of various intralingual translations of the Bible, Zethsen (2009) argues that intralingual translation tends to involve simplification much more than interlingual translation. This, Zethsen argues, leads to more radical microstrategies being involved in translation within the same language – for example, texts translated for children or lay people. This leads her to argue that 'the differences in microstrategies are more a question of degree than of kind' (Zethsen, 2009: 809). For participants, then, even if foreignisation was difficult to achieve, a radical transformation of knowledge still took place. This involved negotiating both a form of knowledge which acknowledged uncertainty (CTK) and one that promoted the illusion of certainty (evidence). Through this process, participants described a form of simplification whereby the uncertainty was rendered less visible. This radical transformation of knowledge has important implications for both participants and the children and families they worked with and can still be acknowledged and explored whether broader cultural changes do or do not take place.

Below, some of the consequences of these different strategies participants shared using are explored. It is argued that the frustrations, differing expectations and apparently excessive repetition involved in knowledge sharing can be comprehended by first understanding the differences in the meanings participants attached to knowledge.

### **The consequences of knowledge filtering**

Knowledge filtering, like literary translation, involves social factors beyond an individual's control (Wolf, 2007). Although participants had different approaches to knowledge

filtering, underpinned by the extent to which they separated fact and value, these approaches were of course affected by those around them and the wider social work community itself. Below, the consequences of both the differences and similarities between participants are explored using three examples: participants' expectations of others, retranslation and collective authorship.

### **Managing expectations**

Nearly all participants reported that broader social, cultural and political factors influenced their work. This section describes the factors participants explored, and identifies the difference in response to such factors between those who employed SKF and those who employed DKF. The finding is that each group had a different response to the impact of external factors such as funding cuts on their knowledge filtering, and these differences led to reported frustrations from both groups.

The difference between participants who employed SKF or DKF was that those who employed DKF reflected that these factors impacted deeply on their knowledge filtering strategies, whereas it was a source of frustration for those who employed SKF. This was because participants who employed SKF distinguished between fact and value and therefore viewed how they defined and shared knowledge as separate from these broader factors, such as funding cuts. Gilly, who had a pragmatic approach to evidence and thus used various DKF strategies, spoke about the consequences of cuts to services and resulting staff shortages and lack of resources:

I think a massive [issue] for workers now is I feel a lot are confident and they know what risk is. It's getting it past the bar for it to be picked up and managing that risk if it's not and then also actioning on what you need to do there. And then because you're actioning lots of families at the same time and just becoming like a little hamster in a bowl and not developing your knowledge on what works really. And I think that's really what will happen.

(Gilly)

This illustrates the point that knowledge 'work' could only take participants so far. It could not overcome broader social, political and cultural factors, as Emily acknowledged:

I mean if we're being really honest sometimes the sticking point is how many children have we got in care this month. How many children have people got on their caseload...do we just allocate this case or not and I think...thresholds for want of a better word really do alter depending on...how many cases we've got, how busy people are. And sometimes you would take on a case because you've got a new social worker that needs something a little less complicated but if you haven't [you wouldn't]. The reality of decisions alter I think depending on what's going on or the time or what's just happened to you. If you've just had a nasty scare, have you had a serious case review or has a neighbouring authority had a serious case review all those things do affect - even in an ideal world we'd like to say no it's about the assessment, it's about the analysis, it's about clear decision making. It's not, really, because there's lots of human factors that get in.

(Emily)

Emily, as a participant with a reconciled approach to knowledge, acknowledged the role broader social and political factors played in judgement and decision making overall. Emily later stated how frustrating this must be for social workers who do extensive work with a family but do not get the outcome they want. This frustration was, in fact, shared by less senior participants:

I think sometimes there is a real battle between not individual workers but the team of workers against the managers and service managers? They don't seem to see it from our perspective and we're the ones that go out there and do the work. Then when we explain to them the situations there doesn't seem [to be] any one level it seems to change all the time, what they see as being one risky situation, you present them with something ten times worse but then it's not as bad. And it does create some tension... sometimes the gap between them [and us] is so huge we just don't understand how they've arrived at their decisions. And I think sometimes it feels like it depends what mood they're in, and that sounds daft but it just sounds like well why is that a risk situation and that isn't, and we just never understand that.

(Beatrice)

Molly also shared this frustration:

Understanding how decisions are made, the thresholds I really struggle with that all the time...because you have thresholds but I think a lot of decisions are made around manager's personal values. And I really, really struggle, because I think there's no real blueprint...I've got two cases [that are] really similar [but outcomes were different] ...I found that really difficult'

*Researcher:*

Can you think of what made the difference?

*Molly:*

No. I think it was just [related to] personal values and when they looked at the thresholds what they thought was a reasonable decision for that case.

(Molly)

Molly individualised her frustration, sharing her view that decision making in that instance was down to 'personal values'. Molly may have been referring to the moral judgements that are made in child and family social work, which are inherently social (Clifford and Burke, 2004; Stanford, 2010; Taylor and White, 2000; 2001; White, 2011). Here, it is identified that there were collective patterns around the role of value when defining and translating knowledge that participants acknowledged to greater and lesser extents. This depended on their approach to knowledge and the subsequent knowledge filtering strategies they employed. The data illustrates that participants who employed SKF strategies tended to individualise the role of value, as Molly did, because value and fact were separated and value was viewed as undesirable. Whereas participants who employed DKF strategies were of the view that wider social, political and cultural factors inevitably impacted on practice, due to their lack of stark distinction between fact and value. This difference not only impacted on the way participants defined knowledge and the strategies they reported using to share that knowledge with others, but also underpinned many of the frustrations participants articulated around knowledge sharing.

The extent to which individual judgement and decision making is influenced by heuristics and broader social, cultural and political factors is important but not the central focus of the thesis. Demir (2008) argues that disagreement is not always a product of miscommunication and it may be the case that it is the underlying beliefs of each party that differ. This research contributes to existing research on knowledge sharing between experts, particularly within child and family social work, by highlighting that this can occur within an epistemic community that seemingly work within the same knowledge framework. The current focus on communication and multi-agency working in child and family social work and beyond therefore does not always consider the underlying

differences that may exist between experts in the same field, and that communicating differently is not always the answer to resulting frustrations. White and Featherstone (2005) assert that, in relation to multi-agency knowledge sharing, existing habits must be identified and challenged, and the habits of others recognised. This assertion is extended because it has been identified that this is the case within, as well as between, groups of experts. Filtering strategies have a limit: they cannot 'solve' all translation problems. But understanding better the strategies child and family social workers use when engaging in knowledge 'work', and the beliefs that underpin those strategies, helps aid better understanding of subsequent judgement and decision making.

What is important in relation to the frustrations described by participants above are the differences between participants on the extent to which they expect these factors to influence judgement and decision making. It is easy to see how such frustrations occurred when expectations were so different. If these differences are not acknowledged, frustrations will continue, no matter how much a social worker might know about the different ways knowledge can be defined and the various strategies used to share such knowledge. Moreover, if this group of experts can better understand not only how they share knowledge, but why, there is potential for a more robust exploration of why evidence might be defined so narrowly, and the consequences of such a definition. This could occur alongside a debate on the role of CTK in social work if an understanding develops that it cannot be dismissed as individual bias alone.

Retranslation as a specific knowledge filtering strategy, and its consequences, are discussed below.

### **Retranslation**

Within the translation studies literature, retranslation (where a text is translated several times in the same language) is viewed as a positive event, enhancing different interpretations of a text (Gürçağlar, 2009). However, within non-literature writing – for example the translation of science and technical texts – retranslation is viewed negatively

as unnecessary (Gürçağlar, 2009). Retranslation is a useful concept when exploring the consequences of the strategies participants reported using to share knowledge because it identifies a) why what initially appeared as simple repetition was important to participants; b) the consequences of such repetition; and c) the importance of context to this form of repetition.

In the 1990s, the retranslation hypothesis, coined by Antoine Berman, was popular (Gürçağlar, 2009). Berman argues that ‘complete’ translation is not possible, and instead one must strive for this through retranslation (Gürçağlar, 2009). This theory was critiqued in the 2000s, and it is now widely considered that the context of the retranslation is more important than the content of the original (Gürçağlar, 2009). Here, participants shared choosing to look at a piece of knowledge about children and their families through various lenses, using different modes of knowledge sharing – in other words, they were describing a form of retranslation. It is important to note that multi-agency knowledge sharing is not explored here; it is the less visible retranslation by participants which they reflected was a key part of their knowledge ‘work’ that is the subject of this section, and which, the data suggest, resulted in both loss and gain for participants.

Every participant, whatever their approach to knowledge, reported a preference for receiving new referrals in several different ways:

What usually happens is our supervisor [will] look at the referrals, [will] get the referrals, and usually looks and sees if there’s any risk issues, then say look this is about this, this, this, we’ll listen and we’ll think, OK then, it sounds like this, but there’s always something else, they always unravel, so you leave space for that to happen rather than – I know you talk about risk as well but sometimes the risk element could be the thing that makes [the referral] come in, but it’s not necessarily the real issue. Because I’ve got one at the minute it’s a bit like that, it’s a risk thing but then the real issue is something completely different.

(Peggy)

Peggy went on to say:

We make contact with the referrer as well before we meet the family just to see what their take – because obviously, it’s just words isn’t it, so we need to know what the referrer means and what they’re getting at and what are the issues.

(Peggy)

Peggy referred to the various modes of knowledge sharing and different people she received knowledge from – her manager, the referrer, in person, by telephone, through a written report – but also emphasised the need to save ‘space’ for her own views and subsequent knowledge filtering. None of the participants therefore took the previous work for granted. Further, all managers agreed that more than one mode of knowledge sharing (for example written information and a telephone conversation by the same person) as well as different people filtering that knowledge was important:

There's always a conversation [regarding a new referral]. It needs to be done...you can't just have a look and 'oh, there's a referral there'. No, we have our discussions as managers around who we think needs to take the case... So, in that respect you bring over what you're used to doing, don't you as well? So, we'll get it, I'll do a little look of what's what and I'll have a discussion with the worker looking at this case, this, that and the other's happening and looking at first steps usually.

*Researcher:*

So, do you have an idea of why you want the case to go at that time and then you're having a discussion with a worker, or do you think it's totally up to them? Is it in the middle or, with what you want to happen with a case and what you want the worker to do with it, or are you leaving it open or is it in the middle?

*Fiona:*

No...because...as good as some of those assessments might be, it's one person's perspective and usually a short span because initial assessments don't take a lot of time, do they? So, I prefer to take that up and going to introduce yourself, get a gauge of, obviously, they need to say why they're involved, we've received a referral from da-da-da-da-da, a discussion around the concerns and gleaning from the family if they have the same view.

(Fiona)

Fiona referred to retranslation as a purposeful strategy, rather than it being an error or compensation for missing information. Reder and Duncan (2003) outline how different forms of communication can impede understanding of the meaning an individual is attempting to convey. Here, the data illustrate that participants had strategies to deal with this. Molly made an interesting point about obtaining several ‘filters’ before visiting a family, rather than simply visiting with what might be referred to as an ‘open mind’:



Well it's professional! Can't go to a family fumbling...if you're clear about the family and what's going on for them and what your [role will be], you can speak to the family about it. And...if I go with an overview it shows the family that you have read and thought about them, it gives them a chance to say actually oh no [own name] it isn't it's like this and so I say right, in that case what we can do is...So I think it is good to plan. I think families realise that you've thought about them and that they matter really.

(Molly)

Molly was of the view that retranslation, or several 'layers' of knowledge filtering was not simply a method of understanding, but was an ethical imperative. Molly was therefore showing families that they 'mattered' through this kind of knowledge 'work'. Importantly, as Peggy and nearly all other participants stated, it was important to leave 'space' for not just their own filtering, but the children and their families' filtering as well. As identified above, participants shared the gains associated with retranslation, including incorporating a child and their family's perspective; having more than one person's viewpoint; accessing both more and informal knowledges through different modes of knowledge sharing; and demonstrating 'respect' to the child and their family. Therefore, what might have seemed to be needless repetition or, from a more positivist perspective, an attempt to get closer to the 'truth' about a child and their family, was a sophisticated, purposeful knowledge filtering strategy.

However, many participants, when asked, acknowledged that they did not always have time to go through this process as thoroughly as they would have liked. Moreover, some participants shared reservations about this process, indicating a balance between a lack of knowledge about a child and their family and 'overtranslating' was desirable:

I'm making it sound negative I suppose. If you looked at it on paper you'd think it should be more positive if you get a face to face handover but I think you tend to get a little bit distracted and diverted by detail. So [manager] says oh we've had a referral in and neighbours have seen child wandering around late at night, mum's in drink, we've got a bit of a history with this family at this address, we don't know who the current partner is, and you start saying oh why and what and then you start getting into a bit of a dialogue about it. And before you know it you're jumping the gun so you're anticipating information which might lead you not to read the case history so much I think.

(Margaret)

Margaret made an important point that other participants made less directly. That is, 1) overall participants aimed for a balance between too little and too much information; and 2) a pre-existing filter was useful, but could also have unintended consequences, such as distraction and 'anticipating information' which might have impacted on their own filtering of their work with a child and their family. The difference between participants who employed SKF or DKF is that the latter allowed more flexibility when filtering knowledge. Those who employed DKF could also challenge existing filters – for example, Naomi challenged 'can you close it', because she engaged in strong knowledge filtering. Participants who employed DKF both thought that this kind of filtering was necessary, but also that it should not be taken for granted – they shared how important it was to question this if necessary. This is, in part, about incorporating uncertainty into knowledge, which has already been identified is a key feature of participants with a pragmatic or reconciled approach to knowledge. They could begin to ask – why have I been told this and why has this knowledge been shaped in this way? Overall, retranslation involves accessing both formal and informal knowledges, and is affected by whether participants employed SKF or DKF.

The data both support and challenge existing research in this area. Stanley et al (2011) use actor-network theory to analyse the way in which, in New Zealand, children were identified as being 'at risk'. Although their assertion that documents themselves have agency is not adhered to here, their finding that 'workers use risk discourses to legitimise practice decisions' (Stanley et al, 2011: 55) is useful because Stanley et al also argue that written documents make risk appear objective, although here the data suggest that it is the filtering process carried out by participants that privileges objectivity over subjectivity in formal settings. Stanley et al (2011) go on to say that, through these written documents, 'risk is recorded 'matter of factly' [as] something with ontological status that does not require further exploration' (Stanley et al, 2011: 57). The data here complicates this last point. Although subjectivity and uncertainty were rendered less visible through the act of knowledge filtering as participants described it, all participants aimed to question or

‘further explore’ knowledge in whatever form, for example written or verbal, although they described not always having the time to do so. Further, this questioning was affected by the knowledge filtering strategies participants used, underpinned by the extent to which they distinguished between fact and value.

### **Collective authorship**

The concept of authorship within narrative theory is defined as ‘a person (or persons) who is the originator of a particular narrative’ (Baldwin and Estey-Burt, 2013: 21). This concept has been complicated with reference to the relationship between the author and reader within narrative theory (Baldwin and Estey-Burt, 2013) and the translation studies literature (Boase-Beier, 2004; Fisher, 2010; Venuti, 2008). For example, Venuti (2008) argues that the individualistic notion of authorship common in British and American cultures views authorship as ‘unmediated by transindividual determinants (linguistic, cultural, social) that might complicate authorial originality’ (Venuti, 2008: 6). Here, the focus is not on authorship within a particular text or conversation, but how participants reflect on what they identify as the communal nature of authorship in child and family social work, and the strategies they reported using to respond to these reflections. How participants described the communal nature of written recording, the ambivalence of some participants about this, and how this links to broader neoliberal, individualist ideas of responsibility and blame in the profession is outlined below. The focus was on writing because this was the mode of knowledge sharing some participants problematised and led to interesting discussions in the interviews about the nature of knowledge within child and family social work.

Below are two examples of the day-to-day nature of collective authorship as described by participants:

*Researcher:*

Can you think of an example where you've had to make a tweak on a report or say 'oh, just go back and do that a bit different[ly]'?

*Fiona:*

Yeah, I mean I've just done it because one of the workers is sending a letter of expectation out and one of the things of the expectation - I didn't understand what it meant - so we just changed a bit of the wording...But I was also going to say, that worker did say to me '[own name], will you cast your eyes over this, just make sure it makes sense'.

(Fiona)

You might be the one writing it but you have little inputs from everybody really.

(Beatrice)

Collective authorship refers to knowledge shared by one individual through writing being an accumulation of several different filters from various social workers, and was viewed as an everyday occurrence by participants. Some participants – Celia in particular - shared concerns about specific filtering strategies she reported that some of her colleagues used when either inexperienced, short on time, or both:

I think a common theme of the reports that I've read is the fact that things are just copied and pasted from either previous documents or case notes. Which, sometimes just isn't relevant, just isn't relevant...You can tell where the generic baby description - such and such is too young to express their views or have an understanding of - and it's a very bog standard word as opposed to putting observations in there and some of your analysis what you've seen, what you feel...a lot of overtyping, because of timescales, because of pressures people are under now, because they're coming in relatively inexperienced and perhaps not got the support that they need or the time that they need for that support. There are very much "does anybody have a core assessment on a four-year old" and then they overtype it, rather than using it as a guide. And sometimes the assessments they get off people aren't good quality assessments, so I think there needs to be a pool of experienced workers' good quality assessments for them to learn from. Because if they get a poor one then that sets them up because they tend to use that template over and over and over again.

(Celia)

The issue of reports being copied and pasted has received some attention in sections of the media (for example Schraer, 2014). Here, the data suggest that identifying the social nature

of this knowledge 'work' can help us understand why some child and family social workers respond to broader social and political factors in this way. For example, the differences between participants with binary, ambivalent, pragmatic and reconciled approaches to knowledge, and the subsequent strategies they used to share knowledge with one another, have been identified. The data suggest that participants with a pragmatic or reconciled approach to knowledge, such as Celia, were aware of the importance of context and sufficient strong knowledge filtering, underpinned by a recognition that the line between fact and value is blurred. Those with a binary or ambivalent approach to knowledge who did not yet have these skills and who had to complete those same reports thus might turn to 'copying and pasting' because they did not filter or contextualise knowledge in the same way. Jemima, who employed SKF, shared her experience of the ambiguities around authorship:

I was told to do an assessment, I've done one, and I don't feel it's a very positive one and I'm being told well, make it a positive one then. So, that's a very direct, but, on the other hand, you know, my manager has got a vast amount of experience...

(Jemima)

Jemima was ambivalent about the extent to which she should be directed by her manager and this ambivalence was shared with other participants who employed SKF strategies.

Tabitha, who also used SKF, spoke about this dilemma:

[Other social workers] don't understand why and they feel sometimes they haven't been given enough explanation as to why they're saying that's the path they need to go down [with children and their families]. Because if you don't believe in it and you don't understand it you're not going to grasp it and own it are you, you're going to constantly go back to your supervisor and say well I've done this what do you want me to do now? And what the supervisors are trying to do is to put that ownership back on the worker and say well, you tell me what the problems are and you tell me what you think you should happen and they're coming in a bit stumped thinking I don't know and it's trying to build their confidence up to say that, but when they're trying to do it they're being blocked and said well no but you need to do that... I am hearing it from both sides of that that dilemma.

(Tabitha)

This can be described as frustration resulting from differences in knowledge filtering strategies, particularly the difference between hesitant and confident knowledge filtering. Participants who employed DKF shared their frustration about hesitant knowledge filtering and the word 'ownership' was often used:

One of the things I don't like about some social workers, they use their management as a threat...And I think that's just inexperience to be honest...you know oh I've got to take this back to my manager my manager says this my manager says that and what I try to say to my social workers is, you have to make those decisions. if you are unsure, then you say you're unsure and you will seek you know guidance and come back...you have to take responsibility for it...these are your families, you are working them supporting them you are supervising them you are managing them so you have to own it.

(Lesley)

These frustrations illustrate the collective nature of knowledge filtering. Whatever strategy a participant reported using would always be affected by other strategies: each form of knowledge filtering did not stand alone. The consequence of this was that because participants described it as a collective process, individual differences could potentially be rendered invisible. For example, Celia shared her concerns about the way to respond to 'copying and pasting':

Obviously if we read that [type of report], then we've got two choices what to do with it. We can either re-word it, which you've got to be mindful that you're re-wording somebody else's report, and you have to do that very, very carefully to make sure that you take that ownership. Or you can go and address that with the [person who wrote the report] and try and challenge that. Now the difference is if that social worker's on that same level as you, you're not there to manage them...or do you just take the ownership of the report away from the social worker and say [good] report, just you know, dollied up a few bits for you...it is really difficult because everybody's got their parts in the process and actually, nobody's actually got ownership, and I think in social work we're very good at not having ownership of information. I think there has to be tighter things on, if that social worker is typing and signing that report, then they have to take ownership of that report and they have to take the responsibility for that report and I think if that happened, maybe the supervisors...would have to then take a little bit more ownership and responsibility of supervising that. Whereas everybody puts their hands on it, everybody puts their little bits in it, and only one person will stand up and answer for it. Which isn't fair for that social worker.

(Celia)

Celia was referring to the concerns she had about her influence on a report remaining invisible. How viable is it to make every influence on the knowledge filtering associated with a child and their family visible when the number of influences are so large? Celia is also referring to the question of individual responsibility. How do we balance the collective nature of knowledge filtering with individual accountability and responsibility, when individual social workers are blamed in the media for abuse which is located in much broader social, political and cultural contexts? Expectations between participants differed, as well as the strategies they used to share knowledge with others. But these differences were difficult to see because these strategies were often taken for granted. They were also less visible because of the dominance of a narrow definition of evidence that 'filtered out' other forms of knowledge that participants shared had a big impact on their practice.

## **Conclusion**

Existing research on knowledge sharing in various disciplines, as well as insights from the translation studies literature, have aided an exploration of the strategies participants reported using to share CTK and evidence with other child and family social workers. As Horlick-Jones states, 'patterns of risk reasoning by professionals have a great deal more in common with that of lay people than conventional wisdom might suggest. They do, however, account for their reasoning and actions in rather different ways' (Horlick-Jones, 2005a: 269). Part of the way participants did this was to use specific filtering strategies when sharing knowledge with others. A filtering process is essential when sharing knowledge with others because it is impossible to share 'everything' – as in translation, loss is inevitable (Demir, 2008). This includes intralingual translation, as Zethsen (2009) emphasises. It has been identified that there were two main strategies participants reported using to share knowledge, conceptualised here as standard knowledge filtering (SKF) and dynamic knowledge filtering (DKF). SKF was employed by participants who took a binary or ambivalent approach to knowledge as discussed in previous chapters, and DKF

was employed by those who took a pragmatic or reconciled approach. Such strategies highlight the way participants dealt with the issue of explication in relation to gut feeling, a form of CTK, which is discussed below.

SKF was employed by participants who reflected on knowledge in a binary or ambivalent way. It was characterised by underfiltering, hesitant knowledge filtering and changing the way knowledge was shared depending on the audience receiving that knowledge. Participants who employed SKF were of the view that knowledge 'should' be straightforward and easy to share, which contradicted the strategies they reported using, which were necessarily slightly more complex. This was all underpinned by a privileging of objectivity due to the underlying separation between fact and value participants who employed SKF made. Underfiltering was a response to uncertainty that involved an attempt to share 'everything' 'just in case' that knowledge was relevant in future. Participants either employed this strategy at all times or distinguished between when it was necessary to share everything and when it was not. Informed by Carson and Bain's (2008) assertion that whether to share knowledge with other experts in health and social care has been described as a risk decision itself, the data here suggest that those who employed SKF did not want to risk not sharing knowledge, but that this created two risks they might not have been aware of. Firstly, a risk of rendering invisible the filtering they necessarily engaged in, considering they could not share 'everything'; and secondly, sharing so much knowledge that those on the receiving end had additional filtering processes to engage in which might otherwise have been unnecessary.

Hesitant knowledge filtering referred to the way participants who employed SKF viewed knowledge sharing as a means to an end; they shared knowledge for the sake of sharing. This related to their reliance on their managers or senior colleagues to direct the knowledge filtering they did engage in because they did not feel 'qualified' to explicitly impose their own filter on work with a child and their family. This perceived lack of power had the potential to render invisible the inevitable knowledge filtering that did occur as well as making it difficult for participants employing SKF to challenge their managers. Finally, SKF involved sharing knowledge differently depending on the audience receiving that



knowledge. Participants who employed SKF attempted to filter out CTK and uncertainty when sharing knowledge, and the extent to which they attempted to do this was affected by who they were sharing knowledge with.

DKF was employed by participants who reflected on knowledge in a pragmatic or reconciled way, and was characterised by a 'less is more' approach to filtering and confident knowledge filtering. All participants who employed DKF aimed to share knowledge in the same way regardless of audience – and wanted to share both CTK and evidence – yet their way of doing so was very different. Participants with a pragmatic approach rendered CTK less visible due to the use of 'scientific' and objective language when sharing it with others, whereas participants with a reconciled approach aimed to keep CTK visible, and did this because they did not separate fact and value, which meant they subjected CTK and evidence to the same scrutiny even when sharing knowledge with others. Therefore, it would not have made sense to 'filter out' CTK because it was not value-free – it was incorporated because there was a recognition that all knowledge was value-laden to an extent.

Having outlined the strategies participants who employed SKF and DKF reflected on using when sharing knowledge with others, it was argued that Venuti's (2008) analysis of the social nature of translation and associated concepts of fluency, domestication and foreignisation could aid understanding of the strategies participants employed to share knowledge with others. It was argued that understanding how participants defined CTK and evidence and the underpinning meanings linked to those definitions, not just the strategies they reflected on using to share knowledge with others, were important. This was because participants who employed SKF separated fact and value, and therefore aimed to 'filter out' CTK because it did not fit with the values of what can be referred to as the dominant language in child and family social work – EBP. In relation to participants who employed DKF, it was only those with a reconciled approach to knowledge who shared an aim to incorporate CTK into both formal and informal spheres, with participants with a pragmatic approach aiming to filter out CTK using scientific language that fit with the dominant EBP model. In this way, despite the similarities in the strategies participants with a pragmatic

and reconciled approach shared using, it was only participants with a reconciled approach to knowledge who aimed for what Venuti (2008) calls foreignisation.

Despite these aims, it was argued that, because all participants defined evidence in the same way (as discussed in chapter 6) uncertainty and subjectivity was rendered invisible by participants when sharing knowledge with others. As Gentzler and Tymoczko (2002) state, translation can (intentionally or unintentionally) affirm or resist the status quo. Here, the influence of dominant conceptions of evidence can be seen on both the meanings participants attached to specific knowledge and the reasoning behind how they reported sharing knowledge with others. Despite attempts by participants who employed DKF to aim for foreignisation, and thus incorporate CTK and associated uncertainty into knowledge shared with others, the narrow definition of evidence shared by all participants always impacted on the extent to which participants thought this was possible. Whether participants aimed for domestication or foreignisation was thus rendered less visible due to the overwhelming social factors, such as the shared definition of evidence, that individuals reported finding difficult to overcome.

This adds to existing research on the extent to which social workers are comfortable with uncertainty (Fook et al, 2000; Spafford et al, 2007; 2009; Taylor and White, 2006; White, 2009b; 2011). These findings illustrate that participants with a reconciled approach to knowledge do feel 'comfortable' with uncertainty, and aim to incorporate this in the way they share knowledge with others, but are constrained by narrow definitions of evidence. The findings also provide much-needed detail on the differences between child and family social workers in terms of how they respond to uncertainty when sharing knowledge with others, the link between meanings attached to different knowledges and knowledge sharing strategies, and the positive, as well as negative, consequences of not sharing, as well as sharing, knowledge with others.

Nida's (1964) work on equivalence, and the dominance of this concept in the 1960s and 1970s (Venuti, 2012), was not challenged within the translation studies literature on a broad scale until what Bassnett and Lefevere (1990) call the 'cultural turn' in the 1990s

(Gentzler and Tymoczko, 2002). Yet Venuti (2008) argues that even this shift has not been incorporated into the 'practice' of translation, with domestication dominating. It was argued that it may take an equally or more significant shift within child and family social work, as well as a change in the response to risk and uncertainty at a societal level, for foreignisation to be achieved. This could lead to both CTK and evidence being more visible and thus more easily subject to scrutiny. However, until (if) this occurs, the findings can still help identify the differences between participants that affect the way knowledge is transformed, and the impact of such transformation that Zethsen (2009) describes on judgement and decision making.

Nearly all participants reported that broader social, cultural and political factors influenced their work. The difference between participants who employed SKF or DKF was that those who employed DKF reflected that these factors impacted deeply on their knowledge filtering strategies, whereas it was a source of frustration for those who employed SKF. Three consequences of knowledge filtering were discussed, including differences in the expectations of participants in terms of how much knowledge sharing strategies could achieve; the reason for the repetition of knowledge participants reported, using the concept of retranslation; and the ambivalence participants reported on the collective nature of authorship. These consequences raised the question: how is the collective nature of knowledge filtering balanced with individual accountability and responsibility, where individual social workers are blamed in the media for abuse that is located in much broader social, political and cultural contexts? The aim of this chapter has been to attempt to answer this question by identifying and understanding the strategies participants reported employing to share knowledge with others and their consequences, in order make an original contribution to existing literature on the subject.

## Chapter Eight – Conclusion

### Introduction

The thesis explored how one group of experts in England define and share knowledge with their co-workers in a profession dominated by a risk-orientated approach to uncertainty (Kemshall, 2016; Stanford, 2010; Tanner, 1998; Webb, 2006). In this chapter, an overview of the contribution to existing research is provided, followed by a discussion of the strengths and limitations of the study and potential areas for future research.

The study is placed in the context of late modernity, where the response to uncertainty has shifted from one broadly based on fate in pre-modern times to one predominantly based on risk (Ewald, 1991), although it is acknowledged that ideas related to fate and destiny still exist (Giddens, 1990; 1991; Lupton, 1999). During this time, risk moved from being narrowly associated with probability to being more broadly associated with danger (Douglas, 1990), with Beck's (1992) risk society thesis proposing that risk is now central to the organisation of society in a way it has never been before. More recently, existing literature has highlighted other responses to uncertainty in everyday life, such as trust (Alaszewski and Coxon, 2009; Gambetta and Hamill, 2005; Zinn, 2008), intuition (Zinn, 2008), emotion (Zinn, 2008) and hope (Brown, 2013; Zinn, 2016). However, the formal risk approach tends to be preferred in larger organisations or institutions, with experts being given risk assessment and management tools to respond to particular areas of uncertainty (Alaszewski and Coxon, 2009). A social constructionist approach is taken to risk and uncertainty here. Within this approach, rather than asking whether risks exist objectively outside social systems, the way in which risk, as a response to uncertainty, is constructed – including the meanings underpinning that construction – is the object of study (Lupton, 1999).

Child and family social work is an interesting topic to discuss in relation to risk and uncertainty because child abuse, which is categorised as a 'risk object' by Hilgartner (1992), has come to dominate discussions about this epistemic community (Hall, 1997).

Uncertainty permeates through the profession (Smallbone et al, 2008), with related policy being based on individual, highly publicised, tragic child deaths (Corby, 2006; Fawcett et al, 2004; Payne, 2005; Parton, 2012; Webb, 2006). These developments have led to a quest for certainty, including a 'preoccupation with risk factors, "dangerousness" and predicting who is likely to abuse' (Taylor and White, 2000: 9). Clarification was provided on exactly what is meant by the terms 'child' and 'child abuse', and a historical overview of how current definitions of such terms have been shaped by social, political and cultural contexts across time and space was provided. Such developments do not mean society is getting closer to the 'truth' about child abuse; as knowledge changes, our response to it changes (Hacking, 1991). It was argued that, in relation to child and family social work, taking this approach to knowledge does not eliminate the need, in the context of finite time and resources, to make judgements and decisions against a background of inherent uncertainty (Pielke, 2007: 56). What is required is the recognition that judgements relating to risk and uncertainty can be made, but the social processes underlying these judgements should not be ignored (Taylor and White, 2000; 2001).

Child and family social workers were defined as experts, and a further exploration of what constitutes 'expert knowledge' was provided in chapter 3. It was argued that although expert and 'ordinary' knowledge are both social in the same way (Kusch, 2002), experts account for their reasoning in very different ways (Horlick-Jones, 2005a: 269). Existing research on such reasoning, including expert judgement and decision making and knowledge sharing, was also outlined in chapter 3. Existing research on expert knowledge sharing traditionally focuses on knowledge sharing between groups, rather than within them, although more recently, research on information filtering has begun to complicate the assumption that knowledge sharing within child and family social work is straightforward (Huuskonen and Vakkari, 2015; Lees, 2017; Thompson, 2010; 2013; 2016). However, there remain gaps in our knowledge on what knowledge child and family social workers view as central to their practice; how they define such knowledges; what strategies they use to share such knowledge with others (if they can) and why; and what the consequences of these understandings and strategies are. It was argued that insights from

the sociology of scientific knowledge (SSK) and literary translation studies could potentially yield new insights into such topics. Below, the methodology used to address this gap is outlined.

## **Methodology**

Ethical approval for the research was received in May 2012 and the research was conducted under the University of Leicester Research Code of Practice and the British Sociological Association (BSA) Code of Ethics. In chapter 5, a qualitative approach to the research questions was outlined. The reasoning behind the sampling frame was defended, with qualified and unqualified child and family social workers included in the study, which challenged what Bogner and Menz (2009) call the social-representational approach to expertise. 'Theoretical depth' (Abrams, 2010; Curtis et al, 2000) was prioritised when choosing the method of sampling, which was convenience/purposive and snowball sampling. Social workers can be viewed as a 'hard to reach' group, making convenience/purposive sampling a useful technique for the study which could also utilise the contacts I had from previous employment. Attempts were made to ensure that 'isolates' not belonging to particular networks were not ignored (Atkinson and Flint, 2001) and those who participated in this study may not represent the views of those who do not wish to be involved. Nevertheless, the aim of the sample was to reach various levels of hierarchies in the sector, and it is not claimed that it is representative of the sector as a whole.

Semi-structured interviews were the main method of data collection. This was because the study explored what social workers think about what they do, rather than what they do, a distinction that Silverman (2005) applies to whether interviews or observation is appropriate in social research. Considerations regarding interviews with experts were outlined, including the creation of a semi-structured interview guide (see appendix 9.3 and 9.4) that was prepared through a review of existing literature. There was an aim to explore informal knowledges that are less accessible than the formal knowledge child and family social workers are used to sharing. Research diaries, a form of solicited documents (Flick,

2009), were used to track the thoughts of social workers at three different stages of knowledge work. A pilot study was completed, and in total sixty-two people were asked to take part, with twenty-seven of those either declining to take part or not responding. Thirty-five interviews were carried out, and twelve research diaries were completed. Unfortunately, the data from one interview in the study could not be included.

The way in which I presented and navigated various identities as a researcher, student and previous social worker directly influenced access to participants and subsequent knowledge that was available to me (Archer, 2002; Feldman et al, 2003; Roesch-Marsh et al, 2011) and co-constructed during interviews. During the research, I took Bogner and Menz's (2009) advice and 'played' with these identities in different ways depending on the participant I was interacting with. I noted that different participants received my identity as a previous social worker in different ways, and, as Sandfort (2003) argues, I was 'tested' every time I contacted or met someone new. Relationships had to be constantly maintained (Jamal and Lin, 2003) to ensure access continued. I therefore occupied the 'space between' (Dwyer and Buckle, 2009) the insider-outsider dichotomy. Data were analysed using an abductive approach (Timmermans and Tavory, 2012) to thematic analysis. Abductive analysis is constructed 'from a grounded theory foundation to foster theoretical innovation' (Timmerman and Tavory, 2012: 169) and crucially, enabled sociological creativity through identifying and analysing surprises in the data. The findings are outlined below.

### **Defining informal knowledge: the case of gut feeling**

In chapter 6, gut feeling, an informal type of knowledge, was explored. The aim of the methodology was to explore informal knowledges more generally. However, during the pilot and following interviews, it became clear that this form of knowledge was central to participant responses to uncertainty in a profession dominated by risk (Kemshall, 2016; Stanford, 2010; Tanner, 1998; Webb, 2006). The term gut feeling was explored in more detail by referring to existing literature on the subject. How participants defined gut feeling was complex, and divided into three parts and included the meanings attached to this form

of knowledge: a) it was argued that gut feeling is a form of collective tacit knowledge (CTK), thus it is social, warranting a sociological analysis; b) two broad, communal themes associated with this form of CTK were identified; and c) it was identified that participants reflected on the term in different ways. These differences are important because they underpin the strategies participants used to share (or not) knowledge with others, which was explored further in chapter 7.

It was argued that Collins's (2010) theory of tacit knowledge enabled a robust exploration of gut feeling, and it was argued that gut feeling, as participants described it, was a form of what Collins calls collective tacit knowledge (CTK). Due to CTK being located in the collective, rather than the individual (Collins, 2010), sociological analysis is required to acknowledge the role of social context in determining why one might get a 'gut feeling' in a particular situation. Criticisms of Collins's (2010) typology were outlined, although it was argued that such criticisms do not outweigh the power of his work in terms of emphasising the social nature of gut feeling. The most important point was that gut feeling as participants described it was always a form of CTK – in other words, it was located in the collective, rather than the individual (Collins, 2010).

It has been identified that this form of CTK, as participants described it, was a combination of a physical response to a situation and the CTK that created that response. The focus here was on the CTK component. From an analysis of the data, it was argued that this form of CTK was a mix of wider societal norms and values and specific social work knowledge gained in practice. The complex question of how participants defined gut feeling was separated into three parts and included the meanings attached to this form of knowledge. It was argued that gut feeling is a form of collective tacit knowledge (CTK), thus it is social, warranting a sociological analysis. Two broad, communal themes associated with this form of CTK were identified: a) uncertainty coming to the fore that had previously been hidden; and b) incongruence between the current situation and past experience. Although it underlines all child and family social work practice, CTK brought uncertainty to the fore in specific situations, and was a tool participants used to decide when to ask questions and when to explore further. CTK could be associated with what is called confirmation bias in



the psychology literature (Taylor and White, 2006), for example if a feeling that 'something's not right' is acted upon together with disregarding other knowledges that may support another viewpoint. In other words, gut feeling, as a form of CTK, was fallible, and warranted as much scrutiny as any other form of knowledge. It also referred to general uncertainties rather than a specific emotion or judgement. The second broad theme related to CTK, incongruence, was collective, rather than individual, because it was based on the CTK of this epistemic community.

Finally, it was identified that participants reflected on the term in different ways. These differences are important because they underpin the strategies participants used to share (or not) knowledge with others, which was explored further in chapter 7. Four responses to CTK were outlined: 1) binary; 2) ambivalent; 3) pragmatic; and 4) reconciled. What differentiated the four responses was the extent to which participants separated fact and value. It has been identified that it was these reflections on this form of CTK that affected the way participants shared such knowledge with others, which was discussed in chapter 7. 5 of the 7 participants who reflected on CTK in a binary manner found it difficult to articulate what they meant by the term 'gut feeling' and all 7 made a strict distinction between fact and value. Although sharing the common themes associated with this form of knowledge identified above, the 5 participants in this group who stated they did use this form of CTK had conflicting expectations of whether certainty could, at some point, be achieved through gut feeling. The 2 who stated they did not use this form of knowledge were referring to their concern about the fallibility of CTK, reflecting their strict distinction between fact and value.

The 8 participants who reflected on CTK in an ambivalent manner also found it difficult to articulate what they meant by 'gut feeling'. These participants had the ability to reflect on this form of CTK, its fallibility and the place it had in their practice, but struggled to reconcile this with EBP's narrow definition of evidence. Again, they made a distinction between fact and value but reflected on this divide and CTK itself in a different way to those with a binary approach. The nine participants who reflected on CTK in a pragmatic way were more detailed in their reflections, providing clarity about what they meant by the term 'gut

feeling’, stating that it was a tool that highlighted uncertainty rather than a certain judgement. Interestingly, underpinning this type of reflection was a divide between fact and value. This was because this group used ‘scientific’ language to justify their use of CTK thus reinforcing the existing EBP knowledge hierarchy. It was only the eight participants who reflected on this form of CTK in a reconciled manner who did not make a distinction between fact and value. They were clear about their reflections on ‘gut feeling’, had reconciled their use of CTK in their practice and did not expect certainty from CTK. Crucially, they viewed all forms of knowledge as fallible – questioning both ‘evidence’ and CTK.

That ‘gut feeling’ was argued to be a form of CTK using Collins’s (2010) typology of tacit knowledge was underpinned by Kusch’s (2002; 2010) communitarian epistemology, in the sense that CTK can only be understood in relation to participants’ membership of the social work community. This is important because it adds a sociological dimension to our understanding of informal knowledges in child and family social work, as well as refuting the idea that gut feeling is simply ‘common sense’, which only serves to render this form of knowledge less visible. Overall, the extent to which participants separated fact and value underpinned their interpretations and expectations of gut feeling, identified as a form of CTK. Further, these findings support Fook et al’s (2000) assertions that more expert social workers are more comfortable with uncertainty as well as Sternberg’s (1999) finding that individuals at different levels of hierarchy have different tacit knowledge. However, the thesis explores how knowledge is defined and shared, rather than knowledge learning, and thus extends this research by finding that the extent to which participants were comfortable with uncertainty – and gut feeling – was related to how they conceptualised the fact/ value distinction. Moreover, participants who viewed the line between fact and value as blurred were not just comfortable with uncertainty, but incorporated uncertainty into their very definition of different forms of knowledge, including this form of CTK.

### **Exploring evidence: the social worker perspective**

Chapter 6 explored evidence, a formal type of knowledge. Current debates in child and family social work on what constitutes evidence in this epistemic community centre around evidence-based practice (EBP). It was argued that EBP based narratives support a narrow, homogenised view of knowledge, with the power relations inherent in who decides how evidence is defined often being ignored (Taylor and White, 2000; 2001). EBP is extensively debated in the literature in relation to many different occupations, but in the social work literature, (for example, Drisko and Grady, 2012; Gray et al, 2009; 2014; 2015; Sheldon, 2001; Trinder, 2000; Webb, 2001), debates centre around how to define EBP, how to implement it and whether it should be implemented at all. Although they do not necessarily agree with the EBP hierarchy of knowledge, Gray and Schubert (2012) argue that, in a neoliberal context, EBP helps make social work sustainable. Chapter 6 focused on other consequences of this dominance, and contributed to the debate on what is lost – and gained – when EBP dominates child and family social work. It was argued in chapter 5 that participants had different responses to CTK depending on the extent to which they separated fact and value, and chapter 6 asked whether how they defined evidence, and their response to it, was similarly complex. To explore these questions, the meanings social workers attached to the term evidence were explored more deeply, rather than observing what impacts practice and asking the question in the explicit context of the implementation of EBP.

There were three main original contributions to knowledge in this chapter. The first contribution was that how participants defined evidence more generally, rather than in relation to the implementation of EBP, was identified, which adds to existing literature on the subject and helps provide clarification on what is meant by what is often an abstract, ill-defined term. Secondly, the complex question of how participants defined evidence was explored in two ways. Firstly, it was identified that evidence was used as an umbrella term to refer to any knowledge that had the potential to promote change for children and their families. The data illustrated that defining evidence is a social process, based on constant assumptions about the meanings others attach to evidence and how they respond to those meanings. Three main examples of such knowledge provided by participants were physical

and environmental observation; the child's voice; and parental engagement. All participants gave the example of physical and environmental observation when discussing evidence. It was thus the form of knowledge participants viewed as most closely associated with certainty and objectivity. Crucially, it was the expert's observation that was referred to, whether first-hand or by other professionals, and quantifying this kind of observation was also mentioned by participants. Secondly, when discussing evidence in the abstract, it was seen as 'obvious' that the child's voice was central to any definition of evidence. This may seem to contradict existing research that suggests the opposite (such as Helm, 2011), but it was noted that just because a child's voice was seen as central to a definition of what knowledge constitutes evidence does not necessarily mean a child's views are central to judgement and decision making. It simply meant that this form of knowledge was privileged over other knowledge, such as CTK. Whether parents 'engaged' with professionals was the final component of what constituted evidence for participants, which excluded any uncertainty-related context relating to why parents engaged (or not). It also excluded primary caregivers who were not parents. Further, it was the combination of all three examples, and the link between evidence and change, that constituted how participants defined evidence.

That these forms of knowledge were considered to constitute evidence was interesting in terms of what this definition did not include, such as moral judgement (Clifford and Burke, 2004; Stanford, 2010; Taylor and White, 2000; 2001; White, 2011); emotion (for example, Ase Wagli, 2010, cited in Ericsson, 2010, and White, 2010; Ferguson, 2005; 2009; 2011; Forsberg, 1999; Helm, 2011; 2016; Lees, 2017; O'Connor and Leonard, 2014; Thompson, 2010; 2013; 2016); and gut feeling as a form of CTK that all also contribute to social work judgement and decision making. The difference between what was and was not considered evidence was the extent to which that form of knowledge was associated with certainty. This is, perhaps, unsurprising considering the knowledge hierarchy underpinning EBP. However, this study provided more detail on what type of knowledge was considered evidence, which then formed the basis of further analysis of the strategies participants reported using when sharing knowledge with others.

Research was mentioned by participants alongside evidence, but was not directly associated with change in the same way as physical and environmental observation, the child's voice and parent/carer engagement. This was interesting, considering how central research is to EBP (Payne, 2005). Existing literature on how social workers use research in their practice can appear contradictory, although overall the data supports existing findings from Avby et al (2015) that suggests research is considered a separate resource rather than being completely incorporated into practice. The data here aids a move toward providing an explanation of why this is the case by exploring in more detail what constitutes evidence for social workers and, importantly, why. The SSK literature (discussed in chapter 3) has identified that research is practice, and thus it is messy and contradictory. Moreover, social research has been described by White and Stancombe (2003: 155) as 'intrinsically contestable'. If research is not seen to be providing certainty, the data suggest social workers might use research in other ways (such as filling a perceived knowledge gap) but not directly associate it with evidence because this term is so narrowly associated with certainty. Therefore, this exploration of the meanings participants attached to evidence identifies a gap between research and practice, thus providing an original contribution to existing literature on the subject.

The second part of chapter 7 explored how participants defined evidence and the way in which they reflected on the term. The 7 participants with a binary response to CTK also had a binary response to evidence. That is, they separated fact and value and privileged evidence over CTK. They did so because knowledge placed under the umbrella term evidence was considered objective, less ambiguous and therefore closer to certainty. Evidence was therefore viewed as very different to CTK. The 8 participants with an ambivalent response to evidence were very similar in their response to those with a binary perspective, but the difference was that they were more uncertain – they questioned that response, in the same way they questioned the separation they made between fact and value. An important point about this group is that they questioned their definition of evidence and the distinction between fact and value only in terms of their individual practice, rather than child and family social work more generally. 11 participants had a

pragmatic response to evidence, which meant they viewed the line between fact and value as blurred but still separate. Their response to this was to use 'scientific' language to legitimise all forms of knowledge, including evidence. The 8 participants with a reconciled approach to evidence were the only participants who did not view fact and value as separate, thereby viewing all types of knowledge as inevitably influenced by values and the wider social context. This meant that they questioned both evidence and CTK in similar ways.

The shared definition of evidence provided by participants was even narrower than the abstract EBP definition, which is based on EBM, which was viewed as perhaps not surprising. Without the status associated with medicine, participants defined evidence more narrowly than EBP guidelines as a strategy – purposefully or not – to mitigate against their comparatively low status as a profession. It was clear that participants had different responses to such a strategy, but, despite such differences, all participants – reluctantly or not – accepted that this association between evidence, objectivity and certainty was what had the potential to effect change for children and their families. Therefore, the differences between their responses to evidence and CTK could easily be missed. In this way, they were all constrained, regardless of their approach, by the (admittedly appealing) quest for certainty prevalent in the epistemic community. Thus, the data suggest that any attempt to individualise debates about uncertainty in child and family social work are misguided.

### **Knowledge sharing strategies and their consequences**

Informed by prior analysis of CTK and evidence, chapter 8 explored the strategies participants described using to share knowledge with others within their team. It was argued that insights from the translation studies literature have not yet been fully utilised within research on expert responses to risk and uncertainty. Thus, five concepts from the translation studies literature – fluency domestication, foreignisation, retranslation and authorship – were used to aid exploration of the strategies participants reported using when sharing knowledge within their epistemic community. Specifically, the findings

extended existing research, which tends to focus on the complexities of multi-agency knowledge sharing, by exploring participants' reflections on knowledge sharing within their own team. Extending existing research on 'information filtering' in child and family social work (Lees, 2017; Thompson, 2010; 2013; 2016; Huuskonen and Vakkari, 2015), further detail was provided on why knowledge was filtered in particular ways, and it was argued that knowledge filtering had both positive and negative consequences for participants. Overall, literary translation studies, as well as research which utilises similar concepts, helped create a metaphorical 'space' to explore the strategies participants described when reflecting on how they shared knowledge with others.

It was identified that participants reported constantly making choices about the way in which they filtered the knowledge they shared. Two filtering strategies were identified: standard knowledge filtering (SKF), used by participants with a binary and ambivalent approach to knowledge; and dynamic knowledge filtering (DKF), employed by participants with a pragmatic and reconciled approach to knowledge. An important note to make is that participants were referred to as either employing SKF or DKF as a shorthand. This referred to the finding that participants reported sharing particular strategies that have been conceptualised here as SKF or DKF. Therefore, it cannot be said that participants definitely employed SKF or DKF in their practice, but that these were their reflections and thoughts behind their knowledge sharing, which is an original contribution to the literature on the subject.

Participants who employed SKF were of the view that knowledge sharing 'should' be straightforward. Drawing on the work of Demir (2011), Demir and Murtagh (2013) and Mitchell (2016), these participants aimed for accuracy in terms of knowledge sharing, for example often attempting to share 'everything'. Accuracy was these participants' response to the epistemological problem of sharing tacit knowledge (something Collins, 2010, argues is impossible). This contradicted the strategies they described using – albeit often unintentionally – which were necessarily slightly more complex. Further, because the strategies they described did not reflect the inherent complexity and uncertainty involved in knowledge sharing, they described knowledge sharing as being a frustrating process.

Three main components of SKF were identified: 1) underfiltering; 2) hesitant knowledge filtering; and 3) filtering differently depending on the audience receiving that knowledge. Informed by Carson and Bain's (2008) assertion that whether to share knowledge with other experts in health and social care has been described as a risk decision itself, the data suggested that those who employed SKF wanted to avoid the risk of not sharing knowledge, but that this paradoxically created two risks they might not have been aware of. Firstly, a risk of rendering invisible the filtering they necessarily engaged in, considering they could not share 'everything'; and secondly, sharing so much knowledge that those on the receiving end had additional filtering processes to engage in which might otherwise have been unnecessary. In relation to hesitant knowledge filtering, the data extended existing research on the role of confidence in the form of 'professional voice' (O'Connor and Leonard, 2014), arguing that an element of this voice was the extent to which participants felt able to influence the way knowledge was filtered. Finally, participants who employed SKF attempted to filter out CTK and uncertainty when sharing knowledge, and the extent to which they attempted to do this was affected by who they were sharing knowledge with (their audience). That fact and value were viewed as markedly distinct from one another and CTK was largely excluded could lead to frustration when participants struggled to accept the subjectivity and uncertainty inherent in this type of work.

DKF involved three main strategies: a 'less is more' approach to knowledge filtering; strong knowledge filtering; and attempting to limit the effect of audience on knowledge filtering. Drawing on the work of Demir (2011), Demir and Murtagh (2013) and Mitchell (2016), these participants aimed for adequacy rather than accuracy when sharing knowledge with others. This was these participants' response to the epistemological problem of explicating CTK. Participants who employed DKF were of the view that 'less was more' and aimed to share concisely, viewing it as problematic when they were unable to do so. Participants who employed DKF also anticipated a response to their knowledge, and utilised these predictions to strategically shape the knowledge they shared. Filtering 'out' knowledge was thus used to give weight to the knowledge participants employing DKF shared with others. It was also acknowledged that although the way knowledge was shared was important,



broader effects of policy changes, funding cuts and the lack of status of the profession all played a part for participants in terms of when knowledge was shared and when it was not. Overall, choosing not to share knowledge was often strategic for participants who employed DKF, rather than being solely down to individual error. That strong knowledge filtering was an important part of DKF did not negate the communal aspect of knowledge filtering in general. Rather, it reinforced how inextricably linked a participant's own filter was with their colleagues and the wider epistemic community.

All participants who employed DKF aimed to limit the effect of audience on their knowledge filtering. That is, they aimed to share knowledge in the same way regardless of whether they were sharing in formal or informal contexts. However, the key difference between participants with a pragmatic or reconciled approach to knowledge was that participants with a pragmatic approach rendered CTK less visible due to the use of 'scientific' and objective language when sharing it with others, whereas participants with a reconciled approach aimed to keep CTK visible because they applied scrutiny to both evidence and CTK. However, as was made clear in chapters 5 and 6, wider definitions of evidence distorted this process and privileged specific forms of knowledge over others. This meant that these differences between participants with a pragmatic and reconciled approach to knowledge were likely to be rendered invisible because of the narrow definition of what constitutes knowledge that had the potential to promote change for children and their families. Consequently, frustrations that might have occurred due to such differences in approach may not be easily understood due to the EBP perspective providing little space for subtle differences in subjectivity, knowledge and uncertainty.

Following discussion of the strategies participants who employed SKF and DKF reflected on using when sharing knowledge with others, it was argued that Venuti's (2008) analysis of the social nature of translation and associated concepts of fluency, domestication and foreignisation could aid understanding of the strategies participants shared using. Fluency refers to the way in which translators, when translating a less dominant language into English, focus on excluding any indication that the translation is not the 'original' (Venuti, 2008). Through this process, domestication occurs, whereby difference is sacrificed for the

translation to fit with the dominant language's values (Venuti, 2008). In relation to understanding the consequences of participants employing SKF, it was argued that because participants who employed SKF separated fact and value, their aim was to 'filter out' CTK because it did not fit with the values of what can be referred to as the dominant language (EBP). Using Venuti's (1998; 2008) terminology, 'visibility of difference' was sacrificed to meet the demands of EBP, the model on which participants' definition of evidence was based.

Further, although participants who employed DKF shared many of the same strategies, the difference between them in terms of the way they conceptualised fact and value meant that participants with a pragmatic response to knowledge also reproduced EBP values through domestication. Hence, it was only participants with a reconciled response to knowledge who aimed for what Venuti (2008) calls foreignisation; that is, they aimed to keep uncertainty visible through all modes of knowledge sharing with all types of audiences. Crucially, however, although participants with a reconciled response to knowledge who employed DKF aimed for foreignisation, it was against a background of a shared, narrow definition of evidence that participants reported impacted on the knowledge they shared with others. Therefore, differences were rendered invisible because of the dominance of social factors – such as this shared definition of evidence – that participants reported being unable to overcome. This extends existing arguments (for example, Taylor and White, 2006; Trevithick, 2014; White, 2009b; 2011) about the way in which EBP and associated ways of knowing affect knowledge in child and family social work in unintended, complex ways.

Overall, the findings illustrated that EBP was subtly reinforced whether SKF or DKF was employed, and that foreignisation was particularly difficult to achieve, in part, because of an existing lack of professional standing and associated inability to challenge the status quo. It was also because 'social work often operates in the "moral domain"' (White, 2011: 176), where uncertainty is considered almost intolerable (White, 2011). White (2009b; 2011) and Taylor and White (2006) have identified that social workers move to certainty quickly in practice. These findings illustrate that participants with a reconciled approach to knowledge did feel 'comfortable' with uncertainty (Fook et al, 2000), and aimed to incorporate that in

the way they shared knowledge, but were constrained by narrow definitions of evidence influenced by the EBP approach to knowledge.

The findings also provide much-needed detail on the differences between child and family social workers in terms of the link between meanings attached to different knowledges and knowledge sharing strategies, and the positive, as well as negative, consequences of knowledge filtering participants described. Drawing on Zethsen (2009), it was argued that even if foreignisation was difficult to achieve, what participants described was a radical transformation of knowledge taking place. Through their descriptions and reflections on the strategies used to share knowledge, participants described a form of simplification whereby uncertainty was rendered less visible. This radical transformation of knowledge has important implications for both participants and the children and families they worked with.

Finally, the consequences of knowledge filtering strategies were explored. It was argued that a difference between participants who employed SKF or DKF was that those who employed DKF reflected that social, political and cultural factors impacted deeply on their knowledge filtering strategies, whereas it was a source of frustration for those who employed SKF. This was because participants who employed SKF individualised the role of value in judgement and decision making, thus sharing their frustration when knowledge was not separated from these broader factors, such as funding cuts. As well as this meaning that knowledge 'work' could only take participants so far – it could not overcome broader social, political and cultural factors impacting on such work and child and family social work in general – such differences often led to participants defining and sharing knowledge in particular ways. The thesis thus contributes to a better understanding of the factors underpinning such differences and resulting frustrations.

It was argued that retranslation is a useful concept when exploring the strategies participants used to share knowledge because it identifies why what initially appeared as simple repetition was important to participants, the consequences of such repetition, and the importance of context to this aspect of knowledge filtering. Participants shared

choosing to look at a piece of knowledge about children and their families through various lenses, using different modes of knowledge sharing – in other words, they were describing a form of retranslation. This form of retranslation was described by participants as purposeful, rather than being an error or compensation for missing information. Participants also described this process as being associated with both loss and gain, indicating that a balanced approach to retranslation was desirable.

Finally, the concept of collective authorship was utilised in order to highlight the extent to which not only managers, but other colleagues and wider social and political factors, in Venuti's (2008) words, 'complicate' the idea of individual authorship. Collective authorship referred not to an individual being influenced by knowledge received from others, or even managerial input into report writing, for example. Rather, it referred to knowledge shared by one individual through writing being an accumulation of several different filters from various social workers, which was viewed by participants as an everyday occurrence. Some participants shared concerns about specific filtering strategies some of their colleagues used, which included 'copying and pasting' text from other documents. Frustrations from those who did or did not use this strategy could be understood as resulting from differences in knowledge filtering strategies. However, such differences were difficult to see because these strategies were often taken for granted. They were also less visible because of the dominance of a narrow definition of evidence that led to participants aiming to 'filter out' other forms of knowledge that participants shared had a big impact on their practice. As has been a theme throughout the thesis, the data suggest that how knowledge is defined, including the meanings attached to that knowledge, influences the way in which it is – or is not – shared with others. Moreover, participants described positive, as well as negative, consequences of not sharing, as well as sharing, knowledge with others within this epistemic community.

The findings of this study have implications for child and family social work, including the child protection system. The current obsession with information sharing – described by Thompson as a 'moral and political imperative' (Thompson, 2013: 189) – has, alongside existing research, been shown to over-simplistic at the very least. Strategic filtering is a sign

of expertise – in other words, knowing when not to share is just as important as knowing when to share knowledge when responding to uncertainty. Moreover, the data illustrate that sharing knowledge can have negative consequences – not being taken seriously, or information being ignored by more senior staff, for example. Rather than the endless repetition of poor information sharing being at the heart of serious case review conclusions, informed knowledge sharing should be recommended. This should include the question: why is knowledge being shared, by whom, and who is listening (or not)? Further, it is not only the sharing of knowledge which needs to be explored in research, teaching and practice, but the way in which knowledge is defined. Exploring assumptions about the distinction between fact and value could provide useful debate that goes beyond Laming's (2009) temptation – regarding knowledge sharing – to tell social workers to 'just do it'.

More broadly, the findings have consequences for a system underpinned by new managerialism and EBP. The data provide yet more evidence that excluding gut feeling, or 'informal logics' of risk management (Broadhurst et al, 2010) from the hierarchy of knowledge has unintended consequences for children and their families. That is, when gut feeling, or CTK, is excluded from definitions of evidence because of the dominance of EBP, there is a distorting effect on knowledge sharing and the way in which children and their families' experiences are understood by child and family social workers. CTK, which informs social worker judgement, is rendered less visible, and frustrations and miscommunication may occur as a result. Although translation is always required when sharing knowledge with others for specific purposes, the challenge of translating gut feeling into evidence leads to domestication and a move further away from the complexity (not a single truth) of children and their families' experiences. Moreover, paradoxically, the findings illustrate that EBP in its dominant form actually makes the use of research in practice less likely because of the unpalatability of uncertainty within this approach. This, alongside the finding that gut feeling is social, indicates that instead of focussing on individual social worker practice, it is the system that needs to change.

That the findings illustrate the inability of EBP to promote research in practice, as well as the underpinning assumptions making the less formal knowledge social workers use less

visible also supports Featherstone et al's (2014b) call for a new ethical framework in child and family social work. Promoting the idea of the existence of 'one truth' thus not only limits debate, as Featherstone et al (2014b) argue, but renders specific knowledge less visible. When examples of evidence, such as 'parental engagement', are defined so narrowly, the findings demonstrate that social workers, despite differences between them, respond with strategies that reinforce the neoliberal moral narratives currently dominating the profession. These narratives, as Featherstone et al (2014b) and others argue, are in direct opposition to an ethics of care and awareness of the complexity and uncertainty of children and their families' lives. The findings support Featherstone et al's (2014b) call for a new ethical framework that puts the moral nature of social work at the heart of the profession; renders all knowledge, however fallible, more visible; and acknowledge the social and contingent nature of gut feeling and evidence. This, rather than short-term technical fixes, is the way to promote informed information sharing between child and family social workers.

### **Strengths and limitations of the study**

The data illustrate that participants differed in how they did – or did not – share uncertainty with others. In order to explore this, it became clear throughout the research that clarity was required regarding how knowledge was defined by participants. The methodology used in this study allowed for deeper reflection on such definitions which would not usually be possible, and it also enabled such knowledge to be explored without an explicit focus on EBP. Further, the research contributes to the gap in existing research on gut feeling and expertise on how child and family social workers define gut feeling themselves, and the impact this has on the strategies they use to share knowledge with others.

Existing research about judgement and decision making and knowledge sharing within child and family social work tends to be informed by the psychology literature, or be underpinned by a psycho-social approach to knowledge. This study adds to such existing research by providing a sociological analysis of the subject, including utilising insights from the SSK

literature and literary translation studies, thus providing a significant, original contribution to the research area. Such insights emphasise the social processes involved in what can be seen (for example, in terms of the EBP hierarchy of knowledge) as a very individual process, as well as resisting a dichotomy between fact and value to highlight loss and gain associated with all forms of knowledge. Overall, the use of interviews and research diaries led to a deep exploration of what is meant by the term professional judgement by social workers themselves, and highlighted how important the way social workers define knowledge, including the meanings they attach to such knowledge, influence the strategies used to share knowledge with others.

By focusing on knowledge sharing within child and family social work, assumptions about how straightforward (or not) this might be can be challenged. Participants were recruited from all over England, which reduced the likelihood of local practices dominating the research. Further, that both unqualified and qualified social workers were included in the sample prevented further reinforcing the existing dichotomy between child protection and family support in England. Including unqualified social workers enabled access to what might be termed a 'hard to reach' group, due to there being a lack of detailed knowledge on the numbers of such workers due to their diversity. Ideally, a wider definition of evidence would be accepted in child and family social work, with an associated acknowledgement of the blurred line between fact and value. However, even if this did occur, knowledge filtering would still be necessary because it is impossible to share 'everything', and the data suggests a key skill of this group of experts is choosing when and when not to share specific knowledge with others.

Limitations of the study include the focus on the 'Anglophone' (Lonne et al, 2009) approach to child and family social work due to the study taking place in England. Further, the small number of participants who took part means that generalisations about child and family social work in England cannot be made based on the findings here. Instead, the emphasis was on the meanings a small group of child and family social workers attached to knowledge and the knowledge sharing strategies they reported using. Further, it cannot be said that participants definitively used such strategies in their practice; again, the aim was on the

meanings behind actions, rather than actions themselves. Research diaries were completed by comparatively few participants which was disappointing and reduced the potential for this method to provide original insights. The reasons for choosing to use purposive and snowball sampling were outlined in chapter 4, although limitations associated with this approach include the potential for participants to share similar perspectives, even if solely due to their interest in taking part in research itself.

### **Implications for future research**

The study has explored how one group of experts define and share knowledge in the 'risk society', with a focus on knowledge sharing within their epistemic community. It has been suggested that the way knowledge is defined by experts, including the meanings attached to such knowledge, influences how they then share that knowledge with others. Thus, future research could begin by exploring often taken-for-granted definitions of knowledge such as 'intuition' and 'evidence' with both experts and the people they work with. The research also suggests that a focus on the extent to which specific knowledges can be explicated or not is less important than identifying the strategies experts use to overcome such complexities. Findings from literary translation studies have been central to identifying and analysing such strategies, and it is hoped that future studies also utilise such research, as well as other seemingly unrelated research areas to better understand the response to risk and uncertainty in late modernity. Specifically, findings from this area, including feminist translation studies (for example, Fisher, 2010), could be utilised to explore power relations in terms of knowledge between social workers and children and their families.

The study was carried out in England; therefore, it would be useful to find out whether different countries and cultures use similar strategies. This would be informed by existing research on how difficult it is to define 'social work' in an international context (Brydon, 2012; Kessl and Evans, 2015; Payne, 2012). Such research would facilitate comparisons between different groups, and explore how cultural, political and economic differences impact on how knowledge is defined and shared by experts. Finally, children and their



families were not included in this research. In chapter 4, it was argued that their private lives should only be accessible to researchers when necessary to answer the research question, which it was not here. Trevithick (2008) argues that service users' knowledge is varied, including formal and informal knowledges. Interestingly, Foster (2016) identifies what she terms lay people's 'tacit healthcare knowledge' that, when shared with one another, can help empower patients when interacting with medical professionals and institutions. It has also been argued that there is an increasing separation between social workers and service users, both physically and psychologically (Featherstone et al, 2014a). Work on these topics could begin by building on existing research on how children and their families share knowledge with experts, as well as their views on what they expect from the experts who work with them in terms of the way they define and share knowledge.

## Appendix 9.1: Consent Form



### Research Project Consent form

I agree to take part in the 'How do Experts Translate and Navigate Risk Knowledges? A Case Study of Child and Family Social Workers' project, which is research towards the submission of a PhD in Sociology at the University of Leicester.

I have had the project fully explained to me and I have read the participant information statement about the project which I may keep for my own personal records. I understand that my own contribution will be used for the purposes of postgraduate research only and that I can withdraw from the research at any time.

I also understand that this project will be carried out in accordance with the University of Leicester's Code of Research Ethics. Material gathered as part of this study will be treated as confidential and securely stored in accordance with the Data Protection Act 1998.

I understand that all service users will remain anonymous at all stages of the research and all participants' details will be anonymised by the researcher to ensure no identifiable data is exposed.

**Name [PRINT]** .....

**Signature** .....

**Date** .....

## Appendix 9.2: Participant Information Sheet

### Participant Information Sheet

#### **How do Experts Translate and Navigate Risk Knowledges? A Case Study of Child and Family Social Work**

The study is being undertaken by Gemma Mitchell, of the University of Leicester. It is a postgraduate research project which will be assessed as part of a PhD in Sociology. The research follows the British Sociological Association Ethical Guidelines and the University of Leicester Code of Ethics.

Your participation is voluntary and I would be grateful if you would agree to take part. You will be asked some questions by me about your experience of risk in your role within child and family social work. *Please be advised that this study is not evaluative.* The aim is not to 'judge' the practice of individual workers. Rather, the study aims to explore how experts feel about and deal with issues relating to risk in the context of child and family social work.

The research is therefore concerned with processes rather than individual cases. Any cases discussed will be referred to anonymously, as the research is focused on workers' experiences rather than case management.

The research will involve you answering some questions in an interview with me. The interview will take about an hour and I would like to audio record it so that I can concentrate on our discussion. I will also ask that you write your thoughts in relation to a (anonymous) case you are involved with after the interview, although this is *completely optional* and can be discussed further in person.

Everything that you tell me is strictly **confidential** and you will be referred to **anonymously** as part of the study. All information will be stored on a password protected computer and USB and audio recordings will be destroyed following transcription. You may withdraw your consent to participate at any time.

Thank you for taking the time to consider being part of this research, which I hope will provide valuable information and inform policies which will support social work professionals who make decisions about risk in their practice.

**Gemma Mitchell**

**Department of Sociology**

**University of Leicester**

[gm95@le.ac.uk](mailto:gm95@le.ac.uk)

## Appendix 9.3: Interview Schedule

### Interview schedule

Brief explanation of terms used

Years in social work (roughly)

Why did you decide to go into social work?

Brief overview of role

### BEFORE – we'll start with before you meet a family

- 1) I'm interested in when a case first comes to you. When you receive a referral/new case/case transfer how do you go about translating that information into your initial thoughts on the risks involved in the case? *Are there any particular words/signs you look out for?***
- 2) In what way is this information given to you (e.g. written/oral)? *Do you think the way you receive it is relevant, for example, is it easier on the phone? Are there times it has been difficult? Can you tell if it has come through a lot of people, and has this made a difference in the clarity of the information? Is the information different – what is on the page compared to what is on the phone?***

### AFTER – we'll move onto during and after you have met a family

- 3) During an initial home visit, how do you translate the information service users are giving you, including your observations on that visit, into an assessment of what is happening in the home? Is it straightforward? Can you give me an example?**

*Can you tell me what helps make this process easy? Are there any difficulties? Do you notice a change in your own behaviour depending on who you're visiting, or do you stay the same? For example, in the way you talk, the words you use? How do you capture the home situation in a, for example, 20-minute visit?*

- 4) Can you tell me how you would record a home visit in your general case notes? Is there anything you would include/exclude? Would this be the same for a report or different?**

*When you write a case note, what do you include or exclude? To clarify, is a case note simply a list of the 'facts' for you? Or is there more to it? For example, if a non- social worker read a case note,*

would they understand it? Are there shorthand's for s/w? Do you change your style of writing, the information you leave in/out when writing for a different report, for example a multi-agency report?

Sometimes, there's not enough time to record case notes. When you come across this, how do you 'fill in' the gaps?

- 5) Can you think of an example of a case which involved issues you hadn't worked with before?** How did you respond to this? Were there any particular difficulties? What made it easier?

If they say 'gut feeling', ask to say what this means. What did it feel like? What was the context? How did they respond?

Did they ask any other colleagues?

Did they refer to their training? If not, why?

- 6) What, if anything, do you refer to when you have to make a decision on your own on a visit?** Do you ever make decisions in isolation? Or do you call etc.

Moving on now to DISCUSSIONS WITH OTHERS

- 7) Do you do most of your visits alone or with others? Are joint visits helpful? Which do you prefer?** Are your assessments of the visit generally the same or different when you visit jointly?
- 8) Can you give me an example of a particular frustration you encountered when sharing information about risk with other colleagues or supervisors?** How is this different to when sharing information is straightforward?
- 9) How would you describe the relationship between you and the managers, service managers?** Is there an open-door policy? Who is responsible for making decisions in reality – informally and formally? Is the translation of their views on risk and your views in a case straightforward, or are there often differences? If there are differences, how is this resolved?
- 10) How do you decide what to put in a chronology?** Would you leave in informal discussions and formal with supervisor?
- 11) What do you think of when you hear the word evidence? What do you think makes good evidence?**

#### DOCUMENTS

- 12) Some people argue that official rules and guidance give social workers a degree of certainty when they're making decisions about children. What are your thoughts on this and how does this relate to your experience of casework?**
- 13) Are there any documents other than forms you use on a regular basis? Can you tell me how you use them?**

*Is the information you choose to put in/leave out different for a court report as opposed to another assessment? Is your writing style different? How does the court process affect your work, if at all? Is it something you think about when making decisions/thinking about cases? And for non-qualified, ask about referrals*

#### Supervision

- How often?
- Where do you think decisions are made – formal, informal?
- How do you choose what to tell your supervisor?
- Add what do you do if there is a disagreement between you and a colleague/manager? (only ask if frustration question didn't reveal much)
- When do you think decisions are made – at meetings, on home visits, do you have the answers before meetings?

#### Additional if required:

- 1) **Could you talk me through one case which was particularly challenging in relation to decision making?**
- 2) How many supervisors do you have? How does the relationship work? If you have more than one, what are the benefits/difficulties with this?
- 3) In what form does feedback from supervisors take? What effect, if any, does it have on your practice?
- 4) Who do you view as responsible for making risk decisions in your profession?

#### Discuss research diaries

## **Appendix 9.4: Interview Schedule for Participants with Managerial Responsibilities**

### **Interview schedule: managers**

Brief explanation of terms used

Years in social work (roughly)

Why did you decide to go into social care/work?

Brief overview of role

**BEFORE – we'll start with before a social worker meets a family**

- 1) I'm interested in when you first receive a case. When you receive a referral/new case/case transfer how do you go about translating that information into your initial thoughts on the risks involved in the case? *Are there any particular words/signs you look out for?* How do you convey your thoughts to your supervisee? Or do they give their thoughts initially?**
- 2) In what way is this information given to you (e.g. written/oral)? *Do you think the way you receive it is relevant, for example, is it easier on the phone? Are there times it has been difficult? Is the information different – what is on the page compared to what is on the phone?***

**AFTER – we'll move onto after staff have met the family**

- 3) Following a home visit, (initial where possible) During an initial home visit, how do you translate the information staff are giving you, into an assessment of what is happening in the home at that time? Is it straightforward? Can you give me an example?**

*Can you tell me what helps make this process easy? Are there any difficulties? Do you notice a change in your own behaviour depending on who you're supervising, or do you stay the same? For example, in the way you talk, the words you use? Do you have strategies that help give you a better picture?*

- 4) When you read case notes, are there particular things you look out for? Are case notes simply a list of facts or is there more to it?**

*Have you ever sent a casenote/report back for revision? Can you give an example? Is it difficult or straightforward to get a picture from casenotes? What helps this process? What do you think is a 'good' way of writing casenotes, and how do you support staff in doing this?*

- 5) Can you think of an example of a case which involved issues you hadn't worked with before?** How did you respond to this? Were there any particular difficulties? What made it easier?

*If they say 'gut feeling', ask to say what this means. What did it feel like? What was the context? How did they respond?*

*Did they ask any other colleagues?*

*Did they refer to their training? If not, why?*

Moving on now to DISCUSSIONS WITH OTHERS

- 6) Do you have time to do visits with staff? If yes, what is useful about this? Have you noticed differences in what you thought the visit/case was like in your mind to visiting first hand or is it normally the same? If no, what do you think about this?**
- 7) Can you give me an example of a particular frustration you encountered when sharing information from with colleagues/ managers?** *How is this different to when sharing information is straightforward?*
- 8) How often do you receive supervision yourself?** *Is there an open-door policy? Where do you think the majority of decisions are made – in informal or formal supervision? Is the translation of their views on risk and your views in a case straightforward, or are there often differences? If there are differences, how is this resolved? How do you choose what to tell your supervisor? What other support do you receive in your decision making?*
- 9) What do you think of when you hear the word evidence? What do you think makes good evidence?**

#### DOCUMENTS

- 10) Some people argue that official rules and guidance give social workers a degree of certainty when they're making decisions about children.** *What are your thoughts on this and how does this relate to your experience?*
- 11) Are there any documents other than forms you use on a regular basis? Can you tell me how you use them?**  
*Add what do you do if there is a disagreement between you and a colleague/manager? (only ask if frustration question didn't reveal much)*

Additional if required:

- 12) Could you talk me through one case which was particularly challenging in relation to decision making?**
- 13) Who do you view as responsible for making risk decisions in your profession?**



- 14)** Do you notice any differences between you and other managers in similar positions?  
Or are you similar in how you practice the role?

**Discuss research diaries**

## Appendix 9.5: Research Diary

### RESEARCH DIARY

It will be very helpful for my research if you could complete this research diary. Although it is called a 'research diary', it is simply your professional thoughts on one case at 3 different stages (described in each box). These 3 stages can take place in the course of roughly one day, one week, or one month. The purpose of this is to explore the complexities of decision making in child and family social work – not to judge individual practice.

- Please **do not refer by name** to any service users or colleagues
- Please **do not refer to any information that could identify the above** – if in doubt, leave it out!
- Please use the **same case** as an example throughout

#### Stage 1: Home visit (at any stage in the case)

- Please briefly describe where the visit took place, who completed the visit (e.g. alone, with a colleague, etc.) and what happened
- How did you identify whether there were risks (or no risks) to the child during the visit?
- Are there things you look out for when completing a home visit?
- Did you use your past experiences of home visits to understand what was happening? If so, how?
- How did you decide what to include/leave out when recording the visit?

**Stage 2: Discussion with colleague/manager (please say which)**

- Where did this take place? (E.g. in a car, shared office, private office, phone, etc.)
- Why did you choose this person to discuss the case with? (E.g. you get on well with them personally, convenience, you had to because of their position, etc.)
- Please briefly summarise the discussion
- Did it help/not help you to *understand what is happening* in the case? How?
- Did it help/not help you to *analyse* the risks (to the child, siblings, family members, you and your colleagues) in the case? How?
- Did it help/not help you to decide what *action* to take? How?
- Overall, did anything change as a result of this discussion?

**Stage 3: Writing a report**

- Please describe what type of report was written
- Please briefly describe your overall judgement outlined in the report
- How do you decide what information to include/ leave out?
- Did you draw on any official guidance when writing this report?
- Did discussions with colleagues or managers influence your judgement? If so, how?
- Did you use previous case experiences when writing the report? If so, how?
- How does the information you put in the report differ to your case notes, if at all?

## Appendix 9.6: Research Diary for Participants with Managerial Responsibilities

### RESEARCH DIARY

It will be very helpful for my research if you could complete this research diary. Although it is called a 'research diary', it is simply your professional thoughts on one case at 3 different stages (described in each box). These 3 stages can take place in the course of roughly one day, one week, or one month. The purpose of this is to explore the complexities of decision making in child and family social work – not to judge individual practice.

- Please **do not refer by name** to any service users or colleagues
- Please **do not refer to any information that could identify the above** – if in doubt, leave it out!
- Please use the **same case** as an example throughout

#### Stage 1: Discussion regarding a case with the caseworker

- Please briefly describe where the discussion took place, who with (if others were present, e.g. principal social worker), and a brief summary of the discussion.
- How did you identify whether there were risks (or no risks) to the child during the discussion?
- Are there things you listen out for when hearing from staff about specific cases?
- Did you use your past experiences of these discussions to understand what was happening? If so, how?
- How did you decide what was important, what was less important?

**Stage 2: Discussion about the same case with person other than caseworker**

- Where did this take place? (E.g. in a car, shared office, private office, phone, etc.)
- Why did you choose this person to discuss the case with? (E.g. you get on well with them personally, convenience, you had to because of their position, etc.)
- Please briefly summarise the discussion
- Did it help/not help you to *understand what is happening* in the case? How?
- Did it help/not help you to *analyse* the risks (to the child, siblings, family members, you and your colleagues) in the case? How?
- Did it help/not help you to decide what *action* to take? How?
- Overall, did anything change as a result of this discussion?

**Stage 3: Signing off a report/decision**

Please describe what type of report was written or what decision was made

- Please briefly describe your overall judgement of the report/decision made
- How did you decide what information relating to the case was relevant in supporting this report/decision? Was it all relevant?
- Did you draw on any official guidance when writing this report/making this decision?
- Did discussions with colleagues or managers influence your judgement? If so, how?
- Did you refer to your previous experience when signing off this report/making this decision?

## Appendix 9.7: Participant List

|                                 |                                                                                              |
|---------------------------------|----------------------------------------------------------------------------------------------|
| Social worker level one         | No supervisory responsibilities                                                              |
| Social worker level two         | Some supervisory responsibilities (e.g. students), primarily caseload role                   |
| Social work manager level one   | Manager of social workers who have no supervisory responsibilities                           |
| Social work manager level two   | Manager of social workers who have supervisory responsibilities                              |
| Social work manager level three | Team manager involved in judgement and decision making regarding children and their families |

| Interview number | Pseudonym | Length of professional experience/ qualified or unqualified | Seniority                   | Completed research diary? | Approach to knowledge | Knowledge filtering strategy |
|------------------|-----------|-------------------------------------------------------------|-----------------------------|---------------------------|-----------------------|------------------------------|
| 1                | Mia       | over 15 years Q                                             | social worker level 1       | No                        | Pragmatic             | DKF                          |
| 2                | Olivia    | 10-15 years UQ                                              | UQ family support worker    | Yes                       | Ambivalent            | SKF                          |
| 3                | Ava       | 10-15 years UQ                                              | UQ family support worker    | Yes                       | binary                | SKF                          |
| 4                | Barbara   | 5-10 years Q                                                | Social work manager level 2 | No                        | Reconciled            | DKF                          |
| 5                | Grace     | 5-10 years UQ                                               | UQ family support worker    | Yes                       | Ambivalent            | SKF                          |
| 6                | Violet    | less than 5 years Q                                         | social worker level 1       | Yes                       | Pragmatic             | DKF                          |



| Interview number | Pseudonym | Length of professional experience/ qualified or unqualified | Seniority                   | Completed research diary? | Approach to knowledge     | Knowledge filtering strategy |
|------------------|-----------|-------------------------------------------------------------|-----------------------------|---------------------------|---------------------------|------------------------------|
| 7                | Beatrice  | 5-10 years Q                                                | social worker level 1       | No                        | Reconciled                | DKF                          |
| 8                | Sharon    | less than 3 years Q                                         | social worker level 1       | Yes                       | Pragmatic                 | DKF                          |
| 9                | Kerry     | less than 5 years Q                                         | social worker level 1       | Yes                       | Ambivalent                | SKF                          |
| 10               |           |                                                             |                             |                           |                           |                              |
| 11               | Simon     | less than 5 years Q                                         | social work manager level 1 | No                        | Reconciled                | DKF                          |
| 12               | Jemima    | less than 3 years Q                                         | social worker level 1       | Yes                       | Ambivalent                | SKF                          |
| 13               | Poppy     | less than 5 years Q                                         | social worker level 1       | No                        | Binary                    | SKF                          |
| 14               | Natalie   | over 15 years Q                                             | Social work manager level 2 | No                        | Reconciled                | DKF                          |
| 15               | Celia     | 5-10 years Q                                                | social worker level 1       | No                        | Pragmatic (evidence only) | DKF                          |
| 16               | Adam      | 10-15 years UQ                                              | UQ family support worker    | Yes                       | Binary                    | SKF                          |
| 17               | John      | 10-15 years UQ                                              | UQ family support worker    | No                        | Pragmatic                 | DKF                          |
| 18               | Holly     | less than 3 years Q                                         | social worker level 1       | No                        | Ambivalent                | SKF                          |
| 19               | Katie     | 10-15 years UQ                                              | UQ family support worker    | No                        | Binary                    | SKF                          |
| 20               | Gilly     | less than 5 years Q                                         | social work manager level 1 | No                        | Pragmatic (evidence only) | DKF                          |

| Interview number | Pseudonym | Length of professional experience/ qualified or unqualified | Seniority                   | Completed research diary? | Approach to knowledge | Knowledge filtering strategy |
|------------------|-----------|-------------------------------------------------------------|-----------------------------|---------------------------|-----------------------|------------------------------|
| 21               | Fiona     | 10-15 years Q                                               | social work manager level 2 | No                        | Reconciled            | DKF                          |
| 22               | Molly     | less than 3 years Q                                         | UQ family support worker    | Yes                       | Binary                | SKF                          |
| 23               | Peggy     | 10-15 years Q                                               | UQ family support worker    | No                        | Binary                | SKF                          |
| 24               | Stuart    | less than 5 years Q                                         | social worker level 1       | Yes                       | Binary                | SKF                          |
| 25               | Lesley    | over 15 years Q                                             | social work manager level 2 | Yes                       | Pragmatic             | DKF                          |
| 26               | Megan     | 10-15 years Q                                               | social work manager level 1 | No                        | Reconciled            | DKF                          |
| 27               | Naomi     | 5-10 years Q                                                | social worker level 2       | Yes                       | Reconciled            | DKF                          |
| 28               | Cathy     | Over 15 years Q                                             | social work manager level 2 | No                        | Pragmatic             | DKF                          |
| 29               | Georgia   | 5-10 years Q                                                | social work manager level 1 | No                        | Ambivalent            | SKF                          |
| 30               | Tabitha   | 5-10 years Q                                                | social worker level 1       | No                        | Ambivalent            | SKF                          |
| 31               | Emily     | over 15 years Q                                             | social work manager level 3 | No                        | Reconciled            | DKF                          |
| 32               | Gwyneth   | under 5 years Q                                             | social worker level 1       | No                        | Ambivalent            | SKF                          |

| Interview number | Pseudonym | Length of professional experience/ qualified or unqualified | Seniority                   | Completed research diary? | Approach to knowledge | Knowledge filtering strategy |
|------------------|-----------|-------------------------------------------------------------|-----------------------------|---------------------------|-----------------------|------------------------------|
| 33               | Wendy     | 10-15 years Q                                               | social work manager level 2 | No                        | Pragmatic             | DKF                          |
| 34               | Margaret  | less than 3 years Q                                         | social worker level 1       | No                        | Pragmatic             | DKF                          |
| 35               | Salima    | Over 15 years Q                                             | social work manager level 2 | No                        | Pragmatic             | DKF                          |

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