Understanding participation and power within collaborative processes: Jointly involving staff and citizens in changing public services

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Abstract

This study assesses the extent to which employees and users of public services can develop collaborative partnerships that promote person-centred services within institutions. Both citizen and worker participation are currently advocated as a means to develop public services, yet academically they have been studied within distinctive disciplines. Drawing together different theories of participation alongside the analysis of the concepts and practices of co-production, co-design and co-creation, this thesis establishes an analytic framework, termed co-participation to explore processes of collaboration between public service staff and users. This framework then informs the analysis of two case studies in local government and the health service where both staff and service users are involved together in developing person-centred services. This empirical work is supplemented by expert interviews with people who have worked in a number of different collaborative projects, alongside a realist synthesis of other similar cases. Using a critical realist approach and retroductive analysis this study explores how agents act within their institutional and policy contexts, assessing the extent to which their actions can instigate changes through institutionally designed participatory projects.

It is found that the projects facilitated processes of reflexivity and intersubjectivity which promoted a sense of embedded collectivism within institutional contexts. The projects enabled agents to make many localised changes which positively impacted people’s lived experiences. Collectivities and networks were developed, yet these operated within dominant hierarchies and could be limited by their structural and cultural environments. Wider social inequalities and power relations had an impact upon these participatory processes, although participatory processes could also be adapted to enable greater access and more equal voice. These projects and practices are analysed within the wider context of the continuing neo-liberal reform of public services, exploring how the state shapes the structural and policy context which sets situational logics and conditions of possibility for these practices.
List of abbreviations

APSE  Association for Public Service Excellence
BBC  British Broadcasting Company
DCLG Department for Communities and Local Government
DH  Department of Health
DIUS Department for Innovation, Universities and Skills
EBCD Experience-based co-design
ESRC Economic and Social Research Council
GP  General Practitioner
NAO National Audit Office
NHS National Health Service
TUC  Trades Union Congress
CHAPTER 1

Introduction

1.1 Focus of the study

This thesis considers how staff and service user participation interrelate within public services. It analyses various participative mechanisms that aim to enable workers and service users to collaborate together, attempting to reconcile both employee and service users’ insights and interests within institutions to facilitate mutually beneficial outcomes. Current public service policies advocate both employee and service user empowerment to enable improvements and innovations within public service provision. Within this thesis I explore how people who work in and people who use public services can mutually participate within institutional collaborative processes that are designed to facilitate improvements in both service quality and work outcomes. Does this mutual empowerment of users and front line staff create innovative service developments (Parker and Heapy, 2006) or will it result in political conflict, disillusionment and alienation where not all parties can be empowered at once (Peters and Pierre, 2000)?

Various processes under the guises of co-production, co-design and co-creation attempt to overcome separations between worker and service user interests and facilitate more person-centred approaches. Think tanks, quangos, public sector organisations and trade unions have all had an interest in these approaches. For example the Trades Union Congress (TUC, 2008) and Unison (Prentis, 2007) have been exploring these methods, looking to simultaneously civilise both production and consumption ‘seeking to create not only decent jobs, but also decent services to deliver to customers’ (Korczynski, 2007).

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1 The usage of terms such as citizen or service user is problematic. All citizens are potential users of services and all public sector staff are potential service users. For the purpose of this thesis the term service user is adopted to illustrate the position of a person who is currently receiving/using services as opposed to being employed by a public service institution.

2 Definitions of person-centred support include core elements of focussing upon service users in ways to promote choice, independence and autonomy, working within a collaborative philosophy (Beresford et al, 2011). Glynn et al (2008: 2) use a working definition that puts ‘service users at the centre of policy and practice to ensure that the support they receive is shaped primarily by their individual and collective rights and needs, hopes and goals’.
Council and the NHS Institute (2009a) have developed a series of cases and guides to illustrate how service users and staff can work together to improve services. Think tanks such as National Endowment for Science, Technology and the Arts (NESTA) and the New Economics Foundation (Boyle and Harris, 2009) have explored how to develop ‘equal partnerships between professionals and the public’. This thesis empirically examines different cases of where public sector institutions have facilitated these collaborative projects between staff and service users. It analyses the underlying mechanisms that facilitate collaboration, the contexts within which collaboration occurs, the outcomes achieved and the underlying power relations and dynamics within these processes.

This introductory chapter sets the scene for this thesis. Firstly the main theoretical perspectives that ground this research are overviewed. Then a short summary is provided of the policy context within which this research has taken place. The research questions and methodological approach are detailed before summarising some of the intended contributions that I hope to make through this thesis. Finally a summary of the thesis structure is presented, detailing the content of specific chapters.

1.2 Theoretical perspectives

Alongside an emphasis on participatory approaches, the marketisation of public service provision has continued apace within the last 30 years of public policy in England, the geographic and policy locus of this study. Worker and consumer interests can be separated by market mechanisms, where the fact that consumers are also workers (and vice versa) is superseded by the dominance of the market where consumption is often privileged over production. The state is following this focus through the promotion of consumerism and markets as an attempt to control public sector producers. Public sector managerialism and new public management theory have set the interests of public sector workers and managers against those of service users and built technical and rational management systems to overcome these differential interests, laying the ground for a separation of workers and citizens. However notions of co-production begin to challenge these separations and differential interests where it is illustrated how the interests of public service workers and citizens are intricately wound within the public service process and its outcomes (Alford, 2009). Co-production highlights the importance of close and sustained relations between public service officials and clients (Bovaird, 2005; 2006). Within co-
production the organisation is no longer the sole producer nor the client merely the recipient, instead reciprocal relationships are highlighted, building upon the assets and strengths of people who use services to co-produce outcomes (Stephens et al., 2008). In this way boundaries between the roles of producers and consumers can become blurred, escaping a ‘provider-consumer’ model (Tudor-Hart, 2010, p.xiii).

Distinctions between production and consumption are mirrored within academia, sociologists rarely balancing their focus on both customers and workers, one actor is usually privileged (Korczynski, 2009). In contrast, the focus of this thesis is on the experiences of both workers and citizens/ service users, both are central figures within this analysis. Academically, the study of participation has focussed on a particular actor; worker participation being studied within the disciplines of industrial relations and human resource management whereas user or citizen participation has been approached from political theory, social policy, governance, social work and international and community development perspectives. Building on an overview of the historical and theoretical development of worker and citizen participation, this thesis develops a theoretical framework which explores how worker and user participation interrelate within a public service context.

Identities and labels of actors who are involved in the production and use of public services are contested and debated extendedly. People who use public services can be identified as consumers or users of services, patients within some health services, citizens with rights, experts in their own lives, or political activists (Barnes and Cotterell, 2011, p.xxii). Consumers and customers is a terminology that is not used in this thesis with specific reference to public services due to its connotations of people acting within a market place, choosing and buying particular goods or services. Instead users is often adopted as the term to describe people who are in the position of needing to access public services. However this relationship with public services is seen within a wider citizenship perspective through the course of the thesis, highlighting people’s rights as citizens within public service provision. Thus the terms users and citizens are sometimes used interchangeably to illustrate how public service users not only have a relationship with particular public service institutions but that this relationship is set within the wider context of users as citizens with particular rights within society (Barnes and Cotterell, 2011, p. xxiv).
Participatory mechanisms that encourage a range of actors to become engaged with the decision making processes of the state have substantially grown within governance processes. It is seen that representative forms of democracy need to be augmented by direct methods of citizen involvement to enable public institutions to deliver services more effectively. Participation is understood to support differentiated and personalised services (Kooiman, 2000; Newman, 2005). Within policy documents and public management paradigms user and employee participation are understood as mutually beneficial, however few participation theories model how both user and worker participation interrelate within the same organisation. Concepts of co-production (Needham, 2008), co-design (Parker and Heapy, 2006; Sanders and Stappers, 2008), experience-based co-design (Bate and Robert, 2007a), co-creation (Bason, 2010; Cottam and Leadbeater, 2004) and empowered participatory governance (Fung and Wright, 2003) can all incorporate collaborative forms of participation that involve both service users and staff. However none of these concepts originate from literature based in both worker and citizen participation, and indeed some authors (Bovaird, 2007; Stephens et al., 2008) treat co-production as something distinct to participation. This thesis explores the relationships between the history and theory of participation with co-production, co-design and co-creation theories and practice. It is asserted that co-production, co-design and co-creation can be understood as forms of participation and that the linking of the literatures provides greater analytic insight into collaborative processes and the contexts that they are situated within. 'The nature of participation is political' (Carr, 2007, p.269) and by analysing the concepts of co-production, co-design and co-creation in the light of historical and theoretical perspectives on participation, it sheds light on underlying politics and power relations.

Power is a core concept of this thesis and different theories of power are reviewed and analysed. It is asserted that it is necessary to recognise different elements of power as both ‘power over’ (power as domination) and ‘power to’ (power to act and realise aims) (Edwards, 2006). This understanding of power is multi-dimensional, exploring its potential as both facilitative and constraining. Associated with this concept of power the thesis takes a critical realist approach to the analysis of the interrelationships between structure and agency, exploring how structures might restrict or enable agents to instigate social change. This supports an in-depth analysis of how different agents interact within their structural
and cultural contexts and explicitly highlights both the creative and constrained nature of agency, incorporating both structural conditioning and an active and reflective agent (Archer, 1995).

1.3 Policy context

This thesis focuses its analysis on public services within England, where they have been continually subject to public policies promoting increased marketisation. This research has spanned considerable changes within the political and economic landscape which has had significance for its policy context. The PhD began in October 2007 when Gordon Brown led the Labour Government and has been completed in September 2011 in the context of the Coalition Government of the Conservatives and Liberal Democrats. Through the period of the New Labour government the public sector had been the recipient of investment alongside a ‘modernisation’ drive. Following the Comprehensive Spending Review led by the Coalition in October 2010, public service finances now face significant pressures and reductions in funding. Although the current Coalition government have instigated significant changes in terms of policy direction in local government and the health service, as illustrated through the current Localism Bill (2011) and Health and Social Care Bill (2011), an emphasis on different forms of staff and citizen participation has remained prevalent throughout both Labour and Coalition policies.

Beginning with Labour government policies, they advocated the importance of both citizen and staff participation in their programme of public service modernisation:

‘To become world class, services must take a more systematic approach in which new ideas are developed by professionals in conjunction with service users, tested on a small scale and, if successful, implemented more widely.’ (Cabinet Office, 2008, p.39)

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3 In contrast to a market approach in England, since 1999 Scotland under devolution has tended to maintain a more traditional public sector approach, ‘emphasising egalitarianism and cooperation’ with public service professionals (Keating, 2005: 453). For example within the English NHS the separation of commissioners and providers has been a key policy tenet, whereas within Scotland such an approach was discarded after devolution (Taylor-Gooby, 2008). Within Wales, following devolution, the Welsh assembly government rejected a public service model based on consumer choice and competition and instead emphasised citizenship and co-operation (Andrews and Martin, 2007; 2010).
‘Successful innovation will require cultural and organisational change... new partnerships are necessary to generate and realise innovative approaches. There is an increasing recognition that the empowerment and incentivisation of front line workers and end users will be pivotal to achieving this’. (Department for Innovation, Universities and Skills, 2008, pp.70-71).

Turning to Coalition policies, the Open Public Services White Paper (Cabinet Office, 2011) promotes staff engagement alongside devolving power to service users:

‘Our plans will tear up the rule book that stops public sector staff doing the job as they see fit. We will restore professional responsibility and discretion; offer public service staff new opportunities to innovate, improve and inspire; and encourage public sector staff to start their own enterprise’ (Cabinet Office, 2011, p. 13).

‘We want control of public services to be as close to people as possible. Wherever possible we want to decentralise power to the individuals who use a service. But where a service is used by a community collectively, the control over services needs to be exercised by a representative body. In these circumstances we are clear that the principle should be to decentralise power to the lowest appropriate level’ (Cabinet Office, 2011, p. 8).

The White Paper ‘Equity and Excellence: Liberating the NHS’ describes its aims as ensuring ‘patients will be at the heart of everything we do’ with healthcare being run ‘from the bottom up with ownership and decision-making in the hands of professionals and patients’ (Department of Health, 2010, p.1). Similarly the Localism Bill follows this trajectory of shifting ‘power away from central government and towards local people’ (Department for Communities and Local Government [DCLG], 2011, p.3). The Coalition’s concept of the ‘Big Society’ is used to describe ‘what happens whenever people work together for the common good. It is about achieving our collective goals in ways that are more diverse, more local and more personal’ (DCLG, 2010, p.2). Whilst ‘public sector monopolies’ are being broken up, it is seen that the ‘Big Society’ takes the mantle where ‘the most accessible form of government is self-government’ (DCLG, 2010, p.11).
Alongside various structural changes that are being instigated through the Localism Bill and the Health and Social Care Bill (described in depth in section 3.3) economically, public service finances are under increasing strain. Within local government the October 2010 Comprehensive Spending Review announced a real term reduction in spending of 28% up to 2014/15, these being some of the biggest cuts in the public sector (Local Government Group, 2010). In the NHS the Comprehensive Spending Review saw a real-term increase of just under 0.1 per cent per year, however inflationary pressures could significantly reduce this (Appleby, 2010). Alongside these political debates over the extent to which the NHS budget has grown in real terms (Buck, 2011), an efficiency drive requires the NHS to save between £15 to £20 billion through ‘recurring efficiencies’ by 2014/15 (Delamothe and Goodlee, 2011). As noted by the King’s Fund (2011, p.8), ‘the NHS faces the tightest financial settlement in its history’.

Within current policy directions, service user participation is encouraged through choice within markets of multiple providers. The ‘Big Society’ and Localism Bill encourages participation and community group action to take on public service provision. Within health, service user participation is encouraged through choice, complaints and feedback into commissioning bodies, through HealthWatch organisations. Staff participation seems to be promoted mainly through opportunities to develop employee-led mutuals. Public sector staff participation seems to be overlooked within current policy directions and there is less concern about how service user participation is integrated within everyday service interactions. The structural and wider policy context for these participative mechanisms is one where public services are opened up to competition, promoting individual choice, decentralising services, ensuring fair access and accountability through greater provision of information (Cabinet Office, 2011). Policy thinkers on the political Left do not necessarily contest this diversity of public service provision, having developed some its grounding policies, such as separation of commissioner and provider roles and the encouragement of co-operatives and mutuals to run public services (Department of Health, 2008). Influential thinkers close to Ed Miliband, Leader of the Opposition, also state that the ‘central bureaucratic state’ may not be best way to promote ‘localised solutions’ (Stears, in BBC, 2011).
‘… we need to think about ways of building our public services so that they actually involve people who work in them and people who consume them actually shaping the nature of those services themselves’ (Stears, in BBC, 2011).

Thus there is a consistent political emphasis upon both empowering staff and service users in public services, within an increasingly marketised context. Both Left and Right parties seem to converge on this approach with increasing reference to a need to devolve power to the front line. Commentators have noted that ‘even if user focus and staff engagement go hand in hand in principle, we need to know how in practice’ (Mayo, 2007). This thesis attempts to explore how staff and service user participation interrelate in practice, analysing different cases and examples of projects that aim to empower both staff and service users to make changes to public services. It analyses the context within which these collaborative processes take place and problematises the dual emphasis on participation of service users and staff within the wider context of the marketisation of public services.

1.4 Research questions and methodological approach

Having overviewed the theoretical constructs and policy contexts of this study, this section illustrates how the research questions were developed through a short review of key aspects of literature and the research process. Reflections on my own research position are then presented.

1.4.1 Emergence of research questions and methodological approach

Through studying both the worker participation and user participation literature it became clear that, although in policy and practice user and worker participation were seen as essential routes to effective public services, few studies had brought the two literatures together. Policy papers (Cabinet Office, 2007, 2008) promote user and worker participation as complimentary practices, yet if participation relinquishes power to both users and front line staff, how does this impact power relations between these different interest groups? This question began to inform the analytic grounding of the research, exploring power within collaborative forms of participation between public service users and staff. This presented two major areas of work. The first was to analyse the history and theory of worker and user participation through the lens of power. This initial historical and theoretical overview informed the literature review, particularly focussing upon how power
has been conceptualised within studies of participation (Chapter 2). The second area of work was to explore how user and worker participation were related empirically through analysis of different existing studies (Section 3.5.1), developing the particular focus of this study.

In terms of power, this research has a different starting point to many other studies that have examined participation through the lens of power, which have often used the work of Lukes and Foucault as a basis. This thesis contests that neither Lukes nor Foucault adequately theorises both power to (the creative aspect of power in contrast to power as dominance) and the concept of an active subject. As Edwards (2006) notes a theory of power needs to take into account both positive sum aspects and how power is rooted within social relations. A framework of power that incorporates both structural constraints and an active and reflective agent is important in order to understand and explain the empirical findings of some studies in participation. In order to conceptualise the possibility of transformation of social structures as a result of agency, this study looks beyond both a dimensional and Foucauldian view of power to a model that incorporates a reflective and creative agent. This moves the study away from the governmentality literature toward critical realism. The morphogenetic approach of Archer (1995) allows analytic distinctions between pre-existent structures (which derive from and exist as a result of the activities of past agency), and an active but conditioned agency who can through active reflection upon their practices engage in and instigate forms of social change. Critical realism is a framework that conceptualises both structure and agency as analytically separate but mutually linked through their interplay, can analyse processes of social change and is also sensitive to power relations and differential knowledge claims.

Not only is critical realism of use theoretically but provides considerable benefits when considering methodological implications of the development of the research. If this research were to take an objectivist stance, a positivist epistemology might focus upon the impact of collaborative processes following a cause-effect variable model, using a quasi-experimental model collating baseline survey data before an intervention and then again after. However this ‘successionist’ approach (such as in clinical trials where a cause X creates effect Y) is unable to explicate how and why an intervention may succeed in creating change (Crump, 2008; Pawson and Tilley, 1997). Nor does it attempt to consider
the main focus of this study which concerns the power dynamics between the different actors in collaborative processes. Beresford (2007) highlights that evaluating involvement involves philosophical, moral and methodological issues rather than merely technical and objective matters. He contests approaches that assume that a neutral set of findings about specific ‘improvements’ and outcomes can be identified from participation. Such arguments might lead us toward a constructionist approach, however problems with this perspective relate to the difficulties of identifying causal relations within a socially constructed ontology. Causality is an important area to focus on in this study, the participatory projects being studied are using participation as a means of creating change, service improvements and innovation. The causal efficacy of these projects therefore needs to be examined within an ontological and epistemological framework that can model causal relationships.

Initially, using realistic evaluation (Pawson and Tilley, 1997) as a theoretical and methodological basis, the research questions of this study were based on understanding the contexts, mechanisms and outcomes of collaboration between staff and service users. Thus the first three research questions developed as follows:

Research question 1: **What are the processes and mechanisms that facilitate staff and citizens to come together to make changes to public services?**

Research question 2: **How do these collaborative forms of participation sit within existent institutional structures and social, policy and political contexts?**

Research question 3: **What are the outcomes, significances and limitations of these collaborative projects in shaping services?**

However, as Chapter 4 details, realistic evaluation (Pawson and Tilley, 1997) is less suitable to analyse power relations within collaborative processes. Therefore this study sought to develop realistic evaluation into a distinctly **critical** realist approach to be able to analyse power relations, the fourth research question.
Research question 4: **What power dynamics operate where staff and user participation interact within institutional collaborative processes?**

The critical aspect of critical realism is found to be important as it facilitates not just the evaluation of projects but enables an analysis of both the external and internal values of collaborative processes, exploring how these projects were derived, their purposes and relationship to policy (Taylor, 2006).

There are three particular significances of these research questions and the theoretical approach taken. Firstly they support a contribution that explores creative, productive and constraining aspects of power within participative processes. Secondly, they explicitly explore how and why collaboration may lead to changes within public services. Thirdly, they enable a clear focus upon the institutional and policy contexts within which these participative processes sit. Hierarchies, policy trajectories and professional structures might all have a role to play within the dynamics of staff and service user participation. The use of analytic dualism (Archer, 1995) supports this approach to understand how actors are constrained and enabled within particular institutional and policy contexts.

The research questions are addressed using a critical realist approach that analyses the mechanisms within particular interventions which cause outcomes within specific contexts. The methods I have used are described within Chapter 4 and include:

- Two independent evaluations of projects that engage both staff and users in improving public services using a realist evaluation methodology (Pawson and Tilley, 1997). Two different processes of staff and user collaboration were explored through primary cases analysing how the process unfolded, the outcomes achieved for particular stakeholders, the context within which the process was embedded and whether and how practices were sustained within the organisation. One case was based in the health service, using a process of experience-based co-design (Bate and Robert, 2007a) and one was based in local government using co-production and co-design principles.
I undertook a series of expert interviews with a range of facilitators and practitioners who had detailed experience in developing and running programmes that involve staff and user collaboration within different public services, including health, local government, education and criminal justice. These expert interviews are used throughout the data analysis chapters to illustrate where case study findings can be extended through a wider number of examples.

This empirical work was supported by an extensive analysis of a number of different reports and evaluations that described different co-production, co-design and co-creation projects using a realist synthesis approach (Pawson, 2006a). This facilitated a broader examination of how particular mechanisms operated within a wider variety of contexts. Through an iterative analysis of primary and secondary research findings this enabled greater confidence in particular findings where I could illustrate particular generative mechanisms and outcomes occurring across a variety of different contexts.

1.4.2 Research position

I have an enthusiasm and interest in democratic forms of participation, however the stance that I take in this work is that of a critical enthusiast (Newman and Clarke, 2009). It is the critical analysis of management, participation and power within a political context that forms the focus of this study, analysing power relations within participative processes, investigating actors’ interactions and collaborations and the outcomes of these. However this critique is not intended to be solely academic, my hope within this research is that it is both of significance and benefit to practitioners within this field, operating within a middle level of abstraction and proffering suggestions for the practices of collaboration (Pawson, 2006a). In discussing employee participation literature Beirne (2008, p.677) laments the lack of academic and front line collaborations to advance employee influence, academics tending to take on the position of ‘independent adjudicators’. Instead Beirne advocates for applied research that is practically engaged with and grounded in people’s working experiences. He suggests that critical management scholars now tend to be analytic and empirical without considering what this means for practice and ‘the search for alternative ways of managing and organising’ (p. 679). Theory and practice may require different analytic modes that focus on different aspects of a phenomena but both are essential if academic contribution is to be made to the development of practice.
In order to undertake this research I collaborated with two organisations, one within the health service and one in local government, who were both using processes of staff and service user collaboration. I engaged with both organisations at an early stage of the research process and designed the research so that not only would it be an academic study for my PhD, but hopefully, would also provide useful insights and analysis for practitioners who were developing these participative projects. Thus not only does this research study collaborative projects based on co-production principles, but the research process itself was also collaborative with case organisations. This approach enabled additional insights into the processes of collaboration, where sometimes I could see the strengths and dilemmas of the projects themselves mirrored within my own research processes. These issues are explored within the methodology chapter and the discussion and conclusion chapter.

1.5 Contributions of the study

This thesis and research intends to make a contribution to theory, methods and collaborative practice alongside illustrating how its findings have significance for policy directions. Firstly, taking theory, it intends to bridge worker and service user participation literature, drawing out key aspects of both literatures that may help to inform the study of staff and service user collaboration within public service institutions. A theoretical analysis of the concepts of co-production, co-design and co-creation is undertaken, and with the use of retroduction techniques, their core underlying theories are explored. This analysis enables the development of an analytic framework of ‘co-participation’ which is used as a heuristic device to explore the process and mechanisms of staff and service user collaboration within institutional contexts. It is found that service user participation is usually dependent upon staff participation as changes within systems may be dependent upon the extent to which staff have access to institutional resources and decision making processes. Hierarchies and wider structural inequalities can impact the extent to which ‘equal partnerships’ can occur between staff and service users, although participative processes can be reflexively designed in ways that attempt to overcome some of these inequalities. The theoretical approach highlights the role of agency within constraining and enabling social structures and cultures, illustrating how collaboration can enable emergent ‘power to and with’ that may support the instigation of changes within public service
institutions. However policy and institutional culture and practices can set limits and conditions of possibility for these collaborative practices.

In terms of contribution toward methods, this thesis develops a distinctly critical realist approach. It builds upon realistic evaluation (Pawson and Tilley, 1997), yet highlights the differences between Ray Pawson’s work and the lineage of critical realism. Pawson (2006a) himself is keen to distinguish his work apart from critical realism, yet it is suggested within this thesis that a critical element provides additional analytic tools to understand power dynamics and relations within the context of wider political contexts and structures. It also suggests that using an analytic framework based upon a stratified social ontology (Bhaskar and Danermark, 2006) may support a stronger conceptualisation and analysis of contextual features, overcoming some previous difficulties described in operationalising a realistic evaluation methodology (Dahler-Larsen, 2001; Byng et al., 2005). The methods used are informed by a realistic evaluation approach that analyses both the processes and outcomes of collaboration. However this analysis is extended by also exploring how these collaborative projects are situated more widely within their institutional, social and policy contexts and the power dynamics within them. It examines how collaborative processes position and conceptualise different actors and explores the external values that shape project purposes (Taylor, 2006). Because this work has been of a collaborative nature, links are also drawn between critical realism and action research. It is suggested that critical realists may find action research methods particularly beneficial and that action research may be usefully conducted within a philosophical framework of critical realism.

This research has intended to contribute to practice, through collaboration with case study organisations through the research process. I have fed initial research findings back into ongoing practice, continuing the iteration between reflexive research and practice. In a small way this has helped contribute toward ongoing development of collaborative projects. Finally this thesis reflects upon particular inconsistencies and contradictions within current policy trajectories that seem to assume the mutual compatibility of competitive structures and collaborative practices. It is considered that person-centred approaches may jar with output focussed, contract systems that disaggregate people’s needs into specific contractual services. Co-production is based upon different theoretical assumptions to new public
management approaches (Alford, 2009), which may have practical implications for how co-productive and collaborative practices can be established more widely within marketised contexts.

1.6 Structure of the thesis

The thesis begins by scoping the theoretical and policy context of the study. The methodological approach is then discussed followed by three data analysis chapters which synthesise findings from the different parts of the research process. The final discussion and conclusion chapter summarises the key findings of the thesis and explores its theoretical, methodological, policy and practice implications.

Chapter 2 provides some theoretical and historical perspectives on worker and citizen participation, alongside the development of the theoretical framework of this thesis. It begins by exploring some of the history of worker participation through participatory and industrial democracy, interweaving historical examples with theoretical concepts. Theories of participatory and deliberative democracy are compared and critiques considered. Deliberative democratic processes are then contrasted with social movement theory, exploring the interrelationships between social welfare movements and the state. Then the substantive focus of the thesis is introduced, initially considering how non-state actors have become increasingly involved in processes of governance. The histories of worker participation and citizen participation within the public sector are overviewed before drawing out common themes between the two. An analysis of how different theorists have studied participation through the lens of power is conducted before introducing the theoretical framework that this thesis is based upon, where both ‘power to’ and ‘power over’ are considered alongside a model that illustrates the constrained nature of agency, yet conceptualises how reflexive agents can act on and change social structures and cultures (Archer, 1995; 2007).

Chapter 3 focuses upon the theories of co-production, co-creation and co-design in the light of policy and public management approaches, developing the analytic framework for this thesis. It begins by overviewing public management theories and their underlying assumptions. It considers how the co-productive nature of public services may contrast with elements of new public management that are based upon theories of public choice,
principal-agent theory and the separation of provider and consumer roles. The Localism Bill (2011) and the Health and Social Care Bill (2011) are analysed with respect to staff and service user participation before developing a framework to understand the different permutations of how user and worker participation interrelate within a public service context. Then, focusing on areas where both service users and workers work in collaborative partnerships, the concepts of co-production, co-design and co-creation are explored. Through using realist synthesis techniques (Pawson, 2006a) an underlying analytic framework of staff and user collaboration is developed, termed co-participation, this then supporting my own empirical analysis.

Chapter 4 describes the underlying philosophical perspectives of critical realism, upon which this thesis is based. It defines key concepts such as a stratified social ontology, causal configurations, emergence and mechanisms. The operationalisation of a critical realist philosophy through different methodological approaches is overviewed, exploring the morphogenetic approach (Archer, 1995) and realistic evaluation (Pawson and Tilley, 1997). There are some problematic issues that have been highlighted through the use of realistic evaluation which are considered and it is proposed that using additional critical realist analytic tools may help to overcome some of these challenging problems. The methods used within this study are then overviewed, providing details of how I used a realist synthesis (Pawson, 2006a), conducted expert interviews and carried out research within two case studies. Data analysis tools are considered, drawing upon Archer (1995) and Bhaskar and Danermark’s (2006) conception of a stratified social ontology as an analytic framework. The collaborative nature of the research is then considered, exploring the strengths and dilemmas of collaboration within research.

Chapter 5 introduces the two cases and overviews the processes of collaboration between staff and service users within the projects. The cases are analysed to explore some of the key mechanisms of collaboration and the contextual factors that enabled and constrained this, alongside some of the outcomes of the project following a realistic evaluation analytic approach. Similarities between the local government and health service case are considered, illustrating the importance of key processes and mechanisms over different service contexts. Chapter 6 takes a deeper dive into the workings and mechanisms of collaborative processes. It studies the core processes and underlying mechanisms that enabled different
stakeholders to come together and share perspectives, illustrating how communicative spaces were developed between diverse participants that enabled them to work towards areas of common concern. Key underlying mechanisms of collective reflexivity and intersubjectivity are identified, illustrating how these processes enlarged people’s perceptions of key issues and enabled people to instigate specific actions as a result of the sharing of perspectives. The chapter then uses analytic dualism (Archer, 1995) as an additional analytic tool to explore the impact of the structural positions of service users and staff within the collaborative process. By separately analysing the social interaction between agents and their institutional positions and roles, the thesis illustrates how although social interactions were predicated on the basis of equal voice and space, once agents’ social and structural positions are taken into account, there were structural inequalities that impacted this process.

The last data analysis chapter (Chapter 7) situates its focus at different levels of analysis, both exploring agents’ own motivations within collaborative processes yet extending this analysis to also position such practices within a wider social policy and political context. Initially agents’ own interests are considered, exploring how the content and process of participation interrelated within different people’s motivations to get involved. Social interactions are focussed upon, examining how the processes of collective reflexivity and intersubjectivity could counteract more transactional approaches to service provision that were sometimes dominant within everyday service interactions. The variances in mechanisms across different service contexts are considered, before illustrating how collaborative processes were in effect overlaid upon institutional hierarchical structures. The outcomes of the collaborative projects are overviewed, before considering the dynamics between these collaborative processes and their wider policy and political contexts.

Chapter 8 concludes this thesis by considering the theoretical implications of the research findings, their relevance to policy and practice, alongside detailing the methodological contributions this thesis has developed. Each research question is considered in turn, exploring theoretical significances. It is illustrated how service user involvement tends to be dependent upon the extent of staff involvement and engagement. Thus for service user participation to have an impact, staff themselves need to be empowered within institutional
decision making processes to act on the expressed needs and issues highlighted by service
users. The findings of the study are compared with previous theoretical analysis of co-
production, co-design and co-creation concepts, highlighting the importance of
understanding how structural inequalities may impact these processes. Institutional contexts
may constrain the content and aims of participation, yet where different agents can share
common concerns, collaborative action can generate an emergent property of ‘power to’
impact some institutional processes and generate localised changes. Collaborative processes
traversed boundaries between ‘us and them’ and have the potential to illustrate how
different public services may become more integrated around the expressed needs of
service users. The dynamics between collaboration within institutional hierarchies and
wider market mechanisms are considered. Methodological contributions of this thesis are
summarised before considering the strengths and weaknesses of this research. Final
concluding thoughts are then presented.
CHAPTER 2

Participation, democracy and power

2.1 Introduction

This chapter provides an overview of both theoretical and historical perspectives on worker and citizen participation, examining different approaches to studying participation through the lens of power. It is asserted that what participation achieves is contingent upon a range of factors and an analytic framework is needed which incorporates an active and reflective agent, structural conditioning but not control and the possibility of social change and/or stasis, incorporating elements of ‘power to’ (power to act and achieve aims) and ‘power over’ (power as domination). The final part of the chapter illustrates how a critical realist framework can incorporate these different elements.

Initially the concept of participation is explored with respect to democratic and political theory. Theories of participatory and industrial democracy are analysed (Section 2.2), interweaving specific historical examples of worker participation with industrial relations theory. This historical and theoretical account illustrates how conflicts of interest may become managed through institutionalised participative processes, considering more radical perspectives that perceive such participative structures as a form of co-option. Participatory democratic theory is overviewed, illustrating how it relies upon concepts of a common good within a context of equality. Differences between the concepts of participatory and deliberative democracy are then overviewed (Section 2.3), and theories and critiques of deliberative democracy are considered. This review draws attention to several key themes that underlay this thesis. The first relates to the dynamics of conflict and collaboration where differential interests may be contested or drawn together to find common concerns. The second theme follows from this, focussing on the notion of intersubjectivity and the extent to which diverse agents can find common ground. The other two themes relate to the contextual surroundings within which the processes of participation and deliberation take place, one resting on the notion of different forms of political, social and economic equality and the other exploring the impact of independent and institutionalised spaces on processes.
of deliberation. This last theme is explored further in Section 2.4 which analyses aspects of social movement theory and the interrelationships between service user movements and the welfare state. Section 2.5 brings the focus specifically onto public service institutions, overviewing the concept of participatory governance before exploring the trajectories of worker and citizen/service user participation within public services. Section 2.6 examines key conceptions of power, analysing how they have been applied to studies of worker and user participation. The final Section 2.7 develops this analysis building a theoretical framework based on a critical realist perspective. This enables an incorporation of elements of both power over and power to, with the possibility of emancipatory social change. The interplay of structure, agency, reflexivity and intersubjectivity is conceptualised and an analytic framework based on a stratified social ontology is presented.

2.2 Industrial and participatory democracy

Participatory democracy advocates the involvement of citizens in collective decision making processes within different spheres of society, including the political system and the workplace. Rousseau’s political theory, stemming from The Social Contract first published in 1762, is often used as a theoretical basis for contemporary participative democratic theory (e.g. Pateman, 1970). Rousseau (1913) conceived of a political system where citizens were collectively involved in decision making, building toward a ‘general will’ for the ‘common good’. Participation developed citizens’ sense of social, community and political responsibility, serving an educative function whilst ensuring accountable government. Rousseau conceived of this situation not within a capitalist system but one in which society was made up of small, peasant proprietors, where ‘no citizen shall ever be wealthy enough to buy another, and none poor enough to be forced to sell himself’ (1913, p.42). G. D. H. Cole took the central tenets of Rousseau’s thesis and centred the debate on a modern, industrial social system. His theory of Guild Socialism was based on the principles that democracy should be applied to every form of social action, particularly industry and that economic equality and security was essential to achieve political equality and power. By socialising the means of production under a Guild Socialist system, people’s humanity would be ensured through equality of opportunity and status. Through such conditions, ‘large untapped reserves of energy and initiative’ would be given by workers ‘for the benefit of the whole community’ (Pateman, 1970, p.40). Thus both Rousseau and Cole
emphasised the possibility of collective decision making within conditions of social and economic equality.

Guild socialist theories developed at a time of trade union strength through the First World War, yet while guild socialists fought for ‘the entire control and management of industry’ (Hewes, 1922, p.210), trade unions focussed their efforts on greater equity in the distribution of wealth. Pressures on employment relations from increased union power at this time led to a rethink of modes of participation in industry and Whitley joint councils of employers and unions were set up to discuss wages, conditions, and other matters of employment conditions (Blyton and Turnbull, 1998). Guild socialists saw such proposals as attempts to placate their revolutionary ideas for workers control, institutionalising conflict into manageable systems (Brannen, 1983). Indeed this historical episode is used by Ramsay (1977, p.481) as an example of how participation is used ‘as a means of attempting to secure labour’s compliance’ through periods when labour collective power has strongly challenged managerial power. Ramsay’s thesis can be associated with radical critiques of industrial participation where participation is seen as a pretence and illusion that is set within the context of ‘fixed and limited alternatives’ about insignificant matters (Braverman, 1974, p.35). For this school of thought industrial democracy is only achieved when workers control the means of production which are directed toward social needs outside a capitalist system (Hyman and Mason, 1995).

In contrast to the radical approach pluralists favour institutionalised forms of participation that operate within existent political and economic contexts. Such structures enable the negotiation of the differential interests of workers and managers. Here forms of participation are rights-based, collective and often take the forms of representative participation. Academics such as Flanders, Dunlop, Clegg and Fox promoted industrial democracy as a social and democratic right and associated examples include the Whitley councils, Joint Production and Advisory Committees, the Donovan Commission and the Bullock Committee. Pluralists differed in the degree to which they saw that trade unions should participate in managerial decision making beyond collective bargaining, with some seeing collective bargaining as the major form of industrial democracy. Here contestation about redistribution maintained primacy over collaboration within wider managerial decision making (Brannen, 1983). The socially useful economy movement alongside
workers alternative plans in the 1970s was an approach that required trade unions to transcend wage conflicts to question the processes and products of work, creating ideas for new products to meet social needs alongside proposals for greater employee development (Elliott, 1979). However such proposals were usually rejected by companies, thus although such plans moved unions into the new territory over decisions about production, this was not a consensual arena (George, 1979). Other developments associated with models of industrial democracy included the Common Ownership Act in 1976 and the establishment of the Co-operative Development Agency in 1978 which signified a renewed interest in co-operative organisational structures. Co-operatives often developed in the 1970s in response to possible company closures, yet success was sparse in the context of previous capitalist failure, market isolation, underinvestment and a co-operative structure being forced upon organisations (Brannen, 1983).

These industrial democratic practices within the 1970s occurred at a similar time as theoretical models of participatory democracy developed. Developed through a radical student movement, the term ‘participatory democracy’ was included within the Port Huron Statement where students argued for greater political participation (Mansbridge, 1999, p.312). Participatory theorists saw that industrial democracy was an important form of democratic action where citizens could become educated in participative decision making in their daily working lives. Participatory democratic theory extended this involvement in decision making into many spheres including the household, the education system, neighbourhoods and civic associations (Hilmer, 2010). Such involvement would lead to psychological and social benefits and the learning of democratic skills that would support involvement in wider political decision making (Pateman, 1970). Within this model Pateman (1970, p.43) highlighted the importance of every individual having ‘the independence and security necessary for (equal) participation’ and ‘equality of power’ in the making and determining of decisions. Other participative democratic theorists such as Macpherson (1977) and Barber (2003) also highlighted the detrimental impact of social and economic inequalities on processes of participation. Macpherson (1977) identified that as a prerequisite to participative democracy people’s consciousness needed to change from that of passive consumer to one where people enjoyed developing their productive and creative capacities (Macpherson, 1977, p.99). Such an argument mirrors some discussions within co-production literature discussed in chapter 3. Barber’s (2003) model of strong democracy
illuminates how ‘transformation of conflict’ can occur ‘through the creation of common consciousness and political judgement’ (p. 224) where people’s understanding of their own interests become ‘enlarged to include others’ (p. 232). Interaction and intersubjectivity are processes that enable collective understandings of a common good, in contrast to representative models of democracy that emphasise ‘competition and aggregation of interests’ (Vitale, 2006, p.752). Thus although participatory democracy had some associations with forms of industrial democracy, participatory democracy tended to emphasise how participation could enable a focus on common goods whereas trade unions often used more aggregative and conflictual approaches, especially through collective bargaining.

Since the 1980s theories of participatory democracy have been shadowed by developments within liberal minimalist, agonistic and deliberative theories of democracy (Hilmer, 2010, p.47). Mansbridge (1999) suggests several reasons for the decline including decreases in the practice of participatory democracy with fewer collectives and an increasing emphasis on the private and individual sphere; decreases in interest in democratic participation in the workplace at a national political level through the 1980s and difficulties in providing empirical evidence of the benefits that participatory democracy could bring. Others suggest that participatory democratic practices were too utopian to apply within a complex, pluralistic and unequal public sphere (Hilmer, 2010). However various elements of participatory democratic theory have gone on to inform both the concepts and practices of participatory governance (Section 2.5.1) and deliberative democracy (Section 2.3).

2.3 Deliberative democracy

As participatory democracy, deliberative democracy highlights the importance of:

‘an intersubjective political practice, which allows for the achievement of a consensus about collective objectives through dialogue and communication’ (Vitale, 2006, p.753)

It follows participatory democratic theory in that it is in the process of public reason and deliberation that people come to understand a range of issues from different perspectives that enables them to reflect on their concerns and alter their values and opinions in the process of coming to mutual understanding over common concerns. Some of the theoretical
foundations of deliberative democracy extend from the work of Habermas and it is useful to here consider some of his concepts. The ‘system’ refers to societal institutions of the market economy and the state, which both tend toward bureaucratic expansion. The rationalising tendencies of the system can be resisted through the ‘lifeworld’ and ‘communicative action’. Through the lifeworld individuals draw from shared norms and values to construct identity and a sense of solidarity, where:

‘cultural patterns of interpretation, evaluation and expression serve as resources for the achievement of mutual understanding by participants who want to negotiate a common definition of a situation and within that framework, to arrive at a consensus regarding something in the world’ (Habermas, 1987, p.134).

Here Habermas, as Hannah Arendt (see section 2.6.1), highlights the importance of the intersubjective, focussing on the common spaces between subjects (Vitale, 2006). Within deliberative processes the articulation of facts and values enables a reflexivity upon individual opinions and others standpoints, which enlarges a person’s understanding (Benhabib, 1996), the process that Habermas refers to as communicative action. The conditions of deliberation, described by Habermas as an ‘ideal speech situation’ should support debate where external power relations are ‘bracketed’, all citizens can contribute equally, relying on rational discourse and argumentation without ideology, focussing on common goods. Whilst Fraser (1997) has critiqued the idea of a ‘single, comprehensive public sphere’, Benhabib (1996, p.73) illustrates how the model can be extended to incorporate a ‘plurality of modes of association’ where public conversations can result through the interlocking of multiple public spheres.

It is acknowledged by some deliberative democrats that full consensus is unlikely, yet through principles of reciprocity and accommodation, citizens may be able to deliberate moral controversies that exist within pluralistic societies together ‘in a mode of mutual respect’ (Gutmann and Thompson, 1996, pp.93-94). Deliberative democrats advocate certain institutional procedures to incorporate the understanding of diverse values and beliefs:
‘The more conflicts of interest there are the more important it is to have procedural solutions of conflict adjudication…. Proceduralist models of democracy allow the articulation of conflicts of interests under conditions of social cooperation mutually acceptable to all’ (Benhabib, 1996, p.73).

Institutional procedures are themselves subject to deliberative contemplation. Habermas’s (1996) later work focuses upon how these forms of deliberation can be institutionalised through law and conversely how these ‘communicative processes of civil society influence the legislative and policy processes of the state’ (Dryzek, 2000, p.25). Deliberative democracy theories developed an increasing number of debates centred on how existent institutions could facilitate spaces for deliberative debate, however Dryzek (2000) critiques this work for its similarity to liberal constitutionalism and lack of radical and critical voice. Developing a model of ‘discursive democracy’ he highlights the importance of contestation within public spheres and ‘a critical orientation to established power structures’ (p. 162). An important aspect of this critique is whether institutionalised space creates the necessary conducive context where different agents can share their perspectives and opinions as free and equal citizens and contest state agendas. Such a question is related to the debate between radical and pluralist modes of workplace participation where pluralists see that institutionalisation can ensure workers rights whilst radical models understand such forums as forms of incorporation and co-option. These dilemmas are related to the second research question of this thesis which considers the impact of the organisational and institutional context on collaborative forms of participation.

It has been suggested that deliberative democracy takes on key tenets of participatory democracy but in a ‘muted form and in a more institutional-friendly way’ (Cunningham, 2002, p.141). In addition to some theorists seeing it as loosing a critical edge, others note its failings in striving to achieve social and economic equality, thus Vitale (2006, p.758) identifies:

‘the existence of a lacuna in the theory of deliberative democracy, which neither challenges nor engages an in-depth discussion of either the problem of social and economic rights, or issues of redistributive justice’.
Participative democratic theory incorporated many different spheres including the home and workplace yet Habermas distinguishes between private and public concerns. Fraser (1997, p.88) illustrates how these distinctions can be ‘deployed to delegitimate some interests, views, and topics and to valorise others’. Workplace democracy was previously a public concern (for example through the Bullock Committee) that has become increasingly privatised as a managerial concern. Lack of focus on redistribution is an area that Fraser (1997, p.80) contests, illustrating how social inequalities effect deliberation even where power differentials are supposedly ‘bracketed’. Instead Fraser sees that ‘it is a necessary condition for participatory parity that systemic social inequalities be eliminated’. Similarly Young (2001) argues that attempts to ‘bracket’ power relations within a deliberative sphere can never be truly achieved due to structural inequalities adversely impacting both the process and outcomes for those who have less powerful social positions:

‘Formally inclusive deliberative processes nevertheless enact structural biases in which more powerful and socially advantaged actors have greater access to the deliberative process and therefore are able to dominate the proceedings with their interests and perspectives’ (Young, 2001, p.679).

In practice ‘even the most internally democratic small collectives cannot in fact achieve equality of power in their decisions’ (Mansbridge, 1996, p.54). Deliberative democracy has been critiqued for its lack of theorisation of conflicting interests and coercion within democratic processes.

‘Politics in a modern democracy must accept division and conflict as unavoidable, and the reconciliation of rival claims and conflicting interests can only be partial and provisional’ (Mouffe, 1993, p.113).

Within a diverse and unequal society there will always be real differences which will divide citizens and any consensus may be based on exclusions and act as an ‘artificial unity’ and a ‘mask for power relations’ (Stears, 2010). Such consensus and portrayed social objectivity is ultimately political (Mouffe, 2002, p.6), Mouffe advocating a model of agonistic pluralism, entailing the recognition and legitimation of conflict and the acknowledgement that difference and disagreement are an essential part of democratic politics. The public
sphere itself can be characterised by the proliferation of ‘differences of culture, faith, lifestyle and values, differences which place public organizations at the intersection of conflicting needs and alternative definitions of the common good’ (Hoggett, 2006, p.176). Because deliberation is likely to be influenced by ‘symbolic or material privilege’ even where status inequalities have been bracketed, definitions of the common good are likely to be biased toward privileged perspectives (Young, 1996, p.126). What is contestable through deliberation may be based upon limited agendas where some topics are not considered. Deliberative democracy has been challenged for excluding different forms of expression and thus repressing certain social groups from entering deliberative spaces. Deliberative democracy can value ‘dispassionate, orderly or articulate’ expression which excludes other communicative styles including greeting, which acknowledges and ensures recognition of all participants, rhetoric, which can highlight particular viewpoints which might otherwise be marginalised and narratives, which enable people to share meanings and experiences (Young, 2002, p.6-7). Social exclusions and inequalities may engender feelings of anger and distrust amongst citizens, emotions that are excluded from rational deliberative dialogue. The emotional dynamics of deliberation are essential to an understanding of how such emotions can be harnessed to the potential benefit of deliberation (Thompson and Hoggett, 2001). Drawing on the ethics of care literature Barnes (2008) suggests criteria that may support emotional morality within dialogue, so that deliberation may be undertaken ‘with care’.

Because of these various critiques of deliberative democracy, several authors (Fraser, 1997; Beresford, 2002; 2009; Newman, 2007) highlight the importance of independent spaces for citizens to come together to discuss issues of concern, free from institutional structures. The importance of independent, critical spaces is now considered through an analysis of social movement theory and practice, which can be contrasted with more institutionalised participatory forms.

2.4 Social movements

In order to understand the dynamics of conflict and collaboration and social change ‘from the ground up’ it is useful to explore social movement theory and practice. This section contrasts elements of social movement contestation with collaborative deliberative democratic processes, exploring the dynamics of catalysing social change. It overviews
major theoretical approaches to social movements before considering the impact of independent social movements on the welfare state, illustrating how public service practices have been contested by independent social movements. This supports future analysis that explores how institutional and organisational contexts may impact collaborative processes.

2.4.1 Social movements, conflict and collaboration

Social movement theories provide a framework for understanding the inspiration, motivation, organisation and impact of the different movements that have emerged which resist and protest against aspects of the social and political world. Social movement theories can be categorised into two phases, before and after the 1960s when a number of protests and social conflicts led to a reanalysis of theoretical models and debates (Beckett, 2006). ‘Old’ movements that were often class based and focussed on redistribution were contrasted with ‘new’ social movements that were concerned with cultural recognition. However such distinctions between ‘old’ and ‘new’ movements are often blurred as many newer movements, such as the disability movement, fought for both recognition and redistribution (Oliver and Zarb, 1997).

Social movements constitute a form of ‘contentious politics’, whereby their collective claims on behalf of a disadvantaged population may conflict with others’ interests, usually dominant power groups (Tarrow, 1996; Tilly and Wood, 2009). Melucci (1995) highlights the importance of public spheres, independent of government institutions as key to the survival of such movements; demands are presented but never heard solely through state sponsored political channels. Such public spaces enable movements to avoid becoming institutionalised, Fraser (1997) referring to such spaces as ‘subaltern counterpublics’. Three key mechanisms of social movement activity have been identified; ‘conflictual collective action’; informal networking; and collective identity, building connectedness and ‘mutual recognition’ (Della Porta and Diani, 2006, p.20-21). Conflictual collective action concerns:

‘an oppositional relationship between actors who seek control of the same stake – be it political, economic or cultural power – and in the process make negative claims on each other – i.e., demands which, if realised, would damage the interests of the other actors’ (op. cit., p.21).
This is an important differentiation with deliberative democracy that promotes collaborative dialogue. This contrast between confrontation and engagement is illustrated through Young’s (2001) essay of imagined dialogue between a social movement activist and a deliberative democrat. Whilst deliberative democrats may see the tactics of activists as signifying ‘pressure group interest-based politics’ that ought to be transcended to reach agreement (p. 674), the activist may see that social (or environmental) justice is at the centre of their claims rather than self or group interest. The activist may contest that deliberation within institutions may merely legitimise such structures, exclude particular groups, silence dissent, avoid conflict and work within limited agendas and options that maintain structural power relations, existent policy trajectories and hegemonic discourses, mirroring the structural inequalities and social injustices that need contesting. However deliberative democrats may contest that in order to instigate institutional change that enables social justice it is necessary to enter into dialogue with power holders to persuade them to change dominant structures. It is they who have the power to change them. Young (2001, p.688) concludes that (deliberative) democratic theory firstly, needs to maintain its critical edge, exposing the constraints of institutionalised deliberative processes and secondly needs communicative processes that are ‘far more rowdy, disorderly and decentred’. Young suggests that frictions between the critical, oppositional approach of the activist and the collaborative approach of the deliberative democrat cannot be reduced and ‘cannot usually occur together’ (p. 689), thus democratic theory and practice may need to utilise both approaches whilst acknowledging their differences. Such tensions resonate with my own reflections and experiences as a researcher working with aspects of critical theory, yet maintaining a collaborative approach to research with institutions that were facilitating participative projects. At times these theoretical conflicts between critique and collaboration felt embodied and as a researcher I lived with these contradictions between institutional collaborative processes and critical, emancipatory theory. Further reflections on these dynamics are reflected upon within Chapters 4 and 9.

2.4.2 Social movements and the state

Moving more specifically to a focus on social welfare movements and their relationship to the state, a continuum can be developed between oppositional, confrontational direct action protests and radical groups through to conservative groups that are incorporated within professional and managerial structures (Annetts et al., 2009, p.10; Williamson, 2010).
Whilst the development of the welfare state is often narrated as an achievement of politicians and professionals, this has also been contested as disregarding the importance of the role of ‘a loose coalition of social movement networks from within and around the labour movement’ in campaigning for aspects of the welfare state (Annetts et al., 2009, p.10).

Different social movements have continued to have an influence over the development of the welfare state, contesting some public services as being paternalistic and controlling. They have also disputed the authority of expert knowledge, highlighting the importance of experiential and tacit knowledge of service users (Annetts et al., 2009). They have campaigned to variously transform and defend different elements so that they become centred upon the needs and rights of the person rather than organised according to professional and state concerns. Service user movements have been associated with improvements in legislation, policy, culture, theory and provision of services including the development of new discourses, an emphasis on human and civil rights, the social model of disability, direct payments and a campaigning force which works for the inclusion of users in all areas of the social world (Beresford and Croft, 2004). Beresford (2009) illustrates the importance of social movements maintaining a separatist approach in contrast to notions of partnership with welfare providers, which have not necessarily led to significant service changes. However the context of some services means that user groups may attempt to influence and change mainstream service provision rather than set up alternatives (for examples see Williamson, 2010).

2.4.3 Summary

To summarise these debates on participatory, industrial and deliberative democracy alongside social movements some common themes can be highlighted that have theoretical importance for the research questions of this thesis.

**Intersubjectivity and common goods** Deliberative processes are theorised to enable individuals to reflect upon their own concerns in the light of facts, values and others experiences so that areas of understanding and shared perspectives can be facilitated. Some theorists highlight that consensus may not always be possible within a diverse pluralistic society, yet deliberative dialogue can still enable diverse people to work toward sharing
perspectives and understand ‘moments of commonality’ (Wolin, 1996, p.31). Such processes are central to understanding collaborative mechanisms between different stakeholder groups and provides some theoretical grounding to the first research question.

**Equality and inequality** Whilst Guild Socialism and later participative democratic theory highlighted the importance of social and economic equality, more recent deliberative democratic theorists have tended toward focussing on political equality. Yet it has been shown how different forms of structural inequality may impact deliberative dialogue. Social and economic inequalities cannot always be easily ‘bracketed’ within dialogic spheres and can impact upon the content, process and outcomes of deliberation. These theoretical debates relate to the second research question concerning how social contexts may impact participatory processes and the third research question exploring outcomes, as unequal relations may impact the form of outcomes achieved through collaboration.

**Institutionalisation and independence** There is considerable debate as to the extent to which institutionalisation of participative structures constrains free, equal and critical dialogue and the ability to contest structural and cultural inequalities. Several theorists point to the importance of autonomous space to enable people to come together to create ‘counter-discourses’ and oppose dominant agendas and discourses. This theme relates to the second research question which considers how collaborative forms of participation are impacted upon by organisational and institutional structures and the third research question which explores the impact of participation.

**Conflict and consensus** The dynamics of conflict, collaboration and consensus are important to analyse within participative processes. Industrial relations history and theory illustrates how trade union officials can strategically orient their positions, both ‘boxing’ and ‘dancing’ with management according to the substance and context of the issues at stake (Huzzard et al., 2004). Both participatory and deliberative democratic theory rely upon a notion of intersubjectivity and the ability to focus dialogue upon common concerns, more recent deliberative democratic theorists analysing how conflict and differential interests play out within deliberative forums. Social movements may rely upon ‘conflictual collective action’, yet may need to negotiate with power holders in order to realise particular aims. These tensions between conflict and collaboration relates to key concerns.
of the fourth research question which explores power dynamics within collaborative processes.

2.5 Participation and public services

Having overviewed some of the history of trade unionism, workplace democracy, social movements and participatory and deliberative democratic theory, this analysis becomes focused upon institutionalised forms of participation within public services. This section introduces the concept of governance and illustrates how institutionalised forms of participation have developed within public services, analysing the changes in both worker and citizen/service user participation policies and practices through the development of the welfare state in England.

2.5.1 Participation and governance

Governance can refer to the ways in which ‘forms of power and authority can secure order’ (Bevir, 2009, p.3), Kajer (2004, p.3) etymologically tracing the concept back to the Greek verb for steering and designing ‘a system of rule’. Governance has been used as a term to express the structural changes since the 1980s in how states organise and ‘steer’ a range of institutions and agents to conduct its affairs including the delivery of public services and also as a theoretical approach which examines this occurrence (Pierre and Peters, 2000). The concept of governance can refer to the ‘hollowing out’ of the state, whereby markets (through competition) and networks (through collaboration) take on the business of the state. However, whether the state actually gives up its power to these new actors is contested, Clarke (2004) suggesting that it is the end of the state as a unitary object and that state power becomes dispersed through new processes of governing.

Turning specifically towards theories of participation and governance, Hajer and Wagenaar (2003) see that participation of different actors within governance emphasises ‘collective, pragmatic, participatory, local problem solving’ (p. 7) where centralised decision making has become ineffective due to ‘radical uncertainty’. They root their analysis of governance through deliberative policy making within a pragmatist approach, stemming from John Dewey. In contrast to interest bargaining they emphasise processes of conflict resolution through shared problem solving, using Arendt’s concept of ‘communities of action’ (p. 11) whilst acknowledging the existence of deep-rooted value conflicts. Adopting an interpretive
and discursive analysis they highlight the importance of practice in mediating between discourses and social action, directing analysis toward everyday action, Yanow (2003, p.236) noting the importance of ‘local knowledge’ and ‘lived experience’ within such processes. Fung and Wright (2003) develop the concept of empowered participatory governance, where rather than participation occurring through independent social movements, people get involved within institutional boundaries. Instead of social movements ‘fighting the power’, empowered participatory governance attempts to ‘reconstitute decision processes within state institutions’ (Fung and Wright, 2003, p.22).

Empowered participatory governance (EPG) (Fung and Wright, 2003; Fung, 2004) has been developed as a model that illustrates how public agencies can become more responsive, fair, innovative and effective by incorporating empowered participation and deliberation into their governance structures. Central control of services is seen to crowd out local prerogatives, civic initiative and engagement and disregard local knowledge. Through a practical orientation, that focuses on specific concerns and involves the people who are affected by these issues, local knowledge and experience can enable insight and generate solutions through dialogue (Fung and Wright, 2003). Theoretically it is based on deliberative democracy through the work of Habermas, Cohen and Dryzek alongside pragmatism, through the work of John Dewey (Fung, 2004). Fung and Wright (2003, p.22) emphasise ‘close cooperation with state agents’ so that the ‘central procedures of power’ can be changed. However they concede that the localised form of decision making they advocate where solutions are tailored to specific need, may depoliticise wider social problems.

Participatory governance theorists often use the concept of participatory democracy (e.g. Fung, 2004), however Greven (2007) suggests that whereas participatory democracy critiqued democratic elitism, participatory governance has a more functional and technocratic approach to participation. Participants within governance systems become ‘everyday makers’ who are ‘project-oriented and want to deal with common concerns concretely and personally rather than abstractly and ideologically’ (Bang, 2005, p.167). The discussion and recognition of power and politics within governing processes can become sidelined within analysis, Bovaird (2005) noting that research that explores the interweaving of power relations between the government and different stakeholders within networked forms of governance is underdeveloped. Finke (2007) emphasises that
participatory governance tends to take an instrumental approach to participation as a means to the end of effective and efficient policies, whereas participatory democracy focuses on the process of actually democratically involving people. Equality within participative processes is often highlighted as important within participatory governance yet less consideration is given to the contextual conditions of social and economic equality. Such issues are related to the importance of understanding different forms of power and politics within governing relations. There is a need for governance theory to examine the interrelationships between individual action with structures and cultures within an analytic framework (Peters, 2011), an issue explored further in Section 2.7. Before this however it will first be illustrated how these changing forms of governance have manifested themselves in the policy and practice of worker and citizen participation in public services, before exploring how these have been analysed with respect to theories of power.

2.5.2 Worker participation in public services

The contemporary debate on employee participation in England is now largely dominated by management thinking as to its utility and pay off. Within this caste of thinking participation should be non-statutory, problem-solving and a source of employee commitment to the enterprise. Whilst previous sections have illustrated models of radical and pluralist forms of industrial relations, current practices tend to be based on more unitarist assumptions, following the differentiation of perspectives of Fox (1974).

Within the public sector to the late 1970s, staff participation operated through representative forms such as trade unionism, collective bargaining and joint consultative arrangements based on Whitley agreements, modelling how employees should be treated with the state seeking to overt direct conflict with its staff (Farnham and Horton, 1996). Such mechanisms were sidelined by the 1980s Conservative government, professionals and unions were marginalised and collective bargaining systems weakened (Farnham, 2000). Informed by neo-liberal economics and public choice theory, the government eroded professional power, using quasi markets, performance management and user choice to control public service professionals. When the Labour government first came to power in 1997 they promoted partnership with public sector unions (Guest and Peccei, 2001). However disagreement with public service reform was not tolerated within Blair’s
approach, infamously speaking of ‘scars on his back’ from ‘modernisation’ attempts (Mooney and Law, 2007).

Employee involvement initiatives based on a unitarist approach became popular from the 1980s, this consensual and co-operative approach advocated individualism and a direct approach to participation. Contribution, engagement, organisationally committed behaviours and tapping into the talents of the workforce were promoted with the aim of facilitating better performance (EPOC, 1997). The public sector has increasingly adopted practices of high commitment management, using a range of human resource initiatives to induce the development of skills and performance from employees. However whether these models are suited to the public sector is debated, Boselie et al. (2003) suggest that such practices are less effective in highly institutionalised settings. Foster and Hoggett (1999) analyse how ‘empowerment’ initiatives within public services can often mean increases in work volume, responsibility and associated stress, illustrating the adverse impact on employees of the well-worn phrase of ‘getting more for less’. Similarly Cooke (2006) illustrates within health services how nurses’ empowerment sometimes meant additional responsibility but without corresponding power or control. O’Connor (2001, p.16) illustrates how current empowerment literature is psychological, managerialist and apolitical, privileging emotions and feelings over material and social conditions. She reasserts the importance of the political principles of rights and equality within the workplace, stemming from industrial democracy debates and critiques current empowerment literature for its individualistic focus. However there are still high levels of trade union membership (57% in the public sector in comparison with 16% in the private sector) and collective bargaining agreements (collective agreements cover 68% of public sector employees in comparison with 18% of private sector employees) (Department for Business, Innovation and Skills, 2010). Trade union organisations such as the TUC and Unison provide a strong collective voice to assert the social and economic benefits of public sector provision, campaigning against marketisation and public sector cuts.

2.5.3 Citizen and service user participation in public services

Traditional public administration models conceptualised service users as passive recipients however from the 1960s onwards, programs such as the United States War on Poverty and the UK Community Development Projects (CDP) highlighted the importance of citizen
participation. Radical activists within CDPs promoted structural change to enable worker and citizen control (Mayo, 2000, p.96) however such challenges were squashed through the 1980s, municipal socialist councils collapsing under central government pressures. The Conservative government took a different path to citizen participation in the 1980s. Informed by the principles of public choice theory, they introduced consumerist principles into public services through quasi markets and user choice, attempting to empower the citizen and develop new mechanisms of control on the public service provider. The Citizen’s Charter (1991) was an important break from the past, previously providers had been the traditional arbiters of quality standards in service provision (Dawson and Dargie, 2002). Within health and social care the NHS Community Care Act (1990) emphasised the need to involve service users and the Community Care (Direct Payments) Act (1996) enabled local authorities to provide payments to service users to buy services directly. New Labour further emphasised the importance of citizen and service user involvement, developing a ream of legislation promoting participation in health and social care, local government and a variety of different public services. This included Creating a Patient Led NHS (DH, 2005) and the Local Government and Public Involvement in Health Act (2007) that imposed a ‘duty to involve’ local people who may be affected by local authorities decisions and actions. Current Coalition plans for citizen and user participation are developing through two major bills, the Localism Bill (2011) and the Health and Social Care Bill (2011), which are discussed in detail in section 3.3.

The analysis of user participation in public services can often focus on technical aspects, abstracted from politics and ideology. Beresford (2002; 2009) sees that the last three decades of neo-liberalism have promoted managerialist models of participation, focussing on state concerns of efficiency and effectiveness, and consumerism through individual choice. It is argued that institutional forms of participation can create depoliticised, technical and managerial engagement processes (Newman and Clarke, 2009, p.152), focussing on narrow, particular and localised agendas. Co-option may occur where it is the participants that are transformed rather than institutional structures (Newman and Clarke, 2009). Where professionals set the agenda and determine how users will be involved in participative forums and service development this can limit the effectiveness of involvement and extent of change resulting from participation (Barnes et al., 2007). Users knowledge and experiences can be devalued in comparison with professional and
managerial discourses (Rose et al., 2004), Beresford (2001, 2007) similarly illustrating a battle between traditional sources of knowledge based on positivist values of distance, neutrality and objectivity and service users’ experiential knowledge. Service user perspectives may threaten professional identity and involve exposure and vulnerability (Robson et al., 2003), conflicts and tensions within participative structures may be unavoidable as they may be based on contested notions of truth, reality and knowledge (Carr, 2007). Analysis of participative processes needs to be contextualised within government policy, exploring how policy impacts both the actors and structures within which the process takes place (Newman et al., 2004).

There are similarities within both employee and service user participation literature, both through their underlying philosophical models and emerging historical trends. Radical forms of employee participation mirror democratic models of citizen participation, framed within a social justice and rights perspective in contrast to unitarist and managerialist approaches which favour, institutionalised, direct and individual approaches. In terms of historical trends, currently there seems to be greater emphasis on individualised forms of participation such as through consumerism and choice discourses and direct forms of worker involvement. These tendencies may individualise and depoliticise wider structural power relations and inequalities. Both employee and user participation show trends toward more managerialist forms of participation within the last three decades of neo-liberalism, where agendas may become localised and depoliticised. These different aspects of participation are now considered through theoretical concepts of power.

2.6 Participation and power

These last sections of this chapter explore participation with respect to social theories that focus on power, structure and agency, building on the four analytic themes that were drawn from the debates on participatory, industrial and deliberative democracy and social movements. These concerned issues of equality within both the process and context of participation, the dynamics of conflict and cooperation, the process of identifying and agreeing on common concern and the impact of institutionalisation on participation. The first issue highlights the importance of understanding power relations within participative processes and how different forms of inequality may influence the extent to which participants have power within the process. Earlier industrial relations theorists focussed on
material, economic and social equality and concepts of industrial democracy, however more recent debates do not centre such issues. The second and third themes explore the dynamics of conflict and cooperation within participative processes and the extent to which different agents can find shared spaces and common interests through processes of intersubjectivity. These issues relate to different conceptions of power as ‘conflictual power’ and ‘consensual power’, or termed differently ‘power over’ and ‘power to’ (Haugaard, 2002). Conflictual power theories include Lukes and Bourdieu who explore why subaltern groups seem to consent to their own domination, the conflict arising ‘from a normative evaluation by the analyst … that the subaltern agent should not be so consenting’ (Haugaard, 2009, p.241). Consensual theories of power include the work of Barry Barnes and Hannah Arendt, conceiving of power as ‘power to’. The final theme drawn out of the participation literature explores the dynamics of state institutions, power and knowledge, and can relate to Foucauldian concepts of power as they relate to knowledge, discourse and governmentality, or as power as ‘constitutive of reality’ (Haugaard, 2002).

2.6.1 Power

Consensual views of power focus on how power can be created and produced by society. Extending from the view of Parsons that power can be produced through consensus on system goals, ‘power to’ can be derived from shared social knowledge and agreement within particular systems that enables agents to act collectively (Haugaard, 2009). Arendt defines power as ‘the human ability not just to act but to act in concert’ (1970, p.44), which enables people to collectively operate within the public sphere, constituting the political realm. These consensual theories of power can be contrasted with conflictual understandings. Whereas Arendt sees that coercion constitutes a form of violence rather than power, the ‘power over’ debate which derives from a Hobbesian perspective of power, focuses on power as domination (Haugaard and Clegg, 2009, p.2).

Lukes (1974; 2005) identifies three dimensions of power that constitute forms of ‘power over’. The first dimension relates to observable, conflictual behaviour where one party exercises power over another to enforce their opinion (Dahl, 1961), the second dimension relates to subversion and control of agendas (Bachrach and Baratz, 1970). The third critiques a behavioural focus illustrating how sovereign powers disperse meaning which blinds agents to their true needs, power is at its most potent due to its invisibility. Lukes
original conception of the third dimension of power can be associated with a sense of false consciousness, where people are socialised into accepting their domination and do not consciously realise their subjugation. It assumes that actors have unitary and real interests, rather than acknowledging that such interests can be diverse and shifting (Lukes, 2005). This view of power can be critiqued for less consideration of ‘positive-sum aspects of power, namely its “productive” and “transformative” aspects’ (Edwards, 2006, p.573). Indeed within Lukes’s later edition (2005) he acknowledges that ‘power over’, i.e. domination is merely one facet of power and that his earlier analysis failed to appreciate different aspects including how power over others can be ‘compatible with dignity’ (2005, p.109).

The original focus of Lukes on power as domination has preoccupied many other social theorists including Bourdieu and Foucault. Bourdieu illustrates how social dominance appears to be ‘natural’ and defines ‘symbolic power’ as ‘that invisible power which can be exercised only with the complicity of those who do not want to know that they are subject to it or even that they themselves exercise it’ (1991, p.164). Symbolic power shapes habitus, which can be defined as particular dispositions and embodied, tacit practices that agents act in accordance with, developed through our social conditioning and positions. Modern societies are made up of different fields of social practices and people’s capital relates to the extent to which their habitus enables them to have a ‘feel for the game’ within different social fields (Bourdieu, 1991, p.13). Stability within these fields is accounted for by agents’ habitus and acceptance of symbolic power. Bourdieu distinguishes between four types of capital, symbolic (pertaining to status and prestige), social (connections, ties and personal relations), cultural (competences, skills and qualifications) and economic (material resources). Through habitus, agents reproduce social structures and embody practices without being consciously aware of such reproduction (Elder-Vass, 2007a). Whilst some interpretations of habitus include room for creativity, improvisation (Layder, 1994) and reflexivity (Callaghan and Wistow, 2006) within unpredictable situations, Elder-Vass (2007a, p.332) qualifies such a reading of Bourdieu, stating that any conscious deliberation in Bourdieu’s theory remains secondary to habitus. Archer (2007) critiques Bourdieu’s model of habitus arguing that it ignores human subjectivity, attributes particular concerns onto groups and promotes passive agency. Instead Archer (2007) asserts the importance of reflexivity in making us ‘active agents’, which is essential in explaining social events and
outcomes (Archer, 2007, pp.5-6). People matter and our unique identities and dynamic subjectivities enable us to be active agents that reflexively evaluate our personal concerns, actions and social contexts (Archer, 2007, p.22).

Bourdieu’s approach can be seen to develop and extend from a Marxist analysis where class and the economy maintain primacy and the state is a source of sovereign power (Haugaard, 2002; 2009, p.248). In contrast to this Foucault explores the usage of knowledge and ‘truth’ in regimes of power. Clegg (1989) traces Foucault’s work through Machiavelli who conceives power in terms of strategies, seeing power embedded in its specific context rather than flowing from any form of sovereignty. Foucault (1977) portrays power as productive and repressive, illustrating how the techniques and practices of power are normalised into ways of being and thinking that are shared discursively and structure conduct in the world (Clegg et al., 2006). Power is pervasive through discourse and knowledge, all agents being a product of this. Foucault’s approach has been developed by some authors (e.g. Gould, 1994; Hardy and Leiba O’Sullivan, 1998) as a fourth dimension of power. However Foucault’s views have been criticised for overlooking aspects of a knowing agent by locating power in structures (Edwards and Collinson, 2002), the human self being ‘denied any constitutive role in the circulation of power and the production of social life’ (Layder, 1994, p.111). Allen (2002, p.136) insists that such a reading of Foucault is an ‘over-reaction’ and that although Foucault claims that ‘the individual is an effect of power’ this does not mean that he asserts that ‘the individual is merely or nothing more than an effect of power’. Foucault’s thesis has also been critiqued as an overly negative version of power, which does not allow for the idea that if ‘we desire something, we exert power positively to try and bring it within our grasp, power brings about a change in state’ (Clegg et al., 2006).

Such a critique brings us back to notions of ‘power to’ and although Arendt and Foucault have been assumed to be ‘on entirely different metaphysical and epistemological planes’ (Allen, 2002, p.131), Allen illustrates how both Arendt’s and Foucault’s conceptions of power are ingrained in the same critique of a sovereign power that imposes its will on subjects. Both instead stress its relational nature, power surfacing through interaction and presenting itself through its exercise. This can be productive and transformative, although Foucault emphasises the potential danger of power whereas Arendt sees relational power as
normatively positive (op. cit., p.142). Allen explains how this makes a Foucauldian understanding of solidarity and the power of social movements particularly difficult yet Arendt, whilst explaining this phenomenon, neglects strategic, political action. Through Allen’s analysis of Arendt and Foucault she enables a conception of power that both accounts for collective action of social movements whilst illustrating the kinds of oppressive and problematic power relations that Foucault describes that they may be fighting against, thus developing an approach that incorporates both ‘power with’ and ‘power over’. Other authors have also attempted to develop conceptual models that incorporate these different aspects of power, including Haugaard (2003) and Bhaskar (1993). A theory of power needs to take into account both positive sum aspects and the ‘complex and shifting nature of “interests” and the ways in which power is embedded in continuing social relationships’ (Edwards, 2006). Such a framework of power that incorporates both facilitative and constraining structures, a reflective agent that may act creatively and/or dominantly, expressing **power to, over and with** is important in order to understand and explain the dynamics of power relations within participation.

2.6.2 Power and participation

Many studies conceive participative structures as a means of domination, using Lukes and Foucault to analyse power relations (e.g. Hardy and Leiba-O’Sullivan, 1998; Mir and Mir, 2005; Atkinson, 1999; Hodge, 2005). Discursive analyses illustrate how user participation operates within and reinforces institutional power relations, mirroring wider inequalities (Hodge, 2005). Bourdieu has been used to illustrate how governmental participative strategies reinforce existing social relations (Atkinson, 1999). Post-structuralist critiques argue that participative mechanisms draw citizens into new processes of governmental power (Rose, 1999). Foucault’s theory of governmentality is used to conceptualise power as facilitative, where government power is reproduced by individuals who subject and govern themselves within social spaces according to discursive principles, standards, expectations and morals (Taylor, 2007; Mir and Mir, 2005; Swyngedouw, 2005). In her analysis of community participation, Taylor (2007) uses governmentality theory as a framework to help explain how state power is pervasive despite the devolution of governing to communities, yet she finds ‘there are still opportunities for communities to become “active subjects” within them and thus to shape and influence the exercise of government’. Similarly Barnes et al. (2007, p.204) find that there are spaces to influence
decision making, opening up ‘the possibility of new forms of social agency’. What participation actually achieves depends upon context (Marchington et al., 1992) and it does not necessarily produce forms of domination which ‘lock people in a new iron cage’ (Edwards and Collinson, 2002). Control may be attempted but not always achieved and in micro-practices of everyday life, different forms of contestation, conflict and dissent may occur alongside creative and imaginative approaches to changing dominant structures. ‘Micro-emancipation’ (Alvesson and Willmott, 1992) can happen, where incremental reform brings welcome yet local and limited gains. Mckee (2009) highlights the importance of focussing on these everyday practices, taking into account the temporal, spatial and contingent factors of actual governing processes, developing a ‘realist governmentality’ approach, where subjects are able to reflexively adapt and resist totalising discourses. However whilst Foucault’s work maintained the human ability for resistance, governmentality literature does not provide a theoretical model of an active and creative agent. Other authors have highlighted ‘moments of agency’, including ‘the ability to fantasise, to envision other worlds and to create other worlds from those we know’ (Scott-Hill, 2002, p.399). Piven (2008, p.5) emphasises the importance of ‘interdependent power’, which is sourced in ‘social and co-operative relations’. Focussing on the disability movement Scott-Hill (2002) highlights how notions of separateness and independence fail to incorporate ‘interconnectedness’ and ‘relational politics’. Whilst institutions may attempt to enforce conformity, the social relations that people develop within them can enable people to break and challenge social rules. Indeed it can be this rule breaking that supports further interdependent power, where people act together and build solidarity (Piven, 2008).

So how can these different elements be incorporated into a theoretical framework that acknowledges these different dynamics of power relations, structure and agency? Some authors have attempted to draw together post-Foucauldian and critical realist approaches (Al-Amoudi, 2007; Mckee, 2009). In contrast, this thesis asserts that building from critical realist principles provides a stronger basis for a critical empirical analysis of power dynamics and the interrelationships between structure, culture and agency in participative processes. Using critical realism as an analytic framework has four particular benefits. Firstly it enables an analysis of both ‘power to’ act and realise aims and ‘power over’ (as
domination) (Bhaskar, 1993; Edwards, 2006). Secondly, it builds a multi-layered, reflexive and emotional model to conceptualise agency (Archer, 2000). This provides a stronger analytic grip on agency and facilitates a problematisation of actors’ roles in complex institutional and policy terrains. Thirdly, whilst Foucault provides less support for possibilities of transformative agency, critical realism provides some glimmer of hope for emancipatory aims through models of social change (Archer, 1995). Adopting Ernst Bloch’s concept of concrete utopianism Bhaskar (1993) illustrates how new social possibilities can be highlighted, imagining the real prospects within social situations that can be worked toward, developing self-transformative capacity and cooperative, emancipatory praxis. Finally, critical realism asserts the importance of stratification and emergence, providing a means to interrogate complexity through a multi-level framework. This allows for a wider interdisciplinary focus that incorporates an analysis of the interplay of different causal mechanisms within participative processes. These first three aspects are reflected upon in this last section of this chapter whilst the concepts of stratification, emergence and the interplay of causal mechanisms are considered within the initial theoretical considerations of the methodology chapter.

2.7 Structure, agency and intersubjectivity

Using a critical realist approach, this thesis explores the creative and constrained nature of agency, incorporating both structural conditioning and an active and reflective agent (Archer, 1995). Interplays of power are analysed, recognising both ‘power over’ (power as domination) and ‘power to’ (power to act and realise aims either individually or collectively). In contrast to post-structuralist approaches Archer (2000) emphasises the importance of ‘human properties and powers’ including emotion, thought, and personal identity. The self is not a discursive creation, Archer (2000, p.8) asserting that it is the primacy of practice rather than of language that constitutes the key human power of self consciousness. The morphogenetic approach (Archer, 1995) models societal constraints (but not control) on actors which are an effect of pre-existent structures and cultures with the possibility of social change as a result of agents’ reflexivity and interaction. Within this approach time is a central tenet which allows analytic distinctions between: pre-existent,

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4 Bhaskar (1993) refers to these two different forms of power as power: (power to act and realise aims) and power: (power over and as domination). However within this thesis these different elements of power are termed as ‘power to’ and ‘power over’.
conditioning structures which do not determine; social interaction which can emanate both from conditioned and active agency; resulting in either structural stasis or genesis (Archer, 1995, p.91). Archer contrasts this work sharply with structuration theory (Giddens, 1984), where structure and agency are defined in terms of one another, structural properties are not temporally placed and only have an existence where they are instantiated by actors. Whereas structuration accounts conflate structure and agency, the morphogenetic approach understands them as ‘separate strata with their own autonomous, irreducible, emergent properties and which consequently repudiates any form of conflation in social theorising’ (Archer, 1995, p.159). The morphogenetic approach supports an analytic dualism, exploring how agency causally interweaves with structure and culture (Archer, 1996), focussing on the interplay of different strata and their emergent properties. Agency can maintain or transform social structures, but are constrained by the very same. When we understand the real dimension; how, when and why generative mechanisms produce social events, we, as agents have the capacity to influence and change these mechanisms. This thesis is developed in Bhaskar’s transformative model of social action and leads onto the claim that the role of knowledge in society can be emancipatory with the possibility of the transformation of society rather than its reproduction (Archer, 1998, p.374). Bhaskar (1998, pp.25-26) argues that ‘the causal power of social forms is mediated through human agency’, Archer (2007, p.15) in her later work, asking how. She asserts that it is through reflexivity or ‘the internal conversation’ (Archer, 2003) that agents mediate how objective structural or cultural powers influence social action.

Archer (2007) illustrates how changing social contexts foster greater reflexivity where habitual reactions can not be relied upon. She critiques Bourdieu for although his analysis includes times of social crises, it is still through habitus that people make choices and act (Archer, 2007, p.48). She suggests that in Bourdieu’s attempt to transcend subject-object and structure-agency dualisms, the notion of habitus does not provide agents with any sense of independence from their context (p. 42). Elder-Vass (2007a) attempts to reconcile the different positions of Archer and Bourdieu, both theoretically and ontologically. Using neuroscience understandings it can be illustrated how part of our brain is conditioned by our experiences, an ‘underlying neural layer’ (following habitus). However decision making can also amend these dispositions through an ‘emergent mental layer’ (Elder-Vass, 2007a, p.341) which occurs far more often than just moments of crises. The extent to which
agents rely on habitus or conscious reflection can vary across individuals, situations and contexts. Perhaps the most interesting question is to consider how and when this varies between agents and their cultural and structural circumstances and this thesis attempts to explore this area within the case studies.

Archer’s work has been critiqued for developing an ‘under socialised’ picture of agency which does not account sufficiently for emotions generated through relationality and trust (Holmes, 2010), intersubjectivity (Gronow, 2008), social movements and democracy (Vandenberghe, 2005). Indeed Archer acknowledges (2007, p.316) that she does not include collective action, but instead focuses on individual subjects. More recently there have been attempts to bridge critical realism with relational sociology and whilst both focus on relational concerns, critical realism has focussed its efforts on the relationships between structure and agency and relational sociology has focussed on social interaction (Archer, 2010a). Relational sociology takes social relations as its object of analysis, rather than the subject or the social system or the dualisms of structure and agency (Donati, 2011a, pp.4-5). Donati argues that whilst some elements of interpersonal relations can be reduced to the egos of the agents interacting, the actual effect of social interaction is an emergent property that can not be reduced to the sum of its parts, i.e. the separate people interacting (Donati, 2011a, p.126). As Archer notes ‘relational goods’ can be generated through relationships, such goods being wholly dependent upon the enduring social interaction:

‘No-one can take away part of the orchestra or the football game as their personal possession and by taking themselves off they destroy the generative mechanism producing those goods’ (Archer, 2010a, p.203).

Such ‘relational goods’ bear a striking resemblance to Arendt’s ‘capacity to act in concert’ and the notion of power with, and relates to themes of deliberative democracy where people deliberate and extend their understandings to incorporate wider perspectives, where commonalities may emerge. Using a stratified social ontology (as described within chapter 4), social relations can be analysed at a separate emergent level and having argued that social interactions cannot be reduced to the people interacting, Donati (2011b) applies Archer’s work on reflexivity to social relations and extends it to a concept of ‘relational reflexivity’. Whilst Archer remains uncertain about the notion of collective reflexivity
(cited in Donati, 2011a, p.112), Donati (2011b, p.24) suggests that in certain systems there is not only personal reflexivity (the internal conversation) but also ‘a mixture of social interactive reflexivity and system reflexivity’. Social interactive reflexivity can emerge from ‘interactions among individuals with their personal reflexivity, in those social networks possessing relational emergent properties’ (Donati, 2011b, p.24). Whilst system reflexivity could be considered as imputing human subjectivity into systems, it is considered that the notion of social interactive reflexivity can be evidenced through its emergent properties that impact particular systems and structures. Donati (2011b) uses examples of peer to peer networks and co-production to illustrate structural elaborations where personal reflection and social interaction have enabled new emergent structures.

It is essential to place these relational emergent properties within their structural, cultural and policy contexts otherwise such an approach may be critiqued as being dominated by an ‘intersubjective social ontology’ (Joseph, 2006). Archer’s morphogenetic approach highlights the importance of prior structural and institutional contexts in shaping strategic action, Joseph (2010, p.232) illustrating how the concept of governmentality can be used to illustrate the ‘particular set of practices, institutions and rationalities’ that such social interactions take place within. This begins to illustrate the usefulness of a stratified social ontology that incorporates different dimensions of a social world within a wider analytic perspective. Not only must an analysis explore the dimensions of agents and social interactions but also investigate the social structures, cultures and political and ideological contexts within which such practices are situated. The analytic framework adopted to ground this approach is developed from both Archer’s work linking structure, culture, social interaction, agency and reflexivity and Bhaskar and Danermark’s (2006) concept of a ‘laminated system’. A laminated system models how different levels of a stratified social ontology may interact, these levels possibly including biological, psychological, psychosocial, cultural, discursive and policy mechanisms which may combine to co-determine particular empirical events (Bhaskar and Danermark, 2006). This means that such a theoretical analysis is sensitive enough to explore how and when different social practices and processes have primacy over others (Joseph, 2006) and how policy and ideology might affect this, exploring the dynamics of different dimensions and their emergent properties through time.
2.8 Conclusion

This chapter has provided a detailed overview of theoretical and historical perspectives on industrial, participatory and deliberative democracy alongside an analysis of social movements and their interrelationships to the state. This review enabled the emergence of four particular themes that were illustrated to have significance for the research questions of this thesis. The first theme considers how deliberative processes are theorised to facilitate mutual understanding and intersubjectivity where people’s consciousness is expanded to take into account others’ perspectives and standpoints. The second theme focuses upon how contextual inequalities may impact this communicative space. Early Guild Socialist thought emphasised the need for social and economic equality alongside worker control of the means of production, theories of participatory democracy maintaining this emphasis on economic equality and workplace democracy. Critics of deliberative democracy contest the notion of free and equal communicative spaces, highlighting how structural inequalities can impact the content, process and outcome of deliberation. The third theme relates to whether such communicative space occurs within institutions or independent social movements. Free and equal dialogue may be constrained within institutions, thus social movements may have an essential role in creating ‘counter-discourses’ and opposing structural and cultural inequalities. The fourth theme relates to the dynamics of consensus and conflict whereby participatory and deliberative democracy rely upon a sense of intersubjective dialogue, whereas social movements and trade unions may also develop ‘conflictual collective action’ in opposition to dominant power holders.

The history of participation within public services has then been overviewed, developing a focus on institutional forms of worker and service user participation and how participation has been analysed with respect to power. Many theorists have conceived of participation as a means of domination, however what participation achieves can depend upon context. It is suggested that in order to analyse this contingency within participation a theoretical framework that models both ‘power over’ and ‘power to’ needs to be adopted. The last section of this chapter has introduced the theoretical framework upon which this thesis is based. Using a critical realist perspective agency is theorised as being both constrained by existent cultures and social structures, yet people have reflexive ability to conceive how social change might occur and can act in ways that may either transform or maintain
existent social structures and cultures. The notion of collective reflexivity has been introduced which relates back to earlier discussions about intersubjectivity within communicative spaces. The concepts of emergence and a stratified social ontology were introduced, key elements of a critical realist approach, which are returned to in-depth within the methodology chapter. Before that however, Chapter 3 provides the theoretical and policy context for the substantive focus of this thesis, reviewing theories of public management, co-production, co-design and co-creation alongside reflections upon current policy trajectories.
CHAPTER 3

Jointly involving staff and citizens in changing public services

3.1 Introduction

Whilst Chapter 2 focussed upon theories of participation and power and developed the analytic framework of this thesis, this chapter concentrates on the empirical focus; staff and service user collaboration in public services. This chapter begins by reviewing changes in public services management from both a policy and theoretical perspective, illustrating the key underpinning theories of new public management and the developing concepts of public value management (Benington and Moore, 2010) and new public governance (Osborne, 2010a). Current policy thinking on staff and service user participation is overviewed, highlighting how the relational aspects of public services are increasingly being considered. This is followed by an analysis of actual policy trajectories, exploring how staff and service user participation are conceived of within the current Localism Bill (2011) and the Health and Social Care Bill (2011). Theoretical insights from the sociology and management of service work are then considered that begin to illuminate relational aspects of worker and service user interactions within a public service context, including overviews of service management, emotional labour, ethics of care and person-centred support literature. The second half of the chapter develops the model of co-participation, initially analysing the different ways in which service user and worker participation may interrelate within public services. Then the concepts of co-production, co-design and co-creation are overviewed, which all model how service users and staff may develop collaborative relationships within institutionalised contexts. The key premises and assumptions of these concepts are abstracted, developing the heuristic model of co-participation. This model of co-participation is then related to themes of Chapter 2, exploring aspects of equality, intersubjectivity, conflict and consensus, and institutionalisation, highlighting the importance of analysing power relations within collaborative processes that occur within a political context.
3.2 Public management and changing public services

This section explores changes in public management paradigms, examining their theoretical and political roots. The public management concepts of public value management (Benington and Moore, 2010) and new public governance (Osborne, 2010a) are explored, analysing their relevance to the concepts of co-production and co-creation. Pre 1979 the organisation of public services was theorised through public administration, and emphasis was put on bureaucratic process, equity of treatment and accountability (Ferlie et al., 1996). Services were provided through monopolistic organisations, trust was placed with public service professionals to operate according to their professional ethics and service users were essentially passive, receiving a universal and standard public service (Le Grand, 2003, p.5-6). Within the UK the Conservative government in the 1980s, drove a reform agenda from the top down, based on the assumption that large public monopolies were an ineffective way of providing public services. Mechanisms were introduced based on contestability, quasi markets, choice and incentive structures, importing private management techniques into the public sector. New public management (NPM) was characterised by entrepreneurial management, performance measurement, decentralisation, competition and efficiency (Hood, 1991). Public choice theory, alongside principal-agent theory formed some of the foundations of new public management (Hood, 1991). Public choice theorised agents as rational, calculating individuals who were motivated purely by self interest, whilst principal-agent theory assumed that all relationships could be reduced to contractual terms (Meier and Hill, 2005, p.59). Thus public services could be disaggregated down to basic units which enabled controls on inputs, outputs and cost management (Osborne, 2006). This approach was combined with managerialism, which considered organisations in a detached, rational, scientific way, disregarding politics and power issues and assuming a unitarist perspective on the organisation (Pollitt, 1990).

The philosophy of the Third Way informed New Labour’s approach to government from 1997 combining neo-liberal approaches and continued emphasis on economy and efficiency with a new prominence on citizenship, democratic renewal and social inclusion (Newman, 2001). They retained private market principles and a managerialist approach whilst adopting a citizen centred perspective (Hartley et al., 2002). Networks and collaboration were advocated alongside enhanced participation, user centred services and
civil society involvement. Participation was intended to enhance accountability, drive up standards, shift power from providers to users and provide a new way to exert pressure on public service employees to drive service improvements (Newman, 2001). Within this the public had a role as co-producers of services and there was a greater emphasis on community governance (Hartley, 2005). Hartley (2005) illustrates the changing conceptions of public management through eras of traditional public administration, new public management and networked and citizen-centred governance agendas. However linear concepts of change in governing arrangements have been contested (Newman, 2001; Newman and Clarke, 2009), where different aspects of policy emphasise both centralisation and decentralisation, hierarchies and networks. Linear change narratives don’t account for the continuities that exist within governing forms where hierarchies and markets maintain significant institutional influence alongside networks. Instead governing arrangements can be portrayed through the notion of assemblages, where different logics and practices of governing are brought together within specific sites. These tensions and dilemmas are then imposed upon public service agents as they interpret and negotiate policy directions, creating ‘processes of translation’ (Newman and Clarke, 2009). Public officials can ‘live out’ these contradictions alongside wider social value conflicts and contestations (Hoggett, 2006, p.179).

Two particular public management models that have been applied to current public sector practices are the public value model (Moore, 1995; Benington and Moore, 2010) and the development of the new public governance conceptual tool (Osborne, 2006). Public value can be understood as entailing a broader scope of value than public goods, a focus on outcomes rather than outputs and understanding what has meaning for people themselves, rather than institutional and policy perspectives of value (Alford and O’Flynn, 2009). Whilst Moore’s original text on public value (1995) was developed within a neo-liberal US context that favoured a public choice approach based on markets, choice and individualism, Benington (2009) has transposed the public value concept into a framework based on the public and collective. Public value is contested and debated within deliberative dialogue which takes place within state and civil society spheres, enabling different agents to move beyond individual preferences to common issues that express public value. Benington highlights the importance of public service staff in developing service interrelationships that enable ‘processes of co-creation with citizens and users at the front-line’ (Benington,
These relationships are impacted by their wider institutional context, where ‘up-stream policies’ including resources, cultures, knowledge and training may influence many elements of service interactions (Benington, 2009, p.238). The intersubjective dimension of relationships and trust are identified as important elements of public value management (O’Flynn, 2007). Public value can be seen as an alternative to new public management and traditional public administration (Benington, 2009). It goes beyond the limited assumptions of public choice theory to ‘a fuller and rounder vision of humanity’ where people are motivated by ‘their relationships with others in the context of mutual respect and shared learning’ (Stoker, 2006, p.56). Alford (2009) highlights the link between co-production and public value management, illustrating how the economic and rational assumptions of new public management ignore the relational components apparent within co-production:

- Public choice theory, which assumes that people are purely rational, calculating and self-interested is not appropriate as clients and citizens are motivated by a range of values and benefits including material, intrinsic, social and normative (Alford, 2009).
- Principal-agent theory contradicts some models of co-production which highlight the importance of close and sustained relations between public service officials and clients (Bovaird, 2006).
- The separation of provider and commissioner roles and contractual agreements which monitor outputs do not support the relational approach of co-productive activities which focuses on and promotes outcomes (Boyle et al., 2006).
- Within co-production the organisation is no longer the sole producer nor the client merely the recipient, instead reciprocal relationships are highlighted (Alford, 2009; Stephens et al., 2008).

Critiques of the public value management model note its normative tendencies which can avoid value clashes, politics (Rhodes and Wanna, 2007), power relations and ideological contexts. Few public value theorists have engaged with the critiques of deliberative democracy outlined in the previous chapter. Whilst Benington highlights how staff and service user interrelationships may be influenced by their wider institutional context, the public value management framework does not provide an analytic model with which to analyse how this happens and to what effects. However with the use of the analytic
approach described in chapter 2 and developed further in the methodological chapter, this thesis presents and uses a framework that is developed to enable such an analysis.

New public governance has distinguished itself from possible normative tendencies and paradigmatic replacement, being presented as a conceptual tool that aims to capture ‘the realities of public policy implementation and public services delivery’ (Osborne, 2010a, p.7). Theoretically it develops from institutional and network theory and conceptualises the state as both plural (where different interdependent actors are involved in public service delivery) and pluralist (where multiple processes contribute to policy-making). It emphasises negotiation of values and meanings and highlights the importance of relationships, yet also stresses issues of power inequalities and uneven alliances within networks (op. cit., pp.9-10). New public governance literature considers that the unit of analysis in exploring policy implementation and public service delivery should be the whole system of policy processes, public service organisations and service users who act as co-producers (Osborne, 2010b, pp.415-6). This fits with the analytic framework described at the end of the previous chapter as it allows an analysis of the different dynamics between politics, policy processes, cultures, institutions and agents within an open system. New public governance also highlights the importance of service management literature (Osborne, 2010c), one of the topics of section 3.4. But before this theoretical analysis is developed, the policy context of public services and participation is examined further.

3.3 Current policy perspectives in public services

Through the Third Way the organising principles of public services were based upon elements of market logics alongside audits, measurements and regulation. However this approach has been critiqued for ignoring relational elements of public services (Jordan, 2010). More recent political thinking in England, in the light of the demise of the Third Way, on both the Left (through Maurice Glasman and ‘Blue Labour’) and the Right (through Phillip Blond as a ‘Red Tory’) have embraced relational, interactive and communal perspectives of public services. This section briefly describes these two political approaches before exploring the extent to which Blond’s ideas are being operationalised through the current Coalition government.
Maurice Glasman, architect of Blue Labour, focuses on themes of localism and the need to devolve the power of the state whilst maintaining democratic control over the economy. Glasman builds on the concept of the ‘common good’, highlighting how different communities can come together around particular concerns, focussing on relationships and trust (Glasman, 2011). In discussing Blue Labour, Stears (in BBC, 2011) highlights a need to move from an ‘obsession with absolute fairness, with material equality’, advocating a focus on ‘the quality of our relationships’. However this ignores the contextual conditions within which these relationships are formed and the wider power relations that they are a part of. Mutuality and reciprocity are important elements of Phillip Blond’s ‘Red Tory’ (2010) approach. Blond (2009a) advocates for power to be entrusted to front line public services with users and staff taking an active approach in designing, developing and delivering services:

‘...real improvement depends on harnessing two powerful forces: the insight and dedication of frontline workers, and the engagement and involvement of citizens and communities. Too often these forces have been underexploited or set in opposition to one another. What is required is a new model that binds their interests together so that provision most effectively meets need (Blond, 2009b, p.5)’.

Rather than attempt such empowerment within existing institutions, Blond (2009b) advocates the development of organisations based on shared ownership. This advocacy of new institutional forms is part of Blond’s (2009c) wider thesis of asset and resource redistribution to devolve power to local communities. Blond critiques both the dominance of the state and of markets, advocating a localising of the banking system, developing local capital through supporting guilds and co-operatives, reinvesting public money in local businesses and breaking up business monopolies ‘by restoring capital to labour’ (Blond, 2009c). Although David Cameron has based some of his thinking on elements of Blond’s approach through the ‘Big Society’, he has not embraced the fundamental critiques of markets nor has he taken on the radical redistributinal elements of Blond’s approach. The ‘Mutuals Taskforce’ set up by the Coalition government aims to have 1 in 6 public servants delivering public services within mutuals and social enterprises by 2015 (NAO, 2011). One of the main aims of these new organisations is to enable staff to be free from top-down control to innovate and improve services. However changes in institutional form do not
guarantee increased decision-making power of staff and citizens within the organisations. Organisational cultures that support staff involvement in decision making are equally important, however changing cultures may be considerably harder than developing new structures (Ham and Ellins, 2010, p.1176). Whilst there is limited empirical research of workers experiences and decision making processes in English public service worker co-operatives, Atzeni and Ghigliani (2007) provide evidence that market and other structural factors can limit workers’ experiences of self management. Wider decision making on vital issues in the policy environment such as regulatory frameworks and funding may be well outside of these organisations’ control. Trade unions themselves are unconvinced of the benefits of mutualism, seeing them as masking the break up of the public sector (TUC, 2010).

Further marketisation remains the main policy trajectory of the Coalition government, as can be seen through both the Localism Bill (2011) and the Health and Social Care Bill (2011). Both of these Bills are now reviewed with respect to both citizen/ service user and worker participation, as they currently stand in early September 2011. Firstly looking more in-depth within the health service, the Health and Social Care Bill (2011) signifies fundamental changes in commissioning structures, introducing further market mechanisms and competition\(^5\). In terms of service user involvement, it aims to create new information standards and systems to support ‘shared decision making’ with patients. It aspires to increase patient choice between a greater number of providers, placing patients in the role of a customer who chooses between different services based on transparent information. However there is less clarity about the extent to which the collective patient voice will be heard (Millar et al., 2011). Local Involvement Networks, established in 2008 under the Local Government and Public Involvement in Health Act (2007), will be transformed into HealthWatch groups under the new Health and Social Care Bill (2011). The main roles of HealthWatch groups, commissioned by local authorities, will be to integrate feedback from patients and the public into healthcare commissioning arrangements. In addition to this they aim ‘to provide advocacy and support, helping people access and make choices about services, and supporting individuals who want to make a complaint’ (Department of Health, 2011).

\(^5\) The extent of competition that is introduced through the Health and Social Care Bill has been contested and questioned. Current analysis suggests the extent of competition that will be enabled by the legislation is still unclear (The King’s Fund, 2011).
Thus HealthWatch, as enabling processes of participation is concerned mainly with ensuring choice, facilitating complaints, and feeding back public and patient views into commissioning arrangements. Millar et al. (2011, p.11) suggest that these structural changes may result in a weakening of collective patient voice, pointing out that:

‘it is “the system of general practice” that will represent and support patients on their behalf. Faith will be placed in patients’ advocates to support patients in their healthcare choices’.

Clinical commissioning groups (previously described as GP consortia (The King’s Fund, 2011)) become key fund holders within the NHS, previous commissioning services through Primary Care Trusts being abolished. This places General Practitioners in roles both as budget holders and as patient advocates. However this joint responsibility has the possibility of generating conflicting interests:

‘Will GPs spend too much time being managers and not enough time with their patients? How can we ensure that clinical decisions are made on the basis of what is best for the patient rather than what is best for the consortium’s bank balance?’ (Murphy, 2011a).

Turning to staff participation, one of the main routes of staff engagement within the Health and Social Care Bill (2011) is to enable NHS staff to set up employee-owned social enterprises. Specifically in health, the previous Labour government established a Right to Request programme in 2008 to enable Primary Care Trust staff to develop social enterprises for service provision (Department of Health, 2008). The Coalition government continued this scheme releasing further funds, following its ambition ‘to create the largest and most vibrant social enterprise sector in the world’ (Department of Health, 2010, p.36). Foundation trust staff would similarly be given the opportunity ‘to transform their organisations into employee-led social enterprises that they themselves control’ (ibid). By the end of 2011 it is estimated that £900 million of health services will be delivered through organisations developed from the Right to Request programme (National Audit Office, 2011). Whilst there is much discussion of mutualism in public services there seems to be very little empirical research on the actual working experiences of staff within these new
public service organisational forms. The research that does exist provides a broad brushed overview (e.g. Ellins and Ham, 2009) rather than a detailed study to explore actual decision making processes and worker and service user experiences within these new institutional forms\(^6\).

One of the controversial elements of the Health and Social Bill is the extent to which competition between service providers will be a driving force. The dynamics of competition and collaboration are becoming increasingly important to consider within a policy trajectory that is becoming more dominated by market approaches (Ham, 2011; Curry and Ham, 2010). Ensuring integrated services whilst policies drive toward choice and competition can create practical tensions in ensuring different services are seamless for patients (Ham and Smith, 2010). Ham and Smith (2010, p.12) suggest that competition between integrated services rather than a fragmented provider market may provide some benefit and that policies that promote competition need to account for the importance of collaboration and integration in some service areas. Glasby et al. (2011, p.10) point to the problems that previous NHS structural changes have encountered, suggesting that top-down structural changes may actually ‘damage local relationships’ and ‘make some staff more change resistant’.

Turning to local government the Localism Bill (2011) will give voluntary and community groups the right to challenge public sector service delivery, entering into a procurement exercise to bid to run services. Community groups will be given the right to buy community assets, giving such groups additional time to find the necessary resources for purchase ‘on the open market’ (DCLG, 2011, p.10). Additional processes to trigger local referendum will be enabled. Accountability, through choice of service provider is being encouraged. In terms of staff engagement and employee involvement, the Localism Bill (2011) enables local authority staff alongside community groups the ‘right to challenge’ local authority service delivery, following the Health and Social Care Bill’s emphasis on encouraging social enterprises and employee-led mutuals (DCLG, 2010). National targets and centralised performance regimes that local authorities have had to abide by are being

\(^6\) These new organisations, generated through the Right to Request programme, don’t appear to take part in the annual NHS staff survey which provides a useful annual barometer of staff experiences within NHS organisations.
abolished, the Bill emphasising decentralisation and local decision making. Comprehensive Area Assessments and Local Area Agreements alongside the Audit Commission are all being discontinued, instead local authorities will be required to publicise their financial information, publishing every item of expenditure over £500 alongside raw outcome data (DCLG, 2010), following themes of transparency of information. ‘Public sector monopolies’ will be broken, increasing the diversity of service provision. In practice this policy direction has seen some councils stating a preference for service provision to be contracted out rather than provided by the local authorities, with serious implications for local authority employee job security (BBC, 2010).

To summarise this section, some policy thinkers such as Phillip Blond and Maurice Glasman have both emphasised the importance of relationality, and worker and citizen engagement and empowerment. However marketisation and increasing the diversity of service providers remain core policy concerns. Current Coalition policies build upon the idea of the service user being able to choose between service providers, yet they do not provide clear strategies for how service users or workers can engage more intimately within the co-production of public services. Clear distinctions between providers and consumers remain in Coalition policies.

### 3.4 Relational aspects of public service work

Relational aspects of public services have been highlighted as important and this section explores service relationships from four different perspectives, service management literature, the sociology of service work, the ethics of care literature and debates on person-centred support. Firstly, public management literature and theory is often derived from private business manufacturing approaches, however services management literature may have some theoretical contribution that provides insights into public service relationships (Osborne, 2010c). Services management literature tends to view such relationships through the lens of the market, therefore the sociology of service work is useful to highlight some of the issues of commodified service relationships through the concept of emotional labour. Ethics of care literature, derived from a feminist perspective, begins from a relational ontology that asserts that as human beings we are all interdependent, often in asymmetric ways. It, too, focuses on relationships, but through the lens of a feminist perspective on moral philosophy in contrast to service management literature that espouses a desire to
develop ‘a theory of the market(s)’ (Vargo, 2011). Finally the importance of practitioner and service user relationships is explored in the context of current debates on personalisation and person-centred support (Beresford et al., 2011). This literature is rooted within a rights-based approach developed through the independent living philosophy, developed by groups of disabled people. These four different bodies of literature all highlight the importance of relational elements of public service, yet they come from contrasting and diverse roots and provide different conceptual tools and theoretical approaches that can support the understanding of the processes of public services.

3.4.1 Services management

Services, in contrast to physical goods, have a number of distinguishing attributes that have important implications both for their analysis and management (Normann, 2000; Grönroos, 2000). The features and quality of a service are intangible and processual, secondly services are heterogeneous with each customer having specific needs and expectations, thirdly services are simultaneously produced and consumed, and lastly neither the customer nor the worker can be separated from the process of the service. Value is produced through interactions between the producer and consumer and the consumer acts as a co-producer of the service (Normann, 2000: 19; Grönroos, 2000: 47; Osborne, 2010c). These different elements of services have important implications for this thesis: the service interface becomes an important point of analysis where the worker and service user meet and can collaborate together; there are many long term public service users who develop ongoing relationships with service providers; and co-production can be an important element in ensuring public service outcomes.

Osborne (2010c, p.2) illustrates how NPM focussed on input and output controls and disaggregated public services into units. In contrast to NPM’s mechanistic, Newtonian perspective, some service management literature has developed a view of services from a systemic, interconnected approach (Vargo et al, 2008; Vargo, 2011; Chandler and Vargo, 2011). Vargo et al (2008, p.147) deconstruct economics reliance on Adam Smith’s ‘view of productive activities, which was focussed on the output of tangible resources’. They contest the central notion of exchange value within economics, in the form of money for goods, where producers and consumers are distinct (op. cit. p.146). In contrast, Vargo et al (2008) develop a ‘service-dominant logic’ which ‘is essentially a value co-creation model that sees
all actors as resource integrators, tied together in shared systems of exchange – service ecosystems or markets’ (Vargo, 2011, p.220). Value can be seen to be an emergent property (Section 4.2), which is ‘co-created’ as a result of the interdependence of different actors and resources within particular contexts (Chandler and Vargo, 2011; Vargo and Lusch, 2011). In a ‘service dominant logic’ there are no distinct roles between producers and consumers, ‘value is always co-created, jointly and reciprocally’ (Vargo et al., 2008). This way of understanding value takes us from transactions to relationships, where ‘the producer-consumer distinction is inappropriate’ (Vargo et al., 2008, p.151). In later works Vargo and Lusch (2011) go further than this and suggest a framework that dissolves the distinction between producers and consumers, suggesting that ‘at an appropriate level of abstraction, all actors are fundamentally doing the same things, co-creating value through resource integration and service provision’ (p.182).

Three potential issues are identified with such a perspective. Whilst Vargo et al (2008: 148) suggest that ‘all social and economic actors are resource integrators’ this does not take account of social and economic power relations and the fact that some actors have more access to resources and knowledge than others. Secondly, their conflation of producers and consumers ignores important differences, within the service interface it is employees who are exchanging their labour for money and consumers who are reliant upon service provision by employees. Exchange value is still an important element upon which institutional employment structures and consumption are built. The actor in the structural role of employee and the actor in the structural role of consumer have differential access to knowledge, resources and skills which fundamentally affects the power relations between the two actors and their relationship. These fundamental differences in who is exchanging what for what within the service interface means that producers and consumers have necessarily different interests (Korczynski, 2002). Finally, their focus on an actor to actor perspective, within networks of resources (Vargo and Lusch, 2011) does not substantially account for the structural, institutional and discursive contexts within which actors act.

Services management literature highlights the inherent nature of co-production within every service experience, because of the inseparability of production and consumption in a service encounter (Vargo et al., 2008). Quality in services is determined through customers perceptions rather than specific standards (Grönroos, 2000). The service encounter creates
value for customers and it is through the empowerment of employees that customers expectations can be fulfilled effectively (Grönroos, 2000). Grönroos (2000) highlights how it is still the ‘creativity, motivation and skills of people’ that are the drivers behind new service developments in spite of technological advances (p. 377). Employees are in the vital position to understand the needs and expectations of customers due to their interaction at the service interface. The interface between providers and consumers is an important element of the service process, such interaction being described as a ‘moment of truth’ where ‘perceived quality is realised’ (Normann, 2000: 21; Grönroos, 2000). Normann (2000, p.22) highlights the importance of the relationship between consumers and service employees through his description of services being ‘personality intense’ where the quality that a consumer experiences is reliant upon the way employees perform. He goes as far to say that ‘in a well-designed service delivery system’ employees and clients ‘emerge from the process of service delivery and/or service consumption with an enhanced sense of self-esteem’ (op. cit., p.54-55). ‘Virtuous circles’ can exist at the interface between employees and service users where the client can feel ‘uplifted’ through the interaction (op. cit., p.68) which will ‘reinforce the efforts’ of staff to ensure a good service. These interactions in turn support a ‘virtuous macrocircle’ leading to ‘well-functioning service management systems’ (op. cit., p.69). Normann (2000) has a clearly unitarist vision of organisations where ‘people and groups from different hierarchical levels and different functional sectors help each other to operate’ (p.71) in service to the customer. Similarly Grönroos highlights the importance of organisational and management structures to support employees to respond appropriately to customers to ensure that they perceive services as high quality. He highlights that barriers in the form of rules and regulations and ill-treatment by managers may restrict and reduce the extent to which employees can work toward service quality. Osborne et al. (2010) introduce the concept of relational capital into a public service context, which can be defined as ‘mutual trust, respect and friendship that arises out of close interaction at the individual level between alliance partners’ (Kale et al., 2000, p.218). Analysing trust within service relationships has also been highlighted as important in services management literature (Grönroos, 2000).

The approach of the ‘new service management school’, in which Normann and Grönroos reside has been contested and critiqued by Korczynski (2002). He finds little empirical evidence for the ‘satisfaction mirror’ between front-line workers and customers (op. cit.,
p.32). Not only this, but the unitarist assumptions that underpin the services management literature doesn’t support an exploration of the sources of conflict and differential interests between managers, service workers and users (Korczynski, 2002, p.38). The ‘virtuous circle’ described by Normann (2000) is a ‘win: win: win confluence of interests’ but is ‘conceptually weak’ because it assumes that workers main interest is to satisfy customers, however workers may be more satisfied by the nature of the work, the extent to which it is autonomous and skilled, social relations at work and pay and job security (Korczynski, 2002, p.39). Whilst Normann (2000, p.23) suggests that ‘virtuous circles’ can be achieved through social innovation ‘whereby quality and cost efficiency can both be achieved’, Korczynski (2002) illustrates the contradictory nature of attempts to combine both efficiency and customer-orientated quality. Normann’s (2000) image of the ‘uplifted’ client from service experiences is portrayed by Korczynski (2002) as the ‘myth of customer sovereignty’. The pressures of both efficiency and consumer led services can be contradictory, efficiency being achieved through mass production whilst customer led services suggest unique, customised services created according to individual need. Such incongruities are modelled in the customer oriented bureaucracy model (Korczynski, 2002) where front line workers can experience the contradictions and tensions of these different forces, as they manage the service interface with clients. These contradictory pressures are also explored and theorised within the emotional labour debates (Section 3.4.2).

Services management literature comes from a market perspective and originated from private sector marketing literature. Whilst highlighting the importance of relationships in services, it could be argued that these relationships are commodified in pursuit of the main goal of the private sector, profit. As Korczynski (2002) highlights, service management literature extends from a managerial and unitarist perspective. This does not account for the specific moral, ethical and political context of public services. Approaching these relationships from an analytic lens that has been developed within private sector marketing may be at risk of commodifying these relationships and stripping them of ‘their moral and ethical meaning’ (Hoggett, 2006, p.177). Thus, as well as the literature on emotional labour (Section 3.4.2), ethics of care literature which is derived from a feminist perspective on moral philosophy (Section 3.4.3) and person-centred support (Section 3.4.4), derived from a rights-based perspective are also considered within this section.
3.4.2 Emotional labour

The concept of emotional labour has important implications for the dynamics of service interactions and relationships between service workers and users. Space precludes a full analysis of debates within emotional labour theory, instead key applications and critiques that have been found relevant to later empirical analysis are focussed upon. Hochschild (2003, p.7) defines emotional labour as labour that:

‘ … requires one to induce or suppress feeling in order to sustain the outward countenance that produces the proper state of mind in others – in this case [flight attendants], the sense of being cared for in a convivial and safe place’.

Hochschild distinguishes between emotional labour, which is sold for a wage within the public sphere and emotion work which operates within the private sphere, such as within the home and with friends. Within a service context, ‘feeling rules’ are imposed by management, dictating how workers emotionally respond to customers, workers responding to these demands either through ‘surface acting’ or internalisation and ‘deep acting’. However this internalisation can result in alienation and ‘a systemic suppression of the real self’ (Brook, 2009, p.534). Emotional labour illustrates how, within a wage-labour relationship, workers’ feelings become commodified due to power inequalities with customers and the imposition of feeling rules which results in alienation within a capitalist service economy. However key tenets of this theory have been contested. Bolton and Boyd (2003) dispute Hochschild’s claim that private feelings become ‘transmutated’ so that a person’s emotional life is in effect colonised and sold within a wage relationship, suggesting that this leaves no space for social actors. This critique follows the debate that refutes ‘power over’ as a form of domination with little relief or space for agency. Hochschild’s distinction between the public and the private sphere is too absolute and does not allow for ‘private’ emotional expression within a ‘public’ context, allowing room for emotion that is channelled through personal identity. All emotions within Hochschild’s approach are ‘acted’ on either a surface or a deep level, thus emotional labour can be ‘blind to feelings unless scripted and controlled’ (Gabriel, 2009, p.677). Emotional labour lacks a substantive model of emotional and personal identity, Theodosius (2008) developing the concept to incorporate Archer’s (2000) model of agency. In her analysis of emotional
labour in health care Theodosius illustrates how patient-nurse relationships were ‘more than surface and deep acting’, there was a ‘collaborative and therapeutic relationship built up between nurse and patient’ (2008, p.33, emphasis in original). Here emotional labour is an ‘interactive and relational process’ (op. cit., p.48). Because emotions are principally linked to personal and social identity (Archer, 2000), ‘emotional labour not only is integrally linked to, but also flows from personal identity’ (Theodosius, 2008, p.218). However emotional labour can get ‘squeezed’ due to speed-up and rationalisation forces, which can alienate workers from authentic expression of emotional labour. For example, within nursing in the United States, increases in the quantity and speed of care within a marketised system has meant that there is often more demand yet less time and significance given to emotional labour (Bone, 2002). Similar stories are present in Theodosius’s (2008) vignettes of nurses’ working experiences, where lack of time to give appropriate emotional care leads to significant staff dissatisfaction. Marketisation of public services has increasingly commodified emotional labour in the NHS where patients have rising expectations of services (Bolton, 2001, p.93) and nurses are increasingly vulnerable to patient complaints (Theodosius, 2008). However whilst public service consumer agendas have attempted to provide avenues of ‘choice’, ‘voice’ and complaints systems, market forces do not necessarily equalise power relations. Factors that increase workers’ power include high status professional bases, autonomous decision making, technical skills and organisational control of service relationships (Korczynski, 2009, p.960), features which can often be present in welfare service relationships. Choice and complaints systems provide no mechanisms to support the ongoing daily relational work between staff and service users. Workers can hold significant power over service users who may be reliant on workers for their health, welfare and well-being. Markets do not balance these power dynamics, moreover they can reduce both the visibility of and the amount of time available for relational elements of service provision.

Within the sociology of services the service interaction is rarely focussed on where equal analytic weight is given both to the producers and consumers experiences of services, sociologists usually privileging one actor over the other in studies of production and consumption (Korczynski, 2009). This thesis treads an unusual line in attempting to focus on both service workers and service users within a public service institutional and policy context.
3.4.3 Ethics of care and rights based person-centred approaches

Hochschild’s original conception of emotional labour discounts empathy within service relationships where there is ‘emotional authenticity and relationships without rules’ (Lopez, 2010, p.254), and so has difficulties in acknowledging the reciprocal and relational qualities of patient-professional interactions that Theodosius (2008) finds. Here the ethics of care literature can add to emotional labour debates (Gabriel, 2009). Ethics of care literature has developed from a feminist perspective on moral philosophy, which rejects the Kantian notion that rationally justifiable moral judgements be made from a detached and autonomous actor (Tronto, 1993, p.9). Instead agents are conceived as mutually interconnected and interdependent, ‘often in asymmetric ways’ (Pettersen, 2011, p.52). Ethics of care literature is based on a ‘relational ontology’ (Sevenhuijsen, 2000, p.9) where all people are of equal worth and people attend to each other with compassion within a situational context (Meagher and Parton, 2004, p.15). In its focus on interdependence it provides recognition of Theodosius’s (2008, p.218) assertion that nursing care is a ‘collaborative partnership … respect is necessary for patient and nurse alike’ and is thus particularly useful to explore aspects of staff and service user collaboration. The ethics of care literature has been critiqued from a disability rights perspective that sees the concept of care symbolising an ‘oppressive history’ and champions independence, choice and control, not interdependence (Williams, 2001: 478-9). Yet there are links between the approaches, Shakespeare (2006: 3) reflecting that ‘rights alone are not sufficient to promote the well-being of disabled people’. Indeed it may be that means and ends are being confused here, care and attention to each other is needed to ensure that all people have equal rights (Morris, 2001). An ethics of care perspective can provide an important analytic perspective to ensure that ‘autonomy and independence are about the capacity for self-determination rather than the expectation of individual self-sufficiency’ (Williams, 2001: 487).

The ethics of care literature has been extended beyond interpersonal relationships and actual care processes to consider wider political theory and social justice perspectives (Tronto, 1993; Sevenhuijsen, 2000).

Care helps us rethink humans as interdependent beings. It can serve as a political concept to prescribe an ideal for more democratic, more pluralistic politics in the United
States, in which power is more evenly distributed . . . care can serve as a strategic concept to involve the relatively disenfranchised in the political world. (Tronto, 1993, p.21).

Here, care is connected to critiques of structural inequalities, moving beyond a purely relational and intersubjective ontology, renewing thinking about power and difference but not rejecting concepts of equality, rights and justice (Meagher and Parton, 2004, p.18). Instead of understanding equality as ‘sameness’, a care philosophy incorporates notions of difference and diversity whilst asserting ‘equal moral worth’, enabling a wider understanding of the issues of social inequality (Sevenhuijsen, 2000, p.28). In terms of social policy the principles of relationality and interdependence stand in contrast to the normative assumptions of many policy theories that favour rational, economic, independent actors (Sevenhuijsen, 2000). An ethics of care philosophy has the potential to inform policy and political thinking that incorporates relationality within public services in conjunction with social justice and wider political debates.

Beresford et al. (2011) critique notions of ‘care’, instead basing person-centred support on a rights-based approach that is founded upon an independent living philosophy. The concept of person-centred is important to consider, particularly because the two case studies analysed in this thesis both espoused their overall objective to be to facilitate stronger person-centred approaches. Beresford et al. (2011) provide a useful definition of person-centred support, derived from the perspectives of service users, carers, practitioners and middle managers. Important elements include: ensuring that the person is the focus rather than ‘fitting them into’ services; providing information; giving users control and focussing on people’s assets and abilities; treating people as individuals and acting in response to what they say; highlighting the importance of relationships between users and practitioners. Other definitions of person-centred support include Glynn et al (2008: 2) who suggest that such an approach puts ‘service users at the centre of policy and practice to ensure that the support they receive is shaped primarily by their individual and collective rights and needs, hopes and goals’.
3.4.4 Summary

Drawing these different perspectives of relational elements of service provision together, services management literature highlights the importance of the service interface, where interactions occur between service providers and users. However it analyses these interactions and relations through the lens of the market, thus the sociology of service work provides an important critical perspective which highlights the problems of commodified relationships within a market approach. The concept of emotional labour is important to counteract and illuminate the difficulties of commodified relationships. Yet emotional labour critiques draw attention to the importance of collaborative relationships between service users and staff where dignity and respect is necessary for staff and user alike (Theodosius, 2008, p.218). The ethics of care literature provides a relational ontology that asserts the importance of interdependence rather than a rational actor model as the basis for social policy. Person-centred models based within a rights based approach highlight the importance of relational elements of service provision and designing services around the individual rather than institutional or professional structures. Each of these approaches centralises the importance of the relationships between service users and providers, yet they come from distinct genealogies and provide different tools that can support the understanding of the processes of public services.

3.5 Co-production, co-design and co-creation

This last major section of the chapter builds a theoretical framework that enables an analysis of how staff and service users may be able to collaborate together within public services. It firstly considers how staff and service user participation interrelate within public service institutions, focussing upon where staff and service users may collaborate together within a partnership model. Three different concepts which model staff and service user partnerships are explored, analysing the key theories of co-production, co-design and co-creation. Following a critical realist approach the underlying theories about their particular mechanisms that enable emergent outcomes to occur are abstracted, analysing the theoretical roots and positions of actors within co-production, co-design and co-creation processes. This analysis enables the development of an analytic framework, termed co-participation that then informs the empirical analysis of different projects where both citizens and staff collaborate to develop services.
3.5.1 Integrating user and worker participation

Despite the joining of user and employee participation in policy and practice there are few models of the interrelationships between user and staff participation within public service literature. One of the questions that this study had to initially tackle was how to empirically analyse this phenomenon. A historical analysis of both worker and user participation literature was conducted (which informed and became the basis of the literature review) alongside an initial search through both academic and grey literature which produced a list of cases that had combined both user and worker participation in some way within a specific public services project. The analysis of these empirical cases of worker and user participation created an urgency to develop an initial theoretical framework which could categorise these examples and begin to model the different ways in which user and worker participation could interrelate. Through an iterative process of a historical and theoretical analysis of participation models and data analysis from secondary empirical sources a framework was developed which was used to analyse the initial question of how user and worker participation interrelate.

To plot how worker and user participation interrelate it was constructive to employ Marchington and Wilkinson’s (2000) analytic framework of employee participation. This distinguishes between the form (particular processes such as quality circles, surveys, consultation forums or citizen’s juries), level (whether it is at the task, team, department, site or corporate/ boardroom level), range (subject matter covered) and degree (the depth at which participants are influential and have power) of participation. To illustrate the degree of participation Marchington and Wilkinson (2000) use an ‘escalator of participation’, conceptually comparable to Arnstein’s ladder of participation (1969). Although widely critiqued this ladder/ escalator of participation provides a useful axis for the conceptual analysis of power relations within participative structures, enabling a categorisation of different combinations of worker and user participation. Disregarding non participation and receiving information, as they offer neither service users nor workers any power or involvement within organisational processes the continuum within Figure 3.1 ranges from consultation where participants are involved in decision making but have no formal power within the process, partnership where participants have a degree of power and control where participants are in control of the arena of participation.
Figure 3.1 Interrelationships between worker and user participation within an organisational context
(Developed from Farr and Cressey, 2010).

<table>
<thead>
<tr>
<th>SERVICE USERS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Degree of participation</strong></td>
</tr>
<tr>
<td>Consultation</td>
</tr>
<tr>
<td>Partnership</td>
</tr>
<tr>
<td>Control</td>
</tr>
</tbody>
</table>

The development of this model enabled an analytic mapping of different empirical examples of staff and service user participation. Boxes 1 to 7 within Figure 3.1 illustrate the different models that develop from the various combinations of user and worker participation within an organisational context. The creation of Figure 3.1 enabled a clearer insight into the precise focus of this research, which became pinpointed upon Box 5, where both staff and users have power within collaborative partnerships, theorised as co-participation. Co- as a prefix refers to that which is together, jointly or mutually. Co-participation as a concept is derived from a realist synthesis (Pawson, 2006) and analysis of the theory and practices of aspects of co-production, co-design and co-creation, all of which can empower both staff and users within a collaborative partnership. Each of these concepts is considered in sections 3.5.2 (co-production), 3.5.3 (co-design) and 3.5.4 (co-creation) before abstracting this model of co-participation, drawn from their underlying assumptions. However before this, the terrain of Figure 3.1 is briefly explored to examine the empirical and analytic complexities of integrating user and worker participation through the application of empirical cases.
Within Figure 3.1 Boxes 1, 2 and 4 can be seen as examples where both workers and users participate in organisational decision making within existing managerial structures. Examples include various trade union partnership projects such as ‘Drive for Change’ (Cabinet Office and TUC, 2008) and the ‘Time of our Working Lives’ project (Cressey et al, 2000). Within these cases both user and employee interests and needs were discussed and facilitated, often with successful outcomes that met interests of both workers and users, exhibiting localised, incremental reform. Whilst not meeting some idealised form of democracy, these projects focused on enabling practitioners and service users to influence and negotiate organisational arrangements, bringing important changes into everyday issues (Beirne, 2008). In comparison Boxes 3, 6 and 7 can be seen to operate within a democratic model where either workers and/ or users have a degree of control. Box 3 represents examples where service users experience a level of control such as through direct payments which enable them to design and commission their own social care, taking on the responsibilities of an employer. Whilst direct payments have been supported by welfare service user groups the impact upon front line staff is less clear cut. Ungerson (1999) highlights low wages and the casual and temporary nature of the work, where work is individualised rather than collectivised. Box 6 represents worker control with varying degrees of user input. Whether the current interest in co-operative structures within public services fits this worker control model can be debated. Trade unions themselves are unconvinced of the benefits of such an approach, seeing them as masking the break up of the public sector (Unite, 2010). Whilst there is limited empirical research of workers experiences in English public service worker co-operatives, Atzeni and Ghigliani (2007) provide evidence that market and other structural factors can limit workers’ experiences of self management. Box 7 illustrates examples where service users run, control and manage organisations, being service users, workers and managers. Barnes and Mercer (2006) illustrate how service users value services provided by these organisations, highlighting the significance of choice and control, responsiveness to need and the importance of peer support.

Boxes 1, 2 and 4 illustrate participation within existent management structures whereas Boxes 3, 6 and 7 illustrate the potentials of more democratic and radical participative structures. However such distinctions can mask the possible spaces for agency and collaboration within existent structures whilst radical and democratic organisations such as
user controlled organisations can find that operating within a service provision model may impact their ability to maintain a political influence, problems of co-option and depoliticisation can arise (Barnes and Mercer, 2006). Worker co-operatives may break up public sector trade union structures, disbanding national agreements for pay, employment conditions and pensions (Unite, 2010). Wider decision making on vital issues in the policy environment such as regulatory frameworks and funding may be well outside of these organisations’ control. Figure 3.1 is situated within the current neo-liberal context and an increasing emphasis on the marketisation of public services, which may fundamentally impact and constrain both organisational structures and agents’ actions within them.

The remainder of this chapter focuses on collaborative models of participation within Box 5 that involve both service users and staff within a partnership approach, developing the model of co-participation through a detailed analysis of related concepts (co-production, co-design and co-creation). An overview of each concept is presented, exploring its relationship to wider participation theories. The key theoretical assumptions of these different concepts are distilled and synthesised alongside insights from participation literature to develop the model of co-participation.

3.5.2 Co-production

Section 3.4.1 illustrated how services management literature distinguishes co-production as an inherent and inescapable part of service provision. However it is not this intrinsic element of co-production within services that this thesis is focussing on. This thesis focuses on co-production where public service bodies use the process as an extra dimension to traditional service delivery as a means to improve and innovate within public services. Co-production is analysed with respect to its role in public policy as a means to involve users and staff rather than as part of the innate nature of all service delivery.

Within public policy, co-production describes how in the process of delivery, service recipients take an active part in producing these services, they are not a passive, consuming population. Co-production usually describes the relations of citizens/ users with public service providers (e.g. Brudney and England, 1983), however it has been extended to describe the role of various actors in public service processes including voluntary and community organisations (Osborne and McLaughlin, 2004; Brandsen and Pestoff, 2006;
Interest in the concept of co-production occurred initially in the 1970s and early 1980s as a response to increasing demands on public services in an era of fiscal cutbacks (Ostrom, 1996; Parks et al., 1981). This enthusiasm waned as governments introduced market mechanisms into the public sector to address these issues. Since the 1990s co-production has experienced a revival as a response to the increasing complexity of governance. Co-production is seen as a potential solution to the problematic capacity of public service provision to deliver in response to the increasing demands of the population both in terms of personalisation and quality and the rising demands as a result of demographic changes (Boyle et al., 2006; Leadbeater, 2004).

Wilson (1981) analyses the extent to which co-production can be conceptualised within participation theory, concluding that it ‘contains the classical attributes of other forms of participation’, including an engaged, political citizenry, an avenue for the expression of interests and enhanced citizen knowledge of the delivery of public goods. Debates about the relationship between co-production and participation have continued to be examined (e.g. Bovaird, 2007; Dunston et al., 2009; Boyle et al., 2006; Cahn, 2000). Bovaird (2007), Bovaird and Downe (2009) and Dunston et al. (2009) state that co-production is ‘beyond participation’. There are two different premises for this argument. Firstly some authors (e.g. Bovaird, 2007) argue that co-production has significant implications for the underlying power relations between users and producers of services. Secondly, the content of co-production focuses upon the process of public policy implementation rather than decision making about policy formulation. Firstly Bovaird (2007) conceptualises co-production as a partnership between users and service providers where both parties contribute resources, have legitimate voice and power within the relationship (2007, p.855). Dunston et al. (2009, p.45) suggest co-production is ‘an extended and distinctly different form of consumer participation’, locating consumers alongside professionals as ‘co-participants, co-designers and co-producers’. However such a partnership approach can still be located within theories of participation (e.g. Marchington and Wilkinson, 2000; Arnstein, 1969) where different stakeholders share power. Secondly, focussing upon the content of co-production, it has been argued that the aim of co-production ‘is not to consult more, or involve people in decisions more; it is to encourage them to use their skills and experiences they have to help deliver public or voluntary services’ (Stephens et al., 2008, p.10). Co-production illustrates
how citizens may be involved in policy implementation and the actual provision of services (Brudney and England, 1983; Alford, 2009) rather than just decision making about the content of policy following earlier participation theorists (e.g. Arnstein, 1969; Pateman, 1970). The process of participation is different where users/ citizens have an active role in the production of services and their outcomes rather than participating in decision making about services. However co-production should not be dislocated from involvement in decision making about services, as this precludes the importance of service user participation in deciding what those services should actually aim to achieve and how. If co-production is seen only as the process of co-producing outcomes, it overlooks the importance of involvement in strategic management and policy decision-making about those services. It is at these higher levels of decision-making that strategy and policy is shaped which may then set the conditions of possibility for the co-production of outcomes. Debates that argue that co-production is beyond participation dislocates the phenomena from the historical and theoretical background of participation and it is advocated in this thesis that this historical, political and theoretical context is important in analysing and understanding co-production policy discourse, process, practice and outcome.

A broad spectrum of activity has been defined as co-production, ranging from compliance with public directives such as not dropping litter (Rich, 1981), citizens filing online self assessment tax returns and using postcodes (Alford, 2009) to initiatives such as peer to peer support (e.g. the expert patient programme within the NHS) time banks (Stephens et al., 2008; Boyle et al., 2006) and tenant run co-operatives (Bovaird, 2007). As such not all forms of co-production can be seen as examples of collaborative partnerships between staff and citizens. The location at which co-productive relations occur is also debated. Parker and Heapy (2006) highlight the importance of co-productive relations at the interface of service delivery where service users and deliverers meet and can maintain conversation and dialogue. However Needham (2008) notes that such an approach may not be conducive to ensuring that co-production is collective and dialogical, as it may individualise user-provider relationships. Instead she advocates collective, facilitated dialogue away from everyday interactions. Dunston et al. (2009) highlight the need to shift the conceptualisation of co-production away from the sporadic and local to a system wide form of practice, suggesting that this will require ‘processes of profound cultural, identity and practice change’ (p.50). Pollitt et al. (2006), Bovaird (2007) and Bovaird and Downe (2009) extend
the principles of co-production to other aspects of public services including service planning, design, commissioning, managing, delivering, monitoring and evaluation activities. However others have denoted these activities through different concepts including co-design and co-creation, as explored below.

3.5.3 Co-design

Whereas co-production is rooted within an analysis of the production of services and service relationships within the public sphere (Ostrom, 1996), the genealogy of co-design descends from design principles that involve a range of stakeholders within the design process (Sanders and Stappers, 2008). Based on a pragmatist philosophy (Battarbee and Koskinen, 2005), co-design engages service users to understand their experiences which informs service development (Bate and Robert, 2007a). Users become collaborators and participate within the inputs, methodology and outputs of the process, becoming involved in both design and delivery of services (Bradwell and Marr, 2008); design with and by users rather than for (Woodcock, 2008).

Once more there has been debate whether co-design is different to participation (Bradwell and Marr, 2008, p.18). Current interest in co-design can be traced back through earlier practices of participatory design (Sanders and Stappers, 2008) and it has been described as a deliberative and reflexive participative process involving both staff and service users (Iedema et al., 2010). Bate and Robert (2007a, p.10) use a continuum of patient influence in their application of co-design to the health service, which is similar to the steps of Marchington and Wilkinson’s (2000) escalator of participation. They suggest that the ‘co’ implies a ‘partnership and shared leadership’ model between staff and service users. In contrast to some participation and deliberative democracy processes which have been critiqued for disallowing emotional expression (Young, 2002; Barnes, 2008; Hodge, 2005), co-design extends deliberative styles and aims to create new spaces that promote the importance of narrative, experiences, emotion, skills and knowledge of people who use services. Co-design projects often use ‘touch points’, moments where people experience services and engage with them, which can induce different emotions and memories (Parker and Heapy, 2006; Bate and Robert, 2007a; Dewar et al., 2010). By using touch points, emotions in co-design are neither relegated nor rationalised but form a catalyst for further action to change services. Touch points can also emotionally engage practitioners with the
experiences of service users which can facilitate empathy and compassion (Dewar et al., 2010). This may support authentic relational care and appropriate emotional labour that extends from genuine emotional responses to others’ situations.

Design as a discipline closely entwines research, knowledge and practice and the design process can be seen in four stages; firstly information gathering, reflection and diagnosis; secondly, imagination and visualisation of alternatives; thirdly, planning and prototyping and finally, action and implementation (Bevan et al., 2007, p.139-140). Experience based co-design (EBCD)\(^7\) is a form of participatory action research which originates from design and the social sciences, anthropology providing the core discipline (Bate and Robert, 2007a). The elements of narrated experience are used to derive concrete knowledge about how service experiences may be improved. Within EBCD in health, service users have been filmed sharing their personal and emotional experiences of particular services including cancer (Bate and Robert, 2007a; Pickles et al., 2008), Alzheimer’s (Tan and Szebeko, 2009) and emergency departments (Iedema et al., 2008). These films of people’s experiences are used to mobilise both patients and staff into action, inspiring different stakeholders to improve services (Pickles et al., 2008). Patient stories can engender practitioner reflexivity, illustrating the felt impact of clinical practices upon patients, facilitating practitioner identification with both the story-teller and the actual events that are described (Iedema, 2011). These stories can create shared meanings and identity facilitating an underlying consensus and ‘community of purpose’ which contrasts with conflictual accounts of organisational change (Bate, 2004). Bate’s (2004) sense of a ‘common social vision’ mirrors the concept of the common good, explored within chapter 2. Emotions are a ‘life-blood’ where storytelling builds personal awareness, enables people to understand different perspectives and builds communities of practice, creating shared visions and actions (Bate, 2004). It is suggested that these communities of practice may be able to provide a sense of ‘shared moral purpose’ and can fill an emotional or spiritual gap, creating collectivities and more meaning in people’s working lives (Bate, 2004, p.345). Bate (2004) suggests important contextual elements of these change processes include leadership which relies on enablement and facilitation rather than direction and structure,

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\(^7\)The experience-based co-design process is called both experience-based design and experience-based co-design (Bate and Robert, 2007a; see also NHS Institute, 2009: 83). This thesis refers to the process as experience-based co-design to highlight the fact that it is a collaborative process between staff and citizens and has links with other co-design studies.
where organisational change processes need ‘havens’ or ‘empty vessels’ where people can generate new meanings and are not constrained by the ‘old’. Spaces for practitioner reflexivity are of importance whereby ‘staff engage with the lived complexity’ of their work, rather than following bureaucratic rules and evidence based protocols (Iedema and Carroll, 2011, p.175). Similarly to empowered participatory governance, described in Section 2.5.1, social movement theory is drawn upon (Bate et al., 2004a, b) where staff motivations and energies are liberated as a movement for change. However such social movement processes operate within an institutional context, and thus do not provide a vehicle for independent campaigning, unlike autonomous user-controlled organisations. This lack of independence may compromise the ability to tackle wider issues, delimiting influence in wider political and structural areas. This approach has been critiqued for whilst it explores the process of creating social movements amongst staff for organisational change, there is no mention of existent welfare service user movements (Williamson, 2010, p.184). Nor is there significant discussion of the role of trade unions in promoting good working practices. The institutionalisation of social movement processes can create tensions where organisational logics can be seen to contrast with social movement dynamics (Bate and Robert, 2010). More risky approaches that contest organisational processes may be constrained, yet existent networks and systems can be used to create change (Bate and Robert, 2010). Uneven and asymmetrical power relations and irreconcilable perspectives are acknowledged and it is suggested that reconciling these diverse relationships and power imbalances is a challenge for the implementation of EBCD processes (Bate and Robert, 2007b, p.60). These forms of practice mirror Beresford et al.’s (2011) reflections that developing person-centred support involves different stakeholders, who may have conflicting views, coming together around shared concerns in a supportive and accessible way. Iedema et al. (2010, p.81) note the importance of emotional work within this, ensuring that differences do not lead to conflict or miscommunication, ‘participants (patients, caregivers, clinicians, and other staff) discursively negotiating common ground, both technically and interpersonally’. The dynamics of collaboration and contestation here become the minutiae of practice within institutional processes and power relations. A dynamic balance that contests institutional processes whilst remaining inside them may be strongly relational work, ensuring people remain on side yet are open to challenge and change.
3.5.4 Co-creation and collaborative innovation

The service-dominant logic (Vargo et al, 2008), discussed in section 3.4.1 highlights the importance of value being co-created by multiple actors. Similarly to co-production, services management literature tends to highlight how the co-creation of value is a fundamental part of services. This is in contrast with how co-creation has been used within public services, as an additional element to service delivery. This thesis focuses on modes of co-creation within public services that have been used to augment and develop participatory processes, rather than its conception as an integral part of service value (Vargo et al, 2008; Vargo and Lusch, 2011).

User-centred innovation (Von Hippel, 2005) and distributed innovation (Sawhney and Prandelli, 2000) are terms that have developed to explore how innovation can be created through dynamic interaction between product/service users and organisations. The concept of co-creation (Prahalad and Ramaswamy, 2004) developed within the private sector in marketing and the IT industry, and builds on models such as the software community’s ‘open source movement’. Communication and shared learning between consumers and organisational employees enables knowledge to be created through ‘a synergistic interplay between individual contributions and social interactions’ (Sawhney and Prandelli, 2000, p.28). This process is governed by the organisation, that defines the ‘ground rules for participation’ (Sawhney and Prandelli, 2000, p.25). Transparency and risk sharing are seen as key, facilitating collaborative dialogue and trust (Prahalad and Ramaswamy, 2004). Co-creation has also been employed in other fields where it describes forms of ‘collective creativity’ (Sanders and Stappers, 2008, p.6)

Public service literature increasingly highlights the importance of the insights of middle managers, frontline staff and citizens in driving innovation (Borins, 2001) and co-creation is a concept that is increasingly applied within public services (e.g. Bowden, 2005; Cottam and Leadbeater, 2004; Murray et al., 2005; Bason, 2010). Within public services co-creation describes a collaborative model where users develop partnerships with professionals, going beyond consultation to ‘a more creative and interactive process which challenges the views of all parties and seeks to combine professional and local expertise in new ways’ (Cottam and Leadbeater, 2004, p.22). Design processes can be used in co-
creation, Bason (2010) developing a similar four stage model to Bevan et al. (2007) consisting of: ‘knowing’ where information about specific issues is gathered, often using ethnographic research; ‘analysing’ where people come together to explore this data, sharing insights and perspectives; ‘synthesising’ to shape possible solutions; and finally ‘creating’ where solutions are prototyped and implemented. Ethnographic research is highlighted as important to understand people’s everyday lives and experiences, focusing upon subjective and emotional elements. Visualisation, both graphic and video, of peoples’ ‘service journeys’ are often used to enable emotional recognition and connection to service users (Bason, 2010), such mechanisms mirroring the EBCD process. Space to attend to this is key, taking people away from everyday routine action. Bason (2010) illustrates the benefit of ‘innovation labs’, spaces that are dedicated to developing new ideas where there are various partners from the private and public sector as well as service users. Such approaches are in existence through Europe (Bason, 2010) and attempt to support innovatory practices across organisational boundaries, hierarchies and silos.

Differences between the concepts of innovation and improvement (Hartley, 2005) can be important to highlight. Osborne and Brown (2010) illustrate how public policy in its focus on public service innovation often conflates the two terms yet there are important distinctions between facilitating innovation and improvement. Central to this is the idea that innovation involves ‘discontinuous change’ whereas improvement implies ‘incremental development’ (Osborne and Brown, 2010). The processes of managing discontinuous change may demand distinctly different approaches to current institutional practices, involving changes in roles and relationships between service users and professionals (Hartley, 2005) whereas improvements tend to build on existent organisational practices and processes.

‘Innovation is properly defined as an original, disruptive, and fundamental transformation of an organization’s core tasks…. A change unaccompanied by conflict and controversy is a change that is likely to have left the status quo untransformed and those in power more powerful still, and therefore is not an innovation’ (Lynn, 1997, p.96).
Less discussed within public sector innovation literature is the political and policy context within which innovations are situated and the fact that policies, goals and outcomes may be contested (Hartley, 2011). Public service co-creation literature seems to have rarely critically analysed the role of power and politics within co-creation processes. The position of users within co-creation processes does not seemingly challenge policy directions, Bason (2010, p.153) stating that citizen involvement in innovation is:

‘Not about increasing democratic participation or legitimacy through the act of involvement in itself. It is about finding better solutions to achieve politically defined visions of the future’ (emphasis added).

Bason goes on to explain that citizen participation can support understandings of how citizens experiences might be improved and how ‘their behaviour might be changed’ (op. cit. p.154), such notions invoking a sense of governmentality with the state retaining power over citizens. Zwick et al.’s (2008) analysis of private sector co-creation from a governmentality and Marxist perspective suggests that co-creation processes can be ‘a political form of power aimed at generating particular forms of consumer life at once free and controllable, creative and docile’ (p.163). The extent to which citizens have power in the actual decision making processes can be questioned:

‘… we are not involving citizens formally as part of a decision-making process but as contributors to an innovation process. Ultimately decisions are reached through deliberative democracy, and in most innovation projects by presenting solutions and options to steering committees or political bodies, which make the final decision’ (Bason, 2010, p.156, emphasis added).

Sometimes public service innovation literature about lead users can overlook the importance of independent welfare service user movements in providing challenges to existent public services and policy (Bason, 2010). User groups have often taken the lead in creating new alternative approaches as discussed within chapter 2. Such contestation from social movements focuses on the redistribution of power and control within services rather than ceding decision making power to institutions. They can also create original and disruptive approaches that challenge professional dominance.
3.5.5 Developing the model of co-participation

Co-production, co-design and co-creation all focus upon the interrelationships of staff and users within a local, usually institutionalised context. Service users/ citizens are conceptualised to have specific experiential and tacit knowledge that can be utilised to provide insight and resources into public service issues and delivery, they do not necessarily have any underlying political or ideological motives. Different theories exist for the motivation of service users to become involved, with service users either being drawn into the process because of the benefits of social interaction and creativity whilst also improving services (Bate and Robert, 2007a, p.190) or being motivated to be involved because of their dependency upon public services (Fung and Wright, 2003). Participative mechanisms are less about pursuing particular group interests than being key to unlocking the tacit knowledge of both employees and users that enables service improvement, meeting new demands from the workplace such as the move from standardisation of service to an innovative, user centred approach (Cressey, 2006). Within this framework the interactions between worker and user participation are important as both groups have essential knowledge and experience that can be tapped into to develop services. Co-production, co-design and co-creation approaches all emphasise collaboration over conflict where dialogue resolves different interests and perspectives. Such an approach can be contrasted with the community activism of the mid to late 20th century (Newman, 2005, p.126) and radical forms of citizenship involving resistance and conflict (Johansson and Hvinden, 2005). Bovaird and Downe (2009) highlight that these new forms of collaborative relationship means that the professional needs to place trust in the decisions and behaviours of service users, both parties take and share risks (Needham and Carr, 2009). Changes in roles require the empowerment of front line staff alongside service users (Gannon and Lawson, 2008; Boyle, 2009), ensuring that staff are better trained, resourced, and have the necessary autonomy to be able to respond creatively and effectively to service users. There is often an assumption that the mutual empowerment of both front line staff and service users is unproblematic (Cabinet Office, 2007; 2008). However co-production may expose staff to ambiguity, uncertainty and challenge, these sources of potential stress and discomfort needing to be balanced with support and supervision (Hunter and Ritchie, 2007). Dunston et al. (2009) note the lack of theorising of front line staff within co-productive relationships, where issues of professional identity and practice remain
unproblematic. This critique can be extended to illustrate how the co-production literature does not theorise how the ‘expert knowledge’ and experiences of staff interact with the experience, knowledge and skills of citizens. Issues of intersubjectivity, the dynamics of different forms of knowledge and differential power relations need to be examined.

The following comparative table in Figure 3.2 draws the analysis of co-creation, co-production and co-design together in an abstracted form. A new term ‘co-participation’ is developed as a heuristic model which integrates the key theoretical underpinnings from these concepts, following a realist synthesis approach (Pawson, 2006a).
**Figure 3.2 Abstracting key theoretical premises from co-production, co-design, EBCD and co-creation** (Developed from Farr and Cressey, 2010).

<table>
<thead>
<tr>
<th>Co-participation</th>
<th>Co-production</th>
<th>Co-design and EBCD</th>
<th>Co-creation</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Origin of concept</strong></td>
<td>Retrospective analysis</td>
<td>Analysis of public service processes</td>
<td>Design</td>
</tr>
<tr>
<td><strong>Role of users and resources they bring</strong></td>
<td>Active, skilled, tacit, situated knowledge and experience</td>
<td>Active, skilled, bringing time, and abilities</td>
<td>Personal experience, tacit and situated knowledge</td>
</tr>
<tr>
<td><strong>Role of front line staff and resources they bring</strong></td>
<td>Engaging with users, providing resources and expertise. Tacit, experiential and professional knowledge.</td>
<td>Engaging with users as equals. Facilitation, negotiation, trust building, resources</td>
<td>Collaboration with users to redesign services. Engagement as equals. Personal values</td>
</tr>
<tr>
<td><strong>Role of public sector managers and resources they bring</strong></td>
<td>Devolution of responsibility and decision making to staff and service user collaboratives</td>
<td>Devolution of responsibility, collaborative problem solving, client focussed</td>
<td>Facilitators, coordinators, advice, encouragement, performance management</td>
</tr>
<tr>
<td><strong>Where does it take place?</strong></td>
<td>Production, design, commissioning, management, governance.</td>
<td>Point of service interface. Concept extended to full service cycle</td>
<td>Design and delivery of services</td>
</tr>
<tr>
<td><strong>Key change mechanisms</strong></td>
<td>Collaborative relationships, shared situated knowledge</td>
<td>Skilled, active and engaged citizens</td>
<td>Mobilisation, design theory, collective reflection</td>
</tr>
</tbody>
</table>

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9. Bate and Robert (2007a)  
12. Bate and Robert (2007a)  
15. Bate and Robert (2007a); Bate et al (2004a)  
17. Bate and Robert (2007b)  
21. Bate et al. (2004a, b); Bate and Robert (2007a); Bate and Robert (2002).  
The term co-participation is used as a heuristic device that facilitates the analysis of examples that involve both users and front line staff in collaborative partnerships, based on the concepts of co-production, co-design, EBCD and co-creation. The term co-participation has been previously developed in workplace learning literature, where it refers to forms of knowledge creation through practice where learning is conceptualised as the product of participation and engagement within workplace activities (Billett, 2002, 2004). It builds on the work of Lave and Wenger (1991) where learning is situated as people participate and interact within a particular community with its associated history, culture, values, rules and patterns, with particular resources and activities and purposes (Fenwick, 2006). Individuals dynamically influence each other’s knowledge and norms through co-participation and the ‘community of practice’ reproduces and transforms itself (Fenwick, 2006; Billett, 2004). Within this thesis the existent concept of co-participation is here extended to denote an analytic framework that theorises how different stakeholders, public service staff and citizens/ service users may come together to work collaboratively within institutions, drawn from the concepts of co-design, co-production and co-creation.

Four benefits of this model of co-participation can be identified in the light of Chapter 2’s emerging themes. Firstly, co-participation is built through a retroductive analysis of co-creation, co-design and co-production and as such focuses on the key underlying mechanisms of these concepts. It is theorised that the processes depend upon the mechanisms of reflexivity, recognition and intersubjectivity between workers and service users to catalyse changes within public services, working toward collaborative and consensual relationships that focus on common goods. This building of relationships and trust needs to be supported by carefully facilitated processes and a context that provides space, time and resources. Equality amongst participants is often cited as important, however the concept of co-participation problematises this relationship between staff and citizens rather than assuming that the ideal of equality can be achieved. Other aspects of equality, discussed in Chapter 2 such as political, social and economic equality are less considered within co-production, co-design and co-creation literature. However this analysis considers that these aspects may be important contextual conditions that may impact different agents ability and resources to get involved within such processes.
Secondly, attention is given to how interests are negotiated within these collaborative spaces between different actors. This is important because the interests of workers and trade unions are not always consistent with those advanced by service users (Beresford, 2002, p.274). The extent to which there are interest alliances and differences between workers, service users and managers is explored, illustrating the shifting dynamics of coalitions within service relationships (Leidner, 1993). Service users may become allies with workers where there are shared interests or social justice concerns (Lopez, 2010; Beresford and Croft, 2004). Worker, service user and manager identities are also interchangeable, staff and managers also using public services. Whilst many policy processes assume the possibility of both employee and citizen empowerment, co-participation explicitly problematises how these two different forms of participation and diverse agents’ interests may conjoin within institutional contexts.

Thirdly, the model of co-participation explicitly brings the employee as a participant into collaborative work alongside service users, analytically separating them as agents from the public service institutions within which they work. Whilst service user participation and co-production literature often cite professional resistance (e.g. Bovaird, 2007), it is argued here that it is important not to conflate the employee as an agent with the organisational structures and context within which they work. Following Archer’s (1995) approach, co-participation is based on an explicit analytic separation of structure, culture and agency, exploring the interrelationships between staff, service users, managers and policy makers who may be constrained/ enabled within particular institutional, structural and cultural contexts.

Finally, co-production, co-design and co-creation descend from an analysis of the processes of public service production (Brudney and England, 1983), design (Bate and Robert, 2007a) and marketing (Prahalad and Ramaswamy, 2004) respectively. The concepts have been increasingly seen as important within a participative governance context. Here participation is seen as a means of pragmatic problem solving rather than a political process, taking place within an institutionalised context where agents within organisations may define the terms of reference. They do not have the same political or ideological roots that either worker participation (through worker movements and trade unions) or service user participation (through welfare service user movements and user controlled
organisations) (Beresford, 2009) have and as such may be less attached to wider political concerns. This thesis explicitly situates the practices of co-production, co-design and co-creation within participation theories and their historical and political background. This provides a stronger theoretical grounding, facilitating a broader understanding of how these processes sit within wider power relations and underlying political contexts.

3.6 Conclusion

This chapter began by discussing different public management theories, detailing the key assumptions of new public management whereby public services are disaggregated into basic units of inputs and outputs, alongside managerialist approaches that conceive of organisations within rational scientific perspectives. This approach to public management is then contrasted with two developing theoretical perspectives of public value management and new public governance. These models challenge several of the underlying theories of new public management and Alford (2009) has illustrated how the nature of public service interactions means that they are in contradistinction to new public management assumptions of public choice, principal agent theory and the separation of provider and consumer roles. Policy thinkers on the political Left and Right who emphasise the importance of relational aspects of public services were then considered before exploring the extent to which such thinking has informed current policy trajectories, through an analysis of the Localism Bill (2011) and the Health and Social Care Bill (2011). This illustrates how marketisation and increasing the diversity of providers seem to be the main concerns of the policies and they provide less guidance on how staff and service user participation may be embedded in the everyday interactions between service users and providers.

Relational elements of public services were explored with the use of four different bodies of literature. The interface between providers and service users is highlighted within services management literature. Theodosius (2008) extends and develops the emotional labour concept within nursing to explore how emotional labour is an ‘interactive and relational process’ (op. cit., p.48), integrally linked to the personal and social identity of workers. The ethics of care literature may further enhance emotional labour perspectives within public services and it provides a different philosophical grounding for the analysis of social policy. Through emphasising a relational ontology that highlights interdependence, it
challenges the economic assumptions upon which new public management is built highlighting relationality rather than rational, economic, independent actors. The importance of practitioner and service user relationships is explored in the context of current debates on person-centred support. Whilst new public management disaggregates services, reducing interaction and relationships to contractual conditions, disembodying people’s needs into contractual systems, person-centred approaches highlight the importance of integrated services around people’s holistic needs.

The theories and concepts of co-production, co-design and co-creation were then analysed and synthesised, developing a heuristic model of co-participation that will support the empirical analysis of how staff and services users may collaborate together within public service organisations. Four benefits of this model have been presented, illustrating how the themes of intersubjectivity, conflict and consensus, equality and institutionalisation are related to models of staff and service user collaboration. This model of co-participation has been developed from a realist synthesis of co-production, co-design and co-creation theories, based upon a critical realist philosophy of causality. The next chapter begins by detailing the underlying philosophical approach of critical realism before describing how it has been operationalised within this research, presenting the methodological approach.
CHAPTER 4

Methodology

4.1 Introduction

Some key tenets of critical realist thought were introduced at the end of chapter 2, exploring a critical realist analysis of relationships between structure and agency and the concept of emergence. This chapter develops these theoretical perspectives to illustrate how critical realism can be used as a methodological approach to explain how collaborative processes within public sector institutions may initiate changes to services. Section 4.2 provides an overview of the main tenets of critical realism, explaining key concepts of emergence, mechanisms, causal configurations and the analytic technique of retroduction. The concept of a stratified social ontology is developed to explore how it can be of use analytically. Section 4.3 overviews different methodological approaches that critical realists have used to develop empirical studies. Two particular approaches that are focussed on are the methodological operationalisation of Archer’s (1995) morphogenetic approach and realistic evaluation (Pawson and Tilley, 1997). The process and issues of using both these frameworks methodologically are explored. It is suggested that whilst realistic evaluation has been the most applied form of methodological approach stemming from the causal philosophy of critical realism, its approach is less well suited to explore power relations. It is suggested that it can be built on to explore issues of policy, politics and power using a wider analytic framework based on a stratified social ontology. Realistic evaluation, whilst asking how policy or social programmes work, for whom and in what contexts, can also be enhanced through a participatory approach to evaluation and possible links are drawn with participatory action research. Section 4.4 discusses the methods used within this study, providing details of the realist synthesis approach (Pawson, 2006a), the expert interviews that were carried out and the two case studies based upon a realistic evaluation approach. Research processes, ethical considerations and methods are discussed, alongside data collection and analysis. Section 4.5 completes this chapter with a discussion and consideration of different participatory and collaborative processes to research. Reflections upon issues of collaboration, the co-production of knowledge and research impact are
developed. The conclusion of this chapter then paves the way for three data analysis chapters.

4.2 Critical realism

Critical realism purports that a world exists independent to and external from human agents conception of it. Ontologically, there is a real world beyond our knowledge of it. In critical realism this is referred to as the ‘intransitive’ dimension which is stratified and consists of different layers; a real world of mechanisms and tendencies where objects have causal powers; an actual level of sequential events that can be produced in a laboratory and an empirical level which consists of events that can be observed (Bhaskar, 2008). The purpose of a critical realist approach is to develop understanding of the real dimension, where specific mechanisms may interact to produce concrete events. Critical realism is concerned with explanation, understanding the how and why of events within the world. Knowledge is referred to as the ‘transitive’ dimension. Epistemologically, the production and development of knowledge about particular events is a social practice, thus this knowledge is fallibilist, developing neither sequentially nor wholly discontinuously (Sayer 1992, p.5). A stratified social ontological realism and epistemological relativism form two of the pillars of a critical realist approach in social sciences. The third pillar is that of ‘judgemental rationality’ (Archer, 2010a), which asserts that there are better or worse grounds for developing one theory against another, all truths are not equally valid and some theories represent ‘real’ mechanisms more accurately than others. Through specific methods it is possible to discern which theory better represents an ontological reality than another. Thus judgemental rationality avoids a postmodernist cul-de-sac where all truths are equally valid on the road of epistemological relativism. Judgemental rationality supports enhanced reflexivity and ‘seriousness’ where one of the aims of theoretical understanding is to develop practice, to ‘walk your talk’ and live accordingly (Bhaskar, 2009a). Critical realism has an emancipatory intent where the development of knowledge may enable us, as agents, to act differently from an awareness of how our own actions are implicated in the reproduction or transformation of social structures and relations (Ackroyd and Fleetwood, 2000, p.23).

Three concepts of emergence, mechanisms and causal configurations are central to using critical realism within empirical research. Elder-Vass defines emergence as follows:
‘Emergence is the idea that a whole can have properties (or powers) that are not possessed by its parts—or, to put it more rigorously, properties that would not be possessed by its parts if they were not organised as a group into the form of this particular kind of whole’ (Elder-Vass, 2007b, p.28).

Emergence describes how particular combinations of different elements (which, for example, could include agents, processes and practices) enables the creation of new emergent properties. As Carter and New (2004, p.13) note ‘the defining characteristic of emergent properties is their irreducibility. They are more than the sum of their constituents, since they are a product of their combination’. Section 2.7 illustrated this idea of emergence through an orchestra or football game, where if people take themselves away from the social event, they in effect destroy the causal mechanism and emergent music or football game can no longer occur.

Within critical realism causality is understood through the concept of mechanisms which exhibit particular tendencies to cause specific events, these tendencies are dependent upon the particular circumstances and context of each specific event. The concept of causal relations as tendencies (transfactuality) relates to whether particular generative mechanisms may or may not produce events which may or may not be seen (Outhwaite 1998, p.282). We cannot predict that a particular social event will occur but we can explain what has occurred. Within social research the concept of a mechanism refers to ‘positioned practice’ where agents social positions enable them to have access to a variety of resources which enable them to have causal effect (Fleetwood, 2004, p.47). Here ‘the effects of structures are mediated by agency: in social life, nothing happens without the activation of the causal powers of people’ (Carter and New, 2004, p.27). Social mechanisms operate through ‘people’s choices and the capacities they derive from group membership’ and their particular social positions (Pawson and Tilley, 1997, p.66). Social structures themselves are mediated by agents, therefore we need to consider people’s intentions, thoughts and beliefs about their actions in explaining social phenomena (Danermark et al., 2002, p.194).

Causal configurations are groups of different causal elements that combine to generate particular emergent properties, these clusters of causal factors may include ‘social
structures, positioned practices, relations, rules and resources’ (Fleetwood, 2004, p.47-48). Thus the causal configuration of an orchestra includes elements of particular social practices, time, instruments, a particular culture and social structures. Here it is important to remember that it is not any individual component that creates particular tendencies, rather it is ‘the configuration as a totality’ (Fleetwood, 2004, p.48). The mechanisms can be seen to be individual agents who have particular embodied musical skills, having access and choosing to practice together within a social group, creating the emergent property of music and possible pleasure to those listening. Within this social event there are a variety of mechanisms that could be examined, the acoustics may be of interest to the sound engineer whereas the sociologist may be interested in the social practices that enable these occurrences. Thus diverse elements of a stratified social ontology will be of different interest to different disciplines.

In order to understand and analyse these mechanisms and causal configurations, two particular analytic techniques are used within critical realism, those of retroduction and retrodiction. Firstly, examining retrodiction (also referred to as abduction), whilst induction refers to developing generalisations from numerous observations, and deduction moves from a generalisation or theory to infer particular future events, retrodiction explores what actually caused the event, moving from empirical observations to analysing deeper causal mechanisms (Lawson, 1997, p.24). Retrodiction refers to the analysis ‘of antecedent states of affairs’ (Bhaskar, 2010, p.6), exploring the circumstances and situations that led up to a specific event. Lawson (1997, pp.221, 243-244) and Bhaskar (2010) detail similar actions in the process of a critical realist analysis where particular events are firstly resolved into their components (resolution), these components are then redescribed in an optimally explanatory manner (redescription). Then processes of retrodiction and retroduction are necessary to explore both the ‘antecedent states of affairs’ and the generative mechanisms that caused particular events to arise (Bhaskar, 2010, p.6).

Critical realism advocates methodological pluralism because mechanisms at different levels can be best studied using distinctively different methodologies (Danermark et al., 2002). For example, different health professionals may be concerned with generating casual mechanisms that promote health at different levels:
Social sciences: health visitors may support the social well being of individuals and families

Psychology: psychologists; psychiatrists

Physiology/anatomy: physiotherapists

Organic chemistry/biological chemistry: pharmacists

Physical chemistry: geneticists (hierarchy taken and adapted from Benton and Craib, 2001, p.126).

Ontological stratification is an important element of critical realism. Focussing upon social research, complex social phenomena cannot be explained at only one level of reality e.g. discourse or institutions or agents. Instead it is necessary to understand the complex interactions of various different levels of a stratified social ontology. Archer (1998, p.377) argues that ‘analytical dualism’ is necessary to study structure and agency, that is they are approached and analysed separately through a methodological realism which ‘explores the linkages between these separate strata with their own autonomous, irreducible and emergent properties’. Bhaskar and Danermark (2006) have produced a conceptual model, which they call a ‘laminated system’ to represent and provide an analytic framework with which to understand and explain concrete social phenomena. A particular event or phenomena may be explained by a multiplicity of different mechanisms which may be of different kinds, and usually explored through different academic disciplines, which correspond to different levels of reality as illustrated below. Within explanations about the social world, these different levels can be differentiated as:

1. the sub-individual psychological level;
2. the individual or biographical level;
3. the micro- or small group level;
4. the meso-level which is concerned with the relations between functional roles such as the public service worker, the citizen or the service user.
5. the macro-level, concerned with particular societies
6. the mega-level which relates to traditions and civilisations;
7. the planetary level concerned with the planet as a whole (Bhaskar and Danermark, 2006, p.289; Bhaskar, 2010, pp.9-10)
The focus of analysis will be dependent upon the particular social phenomena of interest. The manner in which these levels are presented produces hierarchical strata, where different causal levels cannot be reduced to those previous to it, for example not all psychological mechanisms may be able to be reduced to genetics. Bhaskar and Danermark (2006) illustrate the utility of this approach through an example of a person’s disability, illustrating how different mechanisms at a biological, psychological, social and cultural level interact. They demonstrate how the sequence of mechanisms depends upon particular cases and that coherent narratives can be developed to maximise explanation that fits with the real world order of events (p. 292). This enables an analysis of several mechanisms at different levels, exploring how they combine and interrelate, working with ‘essential complexity’ (p. 295). In order to develop knowledge from a laminated system as illustrated above, it is necessary to integrate ‘different epistemic perspectives of the various disciplines’ (Bhaskar, 2010, p.18). This in effect seeks to explore how interdisciplinary understandings can be practically integrated. Focussing on how mutual understanding between different professions may be achieved, Bhaskar (2010) develops two principles of universal solidarity and axial rationality. Universal solidarity relates to the idea that it is possible that anyone can empathise and come to understand any other human being. This relates to the concept of non-duality, ‘unity over antagonism and split’. The second principle of axial rationality specifies that there is a basic logic of human learning accessible to all communities through activities, irrespective of cultural differences (Bhaskar, 2010, p.18). These two concepts are of particular use to illustrate how collaborative action across different stakeholder groups may be facilitated and enabled, working across interdisciplinary boundaries.

4.3 Critical realism and methodology

Having overviewed the philosophy of critical realism and defined some of its key concepts, this section examines how critical realism has been developed methodologically. Section 4.3.1 examines different critical realist methodological approaches and Section 4.3.2 examines the approach of realistic evaluation. The differences between critical realism and realistic evaluation are considered before reflecting upon how political and power relations can be analysed through evaluation (Section 4.3.3). Consideration of the potential links between critical realism and action research forms the last element of this section (Section 4.3.4)
4.3.1 Different critical realist methodological approaches

There are a broad range of studies that help to explore how different researchers have employed a critical realist approach within different empirical studies. Two particular approaches that have informed my own research design and methodological approach derive from the work of Margaret Archer and Pawson and Tilley (1997). The morphogenetic approach (Archer, 1995) conceptualises how change takes place through historical accounts of emergence in comparison with realistic evaluation (Pawson and Tilley, 1997) which provides a process for evaluating programmes directed toward social change using configurations of context, mechanisms and outcomes. It has been noted that the potential of the morphogenetic approach for empirical research ‘has yet to be realised’ (Carter and New, 2004) and Archer ‘does not offer specific steps to be followed in an empirical study’ (Radulescu and Vessey, 2008, p.12). However there have been voyagers into this domain, where the morphogenetic approach has been used as a theoretical framework to undertake extensive ethnographic work of particular case organisations (Willmott, 2002; Horrocks, 2009).

The methodological application of the morphogenetic approach can be seen to have some resemblance to Bhaskar and Danermark’s (2006) laminated system, yet its focus is on the nature of sociological events rather than an expansive overview that includes both the micro biological level and conversely the planetary level (encompassing issues such as global warming (Bhaskar et al., 2010)). The morphogenetic approach can be used methodologically to explore how structure, culture and agency ‘emerge, intertwine and redefine one another’ over time (Archer, 1995, p. 76). Social structure predates and shapes (but not determines) human action, which in turn can elaborate and change structures through time. Time is a central tenet within analysis which begins by exploring how structural and cultural resources may be distributed, where agents are situated within and may be influenced by particular ‘situational logics’ (Archer, 1995, p.218). Whilst these elements may influence agents, they are not controlled by them and through analytic dualism it is possible to discern the conditions that may enable change within particular social/structural/cultural contexts, producing an analytic history (Horrocks, 2009, p.40). Rather than using the term mechanism, Archer (1995) refers to three types of causal power, structural emergent properties, cultural emergent properties and people’s emergent
properties. Structural emergent properties refer to ‘internal and necessary relationships which entail material resources, whether physical or human’ including distributions of resources, roles, institutional structures and social systems (Archer, 1995, pp.175-77). Cultural emergent properties include ideas, theories, values and beliefs (op. cit., p.180) and people’s emergent properties relate to the way in which people can modify each others’ capacities, ‘affecting their consciousness and commitments, affinities and animosities’ (op. cit., p.184). In contrast to prescriptively using Archer’s detailed approach and terms, many studies have developed a more general definition of a mechanism. Carter and New (2004, p.14) see that a commonality amongst different critical realist researchers is that they identify mechanisms as ‘structures whose combined states result in the exercise of agential powers, which bring about outcomes which need explaining’. The mechanisms that people identify may be dependent upon which aspects of a stratified social ontology forms the object of analysis within a particular research study.

4.3.2 Realistic evaluation

Pawson (Pawson and Tilley, 1997; Pawson et al., 2005; Pawson, 2006a, 2006b) has developed realism into a large body of methodological work, transforming realist theory into research and evaluation methods. Realistic evaluation (Pawson and Tilley, 1997) and realist synthesis (Pawson, 2006a) have been operationalised and used within social sciences to a far greater extent than the morphogenetic approach. The importance of these realist evaluation methodologies is increasingly being recognised (Crump, 2008; Anderson, 2008), going beyond simple cause-effect variable models to explore systems and processes (Bate et al., 2008) to enable an understanding of ‘what works for whom, in what circumstances, in what respects and how’ (Pawson et al., 2005, p.21). Realistic evaluation can be seen to be a form of theory-led evaluation (Dickinson, 2008) which is often used within the analysis of complex social policy interventions. Theory-led evaluations investigate the relationships between cause and effect, analysing the mechanisms within programme interventions which generate particular outcomes within specific contexts.

Realistic evaluation sets out to discover ways of identifying, articulating, testing and refining conjectured mechanism, context and outcome configurations (Pawson and Tilley, 1997). It aims to understand why a programme works, for whom it works and the sets of circumstances within which it works. Because the ontological groundings of realistic
evaluation are based in critical realism this enables an account of multiple connectivity within complex, open systems. Methodological pluralism is advocated to study different levels, using a range of methodological tools which recognise the importance of individual agency, cultures and structures. As Byng et al. (2005) note ‘phenomena such as individual thoughts and actions, team culture, interagency working, financial incentives and policy might all have a part to play in the development or otherwise of improved systems’.

Although Blamey and Mackenzie (2007, p.451) suggest that realistic evaluation works less well in ‘highly complex, multi-site interventions with multiple outcomes’, Pawson et al. (2005) illustrate how realist models are particularly suited to complex interventions and the realist synthesis model, based upon the same principles as realistic evaluation, is specifically designed to integrate diverse research findings about complex interventions within a social context. Callaghan (2008) asserts that complexity theory has its foundations in critical realism, where reality is conceived as a multi-layered, open system incorporating generative theory and non-linear feedback. Indeed several authors have developed theory-led evaluation approaches to integrate concepts of complexity (Barnes et al., 2003; Sanderson, 2000; Stame, 2004; Pawson et al., 2005), Rogers (2008) developing approaches to incorporate complicated and complex aspects of interventions through complex logic models. These models may fit well with the emergent processes of worker and user collaboration as ‘specific activities and causal paths are expected to evolve during implementation, to take advantage of emerging opportunities and to learn from difficulties’ (op. cit., p.40). Realistic evaluation should therefore be able to incorporate and facilitate the conceptualisation of change within a multi-level system.

Various theorists have described limitations of a realistic evaluation approach with difficulties in conceptualising context (Dahler-Larsen, 2001) and problems with differentiating mechanisms from context (Byng et al., 2005). Adopting an explicitly critical realist approach may be able to provide an analytic framework to tackle these issues, providing a stronger framework with which to analyse context, using either Archer’s (1995) concepts of structural, cultural and people’s emergent properties or the laminated system framework of Bhaskar and Danermark (2006). Whilst Pawson and Tilley (1997) brush over the study of structure and agency it is asserted here that using analytic dualism (Archer, 1995) may help the evaluator to differentiate more clearly between contexts and mechanisms. Similarly a laminated system provides a conceptual tool to interrogate
complexity through a multi-level framework. This allows for a wider interdisciplinary focus that incorporates an analysis of the interplay of different causal mechanisms within particular events. These might include biological, psychological, psycho-social, cultural, discursive and policy mechanisms which may combine to co-determine particular empirical events. Including these policy and discursive mechanisms may support a more detailed analysis of the political and power relations that exist within particular policy programmes, a subject which is now examined further.

4.3.3 Realistic evaluation, critique and power relations

There are theoretical limitations to a realistic evaluation methodology, as it does not fully allow an analysis of the interrelationships of power and knowledge, situated within the domain of evidence-based policy it misses a political edge. In later works of Pawson (2006a, pp.18-19), he distinguishes between critical realism (in which social sciences becomes a critical exercise) and realism where it is developed as an empirical method. The main differences stem from how knowledge is developed and critiqued. Critical realists see knowledge as fallible and a product of social relations, not all theories are equally true and as a social scientist it is necessary to critique and reflect on these (Edgley, 1998; Fleetwood, 2005). Pawson (2006a) interprets critical realism as requiring ‘the social scientist to find a privileged standpoint from which to commence investigation, and ultimately draws realism into finding some moral high ground from which to sustain the critical edge… it leaps into the arms of the normative’ (p. 19). However whether this is a fair analysis of critical realism can be debated, Bhaskar (2009b) suggests that research cannot be undertaken from an independent standpoint, acknowledging the centrality of values and action. Contrary to Pawson’s critique Bhaskar states how ‘there is no uniquely privileged level’ (2009b, p.108). Pawson asserts that ‘realism as an empirical method’ (2006a, p.19) considers that different theories are worth determining between and that this should be done through conceptualisation, hypothesis making and the discovery of empirical patterns, basing this model on evidence. In both Pawson and Tilley (1997) and Pawson (2006a, p.20) the work is clearly defined within a scientific realist paradigm, working within an objective and neutral stance. However as Bhaskar (2009b, p.113) notes, ‘human sciences are necessarily non-neutral’ and whilst Pawson suggests his approach maintains an ideologically free stance, it is contested here that all policy-related research is value based and has an inherently political nature.
Pawson and Tilley (1997) suggest beginning evaluation ‘with the expectation that there will be disparity in knowledge of, and control over, any program, and this will be a permanent condition’ (p. 23). Evaluation has no emancipatory intent even though the programmes themselves that are being evaluated might be attempting to tackle some of these social inequalities. Instead the evaluator remains passive when working within differential power relations. Such an approach casts the evaluator as independent, technical adjudicator and does not fully tackle the need for reflexivity of the relations of power that the evaluator themselves are embedded within. Issues of power and control of knowledge production need to be interrogated, exploring how these might serve the purposes of various vested interests, including those of the evaluator or researcher (Beresford, 2005). Taylor (2006) suggests that the practice of evaluation ‘is a political project imbued with power at every level’ (p.244), highlighting how evaluation is discursively constructed and a product of particular political discourses which constitute ‘the common sense of policy making’ (op. cit. p.246). Thus in this thesis it is suggested that evaluation research needs to be situated within wider social, policy and political contexts.

Politics and power can frame evaluation research in different ways which are now considered. Firstly political contexts and power relations may influence how social problems are initially framed which then informs the design of particular policy programmes. Secondly, what counts as evidence can be contentious, with the systemic favouring of randomised controlled trials (Beresford, 2006). Thirdly the differential positions that diverse stakeholders occupy within an evaluation may confer upon them different statuses and impact power relations within an evaluation process, a phenomena that needs to be reflexively taken into account. Taking the first point within public policy it is usually policy makers who discursively frame the ‘social problem’ and potential programmes and solutions, defining what might work according to particular values and ideas that inform programme design. ‘Social problems’ and subsequent policy programmes that are intended to tackle these are shaped by their normative and political context. Realistic evaluation tends to take the policy framing of government discourse and their definition of social problems to be tackled as given and provides no critical edge. The realistic evaluator does not ask why some issues are prioritised as social problems within the current political and economic context whereas others are not, nor why a programme is
framed by a particular set of values and how these might underpin its aims (Taylor, 2006). Because Pawson and Tilley subscribe to a realist rather than critical realist perspective, this may limit the realistic evaluation approach rendering it less able to critically comment on wider structures. Collier (1998, p.57) distinguishes between ‘shallow realism’ which supports the assumption that ‘we can improve states of affairs without changing the structures that produce those states of affairs’ and ‘depth realism’ which critical realism espouses, making ‘the distinction between “transforming structures” and “ameliorating states of affairs”’. ‘Shallow realism’ might only examine ‘what is, without examining what is behind what is’ (Stickley, 2006, p.573). Without an explicitly analytic approach that examines these wider structural and political contexts and the underlying values and aims of policies, realistic evaluation may just get stuck in the shallow end. In order to take on this wider analytic approach we need to extend the object of our analysis beyond the programme to how it sits within the wider political, social and policy context.

Turning to the second point on evidence Turner and Beresford (2005) highlight the hegemonic dominance of particular forms of ‘scientific’ evidence. Whilst considerable progress has been made in the promotion of experiential and subjective knowledge of those who both work in and use public services, researchers and evaluators need to be mindful of issues of power and control of knowledge production. Gregory (2000, p.194) critiques realistic evaluation for its reliance on practitioners and researchers to gain an understanding of underlying programme theories, suggesting that realistic evaluation is not grounded within subjects own personal experiences. Instead she advocates that evaluation needs to be established in the experiential and practical knowledge of the subjects within the programme (Reason, 1994). This relates to the third issue of the social positions of different stakeholders within an evaluation. Beresford (2005, p.82) provides an important critical commentary on the position of service users in participatory research, asking whose discourse, knowledge, agendas, interests and issues is user involvement in research and evaluation seeking to advance (p. 80). There are clear philosophical differences between user involvement within an existing, traditional research framework that values objectivity and neutrality, and user controlled emancipatory research, which is understood as an explicitly political activity. Service users may be more concerned with research committed to social change and tackling inequalities rather than research prioritising knowledge production for dominant political (and academic) discourses. Beresford (2002, 2005)
describes user controlled evaluations as an important development in ensuring that the
rights and needs of service users are central to evaluation research, linking this to wider
policy outcomes and social relations.

However, whilst user controlled and emancipatory research frameworks (Beresford, 2006;
Turner and Beresford, 2005) provide a model to work toward, there can be practical issues
associated with ensuring that service users have control over the research process,
especially in contexts where there are not pre-formed groups of service users. Taylor (2006,
p.260) notes how ‘social categories are not permanently fixed, nor are they necessarily
adequate markers of the ‘interest’ or identity being made present’. Service users themselves
may come from diverse social backgrounds and may identify themselves in a multiplicity
of ways. The social context within which the evaluation and the stakeholders are in can also
influence the degree to which user controlled evaluations may be possible. Beresford has
developed his work within social work and social care where there are a number of user
controlled organisations and this philosophy is perhaps at its strongest. However if this
approach were to be used within an evaluation of a prison programme, an area where
Pawson and Tilley (1997) focus some of their work, a number of practical and
philosophical issues might be encountered. Evaluation is political, and it might not be
politically acceptable to cede control to people in prison. Because of these difficulties in
facilitating user-controlled research, the use of participatory action research can be
considered and this last section on critical realism and methodology explores potential links
between action research and critical realism.

4.3.4 Critical realism and action research

Participatory action research approaches may help to tackle some of these issues
highlighted with realistic evaluation. Although action research usually operates within a
constructivist or relativist paradigm, this thesis suggests that alliances can be drawn
between participatory action research and critical realism, following Winter and Munn-
Giddings (2001) and Houston (2010). This alliance can be built upon two arguments, firstly
that there may be difficulties in building emancipatory and participatory action research
upon the philosophical approach of relativism, and secondly, that the key tenets of critical
realism fit with methodological approaches of action research. Firstly, examining
ontological and epistemological assumptions of participatory action research, Reason
asserts that participative action research is aligned more closely with relativist rather than realist perspectives. Key to this assertion is the ontological assumption that ‘in some important senses we choose our reality and our knowing of it – individually and collectively’ (Reason, 1994, p.332). There are however, several critical realist arguments against this assertion. Firstly, there is the important distinction between ontological realism and epistemological relativism. Critical realists would assert that whilst we may be able to reflect upon our knowledge it does not necessarily mirror the ontological reality within which we find ourselves. Secondly, there is the importance of a stratified social ontology where discourse, knowledge, ideas and beliefs cannot only represent reality. Ontological stratification asserts the importance of the physical and material, as well as the discursive and ideological. Thirdly, critical realists would assert the importance of the existent structural and cultural influences in the extent to which agents may be able to create their reality. Thus, it is suggested that instead of basing participatory action research upon a relativist paradigm, critical realism may be a useful philosophical basis for action research as McKernan (2006) suggests.

This thesis follows Winter and Munn-Giddings (2001), Houston (2010) and Dick (2004), exploring potential fruitful alliances between critical realism and action research. Bhaskar (2009a) also sees critical realism and action research as mutually compatible. Winter and Munn-Giddings (2001) suggest that action research may be a method ‘to realise in practice the theoretical ideal of social inquiry proposed by critical realism’ (p. 263). Winter and Munn-Giddings (2001, p.263-265) suggest that critical realism can be seen to be compatible with the values and processes of action research in several different ways. Firstly both highlight the importance of contextually specific inquiry. Secondly both see that social inquiry and research are part of the social world they describe, emphasising the importance of the research process being embedded within that which it is investigating. Thus there is no independent standpoint upon which to conduct investigation, and here action research advocates the importance of participatory and collaborative processes. Thirdly, both approaches highlight the importance of critical reflexivity upon processes of knowledge development. Fourthly, both emphasise the importance of emancipation and social change, exploring spaces for transformation of existing contexts and relations. Finally both approaches assert that social research and inquiry are not value neutral, with action research seeking to embody its values through the free and equal exchange of views.
and perspectives. A critical realist perspective can add to the analysis of this process, exploring these dynamics through a power lens. Whilst some action researchers have reflected upon critical realist approaches (Winter and Munn-Giddings, 2001; Dick, 2004; Houston, 2010), there seems to have been perhaps fewer critical realists adopting action research approaches. Considering that critical realism is perceived to perhaps have some methodological shortcomings, it is advocated in this thesis that critical realists can learn from the methodological approaches of action research.

This section has explored different methodological approaches that are based within critical realism, highlighting the importance of placing evaluation research within its political context. The final two sections of this chapter turn to the practical issues of research methods, with section 4.4 considering the methods used and section 4.5 reflecting specifically upon the extent to which forms of participation within my research were practically developed.

**4.4 Methods used**

Whilst acknowledging some of the limitations of a realistic evaluation approach, the methodological framework has been useful to aid research design. Within this study three main methods were used:

- A systematic review of existing cases and evaluations that have involved both staff and users in cases of co-production, co-design and co-creation using realist synthesis principles (Pawson, 2006a).
- A series of expert interviews with a range of facilitators and practitioners who have been involved in designing, facilitating and developing projects within public services that involve both staff and users in co-production, co-design and co-creation projects.
- Two independent evaluations of projects that involve both staff and users collaboratively to improve public services within health and local government.

Analytically this study has extended the focus of realistic evaluation, exploring how the processes of staff and service user participation sit within wider political and power relations. A laminated system framework was found to provide greater analytic clarity and
focus in this respect. A realistic evaluation model (Pawson and Tilley, 1997) was found to be useful to design key questions for the evaluations which included:

- What are the mechanisms for change triggered by the collaborative processes and how do they counteract existing social processes?
- What are the social and cultural conditions necessary for these change mechanisms to operate and how are they distributed within and between program contexts? (op. cit. pp.75-77)
- What social and cultural resources are necessary to sustain the changes made?

Within the research I followed the implementation paths of the projects, exploring the intermediate outcomes that arose and went on to form further mechanisms, enabling successful final outcomes to occur. Thus the evaluation explored ‘flows, blockages and points of contention’ (Pawson et al., 2005, p.22) within the project processes. The differing contexts between the two cases provided some interesting contrasts in terms of mechanism and context configurations. Data was collected on organisational contexts and structures, understanding the cultural and structural constraints and enablers of programme mechanisms. These mechanisms were explored to understand the reactions and responses of a variety of agents to the participative mechanisms, understanding how specific processes created change. Each part of the methodological approach is now examined in detail.

4.4.1 Realist synthesis

A realist synthesis takes the principles of systematic reviews and transforms the methods so that they can be used to inform realist based work (Pawson, 2006a). Systematic reviews are explicit review techniques that encapsulate, combine, interpret and synthesise a range of previous research reports to map out existing knowledge, highlight under researched areas and synthesise previous study results together. Realist synthesis is theory led and uses existing literature to understand underlying theories of change, it provides a neat methodological framework which flows into the realistic evaluations and follows key aspects of design for evaluating complex programmes (Pawson, 2006a). A realist synthesis explores whether a particular intervention (in this study worker and service user collaboration) generates change, investigating how such participative methods work and the
mechanisms which cause change within particular contexts. The steps within a realist synthesis are distinct in several ways from a traditional systematic review (Boaz et al., 2006). It focuses upon underlying programme theory, rather than an integrative synthesis of outcomes and allows for flexibility within programmes rather than expecting ‘perfectly formed, correctly configured’ procedures (Pawson, 2006a, p.46). Realist synthesis methods appraise studies through relevance rather than a hierarchy of evidence and uses purposive and iterative sampling where necessary, allowing focussed extraction from research (Pawson, 2006a).

Initially, as part of the literature review within Chapter 3 and following the principles of a realist synthesis (Pawson, 2006a), a detailed, theoretically-led analysis of the concepts of co-production, co-design and co-creation was carried out, as illustrated in Figure 3.2. In addition to this theoretical analysis, my own empirical work was supported by a wider analysis of evaluations and reports that focussed on co-production, co-design and co-creation projects. Pawson (2006a, p.233) advocates using a range of previous evaluations following systematic review principles, evaluation occurring ‘in ongoing portfolios rather than one-off projects’. This enabled a broader analysis of particular mechanisms and causal configuration within a wider variety of contexts. Where particular findings were developed within my own empirical work, these could be explored further within other evaluation reports to assess the extent to which findings might be transferable to other cases. To what extent did the same mechanisms apply over a wider variety of different contexts? By continuing this iterative analysis back and forward from my own empirical work to others I was able to develop possible transferable learning. Thus through the data analysis chapters comparisons and contrasts are sometimes made with other existent evaluations of other similar collaborative projects, based on co-production, co-design, EBCD or co-creation principles. Within the limited resources of a PhD study, the realist synthesis that is integrated into my own research findings has drawn on a range of different studies but it does not claim to be exhaustive as it was deemed important to focus resources upon primary research.

4.4.2 Expert interviews
Realistic evaluators have an explicit intent to understand programme theory and mechanisms, exploring underlying theory through conversations and interviews with a
limited and purposive selection of stakeholders (Blamey and Mackenzie, 2007). Expert interviews were conducted with a range of facilitators and co-ordinators who had been involved in a number of co-production and/ or co-design projects. Experts were found and selected through a variety of means, the realist synthesis as described above produced a list of possible organisations that designed and delivered co-design/ co-production projects for public services. People interviewed had worked in a range of different sectors, including the private, public and the voluntary sector, in health and social care, local government, education and the criminal justice system. Some also had international experience of such work. Interviewees were initially contacted by email, providing a brief summary of the research and its intended outcomes. If they were interested in contributing to the research a participant information sheet would be sent to them (Appendix 1) and also a topic guide which was emailed a few days before the interview took place (Appendix 2). Before the interviews I went through a consent form with the interviewee (Appendix 3) and answered any queries about the research. A total of 8 expert interviews were carried out. The interview focus was similar for all interviewees but the questions needed adapting each time to take account of the interviewee’s specific experience. Desktop research on the interviewee’s work was carried out wherever possible to ensure that the interviews could gain as much insight into each expert’s work as possible. The interviews followed a similar pattern to those advocated by Pawson and Tilley (1997), it was not the researcher’s theory that was the subject of the interview, rather it was the interviewee’s underlying theories of these participative projects that were focussed upon. These interviews provided a strong insight into the variety of implementation mechanisms, the contexts within which they have been applied and outcomes achieved of various co-design and co-production projects.

4.4.3 Case studies

The design of this research has been specifically developed so that it is not just an academic work but also provides useful insights and analysis for practitioners who are implementing these participative projects. As Armstrong and Alsop (from the ESRC, 2010, p.209) suggest, this research engaged with potential users ‘from the earliest stage of the research process’, which ‘is a key factor in helping to ensure that research findings are subsequently taken up and exploited’. In terms of the PhD research the use of two different cases integrated with a realist synthesis and expert interviews followed ‘the cumulative power of an iterative series of inquiries following the fortunes of the same policy line ... scouting
widely for strong shoulders upon which to stand’ (Pawson and Tilley, 2001, p.322). A case study entails a thorough, in depth and intensive analysis of a case. Case studies are a useful research strategy when ‘a how or why question is being asked about a contemporary set of events over which the investigator has little or no control’ (Yin, 1989, p.9). Case study research is a strategy concerned with empirical research about the particular, focused on phenomena in context, using multiple methods of data collection (Robson, 2002). There is a strong emphasis on context with an aim to understand patterns and linkages of theoretical importance, generating new insights that help to build theory (Bryman, 1989).

I chose cases where there seemed to be strong examples of collaborative work between staff and service users because I was interested in how collaborative mechanisms operated. In terms of negotiating access with cases I first came to know about the health service case through an informal discussion after I presented my PhD focus at an academic conference. I was invited to a meeting to discuss the potential of working together with the project as part of my PhD research, taking on the role of an independent evaluator. This evaluation was part of a larger project involving a range of partners in an experience-based co-design\(^\text{23}\) programme. I first became involved in the project at the beginning of its implementation. My own role within the project was as an independent evaluator, as part of my PhD research and on behalf of one of the partners of the project. The project was a partnership between two NHS Trusts, (named in this thesis North Trust and East Trust), a University (named South University\(^\text{24}\)) and a healthcare organisation (referred to as the Health Organisation). My own involvement was facilitated through the Health Organisation and managed by the Health Organisation and the Trusts. As part of the access agreement I would provide the Health Organisation and other partners with two additional evaluation reports that met their own requirements for their independent evaluation that were beyond the scope of my PhD, alongside a copy of my transfer report for their own learning and reflection. The evaluation was undertaken through my PhD research and where the Health Organisation required specific reports that were in addition to and beyond the scope of my PhD research they paid for my time. The Health Organisation had a budget for their

\(^{23}\) Within the NHS the approach studied is called both experience-based design and experience-based co-design (Bate and Robert, 2007a; NHS Institute, 2009: 83). This thesis refers to the process as experience-based co-design to highlight the fact that it is a collaborative process between staff and citizens and has links with other co-design studies.

\(^{24}\) The University of Bath where I studied for this PhD and South University had no connections in association with the project.
independent evaluation and paid for my travel expenses in association with the evaluation. Without this additional support the research would not have been possible as the costs were beyond the resources of my own research budget. The independent realistic evaluation for the Health Organisation focussed upon the processes and outcomes of the project. The PhD builds upon this evaluation using a realist synthesis and additional analytic approaches, whilst acknowledging and attempting to overcome the limitations of realistic evaluation as previously discussed.

The local government case was found as a result of internet searches and snowballing techniques. I contacted the local government project, initially via email to ask if they would like to be part of this PhD research, which would include an evaluation of their project. This case was chosen to contrast with the health service case both in terms of context and it also used slightly different implementation techniques, yet described its work in terms of co-design and co-production. The core theories that informed the two projects seemed very similar yet operated within very different contexts. All evaluation work was undertaken as part of my PhD research, travel expenses being paid through my research budget. As part of the access agreement, it was agreed that I would provide a short summary evaluation report for the organisation after I had completed my PhD thesis.

In addition to these two longitudinal cases I visited a variety of different projects and also became a member of a practitioners’ network that focussed on co-production to gain a greater understanding of key issues over a wider variety of cases. I had the opportunity to visit another experience-based co-design project being carried out on a smaller scale within the health service, this project used an adapted and shorter implementation path. This project had the potential to become another case study but my time started to be stretched alongside some organisational access issues. Following the initial analysis of expert interviews and the early findings of the realist synthesis a final case study was considered following some particular analytic strands from the preliminary synthesis and fieldwork. Institutional structural issues seemed to have an influence on the processes therefore an organisation outside of the public sector structures was followed up to explore the differences that organisational structures made to processes of co-production. I visited a case that was developing a co-ownership model of health service provision whereby both staff and services users would co-own the organisation, under the Right to Request policy.
(Department of Health, 2008). However upon visiting the organisation the process of worker and service user participation and collaboration did not seem clear. I did not follow up this case further as it did not seem to provide a substantial example of staff and service user collaboration. In addition to this, my time and resources were in increasingly short supply.

4.4.4 Research ethics and governance

There were many ethical considerations within this research study to take into account, alongside specific ethical requirements and research governance procedures of the case study organisations. I went through the University of Bath’s departmental ethical procedures, completing and submitting an Ethical Implications of Research Activity form. With regard to individual cases, within the NHS case, a resource kit about experience-based co-design (NHS Institute, 2009a) specifies that the National Research Ethics Service has advised that no formal ethical review was needed prior to using the approach for service improvement purposes. Within the actual case, the participant information sheet that was developed by the project partners explained how the project ‘constitutes a service development and evaluation initiative as opposed to research, ethical approval is not required. Confirmation of this was sought from the National Research Ethics Service’ (Internal project document). To illustrate how this case study fell under service evaluation (which does not require Research Ethics Committee review), following the National Research Ethics Service and National Patient Safety Agency definition (National Research Ethics Service and National Patient Safety Agency, 2008) the evaluation I conducted:

- was designed to judge current care;
- measured levels of care and service without reference to a standard;
- did not use any form of treatment;
- did not use any form of randomisation or allocation to an intervention group
- involved analysis of existing data and the administration of a feedback questionnaire and interview.

The evaluation consisted of questionnaires/feedback forms to service users and staff who had taken part in the EBCD programme and interviews with project co-ordinators, managers, staff and service users who had taken part at the end of the project. In order to comply with all necessary requirements, I had honorary contracts with the specific NHS organisations and I completed a check with the Criminal Records Bureau. Within the local
government case I went through their research governance and ethical approval process and my application was unconditionally approved. Within both cases ethical requirements were followed including informed consent, anonymity and confidentiality and through the actual process of the research it was necessary to continually reflect upon ethical implications.

**Informed consent** Within both case studies my role was as an independent evaluator, as part of my PhD. In the health case I was introduced as the independent evaluator, on behalf of the Health Organisation and as part of my PhD. Within the local government case I was introduced as a PhD researcher who was undertaking an evaluation of the project. Within individual interview situations, written informed consent was obtained. Participants were given a participant information sheet as an invitation to take part. Within the local government project I developed a participant information sheet (example in Appendix 1), which was emailed out to potential participants by the project who had their contact details. Within the NHS project, the project partners developed participant information sheets for the project, which I later adapted for the evaluation stage of the project, including that the evaluation would form part of my PhD thesis. This information sheet was edited and agreed with the project manager. The information sheets for the two cases were designed as an ‘invitation to take part’ and sent to potential participants alongside an introductory email/letter by project staff. This gave people time to read and reflect upon this before deciding upon whether to take part. Before any interview commenced this information sheet was reviewed with space for questions, permission was requested to audio record the interview and a consent form was signed (Appendix 3). Interview transcripts were returned to interviewees so that they could review them and withdraw any data that they did not want used.

As part of the independent evaluations I was a participant observer at different meetings and events. Whilst this observation enabled me to understand the full implementation process and organisational context, written informed consent from all participants could not be obtained without disruption to the actual organisational processes therefore these observations are not used within this thesis. I also had more informal discussions with coordinators of the projects, perhaps over coffee or lunch, where we would discuss and reflect upon particular issues and their relevance to other aspects of my research. The issues
discussed often helped to clarify my own thinking where I could test out some of my initial reflections and thoughts about issues with key practitioners involved.

**Anonymity, confidentiality and dissemination of research** Because the research undertaken has been a collaborative venture this has had particular connotations for anonymity of organisations. The case organisations have and may wish to use shared findings and specific evaluation reports for their own purposes so care has been taken to reduce possible links. Various contextual features of the organisations that are not relevant to the thesis have not been included in descriptions to preserve their anonymity. Anonymity of organisations also supports anonymity and confidentiality of participants. In some particular aspects of the projects only a few people may have been involved, therefore interview numbers to distinguish between different participant quotes have not been used within the cases to ensure anonymity. This has been done to avoid any potential situations where people’s involvement in particular aspects of the project may have made them more easily identifiable to people familiar with the project processes. Expert interviewees have been able to be numbered, as they were not attached to specific cases and came from a variety of different backgrounds, providing a greater degree of anonymity.

### 4.4.5 Data collection and analysis

Within the research design I initially began to analyse cases of co-production and co-design through the realist synthesis. This enabled me to get an idea of the range of projects and programmes that had been developed in different service areas. This realist synthesis then supported my search for expert interviews which were then conducted. These were transcribed and analysed at an early stage in the research process which enabled me to focus on key issues arising through the case studies.

**The health service case**

Within this case I followed the implementation process of an experience-based co-design (EBCD) project from initiation to completion. The EBCD process includes various staff, patient and co-design events as described in Chapter 5. Within the EBCD process I collated 71 feedback sheets from staff (n=46) and patients (n=25) at the end of the staff, patient and co-design events at North Trust and East Trust. At the end of the co-design process I conducted 23 interviews with 7 patients and 15 different staff (one person was interviewed
twice) who were involved in different aspects of the project. Patients had all been involved in the EBCD process. Staff were from both Trusts and all had been involved in the EBCD work, either through management, co-ordination and facilitation roles (4 staff) or as a staff participant within the co-design service improvement groups (11 staff), including clinicians, managers and support staff. The 15 staff that were interviewed consisted of:

- Senior manager = 1
- EBCD Co-ordinators / Programme managers = 3
- Senior/ or strategic clinical roles = 3
- Clinical service managers = 3
- Health professionals = 5 (Nurses, Allied Health Professionals, Clinical Nurse Specialists).

Interview quotes are labelled as either service users or staff, without job types or numbers, to preserve anonymity. Interviews with staff participants were conducted several months after the last co-design improvement groups had met. This timing enabled an initial assessment as to the extent to which improvements and patient involvement was continuing within the services. There are limitations to this interview data in that the majority of interviewees had participated substantially within the project. It was harder to speak to staff and patients who had withdrawn earlier from the process. Thus reasons for people’s non-participation or withdrawal cannot be fully understood. Interview questions were adapted to fit with each person’s role within the project and an example of an interview topic guide is included in Appendix 2. Other data analysed included various project documents.

Local government case

Within the local government case I followed the implementation of a programme based on co-design and co-production principles. I followed the pathway of the project from its beginning (which had started before I began my research), tracking the various projects and their outcomes through documents and reports. I then conducted 18 interviews with 17 different staff (one person was interviewed twice), alongside 2 focus groups, one with 3 community participants and 2 members of staff, and another focus group with 3 members of staff (who were also interviewed separately). Staff (n=17) included a range of senior managers, policy managers, service managers, front line and project co-ordinators, all of whom had worked with the programme in some way, and were either employed by the
local government organisation or a third sector organisation, who had worked collaboratively with the programme. The 17 staff that were interviewed consisted of:

- Senior managers = 2
- Policy or strategic managers = 6
- External or internal service managers = 4 (these managers had responsibility either for a service for external users or internal staff)
- Front line staff with no managerial responsibility = 5

Quotes are labelled as staff interviews or community participants, without job types or numbers to preserve anonymity. Community participants (n=3) had been involved in and worked on specific projects facilitated by the programme. Whilst exact interview questions were tailored to each person’s role within the programme, an example of the areas covered within the interviews are given within the interview topic guide in Appendix 2. In addition to this other data analysed included a wide range of documents and reports that detailed both the development of the programme and its projects.

**Reflections on respondents involved in study**

There are significant limits to the interview data whereby it was harder to speak to people who had not been so involved in the projects or had only a short experience of the project processes in both cases. On the positive side of this, people who I did speak to usually had considerable experience and knowledge of the programme. However the people who I did manage to interview had tended to self-select into the project processes and it was much harder to speak to people who had decided not to take part or had only had a short experience of being involved. People’s reasons and motivations for not getting involved in the projects cannot be represented here as it was not possible to talk with them. I was also aware, that being in the role of an evaluator, I may have been directed toward staff who had had positive experiences of the collaborative projects or parts of the collaborative process where it was working particularly well. I was reliant upon staff gatekeepers for access and communications to different staff involved and was therefore not always in control of who to select to invite to take part in the research. On one occasion I was dissuaded to approach some respondents because of political sensitivities. In such circumstances I took heed of this advice as I did not want to jeopardise ongoing working relationships and organisational sensitivities. It was apparent through the research process that instigating change through collaborative processes was a sensitive, political and strongly relational process. The nature
of this research and the process of inviting people to take part in the interviews has impacted some research findings. Detailed data on where the collaborative process was working well was more prolific within my analysis, yet this was not a specific problem as it enabled a comprehensive analysis of the first research question which considers the processes and mechanisms that facilitate collaboration. Equally, because I was very familiar with the projects and had had substantial involvement with them over a period of over two years, it was also very apparent to me where projects had not been so successful. This enabled me to compare the contexts within which the collaborative process had worked well, with areas where it had faltered, to understand key differences.

**Data analysis**

Interviews were transcribed and analysed through the use of NVivo qualitative data analysis software. Initial analytic categories focussed upon:

- processes of implementation of the projects, including recruitment of service users and staff, key development stages of the process, how people got involved and when
- key mechanisms of collaboration, including facilitation, the use of video and film, visual and creative techniques
- experiences of getting involved from different perspectives including people’s motivations and associated values and identity
- methods and techniques of participation and deliberation
- contextual factors including institutional structures, cultures, hierarchical positions, organisational policies and priorities and the impact of particular service areas
- outcomes achieved from the projects.

I fed back my initial data analysis findings to both cases which enabled further discussion and clarification about particular issues. One case required a full completed evaluation report, and I provided the other with a draft report in the style of a ‘learning history’ (Roth and Kleiner, 1998). I then used this learning history document as an analytic history and analysed my own draft report with the support of Archer’s morphogenetic approach to develop a theoretical analytic approach to develop this thesis. I did not attempt, as Horrocks (2009), a full usage of the morphogenetic approach, however the development of an interdisciplinary analytic framework was useful to guide my data analysis. I developed a
laminated system to act as an analytic framework which enabled a focus upon these different levels of social reality:

1. Biological level – e.g. ability to get involved in the project, medical conditions (NHS example)
2. Psychological level – e.g. values, ethics, passions, motivation to get involved in the project
3. Psycho-social level – e.g. intersubjectivity, collective reflexivity
4. Micro, small group analysis – e.g. facilitating communication and understanding
5. Meso-level – e.g. institutional structures, organisational roles, procedures, rules
6. Macro-level – e.g. national policy level including public sector reform, marketisation
7. Mega-level – e.g. impact of global financial crisis, austerity measures, neoliberalism (Developed from Bhaskar and Danermark, 2006).

Exploring different elements of this framework supported a complex analytic process, which sought to investigate the interrelationships between different mechanisms stemming from an ontological pluralism rather than a reductionist approach that may have focussed only upon one level such as discourse or agents’ experiences and perceptions. Causal mechanisms could include agents, social interaction, cultures, institutional structures, policy, or discourse, whose combinations created emergent properties both synchronically and diachronically. The outcomes of participation could be dependent upon the interaction of mechanisms at all these different levels which combined within specific events. Whilst this stratified model suggests a hierarchical nature between different levels and their causal interactions, it is important to see this as a heuristic device that models how each level is irreducible to its previous level rather than it modelling actual causal interactions which occur through a dynamic rather than hierarchical process. In practice causal configurations interlace together in ways similar to models of complex systems, rather than through hierarchical levels. Through the process of utilising this framework analytically, I found through my own data analysis that diverse mechanisms from different levels interacted with each other in a complex and emergent manner. It was impossible to talk of one level without immediate reference to several others, illustrating the complex nature of causal configurations. Instead of modelling these as levels of social reality, the concept of
dimensions\textsuperscript{25} may better illustrate how these different social dimensions causally influence each other. Visualisations of complex networks seemed to diagrammatically represent how different elements intertwined and interacted, Mingers (2011) illustrating the possible connections between critical realism, complexity theory and systems thinking. Within data analysis and presentation it was difficult to separate different elements out. Whilst analytic dualism supports the separation of elements of structure, culture and agency, as Hay (2002) notes elements of structure and agency are deeply embedded as two alloys within a coin. However a laminated system was useful as an analytic tool and it supported a stronger systematic approach that enabled a clearer differentiation of mechanisms rather than relying upon a realistic evaluation approach that does not clearly model differentiation between contexts and mechanisms. The usage of this analytic framework helped to contextualise the study within wider political processes, helping to avoid a trap of focussing the empirical work on an intersubjective social ontology (Joseph, 2006), that did not take account of wider political and power relations. This enabled a focus on agents and everyday social practices, yet set them within wider social practices, institutions and policy, hopefully avoiding some of the critiques that I myself had found through using a realistic evaluation approach.

4.5 Participatory and collaborative research

There is no consensus on the purpose of research with some researchers advocating its importance in terms of improving social practices (McTaggart, 1999), some highlighting its inherently political nature (Beresford, 2006) and some emphasising its role in ‘the production of knowledge’, questioning these practice and political aims (Hammersley and Atkinson, 2007, p.209). This research, in a small way, attempted to contribute to practice through its production of evaluations for the case organisations, was reflective of wider political issues and through this thesis, develops an academic contribution. These multiple aims required diverse approaches and the tensions between these aims are explored here, reflecting on the process of participatory and collaborative research.

\textsuperscript{25} Thanks to Emma Carmel who suggested the concept of dimensions as more appropriate to an analysis than levels.
4.5.1 Participatory action research

Experience-based co-design is a form of participatory action research (Bate and Robert, 2007a), co-design also sharing some of the characteristics of participatory action research where the ‘starting point is the lived experience of people’ (Reason, 1994). Participatory action research has two objectives, to create useful knowledge for the people involved and to raise consciousness, working towards emancipation (Reason, 1994). In effect, part of the task of my research approach was to evaluate forms of participatory action research, where I would be studying both the processes and outcomes of actually existing participatory projects. At the beginning of the process I reflected upon various participatory evaluation frameworks including fourth generation evaluation (Guba and Lincoln, 1989) and empowerment evaluation (Fetterman, 2005). Using different participatory evaluation methods was dependent upon the particular opportunities and constraints within each of the case organisations. Each case had its own participatory methods involving staff and users to create service improvements, therefore evaluation methods needed to be carefully integrated into these existing techniques rather than layering on another form of participation. The research context precluded an explicitly user-controlled evaluation as advocated by Turner and Beresford (2005). However reflecting upon the philosophy and values of such an approach helped to guide the research (Beresford, 2006, p.167). Firstly the aim of the research was to develop actionable knowledge in conjunction with the case organisations, using the research to explore the experiences of participants within these collaborative projects, their hopes and aims for such work and whether this was indeed achieved through the cases. Secondly, the terms of reference in evaluating the outcomes of work were based on the experiences of service users and staff wherever possible. For example within the NHS case the evaluation of project outcomes was based upon service users own experiences (and also front line staff), exploring how the problems that they had originally highlighted about the service had been tackled through the project. However it was difficult to more formally attempt to change power relations within my own research position. Much of my approach worked within a traditional research paradigm where I developed topic guides (in discussion with the cases) and analysed the data myself.

4.5.2 Collaboration, co-production of knowledge and research impact

Even where groups of users do control the evaluation process or it follows the emancipatory values laid out by Turner and Beresford (2005), this does not guarantee that
the research itself will be acted upon by policy makers or managers of public services. If part of the value of participatory research is to empower service users and improve their lives, with the purpose of instigating social and political change, the impact of research is of central concern. Turning to drivers within the academic world the social and economic impact of research is becoming increasingly important as emphasised through both the Research Councils and the Research Excellence Framework. Collaboration within research between academics and practitioners and the co-production of knowledge is becoming ever more recognised as a route to impact (Antonacopoulou, 2010; Armstrong and Alsop, 2010). Within this PhD research a collaborative approach was taken to working with organisations and practitioners to ensure that the outcomes of the research were of benefit to the organisations as well as the PhD research itself. Because the research was done collaboratively with organisations over a long period of time, my aim was to enable benefits to the organisations through the research. Research collaboration brought many benefits as well as tensions and dilemmas which are reflected upon here.

**Benefits** In terms of the benefits of the research approach strong working relationships were built up with the organisations over a period of time. Because the organisations themselves saw the value in being able to have an independent evaluation, people gave me time and supported me in identifying potential participants, acting as a contact point, sending introductory emails to potential participants. I knew key project staff well and would often have informal conversations with people, reflecting on key issues arising, having reflective conversations sharing academic and practitioner perspectives. This enabled me to understand practitioners’ worlds from a deeper level and the experiential nature of the research process meant I had a strongly detailed understanding of the case organisations. Levels of trust and honesty were built within the research process which supported further insights. This collaborative approach has enabled the development of practice-relevant research (Orr and Bennett, 2010) and some research impact has already been achieved through the sharing of findings, as discussed in Chapter 8. Working at the boundaries and edges between academia and practitioners’ worlds has enabled interesting, topical and academically, policy and practice relevant findings.

**Dilemmas** Alongside the benefits of collaborative working I experienced many tensions through the research process. Collaboration, building relationships and trust takes time,
resources, and the involvement of oneself in a way that traditional research does not. I seemed to end up with a complex and complicated piece of research, which could take on a life of its own. Working in real time with organisations meant that my own research was subject to the same delays as the projects themselves, I did not have full control of the research process and needed to adapt my work to fit with others needs and timetables.

The co-production of research is an ‘inherently political process’ where different parties may have diverse interests and priorities (Orr and Bennett, 2010). Perhaps because my research was also an evaluation of collaborative projects, staff interviewees were often keen to illustrate all the positive elements of the project. Organisations may see evaluation as an opportunity to illustrate and promote their work, which may support future funding whilst as a researcher I was equally interested in what didn’t work and why. Academic and ‘critical independence’ need to be maintained within the co-production of research (Armstrong and Alsop, 2010; Martin, 2010) which brought its own dilemmas, for whilst this research took a collaborative approach to working with institutions, it based its theoretical approach within a critical framework. Whilst Antonacopoulou (2010, p.219) shifts discussion about the co-production of research ‘from politics to purpose’, her advocacy of ‘reflexive critique’ can entail an inherently political activity that may need to be managed sensitively. O’Hare et al. (2010, p.246) note:

‘Academia is pre-disposed to critique rather than co-operate, particularly with those traditionally viewed as power-holders. There is long-standing concern that engagement with powerful actors reinforces their hegemonic control’.

These dynamics of collaboration and critique mirror some of the theoretical issues explored in Chapter 2 between conflict and consensus in participatory processes. The conclusion in Chapter 8 reflects on these tensions of collaboration and critique, both within my own research process, and through the object of my research which focussed on collaborative projects where participants could themselves be critical of organisations.

The presentation and dissemination of the research was another area with potential minefields. Draft reports were prepared for cases and one case required a completed overview before the thesis had been examined. As Martin (2010, p.212) notes, practitioners
and academics may ‘work to very different timescales’. It was beneficial to share findings of the research before it was fully complete to get feedback and comments. There are important issues about the ‘ownership’ of the evaluation and research which occurred through a co-productive process. The early sharing of findings to practitioners could support their own work and the development of other projects which may improve the experiences of users in different services where organisations used the learning to develop the approach in other areas. However this also led to reflection upon how to maintain anonymity of the organisations within my own research whilst organisations themselves were able to use the research that they had been a part of. Thus some less significant contextual details are not included within this thesis and some specific project elements are overviewed in terms of analytic themes rather than the provision of specific detail.

4.6 Conclusion

This chapter began by detailing the precise theoretical framework that this thesis has adopted, using a critical realist approach. Significant philosophical aspects of critical realism were first overviewed, before examining their specific application to modes of empirical research. Different methodologies that critical realists have used have been discussed and reviewed, considering their strengths and weaknesses as other researchers have found them. A detailed examination of realistic evaluation was developed and its shortcomings illustrated. This thesis develops a realistic evaluation approach with additional tools and an analytic framework from Bhaskar (2010), providing a new adaptation to critical realist methodological approaches. From philosophy and methodology the chapter then turned to research practicalities, detailing the methods and research approach that I have taken. It has highlighted how the research was a collaborative activity, and whilst collaboration between staff and service users was the empirical focus of this research, the research approach itself had a collaborative and co-productive nature. This research approach mirrored some of the empirical themes of the research and I found the dynamics between collaboration and critique both in empirical findings and embodied within my own research practice.

The next three chapters develop the data analysis from the cases, the expert interviews and the realist synthesis that I have undertaken, exploring the mechanisms, contexts and outcomes of co-production and co-design projects. Chapter 5 introduces both of the case
studies, analysing their processes through casual configurations. Chapter 6 explores the underlying mechanisms of collaboration in further detail, analysing how staff and service users came to work together within collaborative processes. Chapter 7 brings these findings together using the analytic support of stratification to explore how different levels of agency and identity, social interaction and intersubjectivity, institutional and service contexts and wider policy contexts combined within collaborative processes to create emergent properties and outcomes.
CHAPTER 5

Contexts, mechanisms and outcomes of collaboration

5.1 Introduction
This first data analysis chapter introduces the two case study organisations and explores the processes of collaboration between staff and service users within the projects. Firstly, the local government case is introduced, narrating how the programme developed and describing some of the projects that it set up (Section 5.2). Then the health service case is considered (Section 5.3), again illustrating how the project was developed and the processes that it facilitated. The health service case is then analysed in terms of the key mechanisms of collaboration alongside the contextual factors that supported collaborative work between staff and service users (Section 5.4). This analysis leads to a consideration of the outcomes that were achieved through the health service project. This same analytic approach is then used to explore the context, mechanisms and outcomes of the local government case in Section 5.5. Initial conclusions are drawn in 5.6 before the next chapter explores the underlying mechanisms of collaboration in further depth.

5.2 The local government case
The overall objectives of the programme within the local government case are first described before detailing the two pilot projects that they developed, using co-production and co-design principles. From these two projects a stream of different activities developed, this section focussing upon four projects in particular, a fathers’ project, the development of a community shop, a community cohesion project and a project with ex-offenders.

5.2.1 Introduction to the project
The local government case analysed a programme situated within a council (named in this thesis West Council) that sought to involve both citizens and staff in creating person-centred public services. The local government case used a range of different methods and processes to involve both staff and citizens within their projects. The specific programme, named in this thesis as the Co-production Programme, intended to link the experiences and insights from citizens and frontline staff with the policy and strategy of the organisation.
‘We’re very good at responding to top down requests from our Leader and Chief Executive, not so much the bottom up policy and customer insight and customer need and responding to what, where the people of [West Area] want to take things. I think [the Co-production Programme] was partly about filling the vacuum between those two, strategic led policy and bottom up policy’ (Local government interview).

The programme aimed to illustrate how co-production and co-design techniques could practically make a difference to people’s lives and the services that West Council provided. They worked in policy and service areas such as housing, public health and social services, working with local communities, families on a low income and ex-offenders. They often developed projects opportunistically, engaging with practitioners who were interested in working in more collaborative ways:

‘We only want to work with people who actually want to work with us, you can’t force this onto people otherwise they will just resist it’ (Local government interview).

The Co-production Programme was designed as a ‘space to think’, enabling staff to look beyond everyday practice and take a proactive rather than responsive approach to immediate demands. Their philosophy was based on starting with people rather than existing services:

‘We’re not looking at a problem, we’re looking at the person’ (Local government interview).

When the Co-production Programme was being set up it was seen that it was vital to get some early projects happening on the ground so that people could see what it was aiming to do in practice, these pilot projects are discussed in the following section.

5.2.2 Initial projects

Through discussions with different managers, key people who were interested in working with the programme were identified. A senior manager was enthusiastic about using a co-production approach, was specifically interested in low income and poverty issues and keen
to set up a pilot project. This senior figure seemed to be pivotal in the later influence of what became the low income families project. The second pilot project focussed on developing a department’s online information provision.

**Low income families pilot project**

A group of staff consisting of teachers, social workers and senior policy officers commissioned some ethnographic researchers to work with different families to help understand the specific issues they faced. These families were recruited through existing contacts, with different professionals asking families directly if they would like to get involved. Commissioned researchers spent the day with different families to get a feel for what people’s everyday experiences were:

‘When they turned up they were so friendly, it was just really, really easy to get on with them. So it wasn’t like an interview’ (Participant).

A range of interviews with diverse staff groups from different sectors and services who all worked with service users were also conducted. This research was then collated together and presented at a two day workshop where different multi-agency staff discussed the findings of the research and contributed their thoughts and perspectives on the issues. Family participants did not attend this event. One staff participant described how:

‘I just felt quite liberated by the process really, which allowed me to think about what I was doing in a very critical way. Other people were critical as well, but in a very constructive way’ (Local government interview).

Following this event a report was written which compiled together an analysis of the policy context, stories from the families, staff perspectives and the results from the discussions of the workshop alongside suggestions for future work.

**Online service information**

The purpose of this pilot project was to evaluate the provision of online service information by asking both existing and potential users about what they needed from this online information provision. Insights from staff who were employed by a variety of organisations
who would use the online information were gathered. Some potential service users who had never used the website before were invited to use and comment upon the information services. Web staff observed how these people who were unfamiliar with the site would try and get information from it, staff finding this exercise particularly useful to understand how people accessed the site. The insights gathered then formed the foundation for a series of ideas of how the website could be developed to meet the needs of different service users. These ideas were reported back to the senior management team and a report written to inform decisions about which recommendations to take forward.

**Developments from the pilot projects**

These two pilots had significantly different impacts and whilst the low income families work propagated a series of further projects and initiatives, the online services seemed to have less impact. The online services project did facilitate changes in practices of the web team, the manager integrating web observation techniques into other projects but it was not possible to discern further developments. The low income families project sparked several further projects (described below) and supported various successful organisational funding bids.

Reasons for this differing impact can be discerned. The low income families work had been supported by a prominent senior manager and a group of people who had been determined to make an impact. The topics it covered were of interest to a range of different people from diverse departments and organisations.

> ‘The personalities involved, they were pretty determined to take [the families project] forward, by hook or by crook, it was going to be big…. They had the right connections to make that happen …. It was a particular interest [to] them, and you know, if you like something, you want it to work, it is going to have the momentum behind it….’ (Local government interview).

In contrast staff involved in the online services did not seem so engaged with the project.

> ‘It didn’t take off as well… I don’t think that the project team that was involved in that… they didn’t gel and it was an awkward one, it was an awkward project… The
people that needed to take it forward just weren’t on board with it’ (Local government interview).

One person reflected upon how staff may have felt disempowered to be able to make positive changes to the service where the issues raised were difficult and complex to action. ‘Knowing the right people to pull the right strings’ was seen to be an important aspect of initiating organisational change. Where there were particularly difficult organisational issues or problems that were entrenched or spanned different departmental boundaries, change seemed harder to initiate.

‘[The project] uncovered the whole organisational culture … we learnt a hell of a lot… but no-one wanted to listen to the messages, the messages were too difficult’ (Local government interview).

Following the two pilot projects the Co-production Programme developed a number of different work streams. Some of these projects are described, including two follow-on projects from the low income families work, a fathers’ project and a community shop; a community development project; and a project with ex-offenders. These projects are the subject of the following sections.

5.2.3 The Fathers’ Project

This project was sparked through a conversation at the low income families two day workshop. A third sector organisation who worked in West area with families and their young children were concerned that their services weren’t reaching fathers. From this initial discussion an initiative was developed. The first task of the project was to draw fathers in to the organisation so that they could discuss themselves what they would want from the project. Within the event conversations were facilitated using posters, models and other visual techniques such as community mapping. It was seen as important to create a relaxed atmosphere where people felt welcome and comfortable:

‘The pizza and beer night … we just came up with that idea and said, “do you know what will get the, what do the blokes like?”’, “well have a pizza and beer”, “yeah” …
“yeah they do, I like a pizza and beer”, “ok then, we’ll do it, let’s just get pizza and beer in’’ (Local government interview)

‘One of the things we did was provided [pizza] and beer one night. Now this had all sorts of horrible ramifications…. Staff were very upset, some staff, about the fact that they were dealing with mums who were suffering from the effects of dads who were drinking too much and here was us offering a free beer to blokes who were coming in. I respect that view. We never did it again, but we did get quite a lot of dads come in’ (Local government interview).

Various ideas were generated and there was some negotiation as to which ideas to take forward, trying to balance the ideas of the participants with the organisational resources available. However through the process there was a realisation that there was a limited capacity within the organisation to work with fathers and take any of the ideas forward. It was decided that resources were needed to employ a father’s worker:

‘The results have been an extraordinary bloke running our dads work, whose basic philosophy in life is that you’ve actually got to get alongside these young dads. You’ve got to be there for them and with them and talk to them and probably not in this place [the centre]. That has actually infected, I think that’s probably the right word, other staff as well, who’ve understood that, and who are not trying to encourage dads just to come to Saturday mornings, but to get involved in the parenting of their children, which is what we should be about… it’s very definitely changed the way we do things. Though interestingly, not in the way that it was expected to’ (Local government interview).

5.2.4 The Community Shop

Another project that developed as a result of the low income families work was the establishment of a local community resource centre and shop. Soon after the report on low income families was published, the Co-production Programme facilitated a community event within a former council estate where some of the family participants lived. This area was one where a considerable amount of public money had been focussed, yet there was
often an impression, both from professionals and local residents, that the funds hadn’t created a real impact:

‘There are loads and loads of agencies working in [the estate], phenomenal amounts of activity going on, meetings every other week that are full of people saying the right things and yet nothing seems to be getting better’ (Local government interview).

Within the community meeting there were various ideas and suggestions in response to the low income families report:

‘There were different stalls, different ideas, there was like time banking, there was a bus that could come along, a play bus, and then you had the idea of [a community shop]…. It was just literally, write your idea on a post it and stick it on the wall. And then it was all tallied up’ (Community participant).

The community shop received the greatest number of votes but at the time there was no funding to initiate the project which delayed its beginning:

‘Actually, with hindsight, we probably could have gone back and done [the project] at the time, because we didn’t need any money, because the residents don’t want to spend it’ (Local government interview).

A second follow-up meeting was held with around forty people including residents and different agency representatives that worked in the area. The event was loosely structured and open:

‘They had service professionals there, they had residents there and they said “right, ok, you want a [community shop], we don’t know what that looks like, we have no idea”, they said, “do you?” … “No”… “Ok then, let’s work together, what do you think?” And that is literally, like we say, a blank piece of paper, and let’s just go for it, let’s just see what we can come up with’ (Local government interview).
One of the participants relayed how this approach had put some professionals off and that half way through many of them left. However this left a core group of people who were interested in developing the project together. The Co-production Programme’s way of working with the group was to enable the residents whose idea it was, to develop their own project, giving them power and control at every stage of the process:

‘Basically [the Co-production Programme] do what they say they are going to do and they ask people what they want. They don’t just go in and say ‘this is what we are going to do for you’ (Community participant).

‘The [community group] are in charge of the budget, every opportunity that we get for people to control the budget we do’ (Local government focus group).

Some ideas of the community group contradicted with some organisational policies yet it was seen as important to give community participants decision making power and control over the process:

‘… it is their[s], not ours, it’s theirs. That’s what we keep saying, “you may have given us the funding to do this project but actually it’s not our project”’ (Local government interview).

The organisational structure of the project was developed with local residents being appointed within key organisational roles. Community members got training in computer skills, the group developed the business plan, and logos and artwork were designed. There were collaborations between the shop and other local agencies that joined resources to develop the project further. New resources and services were developed and the project was seen as a success in practical, material and personal terms.

5.2.5 Community cohesion project

Within this project the Co-production Programme collaborated with another initiative within West Council that was using co-design principles to get people active within their local communities. Some initial consultation work within a small rural community had
been carried out to find out about local activities and issues and how community resources were being used. These conversations unearthed several splits within the community:

‘The community had become fractured and divided. The organisations that are supposed to be serving [the community] had become fractured and disconnected, so that the district council had a view that the community wasn’t workable with and the community had a view that the district council couldn’t be trusted’ (Local government interview).

One of the concerns from local people that arose was around intergenerational divides within the local community. Young people spoke about the difficulties they had in accessing local resources such as the community centre:

‘We gave some of those messages back to the key people … I can remember that some of their reactions, especially when we were talking to them about the fact that, about young people not feeling that they could go in [the community centre] … they were quite anti, and they were quite pissed off about it to be honest. And they didn’t agree with it and they were quite anti and we felt quite despondent at the time…. That’s when we felt that another medium could be used’ (Local government interview).

The Co-production Programme then worked with the project to facilitate a participatory film with young people to highlight their views about the area, young people creating a film about how they felt about the village and its history, interviewing the older community members. The young people who had created the film then showed this at an event in the community centre:

‘I remember they were just about to start to do their presentation and half of the people, the adults who were difficult and obstructive, were all in the bar and weren’t going to come and listen … one of us went in there and said, “look you have got to come and listen to this” and we dragged them back in, from the bar, to come in and listen. And it actually went down superbly’ (Local government interview).
This liaison between different parts of the community facilitated an intergenerational dialogue and different relationships to develop. The project enabled greater access to the community centre from all different sectors of the local population and the different types of activities housed by the centre substantially increased. The community itself became more cohesive and this supported stronger relationships with the council:

‘We have also been able to broker the deals that need doing between the District Council and the community … as of last week there was the first meeting between the District Council, the [Area] Development Agency and people from the club and the community and that was the first meeting that has happened for about three to four years …’ (Local government interview).

These wider networks and links and stronger community relationships had a substantial financial benefit for the community, with many successes in gaining higher levels of funding for various community projects.

5.2.6 The ex-offenders project

This project was initiated through a senior manager who was a significant champion of the Co-production Programme, as part of a wider strategic, multi-agency review of policy. This wider policy review aimed to bring together diverse, cross cutting issues that affected ex-offenders. Workshops were facilitated to develop the scope of the project involving staff from housing, district and borough councils, probation, police, the prison services and the voluntary and community sector. Some ethnographic research was commissioned to understand the experiences of people who had left prison and gone through the process of resettlement. Time was also spent with staff who worked in resettlement services through shadowing, meetings and interviews. The stories and experiences from practitioners and ex-offenders went onto inform the development of a multi-agency staff workshop, attended by a wide variety of service providers. The workshop included a presentation of the ethnographic research carried out with ex-offenders and staff:

‘Some of the problems just seemed so obvious… when they are about to be released, offenders will have their housing assessment four weeks before they are about to be released but if they then need to make a housing application that takes six weeks….'
Each service provider thought it was someone else being difficult whereas it isn’t it’s just, that’s the processes that they have to go through, it takes them six weeks, they can’t make it shorter’ (Local government interview).

Individual examples of ex-offenders lives were presented and reflected on, workshop participants discussing peoples’ experiences of services. One participant reflected how their table tended to focus on services in someone’s early life such as education, looking at prevention rather than services that were currently being provided to people. The day ended with practitioners pledging how they could act differently to tackle the issues discussed:

‘This one shocked a few people, one person on my table refused to do it... she was like “there’s nothing more I can do, I’m doing everything I can” and that made me a little bit sad. I thought the whole point of the day was that they were there to try and look at what changes could be made and she just didn’t want to. But then there were some really good outcomes from that and people making good pledges of how they were going to connect, because a lot of the services are disconnected so I think a lot of them were to more to talk to each other’ (Local government interview).

The workshop illustrated the complexities of working across organisations and work generated from the event created various outcomes including greater multi-agency working and communication across different services and departments. The work highlighted the intricacies and difficulties of working with people with complex needs over different agencies and organisations that worked to different targets and institutional demands. Two further workshops were held several months later, this time including serving and ex-offenders to reflect on what had been achieved within the service and what recommendations could be developed from the work. This work was still ongoing at the time my own research with the organisation came to a completion.

Having introduced the local government case and its various projects, attention is now turned to the health service case.
5.3 The health service case

This case aimed to develop person-centred services within a cancer treatment pathway, using a process of experience-based co-design (EBCD), following the method set out in Bate and Robert (2007a). The project aimed to explore both staff and patients’ experiences of providing and receiving a specific cancer service, facilitating a process where staff and patients would come together to prioritise areas for development and improve services collaboratively. This was a service improvement process that intended to explore the whole of the patient pathway within the service, from both service users and staff perspectives. Initially, South University individually asked both staff and service users about their experiences of providing and receiving services (service users were also filmed). Responses were then collated to provide material for reflection at separate staff and service user events where priorities for improvement were identified. At the service user event, an edited film was shown, which had been made from all the separate individual patient narrative films. A co-design event was held where service users and staff came together to share their experiences and staff were shown the user film, following users’ consent to this. Staff and user priorities for improvement were shared and voted on, with the most popular areas forming the focus of further work. Staff and service users then developed and redesigned services together through individual co-design groups who met over a period of time to implement improvements.

5.3.1 The experience-based co-design process

Within the case, following some initial steering group meetings involving key project partners, the experience-based co-design (EBCD) project was introduced to service delivery staff through briefings, information sheets and presentations. Staff reactions to the project were diverse, some being very enthusiastic yet there were others who were less engaged with some questioning capacity issues alongside how they could manage to fit the work into their schedules. Similarly to the local government case recruitment of service users onto the project was done through organisational gatekeepers and their existing contacts, clinical staff identifying potential patients who they thought would be good to get involved with the project. The project partners interviewed a range of staff from different aspects of the service within different clinical disciplines about their experiences in the

26 The term service user is used interchangeably with the term patient to describe people who were using the cancer services. People often referred to themselves as patients rather than service users.
provision of services. Service users were also interviewed and asked to recount their experiences of the service, their narratives being filmed where they consented to this. The filming of patients narratives had usually taken place in people’s own homes by the independent researcher from South University and patients felt that they had been honest and open within the film:

‘I wasn’t at all guarded when she was talking to me. It was just how I was feeling then’ (Service user interview).

‘It was really good, it gave me that opportunity to express myself, how I was feeling and some of what I was going through’ (Service user interview).

‘It was fine to be filmed, I was a bit anxious about what I had said afterwards’ (Service user interview).

Once service users had been filmed, South University developed a short, edited video compiling together key aspects of patients narratives, providing an insight to people’s experiences of services through the treatment pathway, asking for consent to show specific clips of each person’s film. The patient film was edited with a balance of positives and negatives with important themes from different patients highlighted. Three events were then held at each Trust:

- a staff event to reflect on the findings of the staff interviews and decide on key improvement priorities,
- a service user event where the edited film was shown and discussed and key priorities were also discussed, and
- a patient and staff event where staff saw the patient film for the first time and both staff and service users shared and agreed on key priority areas for improvement.

Within the staff events, participants included different clinicians, nurses, managers, administrative staff, surgeons and consultants, from different aspects of the treatment path. Within the event discussions, staff often focussed their thoughts on their understanding of patient experiences rather than their own experiences:
‘What we also found was that we had tried to really get some insights into what the staff experienced themselves and that was very hard. People are much more comfortable talking about their perception of what patients experience than how I feel about my job’ (Staff interview).

Within the evaluation interviews staff involved spoke about how the event had been useful because of its multidisciplinary focus, where different staff and professions spoke about shared issues. Widening participation further was advocated by some staff, as there had been some clinical disciplines that had not been represented. However some participants also felt that they were familiar with staff issues and were more interested to hear about the experiences of patients.

Within the patient events everybody watched the edited patient film and discussed its content. The films were very emotionally powerful:

*My feelings were that if anything was going to make a difference, this film would – it came from the heart* (Patient feedback sheet).

Within North Trust some service users felt that the film had a slightly negative aspect:

*I think we all felt that initially it gave a bit of a negative feeling to our experiences, which we hadn’t wanted. I don’t think any of us had felt that we wanted it to be a negative DVD because overall our experiences had been very good* (Service user interview).

It was decided amongst the group to add an introduction to the film to highlight the positive aspects of the care people had received. Discussion about the film was followed by an ‘emotional mapping’ exercise where the different ‘touch points’ of people’s experiences were shared. The events ended with a conversation about priorities for improvements and a final agreement on the key issues to be taken forward to the staff and patient co-design event. The feedback from participants about the event was generally very positive, people appreciating the space as a chance to share their own experiences and listen to others.
The staff and patient co-design events were an opportunity for staff to watch the patient film for the first time and for patients and staff to discuss and agree their priorities for service improvement. Some staff and service user evaluation interviewees spoke of how they were initially quite nervous about the events:

‘I think they [the co-design events] were very powerful, I think people were very frightened of them initially because they were thinking, “oh my god, what am I letting myself in for?” I think there was, I would say, anxiety on both sides, both the health professionals and the patients and “is this going to work, how is this going to be met, how do you facilitate it?”’ (Staff interview)

‘I was quite nervous about what the professionals would think, … [staff] who I know very well were there…. They all seemed to be very open and they were obviously there willingly’ (Service user interview).

Within the events staff were deeply moved by the patient DVD, service users being touched by professionals’ responses:

‘When we had the big event with the staff, I was amazed at how many of the staff were completely taken aback by what they had seen and heard on that DVD’ (Service user interview).

‘I think people’s reactions were very, very real and very honest and I just think that was really important’ (Service user interview).

Priorities for service improvement were shared and the subject and focus of different co-design groups agreed through a voting system, staff and service users deciding upon which improvement group they would like to be a member of. This event was experienced by many participants as very powerful and moving.

‘I think the biggest impact on me was the day that the staff and the patients all met’ (Service user interview).
‘It felt really good actually because there were all these different groups and to see all the key members of the team actually taking part in it so there was a feeling, gosh, maybe something can really happen here’ (Staff interview).

This staff and service user event seemed to be a very important element of the process and expert interviewees who had been involved in events like these also commented on how it was a key element of the collaborative process:

‘I would say that the most powerful part of the process is the co-design session where people come together and they see what the challenges are from the different stakeholders and actually have a chance then to discuss why they are a challenge and where they fit within their context and then get to vote collectively on all of these challenges and then make their personal choice to move into a certain group. I would say that out of all of the projects that we have done we have always seen the biggest mindset shift happen there and you then start to get the cynics become like the champions and… it’s amazing’ (Health expert interviewee, 01).

Following the co-design events where staff and service users agreed the focus for service improvements, a series of co-design service improvement groups developed. Their focus was on a range of different aspects of treatment including information for patients, aspects of surgery, communications and appointments, chemotherapy and experiences on wards. Different groups tackled these areas aiming to meet up over the following six months. These co-design groups had varying degrees of success in meeting and instigating improvements with some meeting regularly and creating numerous changes whereas a couple of groups quickly faded. These empirical events enable a comparison between the different groups to identify what enabled some groups to meet regularly and develop a range of outcomes, whereas others faded at an early stage. These processes are analysed in terms of the enabling contexts that supported collaborative work, the underlying mechanisms of the co-design process that led to changes within services and the outcomes of the project.
5.3.2 Contextual factors

Firstly exploring the contextual factors there were several different features that influenced the extent to which organisational changes were instigated as a result of the project. These include strategic direction and the focus of existing work; resources; and practitioners’ time. Turning first to strategic directions and ongoing work, where the EBCD project implemented most changes there was often a groundswell of other activity:

‘Our unit was in huge change, we were trying to change things that had not been changed for 10-15 years before…. So this came at a very opportune moment … we had got not only our own view of how things should change but we had the customers telling us, “this is what we would like changed”…. This came bang at the right time, saying, “right let’s get the users of the service involved and design the service around them so for us it worked great”’ (Staff interview).

Where strategic direction was combined with access to additional resources this supported the work:

‘This came at the right time…. We had the financial resources in place, so that has made it quite easy’ (Staff interview).

In some improvement areas there were national priorities and programmes which provided additional impetus around improvement work. Because the co-design groups augmented some ongoing work, it was discussed by some interviewees that it was sometimes difficult to specifically identify the project as being the direct instigator of change.

‘I can tell you stuff that has been achieved, I can’t tell you we have achieved it, it would be much bigger than this, it is just this is what we have noticed in this timeframe and I can believe that the EBCD has added to this’ (Staff interview).

However improvements did not rely solely upon wider strategic drives and resources. For example there was additional training made available for health care assistants and
administrative staff, alongside specific cancer training for nurses who were involved in the patient pathway but yet cancer may not have been their specialty.

Sufficient and permanent staff teams were highlighted as important contextual conditions in which to embed change alongside staff capacity and enough ‘headspace’ where ‘people will have enough time and attention to pay to it’:

‘One of the biggest things is the reality between day to day, knee jerk operational management and managing this as a project. People don’t have much time, people are pulled here, there and everywhere. People are distracted, whether it be clinical risk, whether it be clinical demand, whether it be fiscal challenge, whatever. I think there is something for me, the biggest hurdle has been about getting people to pay proper attention to it’ (Staff interview).

The extent to which co-design groups had additional facilitation support varied. Some co-design groups were co-ordinated by a member of staff external to clinical service teams whose specialism was service improvement. Others relied upon clinical staff having the time to co-ordinate the groups and because this co-ordination activity was on top of staff’s clinical responsibilities unless they had additional time to designate to this work, these additional responsibilities may have created additional time pressures. Where co-design groups folded at an early stage and created few improvements, patient participants of these groups did reflect on how a lack of co-ordination may have led to the process working less well. One participant felt that more support of the group would have been beneficial:

‘It was too much just left in a slightly lethargic way, for people, it was too easy for it just to fall apart, I think’ (Service user interview)

Both improvement co-ordinators and clinical staff who facilitated the groups needed to have designated time and resources to manage this work on top of their daily workload, with the co-design work fitting in to their wider professional role.
5.3.3 Mechanisms and casual configurations

Using Archer’s (1995) concept of internal and necessary relations, the entity of a co-design group, by its very nature depended upon:

- the long term involvement of patients who were active and influential in decision making processes (otherwise the process is no longer co-design)
- the engagement and commitment of staff who have the resources and roles to make legitimate decisions that enable changes to be made to services.

These two elements of co-design groups were not just ‘regular concatenations of heterogeneous features’ (Archer, 1995, p.173) but instead were internal and necessary components of a co-design group. Through these two groups of agents coming together, new emergent properties developed where agents acted in different ways to develop service improvements. The two elements are now explored through an analysis of the development of the co-design groups.

Staff engagement

Staff engagement was a crucial factor in the success of the project and the extent to which it instigated changes in services. Where there was initial reluctance from some staff to getting involved with the project, this seemed to continue within a couple of the co-design groups where some work faltered at an early stage. Staff’s own reasons for disengagement can’t be represented here as it was not possible to speak to them, although it seems that time and resources to commit to the EBCD process may have been in short supply. Overall where staff were interested and engaged with the work significant changes to services could occur:

‘It was because staff were committed…. Nothing seemed to be a huge hurdle. You go to some places and their cups are always half empty, this lot, their cups were always half full. We are going to make it better. That was my general feeling’ (Service user interview).

Where staff had not engaged enthusiastically with the project there was less scope for changes to be made:
‘I think if there had been a member of the health care team that was really interested in any of the groups it probably would have worked, because they are the power and the influence, not either the administrative staff or the patients, and I honestly don’t know why they weren’t particularly interested, whether it was because they were simply too busy…. I can see it from their perspective’ (Service user interview).

Co-ordinators spoke of how important it was to get the ‘right people in the room’ (Staff) so that where specific issues were discussed the most appropriate staff member was in attendance, able to provide the necessary information and make decisions that were then implemented within the service. Groups where senior clinicians were fully engaged with the process tended to be successful in initiating greater improvements, illustrating the importance of hierarchical positions and influential roles within these projects.

Service user involvement
Within the EBCD project, service users were first invited to get involved in the project through clinical staff contacts. However this was questioned by some staff as they felt this might not be the best way to recruit people:

‘Just randomly select patients because I can give you patients who sing my praises…. So never ask the service to give names … I can give you my best patients, and then they will say “there is nothing that works like the [cancer] service”’ (Staff).

Service users got involved in the project through sharing their own personal stories and experiences of services whilst being filmed. However this may have put some potential participants off getting involved:

‘It is quite difficult to recruit patients because you are asking them to be filmed, and you are telling them that these films are going to be shown to the people that have treated you, sometimes are still treating you. And that’s really daunting’ (Staff).

In order for the co-design groups to work well people highlighted the importance of having a number of patient members:
‘I’m not a great believer in tokenistic, one patient in a room…. I just think that’s really hard because it is really unlikely that their lone voice will be heard, that they will have the courage to speak up and that it will have the weight that it requires’ (Staff).

One group had only one patient and this group quickly disintegrated. Some staff participants mentioned that it would also have been beneficial to have more patient participants.

‘I think I would have probably liked to have seen a higher number of patients, I mean in the groups that I attended they were way outnumbered by the healthcare professionals and really, if we are talking about this as being a collaboration then it should have been 50:50’ (Staff).

At each stage of the process there had been a slow attrition of patients who self-selected out of the project. Whilst it was not possible to ask those patients who chose not to get involved the reasons for this, there are a number of issues that may be relevant. The accessibility of the co-design groups may have been an issue for some people and attendance may have been harder for people who worked full time, had childcare arrangements or transport difficulties. The illnesses that people were dealing with also had a major impact on people’s ability to take part in the project:

‘I find very difficult for me to go anywhere on my own. I have to have somebody to go with me every time … I have to have a cab to take me to go and pick me up…. So this is where I lose out on a lot of the meetings, I’d have loved to have gone to some of them [co-design group meetings] actually’ (Service user interview).

Whilst the film and initial events were built around people’s experiences and emotional ‘touch points’, when it came to the co-design groups, the format followed an official business meeting with agendas and action points. This called for careful articulation of patients own views within a more professionalised context.
‘When you are in a meeting you are hoping to achieve something and you have got a time restraint you can’t afford to let people go off and talk about their own experiences. They have got nothing to do with, you have got to pull them back in’ (Service user).

‘I can think of a couple of meetings where it was a distraction where people really wanted to talk about their particular situation’ (Staff).

There is a degree to which patients needed to know and be comfortable with the rules of the game within these meetings. Both patients and staff reflected on the fact that the majority of patients who were co-design group participants were:

‘Quite vocal and quite eloquent and well educated and able to articulate their need’ (Staff).

‘I think if you were shy and retiring there was no way that you would do something like this’ (Service user).

‘I think we had the benefit of having women in high ranking positions, very vocal, very able to present themselves and very coherent’ (Staff).

Service users who took part in ongoing co-design groups often had considerable professional skills and experiences. Such findings associate with Bourdieu’s notions of habitus, cultural and social capital and suggests that certain structural and cultural positions of patients enabled them to participate more fully within the project.

5.3.4 Outcomes

The co-design groups were sometimes very successful in implementing changes at a service delivery and design level, but less so at wider strategic and systemic levels. There were many specific outcomes of the co-design groups, many of them instigated as a result of issues and problems that patients had highlighted within the patient film and subsequent ongoing discussions between patients and staff. These changes supported greater dignity and respect for patients, and there were many clear examples of where improvements would have an impact on the lived experiences of current patients going through the
service. Aspects of the hospital environment changed to support greater privacy, protocols and processes were improved, patient information was reviewed and improved, communication and administrative systems were developed. Problems and issues that had been previously distressing for patients were reviewed and significant steps were taken to address these concerns. Some staff groups received better training and communications improved between different staff groups across different disciplines and departments. Some of the changes were instigated within areas of strategic importance, linking in with other ongoing work within the Trusts. In other circumstances specific issues about services were tackled with quite localised activities where slight changes in the service interface could mean a significant difference in the experiences of service users. The impact was not just contained to these specific service improvements, staff themselves were keen to continue and develop the work that had been started. When the co-design groups were coming to a completion some staff questioned whether they could carry on with the work:

‘People have gone, “hang on, is this coming to an end?” started getting a little bit nervous “can we not carry on”. Which is brilliant, that like, never happens in change, that people are saying “no, please don’t go, let’s carry on”. Normally people are just like “if we keep quiet they will go away”…. I don’t quite know what this is going to mean. But it is just brilliant that it has had that kind of impact’ (Staff).

Analysing cultural changes, several people felt that both communication and team working had been improved through the process of the project:

‘I think the culture of the team overall is better, I think that there is a broader understanding of what people do. I think there is probably more openness in the team about talking about things, I think there is probably less pointing of fingers and maybe more of a jointness of this is our problem rather than it’s your problem. There is definitely more thought about impact of problems on patients’ (Staff).

‘On this project, there seemed to be a closeness between the admin staff and the surgeons that there wasn’t before. So I think that staff felt more comfortable to talk to the doctors, and say where there is a problem’ (Staff).
Some professional disciplines felt that they were much more highly valued through the team and there had been a real positive change in their status, these clinical staff having been highly praised by patients within the film. Staff in the improvement team reflected on how the project had made them realise how easy it was to involve patients in their work. This changed their own actions where they instigated new patient involvement projects and groups which then generated a sense of a wider cultural value of involving patients:

‘It seems to be part of the local culture to do that which I think is really important’
(Staff).

To summarise this section, three key contextual factors were seen to have an influence on the EBCD project within the NHS. These were resources, time, and strategic direction and the focus of existing work. The project brought together staff and patients through a specific methodology and process which enabled a clear comparison between different groups. The importance of staff engagement and service user involvement has been explored before detailing various outcomes achieved. Having explored some of the contextual factors, causal configurations and outcomes of the health service case, a similar analysis is conducted of the local government case before summarising findings and drawing conclusions from this chapter.

5.4 Local government contexts, mechanisms and outcomes

This section follows the same analytic structure, focussing upon the contexts, mechanisms and outcomes of the local government case.

5.4.1 Contextual factors

Similar contextual themes from the health service case are explored here. Several people mentioned the issue of resources in constraining the degree to which the Co-Production Programme could have a greater impact:

‘They’re such a small team delivering the amount of projects that they are trying to do … they are always under capacity and overstretched and that obviously limits, to a certain extent what they can do’ (Local government interview).
‘I wasn’t appreciative or aware of just the lack of resource, i.e. budget and lack of manpower, that [the Co-production Programme] doesn’t have at the moment so I very much see [it] as being still very aspirational … we’re at the very beginning of the journey’ (Local government interview).

The financially constrained environment that developed in local government over the period of this study had an impact on other aspects of the programmes ways of working. ‘Time to think’ and create space away from everyday demands was an important aspect of the programme’s work, however in a pressurised service delivery setting that was focussing on efficiencies and cost savings this emphasis was hard to maintain:

‘It so difficult to give the space and take that person out of their front line job because the demand is enormous and I think that this is going to be a problem … when we try and persuade that manager of that front line, of that Youth Offending Team, “oh please can you release the social worker or the police man, health officer for half a day to come and do a workshop to reflect on what the service can do better” they’ll be like, “no, they’re too busy”’ (Local government interview).

‘I think maybe time’s the biggest barrier, people find it so hard to have time to do everything in their day job….let alone trying to do…I know this kind of stuff should be part of their day job, but I think it’s quite hard’ (Local government interview).

In terms of strategic direction there were slightly different processes in operation between the two case studies. Some of the local government projects were directly influenced by particular strategic policies that the organisation was focussing upon, such as the ex-offenders project which was developed in conjunction with a much wider strategic policy review. In contrast to this, the Community Shop arose from engagement with local residents, and it was through their ideas and perspectives that the project developed, the Co-production Programme illustrating how this work then linked with particular national policies. Thus there was dynamism in the extent to which projects developed around the ideas and interests of citizens in conjunction with wider policy directives or were initially focussed upon as areas of strategic importance and then engagement with citizens occurred.
'It is that cross over point between what's coming politically, legislatively... and what is coming up locally... something needs to occupy the space in between, because neither completely top down nor completely bottom up makes any sort of sense in the normal world’ (Local government interview).

5.4.2 Mechanisms and casual configurations

Whilst the EBCD project in the health service case brought together staff and patients through a specific methodology and process, the Co-production Programme adapted its approach for each of the projects that it instigated and developed, using different participation techniques and methods according to context. The elements of staff engagement and service user involvement are here examined.

Staff engagement

The Co-production Programme itself consisted of three (with at one point four) members of staff who formed the team. Many interviewees remarked on how the team were very committed and ‘passionate’ about their work:

‘I think that the people who work in the core team are extraordinarily energetic about what they are doing’ (Local government interview).

The programme itself had an explicit strategy that they would work with people who were enthusiastic and interested in their ways of working, referring to this approach as a ‘coalition of the willing’. They took advantage of opportunities in a serendipitous fashion, working with the energy and interest of people. Because the programme was a small resource this opportunistic approach built on people’s existing values and approaches to their work:

‘I’m a believer in change of the sort having to be led from where people are at and you can’t impose it. You have to just find the people who are most open to it and work with them and hope that it builds from them’ (Local government interview).
They built networks with others who shared their values, developing these relationships through workshops and specific projects that began to build their reputation through the organisation. This was seen as a key way to disseminate their approaches:

‘[They] do seem to me to have been very good at finding people that we haven’t found before, really, that somehow have a lot to say, a lot to offer. And I don’t know how they have done that, but it has worked well. I have spoken to people about [the Co-production Programme] and they have said, “oh I went to that meeting” and I have thought “great, that’s brilliant that you were there, but how did that happen? Did you find them, did they find you?”’ (Local government interview).

In the early development of the project work it tended to have greater success at instigating changes outside of existing West Council services, working with different organisations which often generated new inter-organisational links. There seemed to be some difficulties in engaging internal service delivery staff and findings suggest that internal organisational change may have been considerably harder and taken longer to achieve than small project based work that could occur either in conjunction with other organisations or could develop independently:

‘There is a risk of course, that they will leave all their colleagues in the public sector behind. Because this group of very competent people as they are, they can move ahead but what about the rest of the people who are back at [the office at West Council]. How will they ever get to know what they are doing?’ (Local government interview).

Where staff did not see the value of their techniques this could be a substantial barrier. The values and perspectives of staff seemed to be important in the degree to which they appreciated and adopted more collaborative ways of working:

‘I think that it was to do with relationships. At the beginning, it was “you’re not coming into our team and taking over”, that was what a lot of it was right at the beginning’ (Local government interview).
‘... they are too, “this is my job” and “I do this and you don’t”’ (Local government interview).

Where messages were difficult to implement within existing services and systems this seemed to limit impact, the ex-offenders project experiencing difficulties in attempting to tackle cross-cutting issues over a number of different departments and organisations. Whilst the purpose of the Co-production Programme was to cut across these different sections of the organisation, this was sometimes hard to achieve:

‘We are such a vast organisation, that you will hit some people that work in a very command and control way and they won’t work in a different way unless it is approved by their manager and gone to their senior management team. You are always going to have a mixture of both in an organisation this size’ (Local government interview).

**Citizen involvement**

Whilst the EBCD project recruited a number of service users at the beginning of the project and relied upon their continuing involvement through the process, the local government case involved different people in their work through diverse methods according to the focus of specific projects. Unlike the EBCD co-design groups, the Co-production Programme did not always involve staff and service users together. Dependent upon the context and the subject matter of specific work, staff and service users were sometimes involved at different times.

‘With the families work we actually decided not to involve users and providers in the same groups … actually when we thought about what would be appropriate and what would give us the most powerful insights, it was very clear that that wasn’t the way to do it because actually one of the things that we had a sense of was that these families would not talk as honestly or openly if there were representatives of the state there…. We were very clear that in doing that we then had to find ways of involving staff further on in the process’ (Local government interview).

Within the ex-offenders project, people who had been in prison were involved through initial ethnographic research to share their experiences of leaving prison and the process of
resettlement. Whilst their experiences and stories were present at the first multi-agency workshop which discussed this ethnographic research, they themselves were not. Further workshops that were held several months later however did include serving and ex-offenders to build the work further, although it is not clear to what extent they were part of any decision making process.

In the EBCD project it tended to be service users who had a greater degree of confidence and social capital that participated in the ongoing co-design meetings where decisions were made about service developments. In contrast to this the Co-production Programme adapted their processes of involvement to ensure that different people felt comfortable in participating in the projects on their own terms. A staff participant described a typical meeting of the Community Shop:

‘The meetings aren’t minuted, there is no agenda, people are having cups of tea and toast, children are pulling chairs and climbing and falling off things. People come, people go. Somebody is sent off to do something on the computer, comes back with this, and if they shout loud enough they can get heard. And then there are little conversations going on and it is one corner of the café, it is just a chaotic melee of things and that is how it works. And if you want to go for a cigarette and make a contact then that is fine, I like things better that way and it seems to work for them. People can turn up when they’re ready, they don’t have to be there at 9 o’clock. It’s not formalised, they don’t do all the proper things you would do but they somehow do know where they are up to and they do know what they want to do next and people go away with tasks that will help the next time and they do them and it works’ (Local government interview).

Similarly with the Fathers’ project it had been very important to create a welcoming and comfortable environment. Whilst the EBCD project encouraged users to share their own experiences of cancer services on film, the local government case took a less personalised approach to sharing experiences. The use of personas, fictitious characters that represented different groups of people and their particular needs, strengths and ambitions, were used to enable people to identify with and share different aspects of themselves:
‘Personas, I like, I like these, this is another one that we used in the dad’s [project] which was really useful for the dad’s because some of them were quite, they didn’t want to say a lot about themselves, they were quite shy especially in front of the other dad’s…. They didn’t have to sit there in front of everybody and say “well, I’m like this or I’m like that”’ (Participant 1, Local government focus group)

‘Yes, it depersonalises it doesn’t it …’ (Participant 2)

‘Yes, it’s like “that’s my mate”, to be honest, one of the dad’s actually went, “that is exactly my friend”. You could steer the conversation around to, “well ok how could we help that person”’ (Participant, 1)

Despite the fact that different involvement techniques were used within the NHS and local government projects the main aim of both projects was to create a space for different participants to come together to share perspectives, facilitating a sense of collective reflexivity and intersubjectivity. This key mechanism is explored in depth within chapter 6.

5.4.3 Outcomes

Within West Council some of the projects fed into and informed specific organisational policies and strategies on poverty, children and families, housing and the ‘Big Society’. Here service users did not have specific decision making power, rather their experiences and views fed into the organisational process of policy development. As well as these specific influences on particular policies, the project had the goal of integrating its work within the corporate policy team, linking citizen and staff insights into policy. This integration with the policy team took time and tenacity and whilst individuals in the policy unit worked with the co-production team on specific projects, it was not fully integrated within the team. However over the four years of the lifetime of the project development this began to change:

‘I think before, community engagement was kind of, “oh let’s chuck a survey out at the end of when we have got a policy document” and that’s about it. And what [the Co-production Programme] has been about is some fresh thinking and fresh ideas and approaches’ (Local government interview).
‘What has it changed? I think that to the extent to which we have cross cutting policy debates informed by some of the same principles that [the Co-production Programme] works to, are partly to do with [the project] and partly to do with the very energy that created [the project]’ (Local government interview).

Whilst within the health service case a series of specific service improvements were implemented, these were more difficult to discern within the local government case. Some of local government projects had created an array of different suggestions for service improvements but it was not always possible to follow these up and ascertain what had been implemented as a result of the work.

‘I guess people will always ask what has it actually done? What has it produced? And when you’re helping people to approach things differently as opposed to having a product that is all your own, that’s often quite difficult to be recognised’ (Local government interview).

‘It happens at a more local or individual level … it is more of a spider web of how then people take it forward through their own networks rather than it being the more formal structures traditionally within West Council…. The route has been more about people who are touched by and involved in it, then take it back to their everyday work…. It’s more about individuals and people who have been involved in it, putting it forward themselves. It’s more like a movement’ (Local government interview).

Whilst the Co-production Programme had clearly been successful in the range of projects that it had developed, some interviewees questioned the extent to which it could initiate wider changes, suggesting that current outcomes were ‘very small scale’ with ‘issues around sustainability’. There was also a question over ‘how much you can achieve with very limited resources, people, time, budget’ (Local government interview).

‘Fundamentally, of course, it’s such a tiny resource…. I see it more as a catalyst, because with such a tiny resource you can’t do more than just catalyse’ (Local government interview)
'I think its importance is probably about the way of doing things rather than any individual result' (Local government interview).

This small scale, incremental change was also seen as part of wider capacity building, where many small actions made a wider difference over time.

5.5 Conclusion

This chapter has introduced and developed the analysis of both case studies in terms of exploring their organisational contexts, mechanisms of the collaboration process and some of the outcomes achieved. Similarities between the local government and health service case can be pulled out in terms of key mechanisms. Both processes used people’s experiences and everyday insights to draw together different stakeholders within spaces that gave people time to reflect and consider diverse perspectives. Both the health service and local government project brought together people from different departments and sometimes from other organisations to consider shared issues. Levels of staff engagement in the process were very important within both cases alongside the sponsorship and advocacy of the projects by senior figures and managers within the organisations. Key elements of the collaborative process have been analytically separated to examine the different aspects of staff engagement and service user involvement. Contextual factors that supported the collaborative process included sufficient time and resource to dedicate to the process following Bate’s (2004) and Bason’s (2010) advocacy of ‘havens’ and space for such collaborative work. Additional funding to support the development of the project was also present within both cases. The contextual factors of resources, space and time were important in facilitating collaborative work. Where the collaborative projects worked on key issues that were of interest and significant to different stakeholders and fitted within strategic directions, this supported engagement and impetus to develop collaborative work.

Having delineated some of the key factors that needed to be present within collaborative processes within this chapter, the next data analysis chapter takes a deeper dive into the workings and mechanisms of collaborative processes. It explores the processes and mechanisms that enabled these different stakeholder groups to come together and share perspectives, then work together toward common concerns.
CHAPTER 6

The mechanisms of collaboration

6.1 Introduction

This chapter explores the processes and underlying mechanisms of both the local government and the NHS case to understand how the projects brought together different staff and service users and enabled changes to be made to public service institutions. The case study data is enhanced here by material from the series of expert interviews that were carried out. These expert interviews illustrate how these same mechanisms operated through a number of different cases, providing further empirical support for the thesis. This chapter explores how staff and service users came together to share perspectives and understanding, creating new emergent properties through their social interaction. After having analysed the underlying mechanisms of this collaboration, identified as collective reflexivity and intersubjectivity, the chapter then explores the impact of the structural positions of service users and staff within the collaborative process. In this way the chapter uses analytic dualism (Archer, 1995) to separately analyse social interaction between different agents, then explores the impact of institutional roles and resources upon this process. By treating structure and agency as analytically distinct but interacting, this avoids conflating people with the structural and institutional roles that they may occupy. In this way the analysis illustrates how whilst facilitators of the social interaction between staff and service users strove toward creating a communicative space that was equal, once agents’ social and structural positions are taking into account, there were clear structural inequalities that impacted this process.

Section 6.2 of the chapter explores the processes of the projects, Section 6.2.1 illustrating how the use of emotion and narrative within participatory processes was an important element of how these projects operated. Emotions and narratives were often used to catalyse a sense of recognition and empathy with different service users, so that practitioners and managers within services could understand the impact of their services from different standpoints. It is illustrated how in this way, the projects went beyond aspects of deliberative democracy, enabling the expressions of emotions and empathy
rather than relying solely upon rational dialogue. The facilitation of dialogic spaces with staff and service users is then examined (Section 6.2.2), illustrating attempts to ‘bracket’ power relations between different participants, who could be service users, front line staff, managers, senior practitioners or policy managers. Section 6.2.3 details how these dialogic processes aimed to reach a consensus between different stakeholders, and the dynamics of collaboration and critique within these processes are explored within Section 6.2.4. Section 6.3 analyses the underlying mechanisms that occurred within these processes, illustrating how service users and staff came together in collective, reflective spaces (Section 6.3.1) which fostered a sense of intersubjectivity (Section 6.3.2) and new relational practices between staff and service users (Section 6.3.3). It illustrates how the process fostered new relationships that could take people outside of their institutional role, interacting through a more personal than professional identity, Section 6.3.4 exploring the implications of this for professional roles. Section 6.4 explores the idea of whether ‘equal’ relationships can actually be facilitated between service users and staff within an institutional context. Section 6.4.1 explores the participative relationships between service users and staff, whilst Section 6.4.2 explores the power relationships between front line staff and managers. It is found that whilst these projects could alter the relationships between staff and service users which could support changes to institutional practices, the structural power relations between service users, staff and managers remained unchallenged and unchanged.

6.2 Project processes

This section explores the different methodologies that the projects used to bring together the diverse experiences and perspectives of staff and service users, illustrating how they had similar underlying mechanisms. Reflection upon everyday experiences and narratives alongside the sharing of diverse perspectives within dialogic spaces were common themes which are explored in depth. This section also begins to examine the impact of institutional context on these processes, discussing the levels of safety and honesty that could be achieved through the process and how the dialogic forums attempted to facilitate a focus on shared interests.

6.2.1 The use of emotion and narratives

When involving citizens and service users in their processes both cases usually built from an initial base of ethnographic research, collecting narratives, filming service users’ stories,
observation and other forms of qualitative data collection. It was seen by expert interviewees that this way of gathering data was sometimes antithetical to established modes of data collection within organisations:

‘Local government is very poor at mobilising research … particularly in the qualitative side of things it has historically been massively undervalued by local government so evidence has been defined quite narrowly… any information or insight coming from front line staff or from users is anecdote, that is the kind of culture that you operate in’ (Local government expert interview, 04).

‘There is this difference between what the Primary Care Trust recognises about the world which is data driven and what everybody else talks about in everyday life which is not data driven, it’s much more driven by anxiety or desire, it’s much more emotional’ (Health expert interview, 02).

These ethnographic approaches provided rich in-depth insights into everyday practices, experiences and the diverse perspectives of staff and citizens. Both the NHS case and the local government project used ‘touch points’ to highlight moments in services that had a particular impact on service users’ lived experiences. Particularly in the NHS the use of these touch points could help to facilitate emotional connections between service users and staff, catalysing further action to change services.

‘Empathy has a half life I’ve discovered this, one of the things that really works is allowing clinicians to empathise, they do empathise, they are in it for the right reasons, most of them. But they lose the desire to empathise because of the stresses of the job. And I think sometimes what you have to do is create situations in which they can refresh that empathy’ (Health expert interview, 02).

Within the EBCD process in health services the patient experience films that were developed often induced strong feelings from staff, and building these emotional dynamics was seen as a key mechanism of change:
‘When I have seen a key ‘aha’ moment is when people hear the stories… particularly if people have got film, that has been the biggest kind of turning the light bulb on for people. They see the film and they say ‘oh my goodness, that’s a patient from my organisation’, they often recognise the patient, the patient being under their care, that makes a difference. Hearing and seeing them talking about their experiences, I have watched a number of people hearing stuff for the first time and they just sit and their heads are shaking and they are going ‘oh, how could it be like that’. They also recognise what the patients are saying’. (Health expert interview, 03).

‘I think that [the films] were very powerful actually, I thought they were very good. Definitely one of the best parts I would say of the project’ (NHS case, Staff).

The patient narrative film could make the emotional impact of everyday professional occurrences stark and vivid:

‘If you couldn’t win someone round, you would say to them, “please watch this”. And then they came back and they were like, “oh my god, that is so powerful”’ (NHS case, Staff).

These films can be seen as a counter hegemonic process that challenged the dominance of a medical, transactional approach within services. The emotional power of these films could disrupt habitual routines and everyday practices and make staff reflect on the impact of their actions.

‘For the staff, it’s shocking, it’s like, we’re hoping that we have done a really good job and you hear that in some places we are getting it hopelessly wrong. That’s just gutting’ (NHS case, Staff).

The film enabled people’s very personal and tacit experiences to be made visible through the whole of the organisation.

‘To see the managers reactions was interesting and they were horrified and they definitely wanted to do something about this, like action it, straight away, like “this
can’t be happening, this has to change. People can’t be feeling like that” … I go to my boss and go like, “listen, this is what I am hearing from patients” but then, it is not evidenced enough. But then if they see this video, then it is like, “oh my god, this is happening”, and I am thinking “yes, we have been telling you this for years, or months”’ (NHS case, Staff).

The film thus gave a power to patients’ experiences and enabled them to highlight the previously less visible impact of staff practices, routines and attitudes. Within the case it was seen that it was also important not to use this process as a disciplinary mechanism but was worked on as a collective project for staff together to develop systems and procedures.

‘Some staff have found it very challenging. I think staff find it very hard to hear they are delivering services badly and I think you have to think about the support in that, because it will never be an individual’s fault, it will be some organisational complexity’ (NHS case, Staff).

The local government case used a variety of tools and techniques to illustrate people’s experiences. The projects that were developed with low income families and ex-prisoners both used life stories and shared people’s everyday experiences in the forms of reports and presentations rather than films, preserving people’s anonymity.

‘I think where [the project] really broke through was with their [low income families] project which really delivered big policy thinking around a really difficult issue but in a very different way than had ever been approached before, real intensive ethnographic research. The way that they packaged it and presented it, it really gave those messages in a hard hitting, quite different way’ (Local government case, Staff).

The presentation of people’s experiences had an important impact with many staff commenting on the power of these stories and the ways in which it made them think differently about service users. A staff member commented on the life stories of people who had been in prison within the ex-offenders project:
‘They made it seem more real and it’s quite sad. I never thought that I would feel bad for an offender because I have always been of the view that maybe, they deserve that. But after seeing like how much bad services can really impact them, they could have been rehabilitated but maybe a service wasn’t working well for them … I think maybe that made a lot of people maybe think how I did’ (Local government case, Staff).

Joint activities were another way that the local government case enabled different participants to come together. Within the Father’s project, the project organised another evening for fathers to become involved in cooking a curry for everyone, where everybody collectively worked together. Rather than directly using empathy and emotional responses, joint activity was used in different projects as a way to facilitate different people to come together. By working alongside people in informal activities this could support conversations and engagement:

‘[I]t is all about talking with people while they are doing activity whether it is cooking or dog walking or aerobics and finding out the real story on the ground, about what’s really happening’ (Local government, focus group).

‘[W]e use activity to bring different people from different perspectives together in a neutral space. You have to go through that before you can expect them to work together because otherwise you’ve got too much baggage and they are making too many assumptions…. There has to be that familiarisation process and I think, whether it’s a resident or whether it’s a front line worker, I think it’s anyone, any people, you have to give them the opportunity, you have to give them the icebreaker, and activity is an ice breaker’ (Local government interview).

The local government co-production programme also used participatory filming methods to bridge intergenerational divides within the community cohesion project and participatory film was also being used to document the development of the community shop. The community members themselves had the means to portray what they saw as important to share with others and had the power and control of the development of the film. Within the health case a researcher from South University both filmed patients individually and edited their responses. The researcher was autonomous of the organisations and was highly skilled
in ethnographic research, this stance enabling a sense of independence from the service. Here it was the researcher’s decision about which aspects of the patients’ films were edited into the final version. However whether such a powerful film would have been made through a more participatory technique is questionable. Some patients themselves had felt the film was ‘too negative’, even though the independent researcher had maintained a careful balance of positive and negative stories. Patients may have felt less inclined to critique the services that they had been so dependent upon, yet the purpose of the projects was also to highlight specific issues that could be the focus of future service improvements.

6.2.2 The facilitation of dialogic spaces

Understanding staff and service users’ experiences provided the groundwork from which both the local government project and the health service case began. From this base the common next step was to share these stories and narratives with different groups of people, bringing together diverse perspectives and experiences. In bringing different stakeholders together they shared some similar facilitation techniques to manage dialogic forums and some of these are analysed here.

To begin the forums, facilitators from both cases highlighted the importance of informality, using people’s first names rather than highlighting their job descriptions or titles:

‘You know when you go into a room and everybody says “oh hi, I’m so and so and my job title is ….” Well actually, we don’t do that. My name is … and that is it, because everybody is equal’ (Local government interview).

Other techniques included ice breakers which both cases used to attempt to level out different hierarchical relationships, making sure that everybody was ‘committed to being there and is actually brought to the same level’ (Local government, Focus group):

‘You do have to work quite hard at getting people to understand the things that they have in common. So some of that is perhaps using a bit of a really cheesy icebreaker which means that people are talking about something completely different from anything to do with hierarchy’ (NHS case, Staff interview).
‘I think ice breakers are really good in getting people to open up more about themselves rather than their job title and that is the whole point within a workshop, our workshops, to get people away from seeing themselves as their job title…. I really liked the one where we [asked people about] your best holiday, your best present, and there was this one woman who looked really scary, like she didn’t want to be there at all, and she actually gave this sweet story about this book that her daughter had made for her and it made her cry. And you just didn’t think that that would have come out of her…’ (Local government, Focus group).

The actual facilitation of these dialogic forums where different people came together was seen as very important, encouraging everyone to speak and have equal room:

‘The facilitator is absolutely crucial’ (Local government staff)

‘Certainly the patients and carers who were involved, if they are not going to have a chance to say anything and they don’t feel that they have contributed in any way they are not going to stay involved with the group, they will just leg it’ (NHS Case, Staff)

‘Giving each equal room to tell their story … not giving the staff more time than the patients or the patients more time than the staff, keeping that 50:50 ness about things is really important. Helping staff not to take over, is really important because they will tend to because that is the sort of position that they are in…. Getting rid of any of the trappings of hierarchy really, stethoscopes and uniforms and stuff all helps’ (Health expert interview, 07)

Deliberative democratic principles were used within these forums, ‘creating a space where actually everyone around the table is treated with parity where you have dissolved some of the hierarchies and divides that exist’, (Local government expert interview, 04). Where these groups seemed to work well, facilitators ensured that everybody felt able to contribute to discussions:

‘Everybody felt able to voice their own opinions and to be honest and open, with whoever else was involved.’ (NHS case, Staff)
‘I think having somebody professional chairing these meetings is very important because then it stops one person dominating hopefully’ (NHS Case, Patient).

However although different techniques were used to limit the impact of hierarchical relations, these still had an important influence on group dynamics:

‘You do things that make sure the patients have the same level of hierarchy, the same status as members of staff, which actually, patients really defer to doctors … particularly in those [co-design] events I think’ (NHS case, Staff).

‘I can see adults working with young people that really believe in empowerment and really believe in creating the conditions in which they can lead and yet they are constantly finishing their sentences and helping them to produce the answer…. People will slip into natural roles and natural positions in relationships’ (Local government and education expert interview, 05)

Within the local government Co-production Programme there was a conscious decision to facilitate workshops and events themselves rather than service or policy managers facilitating events. They saw that their independence from any service supported a more balanced facilitative process that helped to alleviate some of the different power dynamics that may have been present between different staff within workshops.

‘Neutral facilitation, I think is really important because it gives that legitimacy … And it also takes out any sort of hierarchy as well, if [the programme] are trying to facilitate it and run the workshop from a senior manager running it, you are going to get a very different type of atmosphere’ (Local government, staff).

Their approach to workshops was flexible and adaptable, ensuring that the participants led the agenda:

‘[They are] very good at that independent neutral role, but it is also about the way that they ask those open ended, searching questions, their prompting and guiding of the
discussion, in quite a clever way but not in a manipulative way and not in a micro-managing… They let the discussion evolve quite freely but they are also guiding and supporting it as well. So they are steering people towards outcomes but not in a way that makes people feel constrained or over-analysed or over-managed’ (Local government, staff).

The local government case worked with both service users and staff, however they did not always involve staff and citizens within the same process at the same time. At some events they worked with staff teams, at others with multi-agency staff, and at others with groups of local citizens or combinations of service users and staff depending upon the context and the content of the project. Creating a safe space was attempted in a number of different ways and it was not always considered most appropriate to involve both citizens and staff within the same discursive space or ask citizens to share personal and sensitive issues within the projects:

‘I think they are very personal stories and what we’ve tended to use since when we have involved individuals is like, with the Father’s project particularly … we wanted people to feel that they could contribute … we used the concept of the personas, and that was a way that people could engage without feeling, “well I’m not going to tell you what happened to me. But actually I can talk to you about what happened to me by talking about this persona that you have put on the wall”’ (Local government case, staff)

A variety of creative techniques were used to enable people to think about potential solutions to issues they explored:

‘Using visual is absolutely everything we do … actually pictures, visuals, can reach people, can reach everyone…. You don’t need to read a report or anything, you can just see the point’ (Local government, focus group).

‘I think that the one thing that [they] always do is listen and then translate what they hear into something that can be written down or drawn. A lot of drawings get done. Putting crosses on maps and so on. So I think it is something very visual and visible that’s been important’ (Local government, staff).
Visualisation and modelling were used as methods to facilitate and capture people’s ideas. These different tools and techniques then helped to generate discussion and the free flow of ideas in order to create plans of action:

“It’s the transition from the intellectualising and the analysing and the postulating. To go from that to delivering practical results. In my experience it’s unique at being able to do that. You go to a lot of sessions with people who want to pull things apart and analyse what’s going on, but you don’t usually find that as a result of that, that things happen and that’s been remarkable to me. The fact that there’s a long term interest in what you’re talking about. It’s not just “come and get off your chest the issues around kids and families etc.” It’s “go and get it off your chest, so we can then help you to decide how to move forward”, very, very positive and constructive’ (Local government case, staff).

6.2.3 Building toward common goods

The aims of the EBCD process and the local government projects were to develop collaborative working relations between different stakeholders who all contributed to particular organisational services. Similar techniques were spoken of within the expert interviews:

‘There is a series of iterative circles, cycles of events, that you need to go through in order to build consensus and motivation and also so that you can draw a community of people together who want to do this with you’ (Health expert interview, 02).

‘They are processes which allow people to find the places that they can occupy the same space at the same time’ (Local government and education expert interview, 05).

Within EBCD it can be seen through the various different stages that agreement on key service improvements was gradually built, first within separate stakeholder groups and then through collective discussion with both staff and patients together. Through this dialogic process the areas that all stakeholders viewed as important were developed and refined.
Whilst all the different stakeholders had various different concerns and interests that may or may not have overlapped, the methodology facilitated a funnelled process that separated out people’s differential interests and focussed on those that people could work together collectively on. The EBCD process had a specific methodology to achieve this, and the local government project, whilst using different techniques, operated the same underlying mechanisms:

‘It’s all about building consensus, and a participatory approach to working across agencies and disciplines and only by setting it up like that will you then get those findings that are not only interesting, but mean something to all of those people that are on board and something will happen with them as well. Because all those people are on board and they are going to make something happen with them’ (Local government, staff).

One member of staff spoke of how where there were differential interests or areas of potential conflict, these were separated out and left aside from the main focus of projects:

‘We don’t really want people to start arguing or moaning in the workshop, it’s kind of, you park the idea. Our new idea is having a wailing wall so if people do have specific moans at the beginning of the workshop they get them out and they leave them, they stick them on the wall and then they can go back to it later in their own time because we kind of want it to be a positive thing and I just think if people are bickering or something then it is going to bring the atmosphere of the workshop down. We don’t really want that…” (Local government, staff).

Through various techniques the projects teased out those areas where there was a collective interest and consensus for specific changes and developments, building toward common goods.

The extent to which participants were influential in decision making varied and seemed to depend both upon the people who facilitated the participative processes and the context within which the projects were situated. Expert interviewees spoke in different ways about the extent to which participants had control of the collaborative process with some seeing
that boundaries around expectations needed to be clear, whilst others saw the importance yet subsequent dilemmas in ‘handing over’ control:

‘If you hand over the controls to a community, it’s out of your hands a bit. The solution to the problem may also not be something that means much to you, it may not even be something that the regular organs of the NHS, i.e. doctors, nurses, consultants, health visitors, it may not have anything to do with them. It may be a life coach or somebody who understands businesses, a social entrepreneur or something like that. So just as you don’t know what the problem is going to be you don’t actually know what the solution’s going to be, it may be outside of your remit.’ (Health expert interview, 02).

Staff institutional roles meant they had some power and resource to facilitate the extent to which service users were influential within the collaborative processes. Within the Community Shop, community participants had control of its development. One staff member reflected on how this practice was unusual:

‘[They] have stepped back, which I wouldn’t have done…. My natural inclination would be to hold their hand all the way through and not direct them but lead them in the way we wanted it to go…. I just would have panicked if it was my project, to hand it over’ (Local government staff)

Ceding control of the process to participants was also dependent upon the context of collaborative processes. Such participant control was less present within the ex-offenders project where institutional strategy and policy was being debated and the aim was to ultimately reduce reoffending. Expert and specialist knowledge also played a fundamental role in the degree to which participants may have had control over decisions in particular areas, especially aspects of cancer treatment. One service user participant commented on how within cancer treatment they did not feel such a strong need to work in an equal relationship with practitioners, here expert and specialist knowledge played an essential role in service quality.
### 6.2.4 Collaboration and critique

Whilst collaborative processes attempted to build towards understanding of common issues and consensus upon specific action, within these communicative spaces there were also often examples of where there was disagreement and critique. Within the NHS case there were many examples of patients’ experiences that were strongly critical of current practices, yet patients were also concerned to highlight the positive aspects of their experiences, including an introduction to the patient experience film that highlighted the good care and support they had received, explaining that problematic issues were usually as a result of systemic problems. It was also seen that a sense of gratitude toward professionals could actually help to oil and ease more potentially difficult situations where there were more critical views from patients:

> ‘If the atmosphere is right, you are creating the group in the right way, it is not punitive. Even when you are hearing things that you don’t want to hear, it doesn’t appear to be punitive, it appears just to be fact. And it helps enormously because it is usually dovetailed with the fact, “but everything else was absolutely brilliant because I couldn’t have got through that without these people”. So it is balanced and it is not personal’ (NHS Case, Staff).

Facilitating this balance of collaboration and critique was a skilful art and in some co-design groups this seemed to have been achieved:

> ‘There has to be a level of trust in that room because you are talking about things that are potentially uncomfortable and there was trust in that room to be very honest about the realities of the situation’ (NHS Case, Staff).

Some staff valued the input of service users, especially where it was more challenging:

> ‘Without this group we would have probably struggled to find patients who probably felt as passionately about it … who weren’t afraid to say, “do you know what, I think that you are wrong”’ (NHS case, Staff).
Within the local government project it was seen that at times ‘safe spaces’ were best facilitated where service users and service providers discussed issues within different forums rather than the same meeting space. One co-ordinator spoke of the importance of ‘acting as a bridge’ between different groups:

‘I think what we are trying to do … is try and capture the evidence and insights from the two sides and then it is about being able to act as a bridge to share some of those messages back so for example, in the [Community Cohesion] project, the insights that [were] captured from the residents were actually quite difficult messages to take back to the people who were seen as in charge. So what we needed to do was provide a safe space or a vehicle for them to communicate those messages back’ (Local government case, Staff)

In this way the facilitator’s role was one of ‘mediation’:

‘Are there arguments? Yeah, hundreds of arguments and I think that’s fantastic that it’s done in such a way that your views are respected and appreciated… and challenged, to a degree…. It’s been very, very constructive (Local government case, Staff).

The role of the facilitator could be crucial to ensure an open and honest approach. However where there was less staff engagement with the process, one participant found there was little space to discuss issues:

‘By the end I was worried that they just thought I was this critical person…. So from my perspective, there was nothing good at all, I was really worried about blotting my copy book and being seen as a difficult person’ (NHS case, service user).

Deliberative democracy can idealise the possibility of dialogic spaces where free and equal citizens exchange views. Some findings of this research mirror critiques of deliberative democracy in its efforts to ‘bracket’ power relations:

‘I guess that I don’t think that we have fully squared off the power base stuff and I would love us to do a bit more of that. But that takes time, but it also takes a lot of trust,
and it also takes a lot of openness and I think that we need to do more of that, but it is finding that safe place to do it’ (NHS case staff).

‘The frustration that I have with co-design processes... everyone’s equal and everyone’s got equal insights... they sometimes lose their grip on reality, the realities of budgets or of politics, co-design is very naïve sometimes.... it still doesn’t take account of the politics of it’, (Local government, expert interview 04).

In addition to this the importance of trust, social norms, politeness and etiquette may impact the extent to which challenge and critique occurs.

‘People are so polite as well... they don’t want to say things that appear rude’ (NHS case, service user).

Such issues suggest that collaborative participative relations may not always enable free, equal and critical dialogue between different participants.

6.3 Underlying mechanisms

Whilst the previous section illustrates the similarities and differences between the processes of the two cases, it is asserted here that the processes enabled the same mechanisms to occur within different contexts, exploring how they facilitated spaces for collective reflexivity and intersubjectivity between different participants. These processes enabled stronger relational connections between staff and service users, fostering new associations that went beyond traditional professional roles and service transactions.

6.3.1 Collective reflexivity

Within these project processes the routines of service interactions became a focus for collective reflexivity, providing a forum to contemplate everyday practices which could subsequently shift people’s habitual actions:

‘We got staff videoing themselves at work and there is a great video of them giving out meals, it’s chaotic... when they showed the video to people or themselves, they were like “this is bonkers. What are we doing?” ... So they then worked on what could we do to
make it better, they made improvements with the catering department and the after video is just completely different’ (Emphasis in original, Health expert interview, 03).

These collective spaces enabled time out of the demands of organisational routines to understand social actions from different perspectives:

‘It provides a time and an amount of space outside of the contractual relationship between service user and provider to understand, in a supportive way to question, to try and look over the top of, underneath of, around of and through, in a way that in day to day interactions people don’t have the time to do’ (Local government staff)

‘You really do get a different view, you are looking at things from a completely different angle’ (NHS case staff)

Where professionals could relate to and empathise with patients’ experiences these provided a centre of focus for different professional groups to come together and understand the impact that their work had both on patients themselves and the wider system. By focussing collectively on patients’ experiences this uncovered interdisciplinary issues that people were able to view from a wider systemic perspective, seeing everyday working problems from a broader standpoint:

We work individually with each patient, so if there is a problem with that, we would try and sort it out and then we will move onto the next patient. So rather than, what we did in that project was to look at the whole system together, we are just fire fighting individually (NHS case, Staff)

‘I think having the right people in the room, if you get a bunch of patients together and a bunch of staff together and you include the management team and the occupational therapy, that in itself can help to generate change because people can see that the solution is something that they can contribute to’ (Health expert interview, 07).

The interdisciplinary conversations that took place within these groups could enhance relationships between different teams and professional groups:
‘We now talk to the pre-assessments team because they have done the central pre-assessment so we talk to them, they talk to us. The surgeons, the consultants, they come and talk to us. If I have an issue, I am able to say, “look this is not working, can someone deal with it” and they do. So I think everybody now is, I think they are all interdependent, the whole group, so it works well…. So now we have all come together and we have changed everything and that works well’ (NHS case, Staff).

Within the local government project the processes were very similar, enabling professionals from different departments to come together to focus on shared concerns:

‘I am taking people out of their boxes and throwing them all together again so that they learn from each other. Which is really simple but you know, is quite a struggle’ (Local government, Staff).

These conversations enabled people to understand the different institutional contexts within which people worked and how wider systemic issues could impact people’s working relationships:

‘Lots of these services are working at cross purposes and they are assuming that someone else is working to make their lives difficult and in fact they are not. They are doing their, trying to do their real up most best to work well but actually, they can’t because of the way things are set up and you have got contradicting targets’ (Local government, Focus group).

‘Within our own directorate people were saying to me, “it was really interesting to have that conversation with somebody from that service because I never get to meet them” and when you create the conditions in which people have those conversations things take off don’t they’ (Local government, Staff).

Thus the processes enabled new links and networks across hierarchies and departmental silos.
6.3.2 Intersubjectivity

Both co-ordinators of the health service and local government cases saw that an important aspect of these processes was to begin to challenge people’s assumptions and preconceptions of different groups:

‘People start seeing each other in a slightly different way and they are not just, they have made loads of assumptions about who people are by their job title or their uniform or whatever but you have to challenge that in subtle and not so subtle ways’ (NHS case, Staff).

‘By setting up a workshop where you are going to have service providers and service users and not do any of that preparatory experience sharing and familiarisation, you are going to set yourself up for failure because the providers will make assumptions about the users and the users will make assumptions about the providers through experiences that they have all had’ (Local government case, Staff).

The perspectives and involvement of service users brought a significant change both in the social dynamics of professional groups and the ways that staff perceived routine action:

‘I think it is just very powerful to hear from patients, their own experiences…. It was often situations where they felt that people had been a bit abrupt with them or a bit short with them, that had really stuck in their mind…. And it sometimes takes something as powerful as that to make people realise that maybe on a very busy day, being short with somebody, you don’t even remember it but it can really sit in that person’s mind’ (NHS case, Staff).

*People will mention like, the chairs are really uncomfortable, they become really important to managers all of a sudden, when they have never really noticed the chairs, they walk past them every day for the last 20 years but they have never really thought, “hang on, do these look comfortable, would I want to sit in this for half an hour if I am waiting?”* (NHS case, Staff).
The collaborative processes began to bridge perceived differences between groups, providing spaces to explore shared interests and perspectives:

‘It has given me quite a good insight into how people on [the estate] live, these people I probably wouldn’t have talked to generally because I wear the [organisation’s] badge and a lot of it is seen as, not the enemy, but that it is them, not us’ (Local government, staff).

‘Giving people experiences of seeing the world through the shoes of users and actually also giving users a chance to understand the complexity and dynamics of things from a professional perspective’ (Local government, staff).

These examples provide an illustration of how these processes fostered a sense of recognition, where people came to empathise and understand each other and the different experiences that people had.

6.3.3 Relationships

The shared understandings that developed through these processes took participants out of the confines of their own organisational role, people interacting from the basis of their own personal rather than professional identity:

‘Well people come out of roles don’t they. You are not sitting there as a surgeon, you are not sitting there as a clinical nurse specialist or a modern matron or whatever else. You are sitting there as [Name, name, name, name] and you are having conversations with people but you are having real conversations with people. It is not a directive conversation, it is not an advisory conversation as it normally would be with a health care professional. It is a conversation between one human being and another. So it is very different, it is very powerful, very powerful’ (NHS case, staff).

I think actually seeing patients and staff talking to each other and staff talking to each other in what feels, a different way, because the patients are there, is really powerful …. You are just effectively creating an atmosphere in which people can have those conversations (NHS case, staff).
Similar processes were observed within the local government case where staff and community members worked together collaboratively over a longer period of time. Here their approach was personal rather than professionalised which was important in forming relationships and trust between staff and local residents, especially where residents had historically less trusting relationships with the council:

*Interviewer: What are the differences between [the Co-production Programme staff] and different people in the council who you have met previously?*

*Participant: ‘They’re human, they’re higher up than us, they have got more authority than what we have, but they don’t use that against us, laughter… they know people that know people that know people. I wouldn’t want to approach some of the people, they are just so… and so up their own backsides it’s unbelievable. These are human people. A lot of people will give [Area] people a label, they will come in looking at us, and think “oh god, you can’t do it” because you, you’re labelled…. I could sit around a table with some of the people that I have met through here and I could quite easily stick my fingers up at them because they think, they have got a high powered job and things and they look down at people, but none of these do. And half the people that we have met, don’t, so’ (Community participant, focus group).*

The relationships that developed went beyond professional transactions to a more personal and supportive approach.

*‘They have become our friends’ (Local government, community participant)*

These close working relationships between staff and citizens in turn led to more satisfying and rewarding work for staff:

*‘I can actually say for once in my life, in my job history, that I have made a difference, even if it is just for one person, I can see a change, I can see a change in [Name], I can see a change in [Name], I can see it … I think that I have never had that in a job before, so I know that we are doing good and I know what we do is good’ (Local government, staff).*
Similarly community members had developed strong bonds with the staff:

‘I think we will always have that connection anyway. I think we can help each other out in the near future anyway, or the distant future. I think they will definitely be always, because it’s not just a work relationship, it’s, we are kind of obsessed with the same things aren’t we’ (Community participant, focus group).

In many cases these relationships went beyond bureaucratised or professional borders, providing a different relational space within which people interacted:

‘A lot of staff get excited about working with patients or working with the public in a new way and it’s quite surprising, particularly for certain front line staff who deal with the public everyday, that they should get excited in that way because you think, you see patients everyday and so I think that it just motivates people to think, well actually I’m working on behalf of these patients here and they have that relationship with them’ (Health expert interview, 01).

A practitioner described how they had found the process to be very interesting as they had clinically treated some of the patients involved and had been able to specifically ask about different aspects of the procedures and discuss their experiences.

‘It was very interesting to get involved with that and I found it extremely helpful for what I was doing at the time, to be involved with it’ (NHS case, Staff).

The shared spaces enabled people to develop relationships and understandings of each others needs and perspectives outside of service transactional relationships. These elements are explored further in the following section, analysing the meaning of this relational work with respect to professional roles and institutional structures.

### 6.3.4 Implications for professional roles

As illustrated above, both the local government project and the health service case created spaces for the development of conversations and relationships that were outside of
everyday service transactions. Especially in the local government project, a more casual and informal approach that loosened traditional professional boundaries was appreciated and facilitated stronger working relationships:

‘I think knowing that they are there, and you don’t have to use them… but knowing that they are there, when you need them, and obviously not 9 till 5. A lot of the time we sit down to do things when the kids are in bed at 9 o’clock. So I can come up with a brain wave, or we’re on the phone... But I’m sure if they were one of these hoity-toity people, “you can’t reach me after 4 o’clock”. That you have then got to wait until that following day, then it would be like, “what were we saying?” Their friendliness has definitely helped’ (Community participant, focus group).

Within the local government project they not only provided a space for people to understand different perspectives but also tried to encourage people to bring more of their personal selves into their own job:

‘I think it is about bringing your weekend self to your job, it’s about seeing what you do as not just, you come to work, you do it, you leave it behind, its caring about what you do and liking what you do’ (Local government case, Staff).

‘We say you’ve got to bring some of your weekend person, personality, to your day job. This is about, actually if at the weekend you run a scout group or whatever you do, why can’t you use that creativity or that practical way of doing something in your day job? Why do you just have to come in and just be stuck to your desk?’ (Local government, focus group).

Such an approach was also discussed within an expert interview:

‘A lot of things would flower from … if there was this belief that I don’t have to be sat at my desk to do my best work, I really need to get out, I need to go out and share somebody else’s experience …. Understand that problem, empathise with people, I don’t think they believe that they have the right to do that. Just turn to their desks and do the normal. So there are those sorts of things, the feeling that whatever I need to do,
to do my best work, I have the authority to do it. That sort of flexibility’ (Health expert interview, 02).

Such an approach can be seen as antithetic to more ‘professional’ models where people inhabit specific organisational roles and work is constituted by particular rules and procedures. However it is rules and procedures that can also provide some form of protectionism and boundaries for staff against getting too emotionally involved with the lives of service users.

‘The closer to the front line you are the more exposed you feel and the more you feel like if you give too much, it’s your life that is affected and your employer doesn’t really care about that’ (Local government case, Staff).

Within the health service case staff support had been highlighted as an issue within one of the staff feedback events, however this had not been taken forward as a priority to work on.

‘The medical staff have an extraordinary way of dealing with it and you kind of think that they have no feelings or no emotions. But in actual fact no one ever asks them. And that in a way, is quite damaging because what support mechanisms do they have?’ (NHS case, Staff).

Perhaps because staff support was less of a cultural priority even though the improvement process highlighted the importance of staff support it was not significantly worked upon as a result of the project. Whilst these more relational aspects of services were developed through the projects, professional identity and expertise still needed to be maintained within these processes. It was reflected by one member of staff how staff felt they needed to maintain a professional face, with the external picture of a swan gliding through the water, ‘but we are paddling like hell below’ (NHS case, Staff). Thus the institutional roles that people inhabited maintained a significant influence on the relational dynamics within the processes.
6.4 The dynamics of staff and user participation

This final section of the chapter explores the dynamics of staff and user participation within an institutional context, critically examining the power relations between different participants within the processes described. Chapter 3 illustrated how some co-production and co-design theory advocates an ‘equal’ relationship between staff and service users. However, this section problematizes this and illustrates how the structural power relations within institutions impacted these processes.

6.4.1 Power relations between service users and professionals

Co-design techniques aim to facilitate equal relationships between staff and service users and some users and staff felt that this had been successful:

‘It was quite equal, there were no politics, which was quite nice. It is quite unusual to happen, but there were no politics’ (NHS case, Staff).

I think the informality and friendliness of meeting staff has been a very, a big positive, I think it has been really nice and they have always been very good to us. And we have been equals in that way (NHS case, Patient).

However, not all service users felt this sense of an equal relationship. The context in which patients had got to know staff retained a significant influence.

‘I think if you are going to get involved and really fully involved, I think all of us have found, at points along it, really quite difficult because we have had to revisit things. Physically we have visited places and revisited times and that has been quite difficult’ (Patient).

Whilst the co-design groups involved collaboratively working in meetings, some patients still had ongoing clinical relationships with some practitioners which could have an impact on interactions.
'It was good, it was positive, it was difficult at times.... There is that respectful distance so sometimes I had to psyche myself up to say something’ (NHS case, Patient).

Where patients were still receiving treatment they could be dependent upon clinical relationships, which impacted the extent to which some people may have got involved.

‘I thought it was much better not to be involved because the last thing I want to do is sort of ruin my relationship with the people there. So I thought it was better not to be involved’ (NHS case, Patient)

The techniques used tried to appropriate an equal space yet deeper structural inequalities also created imbalanced dynamics.

‘It was really weird and really quite difficult being in a room with staff, when you are a patient because you have got that patient staff relationship and it felt very odd calling, you know, I had that really strange thing of not even wanting to call people by their first names, you know, so it was terrifying from that point of view. However everybody involved was really positive and really kind and did their best to put you at ease, I just think the situation I found quite daunting’ (NHS case, Patient).

Staff by virtue of their role and skills had the capacity to facilitate changes in the relationship dynamics between themselves and patients and some staff skilfully achieved this, enabling significant changes to occur as a result of the projects. Staff could use their power benevolently and reflectively to ensure that the processes that they were involved with were inclusive. Facilitators as chairs, could challenge professionals where they were seen to dodge particular issues that service users raised. However where staff, for whatever reason, were not engaged with the project and did not facilitate the development of these partnerships, patients could not develop and instigate them as they were reliant on staff to create such spaces. Such power dynamics were commented upon within an expert interview:
‘You can have institutions where [service users] have huge amounts of influence and power but that is given to them by those that formally have that power’, (Local government and education expert interview, 05).

Not all staff engaged with the process in the same way and some had withdrawn from the project. Staff who had greater freedom in their roles could choose what to get involved with. Because the work was a ‘project’ beyond peoples day to day operational responsibilities there was some worry that it was ‘often seen as the extra and people can choose what to do’ (NHS case, staff). Staff who were less comfortable with the approach could easily opt out of ongoing work because long term involvement was done on a voluntary basis:

‘Some of them really won’t touch it with a barge pole but that’s ok because there is a bit of a voting with your feet in this kind of approach’ (NHS case, staff).

Staff involvement also occurred on a voluntary basis within the local government project where they explicitly only worked with other staff who were enthusiastic and eager to work in more participative and collaborative ways. The degree of power that service users had within these processes was partially dependent upon staff’s attitudes, values and professional approaches. It was within staff’s ‘gift’ to facilitate changes in power relations and it was through their positions and roles that this was achieved. This was particularly apparent within the local government project’s community shop where staff had ceded all decision making power they could to the community members:

‘You can come up with an idea and they just turn round and say, “yep, if you think that works”’ (Community participant).

However within the research there was no case where the actual public sector institutional power structures were changed, decisions about who could make the decisions remained with professionals:
'The patient has a very powerful voice. Ultimately it is not their decision but I think that they can shift the way of thinking. It almost forces somebody to think of it in a very different way’ (NHS case staff).

‘The power distribution in a normal hierarchy would still be there … the most powerful need to give permission for others to have power’ (Local government and education expert interview, 05)

Whilst one of the aims of the health service project was to focus on both staff and patient experiences through the same process, the extent to which this was able to be achieved in practice was debatable. Within the actual process of the project, it was felt that the emotional power of the patient video overshadowed any differential staff concerns:

‘Once you show the patient film to the staff and the patients together, the power of the patient experience pretty much obliterates the staff perceptions and the staff experience anyway. The things that the staff think are important just totally go away’ (NHS case staff).

Most people did not seem to think that the lesser focus on staff experiences was a particular issue because many of the changes implemented through the process positively impacted staff.

‘Experience has taught me that if you listen to people and listen to what their experiences are, whether they are staff or patients … there are usually common themes running through it. That proved right actually in the project. Because where there are glitches in the system and where staff try to put sticking plasters on, patients fall within that, there is always a gap for them, so it is fairly similar’ (Staff).

‘Clearly it is important for us to have happy, well trained, motivated staff to do their jobs and if one of the outcomes of this was that their support was better and their training was better and they had clearer expectations of their role, which I think did happen then I think that that is a benefit to staff’ (NHS case, staff)
Whilst staff and patient experiences can be interrelated and positively correlated it can also be the case that where staff skills, attitudes or capabilities were lacking this could negatively impact patients’ experiences. The extent to which the project was able to tackle these areas where there might be differential interests and concerns was varied and tended to depend upon the degree of staff engagement and levels of hierarchy and power of different staff, as explored in the following section.

6.4.2 Power dynamics between front line staff and managers

Whilst staff could influence and facilitate the extent to which service users got involved in projects, what was the extent to which staff themselves could be more influential within organisational decision making processes? There were mixed findings within the two main cases and this section explores the decision making processes that occurred through the projects and the importance of more senior management involvement within the process.

Beginning with the health service case within the initial events it was commented that hierarchical differences between staff groups could have a significant impact on dynamics.

‘I think maybe we could do more in the staff events to challenge the hierarchy, amongst the staff groups themselves. Because we definitely find that it is doctors who feel much more comfortable speaking up…. I do think we could do more to raise the legitimacy of the voices of other staff in the room because that is an absolutely essential part of the co-design work, is different staff groups working together better’ (NHS case, Staff).

Membership of co-design groups tended to consist of different managers, supervisors and specific clinical staff who had some decision making power over specific areas. Few administrative clerks or health care assistants were members of the co-design groups yet several changes were instigated that effected the working conditions of these staff including additional training and changes in working practices. Here staff ideas were fed into the co-design groups to get ‘a range of ideas from the whole team’ (NHS case, Staff). It was not possible to gain an understanding of these employees’ perspectives on the project and how it had changed their job roles as I was unable to interview these staff who had not taken part in the co-design groups.
Key decision makers needed to be in the co-design groups in order to action specific improvements and where these people weren’t present it was understood that other participants would need to go through hierarchical channels in order to instigate specific improvements:

‘If somebody is given an action point to do, I think there needs to be some accommodation about what that means in terms of time, if it is going to be more difficult or if somebody else needs to help them do that. Or they have to ask somebody else to make that happen, that’s the other thing, because of the hierarchy’ (NHS case, Staff).

Some staff felt that the co-design groups enabled staff to make decisions without going via traditional bureaucratic structures:

‘Nobody quite knows where decisions get made, so everybody thinks that someone else is making decisions to be honest…. People can think … “doesn’t this have to go through some committee?” And you are like, “well we are a committee” and there is a massive power in saying we have consulted with patients on this’ (NHS case, Staff).

‘If you have an official patient centred focus group and a staff centred focus group and it is videoed and it is compared and it is played to an audience, it goes beyond your manager, because normally it doesn’t, it is parked there’ (NHS case, Staff).

Within the larger co-design groups that instigated the most improvements it seems that the collaboration between patients, multidisciplinary staff and managers did create a new sense of agency and power that enabled specific staff members to implement service changes that benefited patients’ experiences. However not all staff involved in the co-design groups reported a sense of greater empowerment and influence within decision making and where co-design groups were smaller with narrower membership this could limit the extent to which they had power and authority to implement changes.

‘I still would have to go through the necessary lines to make changes, regardless of this project really’ (NHS case, Staff).
One participant within the co-design groups felt that more senior managerial presence would have been beneficial, highlighting how they felt the groups had been ‘basically toothless’:

‘The committee [co-design group] in itself had no powers … if you get more management involved then there is power to that committee and there is credence. And things can happen at a higher level…. It always works if it comes from top-down. Things happen quicker. So not only the clinicians, management should realise their problems, the management needs to get involved in solving these problems as well…. If they are serious about changing practice then it has to be across the board, it can’t be clinicians on one side and management on the one side. It has to be together, a more cohesive service. Then you’ll have, I think you will have a good service’ (NHS case, Staff).

However it was not considered that such involvement was a simple process:

‘When we first set out the project, there was this whole idea that we would go and get almost like, go to the senior people and get them to say that the people who would then get involved would have the autonomy to make the decisions. And the reality is where do you go? Who are the senior people? Because it partly depends upon the decision to be made in the end which you can’t predict through this method’ (NHS case, Staff).

Some evaluations of co-design and co-production projects (Needham, 2008; Prentis, 2007) suggest that there may be limitations in the extent to which staff can influence wider managerial decisions where managers and key decision makers were not part of these co-design processes. One expert interviewee spoke of a co-design project that they had got involved with that followed this pattern where senior managers and members within local government had not got involved in the project and so ‘it felt like a pet project…. It felt very much like a project for junior staff, to keep them occupied, to keep them busy’ (Local government expert interview).
Turning to the local government project, they also attempted through its different projects to draw together different staff perspectives, trying to ensure that everybody who wanted to, could contribute.

‘If part of the team may be excluded from [the] process … I just don’t think [that] inspires creativity or maybe even innovation within the team …. Ideas come from the bottom up but if the manager excludes maybe that bottom layer from the strategic planning of their team, maybe they’re not going to get the right kind of ideas and issues coming through…’ (Local government, Staff)

‘The way that [they] created and facilitated that event is that everyone has got an equal right and opinion to speak, everyone’s voice can be heard. That what the front line staff say is equally valuable and probably in a way more valuable because they live it day to day, they really experience it’ (Local government, Staff).

Less service staff seemed to be involved in the local government projects over a period of time however and it tended to be that people would take part in short workshops rather than longer term projects. It therefore proved difficult to interview many front line service staff who had been involved in a project over a longer period. Within workshops it was unclear as to the extent to which staff thoughts and perspectives were taken account of. The extent of staff involvement appeared to depend upon individual manager’s approaches and whilst one manager spoke of enabling people to ‘reach their own decisions if you empower them and give them individual space to do that’ (Local government staff), another’s approach varied. In one of the local government workshops that was facilitated it was spoken of how when one member of staff expressed a view that some of their working practices weren’t having the desired impact, the manager’s response was ‘prickly’:

‘The manager didn’t get it and probably felt that maybe our way of working was a bit challenging. So yes, there are instances where people don’t really open up’ (Local government staff).

Such examples illustrate how although the projects aimed to develop a more collaborative and cooperative approach, it could be dependent upon specific individuals who occupied
particular organisational roles. Overall whilst some projects such as the Community Shop did successfully shift the locus of decision making so that local residents had control and could develop the project following their own ideas, achieving this shift in power relations and decision making within the organisational structures could be dependent upon specific staff and managers and wider working contexts. This was also apparent in the health service case where some professionals and managers seemed to welcome and proactively engage with service users, inviting feedback so that they could engage in reflexive critique on their own working practices, whereas some seemed to step away from this engagement. This finding highlights the importance of agents’ own practices and values within their own organisational roles.

6.5 Conclusion

This chapter aimed to bring together key processes from the two cases, drawing on insights from expert interviews to develop an understanding of the underlying mechanisms that occurred through the projects and the impact of the institutional context upon these. It has been illustrated how the projects went beyond some critiques of deliberative democracy, enabling dialogue to be based on emotions, narratives and empathic responses to service users experiences, yet the processes also mirrored critiques of deliberative democracy in their attempts to ‘bracket’ power relations. The processes attempted to build agreements around common concerns, developing a consensus for specific forms of action that diverse stakeholders could sign up to. The participative processes enabled spaces for collective reflexivity and intersubjectivity of different stakeholders’ diverse standpoints, building different relationships between staff and service users that went beyond service transactions. The impact of these relational elements has been explored, illustrating how practitioners may need to balance personalised and professional approaches.

The final section of this chapter has explored the impact of institutional power relations and structural hierarchies upon these relational and collaborative mechanisms. By using analytic dualism (Archer, 1995) rather than just context-mechanism-outcome configurations (Pawson and Tilley, 1997) this chapter has began to illustrate the utility of a critical realist approach. By highlighting the impact of the structural roles that people occupied, separate from the people themselves it has illustrated how collaborative processes can be fundamentally affected by institutional hierarchical positions. This enables an
analysis of these collaborative processes which challenges the concept of equal relations between staff and citizens when people occupy fundamentally different structural roles which entail different access to particular resources and decision making processes. The image that develops out of these insights is one of networks within hierarchies, where networks are facilitated between different stakeholders but these collaborative relations are contingent upon facilitative effort and are superimposed upon enduring hierarchical structures. The importance of agency within institutional roles has also been highlighted, illustrating how some staff and managers were keen to work in empowering ways and invited reflexive critique whereas others seemed to step away from such processes. Such insights illustrate the importance of separately analysing both structures and agents within collaborative processes, analytic dualism providing a tool to do this which augments a realistic evaluation approach.

Referring back to the analytic framework based on a laminated system as described in Section 4.4.5, the focus of this chapter has been on a psycho-social level for example exploring empathic responses to the experiences of service users, the micro small group analysis level which has explored the facilitation of collaborative processes and communicative space between different agents, and the meso-level which has analysed the impact of organisational roles and structural power relations within this process. The next and final chapter of data analysis takes the whole of the analytic framework as its focus, following Bhaskar and Danermark’s (2006) laminated system framework. It explores not just the psychological level of why some agents may have participated to a greater degree than others but also a wider macro-level which places these collaborative processes within their wider policy and political contexts.
CHAPTER 7

Collaboration and policy contexts

7.1 Introduction
This last data analysis chapter places these collaborative processes within their wider political and social contexts, exploring the interrelationships between institutional collaborative processes and wider policy backgrounds. It attempts a holistic view of the whole process of collaboration, exploring how specific social events may be created by a multiplicity of causal configurations, within wider institutional and policy logics. Case evaluation material alongside expert interviews and the realist synthesis work support this analysis. The chapter is structured with the support of the analytic framework described in section 4.4.5. It begins with an analysis of specific agents within the collaborative processes, focussing upon the biological level (within the NHS case) and the psychological level (Section 7.2.1). It analyses the complex interrelationships between agents own social positions and their motivations to get involved within collaborative processes. Service users’ motivations to get involved were generated by a complex interaction of different elements, including their relationships with particular services, and both the content and processes of participation. Staff’s motivations to become involved are also considered, examining the importance of identity and interests. Then the psycho-social and small-group levels are considered (Section 7.2.2), examining how the processes of collective reflexivity and intersubjectivity described in Chapter 6 impacted and counteracted some institutional transactional tendencies, building more relational and collective processes through institutions. Section 7.3 focuses upon a meso-level of analysis, firstly exploring the differences in collaborative processes across diverse service contexts. It then illustrates how these collaborative processes were superimposed upon institutional hierarchical structures before exploring their relevance and impact upon wider strategic and policy functions of the organisations. Section 7.4 then examines the outcomes that occurred as a result of the collaborative projects, illustrating the different outcomes achieved at the levels of agency and social interaction (Section 7.4.1) and the influence that the projects had upon their institutional structural and cultural contexts (Section 7.4.2). Then the macro level is concentrated upon, exploring the dynamics between the organisational projects and wider
national policies (Section 7.5.1). Finally the mega-level is considered, examining the influence of neo-liberalism and the marketisation of public services (Section 7.5.2). This analysis extends into Chapter 8 in considering the wider policy implications of the projects.

**7.2 Agents and social interaction**

This section begins the chapter by exploring the level of agency, exploring motivations, identity and interests within processes of involvement. Then the psycho-social and small-group levels are examined, focussing upon collective reflexivity and intersubjectivity, and the theoretical and contextual implications of these emergent properties through the process of collaboration.

**7.2.1 Identity and interests**

Within this analysis of motivation, identity and interests of participants there is a significant interrelationship with the actual processes, content and context of participative projects. First the interrelationships between the biological level and psychological level are considered, exploring how this effected people’s motivation to get involved within the context of the health services. Here expert interviewees and co-ordinators of projects reflected that patients with long term conditions were often easier to engage. Significant interaction with the services over a long period of time was an important factor (see also NHS Institute, 2009b) and people often had more time to get involved in the projects. Where EBCD processes have been implemented within service areas such as accident and emergency departments, ongoing service user engagement and retention has been highlighted as problematic (Iedema et al, 2008: 1). Yet within cancer services this was not identified as a problem (Robert and Bate, 2006). Service user motivation to get involved in the NHS case partially stemmed from the previous interactions that people had had with services which was dependent upon particular health conditions:

‘It becomes important to want to give something back, because it is not just you have had a one off event in A and E and you know, somebody has put four stitches in you and on you go, you get on with the rest of your life. These people, these staff are inextricably linked in what is happening to you and your family…. There is a
uniqueness in that relationship, which actually helps the EBCD work’ (NHS case, Staff).

Reciprocity and the ongoing interactions that service users had with the service seemed important in some people’s reflections on why they got involved. Within the NHS case patients’ reasons for getting involved were usually based around them both wanting to ‘give something back’ and the potential that they could help improve services:

‘I think once you have had an illness, I felt that I wanted to give something back really. And I had had a really good experience but I think you can always learn. You can always change for the better. It was just wanting to give something back, really’ (NHS case, Service user).

‘There’s lots of things that I did want to talk about, being in the system for quite a while, as a patient in hospital. There were a lot of things that I see that could improve. So that gave me the opportunity to say what I would like to see done as a patient in hospital’ (NHS case, Service user).

There were significant interrelationships between identity and motivation to get involved with some service users not wanting to associate themselves with the service.

‘One of our patients in the cancer pathway, once he found out that he didn’t need anymore treatment, he said “that’s it, I bloody hate these places, and once I’m out of here I’m out of here. Further involvement for me would just remind me that I have been sick, and I want to leave all that behind, I’m going back to a normal life”’ (Health expert interview, 07).

Another expert interview who worked in health, had undertaken a project working with marginalised communities who had ‘antagonistic relationships’ with the NHS:

‘I’m talking about people who are problematic drug users, alcohol users and their families, sex workers, economic migrants, offenders, travellers… they are marginalised for several reasons…. I was trying to bring them close to NHS participants who might
actually work with them to develop this service. It wasn’t very easy. Also it was interesting to find out that although these groups from my perspective shared an awful lot in common, they didn’t see that. You know “I’m not a smack head”, “what are you saying about me, I’m the same as a prostitute, are you calling me a prostitute?” It was those sorts of responses, they didn’t see that they had very similar needs and how could they in a sense? But because of that it was difficult to get them to work together’ (Health expert interview, 02).

Personal and social identity can be diverse and shifting, nor is a specific identity necessarily confluent with a particular set of interests. Shared collective identities of participants could not be assumed. Some authors (e.g. Beresford, 2009; Fraser, 1997) highlight the importance of independent spaces for service users to come together to share perspectives and create alternative discourses. In my interviews with service user participants within the health case I asked whether service user only groups would have been a beneficial addition to the project, yet few people seemed to think that this would have been of advantage. Such findings resonate with Bang’s (2005) concept of ‘everyday makers’, where participants were motivated by pragmatic and concrete solutions. Although the EBCD process draws on social movement theory there was less evidence of ‘conflictual collective action’ (Della Porta and Diani, 2006). Participants could come from diverse social backgrounds and identified themselves in a multiplicity of ways, some possibly associating themselves more closely with professionals than other people who used the same service (Williamson, 2010):

‘I had one or two niggles with other patients, because I thought, “oh for goodness sake, oh give me a break” …. I think their expectations may be a wee bit unrealistic’ (NHS case, Service user).

The local government case helps to illustrate the importance of how agents’ interests and identities can interrelate with the process, context and content of participation. The programme successfully engaged with diverse populations, working with people that might be labelled ‘hard to reach’. Participants may not have set foot in professionally dominated participative arenas nor would they necessarily have been part of activist groups or social movements. Involvement processes were designed to fit the social contexts of different
people. This meant a deliberative forum could take the shape of a ‘pizza and beer’ evening or a morning get together in a local café. Within the Father’s project the process could be walked into from off the street, working within the context of people’s own local surroundings.

‘We did get dad’s just literally walk past, saw that there was a dad’s night, “come in for a pizza and beer” and they walked in... he just walked in and said, “oh you know, I’m separated from my wife, I don’t have anywhere to go with my kids, I didn’t realise I could come in here, I didn’t realise there was a Saturday group” and that was it, he was in’ (Local government interview).

Basing participative processes within the context of people’s own lives rather than institutions was also spoken of within an expert interview:

‘Professionals have to become more creative, also more brave and basically go where the people are and there’s still the thinking that users should come to where they are. If you want to have a discussion and involvement of users, you cannot make elderly people come to you, but you have to go to the bingo hall.... You have to go to the pub on a Friday night, that’s where most of the citizens are, at least in this country’ (Expert interview, international experience of co-production, 08).

Focussing upon the analysis of the content of participative discussions, within the Fathers’ Project, conversations derived from participants own interests and concerns:

‘It was an absolutely open discussion with dads about what they wanted. What [the area] was good for. What they wanted to do with their kids.’ (Local government staff interview)

Particularly within the Community Shop, community members saw that the content and outcomes of participation benefited themselves both socially and materially.

Interviewer: ‘What made you want to get involved with this project rather than other things that had been going on?’
Participant 1: ‘Because it benefits us as well. That sounds really selfish though, doesn’t it?’

Participant 2: ‘That’s the whole point though’ (Focus group).

Developing the shop meant that local community members would be able to buy particular goods at cheaper prices. Their motivation to become involved was facilitated by a process where they developed their own ideas, made the decisions and had control of the projects direction, getting feedback from the local community through local events and discussions.

Turning now to concentrate upon staff’s identity, motivation and interests both within the cases and the expert interviews, the personal and professional identity of staff seemed to play a role in the extent to which practitioners would become involved in the projects.

‘It is very interesting because the police and custody people hated what we were doing, some of them came around, some of them really didn’t. Education and social work were like, “yes, this is going exactly back to where we want to be” and so it was very interesting to see these different cultures clash with this whole way of working and the whole idea that young people have got something to say’ (Local government expert interview, 04).

‘There are practitioners that would positively welcome looking at things in a different way, and involving the community and I think it would take some of them back to their social care, social work roots’ (Local government interview).

Within both of these quotes, people talk of going ‘back’ to something that they have been dislocated from, returning to ‘social work roots’. The values and motivations of staff were generally seen as an important aspect in the extent to which different people got involved within the projects. Within the health service case where staff professional roles were closely associated with the cancer service or the issues discussed formed an important part of their job or were associated with their professional identity, this was an important motivator.
'It is having the interest, the specific interest that actually involves a very big part of your job' (NHS case, Staff).

Staff who engaged enthusiastically with the projects can be seen to be important agents whose actions facilitated involvement processes where service users reported feeling heard and valued and which instigated organisational changes.

‘I think a lot of it was because the staff were so committed to change and they went away and worked really hard at changing between each session’ (NHS case, Service user).

Within both projects it was considered important that people be involved by choice.

‘There is work going on between but it’s normally as a result of the personalities and the tenacity and the passion of the individuals that want to connect, want to work across, like working in a … kind of collaborative way, aren’t a slave to those silo mentalities’ (Local government, Staff).

This approach could limit the scope of changes to where practitioners were able and willing to get involved as staff often had the option to disengage with the processes. This finding suggests that whilst co-production and co-design theories conceptualise practitioners as facilitative of these processes, not all professionals may have the skills, capacity or motivation to work in more collaborative ways.

7.2.2 Social interaction and intersubjectivity

This section concentrates upon the levels of psycho-social and small-group interactions, which was the substance of considerable empirical analysis within Chapter 6. This section places findings from Chapter 6 within wider theoretical concerns and explores the dynamics of how these processes of collective reflexivity and intersubjectivity intertwined with wider institutional and service contexts. Some of the institutional contextual features that can limit recognition and relational elements of public services are considered, before examining in depth how the collaborative mechanisms enabled embedded collectivities and
relational elements that counteracted some institutional tendencies toward transactions and split.

Health professions involve continual contact with people who are ill, which can create personal anxiety about sickness and suffering, arousing conflicting feelings within practitioners (Menzies Lyth, 1960). Organisational structures and cultures may create defences against such social anxiety through routinisation and depersonalisation. However this in itself may arouse secondary anxieties, hospital systems preventing practitioners from ‘realising to the full their capacity for concern, compassion and sympathy’ (p. 460). Relational elements within services are vital to a concept of person-centredness, yet efficiency drives may limit the time that staff can devote to emotional labour (Section 3.4.2). The EBCD process of the patient film and staff and patient co-design groups enabled emotional connections which were then followed by time and space for deliberation and agreement on specific changes. In this way the EBCD process can be seen to have facilitated emotional recognition of the difficult experiences of patients and practical action was instigated to remedy certain aspects of the service experience. It provided time and space for the reciprocal and relational elements of patient-professional interactions (Theodosius, 2008), outside of an everyday service context.

Turning to the context of local government, labelling can be a form of emotional distancing (Hoggett, 2006) that one expert interviewee spoke of:

‘One way of dealing with stressful users is to pathologise them … how [do] we increase resilience of the professionals so that they don’t move into this pathologising…. Asking the question opens up a more honest dialogue about that being a coping strategy. You can totally see why it is, you have to undermine or denigrate the people who you are dealing with because it is just too stressful to do anything else. Anything else means you’re going to give too much of yourself emotionally and that’s going to screw you up. So I think that there is some interesting stuff there about building resilience amongst professionals so that they feel that they have more support’ (Local government expert interview, 04)
Within the local government case in the low income families project, some staff had originally referred to families as ‘dysfunctional’. However the projects challenged prejudgements and stereotypes of particular service user groups through detailed ethnographic work that brought to life different people’s experiences. Both through the low income families and ex-offenders project, vivid everyday life stories brought the realities of people’s experiences closer to practitioners.

‘I think there has been a serious change in attitudes in some people. [It] has been a very useful document to actually say to people, “Have you seen that?” It gives a lot of really good insight into the way people are living their lives which…. As a professional, you see a very different type of person… the difference that comes out of [the report] of course is really quite striking and I think that that has changed people’s attitudes’ (Local government staff).

Chapter 6 has illustrated how both the local government and NHS projects began to tackle some of the critiques of deliberative democracy (Young, 2002). Whereas various authors (Barnes, 2004; 2008) have illustrated how staff have rejected user narratives, where they were unable to take on board the emotional impact of service experiences, these projects managed to legitimise the use of narratives and emotions. Through highlighting the importance of the emotional impact of service experiences, they used emotional experiences and responses in a way that Mouffe (2002, p 9) advocates, ‘mobilising them for democratic ends … creating collective forms of identification’. These approaches enabled staff to more readily identify with service users and empathically respond to the issues that they faced. Within the NHS case staff responses to the service user film resonated with the findings of Iedema (2011), facilitating identification both with service users and the events they described:

‘These were our patients and so we had to take responsibility for everything that was happening, everything that they were saying’ (Staff).

Both within the NHS and the local government case, the processes cultivated a space to explore commonalities ‘between “us” (professionals) and “them” (service users) or vice versa’ (Carr, 2007, p.274) which could support the building of alliances between service
users and staff (Beresford and Croft, 2004). These processes of intersubjectivity and comprehension of different people’s perspectives enabled a focus on the ‘common space that exists between individuals’ (Vitale, 2006, p.743). It facilitated a new sense of recognition, tackling the split between ‘self’ and ‘other’ alongside wider splitting processes that skew ‘patterns of interdependency’ within a welfare society (Hoggett, 2006, p.184). In this way they followed an ethics of care perspective that highlights interdependence as opposed to rational autonomous actors. Another form of splitting that can occur within public services concerns the disaggregation of people’s needs. The ex-offenders project highlighted how people could become labelled according to different practitioners’ specialisms with one person needing five different, unintegrated services such as drug rehabilitation, mental health services, housing, education, training and employment and probation. Within each of these different services, organisational targets and processes could contradict each other with the person leaving prison having to manage these contradictions and gaps. Personal stories highlighted the felt impact of public service silos where institutional approaches have tended to split people into specific elements and needs, with different services being orientated to their own organisational practices, targets and efficiency goals.

The participative processes enabled people to collect around common concerns, facilitated through emotional recognition and professional interests. Within the NHS case the project provided an emotional jolt which shook people out of their everyday habitual action:

‘The reaction from staff was absolute shock. Because they didn’t know that this was what was happening, because as I say, once you are in it, once you are in the pot you don’t know what’s happening outside the pot. So this was a good eye opener for me…. That was an awakening really (NHS case, Staff).

‘It took me back a bit. Because some of it was quite intense…. It is the way to make everyone realise what it is like, for that person. You can put yourself in their shoes and you just approach things differently after that’ (NHS case, Staff).

Different professional groups came together within one forum, such processes mirroring Bhaskar’s (2010, p.18) conception of interdisciplinary working where different
professionals knowledge and understanding of specific concerns can be practically integrated around concrete issues. This collective reflection can be seen to create emergent properties where agents enlarged their own awareness which impacted working practices and processes, following aspects of deliberative democracy where people’s consciousness is enlarged in order to take account of different perspectives. It illustrates the importance of Archer’s (2003, 2007) notion of reflexivity in making people ‘active agents’. These processes build on Donati’s (2011b) work on ‘relational reflexivity’ where social interactions generated collective forms of reflexivity. These social interactions generated a new sense of power, as in Arendt’s capacity to act in concert.

‘The power is in the room, you can choose to use it or not as you may see fit’ (NHS case, Staff).

The long term involvement of service users within the collaborative groups supported changes in services, where service users contributed and developed their own skills:

‘It’s about bringing people with different perspectives and we talk about patients and we tend to forget that they are full-time mothers who have fantastic planning, they’re lawyers, they’re film makers, we forget that they bring a valuable perspective from their industry to help us shape our services’ (Health expert interview, 04).

Accountability for service changes and improvements widened. Monitoring from service users was also important in keeping impetus within the process:

‘Staff knew that between them they needed to be moving along with whatever because it was going to be the subject of conversations and the patients weren’t nagging but they were interested in how it was coming along and had an expectation that it was coming along too. Because they were doing their two pennies worth, they were doing their bit. That generates change because people are expecting it and they were planning on it and they were looking for it’ (Health expert interview, 07).

In these ways the processes supported a new sense of ‘power to’ and ‘power with’ where as a result of collective reflexivity and intersubjectivity people came together and
implemented particular changes to services that they had influence over, actions that would not have happened without the projects.

7.3 Service, institutional and organisational policy contexts

Concentrating here on the meso-level of analysis, this section firstly explores the influences of different service contexts on the process of intersubjectivity (Section 7.3.1). It then examines how collaborative processes were overlaid upon institutional hierarchical structures (Section 7.3.2) before exploring the interrelationships between the collaborative processes and wider strategic and policy functions of the organisations (Section 7.3.3).

7.3.1 Service contexts

Different services impacted the extent to which the mechanism of emotional recognition sparked and facilitated intersubjectivity and collective understandings. The contexts over which the different projects operated was vast as a result of a purposive research decision to explore staff and user collaboration in contrasting situations. The EBCD process which often uses filmed patient narratives was developed within health and its precise methodology has tended to remain operationalised within this context. Within the local government case, video and visual elements were used but the purpose of these was not necessarily to catalyse personal connections, although this could be said to have occurred within the Community Cohesion project. Not all staff gained empathy and understanding with people in all different service areas and it seems that where there were possibly wider perceived gaps between ‘them’ and ‘us’, intersubjectivity and common understanding may have been harder to catalyse. Compassion and emotional recognition were more easily facilitated between patients and staff within the context of cancer services which may have supported greater collaborative working. Conversely, in the local government case, in association with the Community Shop project, I heard that some professionals who worked in the area disagreed with the approach used, making particularly disparaging and prejudiced remarks, commenting that the project was not “‘making them get off the poverty line, how is it stopping them becoming pregnant?’” (Local government interview). Here part of the project’s work became to facilitate a ‘safe space’ for the local residents to create and develop the work as they wanted in consultation with the local community.
‘We have to be the buffers or the bodyguards and say, “actually, no they need that space to go and do what they want to do” … just to allow them to have the free space to do what they want to do’ (Local government staff).

In terms of the underlying logics of the collaborative programmes work with people who had been in prison was described in terms of effective services with the aim of reducing re-offending. In contrast to this within health services notions of empathy and quality of care were prominent (alongside highlighting effectiveness and value for money).

7.3.2 Institutional contexts

It is useful to explore the organisational context within which these projects were developed, understanding how previous structural and cultural contexts supported the development of these programmes. Talking with the people within the specific areas of the organisations that had initially set up these two programmes, there was a keen enthusiasm to embed service user involvement more deeply within their organisational processes. The organisations within which both projects were situated had high performance ratings. Both the NHS and local government case had developed various improvement and innovation programmes, keen to be seen at the cutting edge of service development. Expert interviewees also highlighted this sense of organisational confidence as an important factor in other projects that they had been involved with. Both cases situated these projects outside of service delivery functions, as part of a separate team or improvement group. Within both cases, the programmes had accessed some external funding that was beyond core budgets to enable the projects.

‘Funny money is often useful for this, if it’s not my managers or my bosses core budget that is being committed, that’s ok you can play around with it because it is not so much of an issue if it all goes wrong because we haven’t wasted [West Council] ratepayers money’ (Local government staff).

This collaborative work between service users and staff tended to operate on a project basis within both organisations and it can be questioned as to the extent to which participative processes were more deeply embedded into the structures of the organisation. Within the EBCD work, whilst the project aimed to empower staff and patients to instigate changes to
services, some managers were keen to ensure that this culture was rooted more deeply within the services.

‘What I would aspire to is that there is a philosophy of patient and staff involvement generally so staff just thought to ask patients a bit more generally about life and the meaning of … do you know that there is something awful in the lift, go and move it…. How do you get that culture?’ (NHS case, Staff).

However both service users and staff spoke of occasions where the everyday reality could be quite different. Where service users had contributed ideas and suggestions outside of the EBCD process, sometimes it seemed more difficult for the organisation to react to these and take issues forward. Similarly a staff member spoke about how through the EBCD process, issues about services could transcend hierarchical communications, yet in everyday practice hierarchical structures could sometimes inhibit communication and action derived from staff’s own tacit knowledge of services:

‘Because we are on the shop floor, we know what runs well, what doesn’t run well, what we would change and maybe how we would change it. But those changes are never made because we park them with our managers, our managers go like, “great, ok, that is not a priority right now”. Or “yes, I get where you are coming from, you are just going to have to work with it”, whatever. So you get disheartened by it so then, in the end, you forget about it, I am not even going to mention it any more because I have mentioned it 20 times, nothing has happened’ (NHS case, Staff).

If patients talked with staff about an issue with a part of the service that was not directly related to their own area, in everyday practice staff sometimes found it difficult to feed this information back into the necessary part of the service and act on feedback within different parts of the system of care. The hierarchical nature of communication within an everyday context was apparent through different interviewees’ descriptions. The EBCD process attempted to change these dynamics and it was successful to a certain extent, however the ‘project’ basis of much of the collaborative work meant that islands of collectivities of staff and patients tended to operate within wider hierarchical and bureaucratic structures. The power of hierarchical structural and cultural influences meant that in the longer term it was
seen as harder to keep up this collaborative approach. Some staff acknowledged the difficulties of ongoing staff involvement within an everyday service context:

‘I think the momentum with staff, is easy to lose it.... I think that it is easy to go back to the chosen few, and I think that is a lesson that we have to learn as a team … if we want to change something then we must look at all levels, grades and backgrounds of staff to get people in and not let it get very narrow. But in practice, it is not always that easy’ (NHS case, Staff).

Several clinicians highlighted the need for forms of ongoing patient feedback about their experiences of clinical services. This had been discussed as an important issue but significant action to instigate ongoing patient involvement through the specific clinical service beyond the EBCD project was not apparent by the time the project had been completed. This issue of building ongoing conversations with service users who could become involved in ongoing improvement work was also highlighted by an expert interviewee, illustrating the importance of this issue more widely:

It shouldn’t just be a project where staff and patients come together and do some service improvement, it should be a relationship in which public services are built in that way where people can give that feedback and can help improve things. Because at the moment there aren’t really that many clear entry points for people to do that, and that’s the challenge (Health expert interviewee, 01).

What had taken place was that the collaborative methodology had been extended to other cancer pathways where staff had adopted and adapted the EBCD process into other clinical services to develop further service improvements. Similarly the local government case was interested in developing guides which would support other staff to take on and develop collaborative approaches in other service areas. In this way the projects diffused their practices through guides and tools that other professionals could pick up and use. There were less formal links with human resources and training departments, and the local government case in particular saw their approach was in contrast to this traditional training provision:
‘I understand that some learning does require external accreditation and that sort of thing but our way is that actually you’ve got skills and competencies within your teams and you just need to mobilise those and learn from each other for free. So those two cultures of working are slightly in contradiction to each other’ (Local government, staff).

‘We need to look at how we commission [the Co-production Programme] to train people, how they can develop people, inspire people, rather than just utilising very limited training resources on traditional training’ (Local government, staff).

This empirical phenomenon relates to Osborne’s (2010b, p.421) observations that training in public service organisations often is rooted in competencies for current organisational practices rather than inter-organisational and collaborative processes and is discussed further within Chapter 8.

Within the local government project institutional structures and practices maintained a considerable influence. Because the Co-production Programme did not operate through traditional hierarchies using linear project management routes, it was reflected on by some interviewees how this could be a disadvantage to promoting its successes.

‘The projects and the research that has happened have really worked for either those communities or those people who have been involved … that’s what drives it forward. What we haven’t managed to do is to produce a report or project, present it to Cabinet and then they say, “right, we are now going to do this, this and this as a result of it”’ (Local government, Staff).

‘What we all want is for the policy team itself, as well, to be operating in more of [a co-production] kind of way, but obviously a good proportion of what we do… there isn’t necessarily the time or it might not necessarily fit properly. If you have hurriedly got to produce a briefing paper for the Leader on something in a very short space of time … it may be quite difficult to do anything other than trawl through existing customer information’ (Local government, Staff).
Because the Co-production Programme endorsed different ways of working, promoting this approach was seen as potentially problematic where it didn’t specifically drive toward key organisational targets.

‘I think a lot of people … they like the way of working that [the Co-production Programme] promotes, they find it very attractive, it’s the sort of work that they would like to do. But in order for it to become the way of working generally it all needs to be seen to be productive and efficient and economical in order to deliver the targets that those people are given. You can have lovely ways of working but if they’re not delivering the core business and the core targets of the organisation. So the challenge is to show that this isn’t just a good way of working it’s the way in which you are going to hit your targets and do that within budget.’ (Local government, Staff).

Expert interviewees and cases were interested in developing measurements to evidence project successes, illustrating how projects were working within a dominant culture of performance measurement and rational management paradigms. However neither co-design nor co-production are based on linear models of change, which resulted in difficulties in applying various measurement techniques to outcomes achieved.

‘I don’t think we’ve measured the changes, we have measured other outcomes on pathways such as length of stay, but measuring experience is difficult…. We hope that we see it through our patient survey results but we know that actually they’re not necessarily measuring experience’ (Health expert interview, 07).

The importance of evidencing changes and outcomes was important to respondents as a way of illustrating the capacity and efficacy of these approaches, providing hard data of outcomes was a significant and important way to promote collaborative work. Although collaborative processes were often based upon creative and emergent processes rather than rational linear models there was pressure to account for their activities through measurement and financial outcomes such as efficiencies and savings created. However within the local government case some staff felt that this approach could devalue the intangible and qualitative nature of the outcomes and changes achieved:
'If we move to being more something that quantifies something in pounds I think it would lose a lot of its value’ (Local government staff).

### 7.3.3 Institutional strategic and policy contexts

Both projects within the health service and local government initially had a clear intention to work with senior and policy managers, aiming to influence organisations at a strategic level. Whilst Chapter 6 explored the extent to which senior managers needed to sponsor and ‘give permission’ for collaborative projects to take place, this section explores the extent to which such projects had wider strategic influence upon higher level policy and organisational decision making.

The project partners within the EBCD project saw that an important element of instigating wider organisational changes and strategies was to involve senior managers in reflecting upon wider strategic issues that the EBCD project uncovered. The Health Organisation conducted a series of interviews with different senior figures to explore how more person-centred approaches to services could be embedded within wider policy, strategy and different institutional functions. This piece of work culminated with a senior management event that was held to reflect upon both the EBCD process and explore the roles and actions that senior managers could undertake to support the improvement work. Whilst many areas and approaches were discussed within the meeting, it seemed much harder to instigate and embed specific actions as a result of this piece of work. Financial constraints seemed to limit the extent to which people had space and time for the approach with some work seeming to have got slightly lost within the maelstrom of top down pressures from national directives:

‘I think, day to day business, the change in the NHS, the finances, everything got in the way. People ended up in a bit of a turmoil, between change of government, everything…. There was a lot of that, I think that just got in the way’ (NHS case, Staff).

Turning to the local government case although one of the aims of the Co-production Programme was to work within the corporate policy team, linking service users’ insights directly into policy developments, this had initially been hard to instigate:
‘[The project] didn’t work, really integrally with Policy at the time, it was sort of like on the outside of it, still part, a little bit part of Policy but on the outside... it just didn’t gel at the time’ (Local government interview).

These issues were compounded by internal politics with some hostility to the development of the project:

‘The dynamics of the organisation, the politics and all of that was so important ... because it is threatening, it does challenge the way that things get done’ (Local government interview).

Whilst the project had the support of some key figures, it did not seek further backing from the wider leadership through presentations and high profiling, as it was thought that this might not be the best avenue for the programme:

‘We haven’t had a blanket awareness raising of what [the project] does, because we deliberately choose not to because otherwise that would just become another presentation, another activity that was going to fail. So we have worked with people via viral approaches... we are not doing a blanket showdown’ (Local government interview).

‘Definitely, looking back, it was a good move, we weren’t on anybody’s radar, it was deliberately done like that, looking back now.... Looking back that was the best thing that we could have ever done. I think if we had been on radar, I don’t think it would have worked. I don’t think we would have been here’ (Local government interview).

Whilst this less visible approach gave space and freedom for the project to develop their work, the down side of this approach was that it may have been harder to initially garner resources to develop the work:

‘That is the interplay between the security of resources and the lack of political championing ... whereas there are other projects around the organisation that have gone for a much more high profile, that has generated a degree of scepticism ... “Well
where is the substance? Is this all just hype and promotion?" Where I think that [the Co-production Programme] has got to is that it has demonstrated time and again that it has got substance, [I’m] just not convinced it’s as well known and well promoted at the most senior level’ (Local government interview).

The broader engagement of all senior leaders with the project’s approach was an area that was still being worked on:

‘I think that the top level engagement is always a battle, it is always going to be quite a hard act to win over our political leadership and our senior managers about the real quality and the benefits of that approach, because it’s just, I think just because it is so new and different’ (Local government interview).

The positioning and marketing of the project’s work within West Council was often reflected on as local government funding cuts began to impact the organisation. The sponsorship and endorsement of senior managers was seen as increasingly important as financial restrictions led to substantial organisational restructuring and increasing insecurity of resources. Relationships with senior managers and Members were consistently being worked with by project staff up to the completion of this research and beyond. It was seen that there was a need to promote the value of the project, fitting within current Coalition policy drives of ‘localism’ and the ‘Big Society’. In order to survive the local government budget cuts it was seen that the work needed to aligned with these wider organisational policy drives without compromising their values and approach.

### 7.4 Project outcomes

This section first explores some of the outcomes of the projects, analysing their impact at the levels of agency, culture and structure. The dynamics of institutional and policy contexts on these outcomes are then considered.

#### 7.4.1 Outcomes at the levels of agency and social interaction

Turning first to the level of agency, where it was clear that changes had resulted from the project, service user and community participants expressed their satisfaction at having been involved. Within the NHS case and the Community Shop the outcomes of participation
were important in service users’ long term motivation to keep being involved and the satisfaction that derived from involvement:

‘If I had felt at any point it wasn’t getting anywhere, then I wouldn’t have carried on’ (NHS Case, Service user).

‘Come the next meeting, “oh yes, we have implemented that”. Good lord, I mean it is fantastic’ (NHS Case, Service user).

The process of participation itself could have a significant impact on service users, with some discussing how it had supported their own recovery and helped them come to terms with their experiences of having cancer. Turning to the local government case the confidence, self-esteem and skills of some community participants grew considerably, with one community member presenting the work at a conference:

‘It was pretty nerve wracking, considering that was my first speech, I did walk away buzzing. It was like going in there, it was like Pretty Woman going down Rodeo Drive. You walk in there and you have got all the suited and booted all on the side with their phones and that’ (Community participant).

The work supported participants in their own feelings of equality and status, one member commenting that:

‘“It doesn’t matter what you do, what your job title is, actually you’re my equal, you are equal to me and I have got as much of value as what you have and I can express myself as well as you can ...”’ (Community participant).

The local residents who developed the project had felt that some professionals had doubted their capabilities and were pleased to prove them wrong:

‘It is nice seeing people like that, that were slamming their feet down, saying “It will never work”, and then they were at the opening day, saying “I knew you could do it”’ (Community participant).
The work supported wider community networking, one member of the group setting up their own parents’ group.

‘One of the women who came to the meeting was talking about, in fact two separate women were talking about setting up a [parents’] group … I think that that only came about by them having the confidence instilled in them through [this] process’ (Local government interview).

It also supported relationships between the community and different parts of West Council. Because local residents had developed better links with West Council, this then enabled other people to connect into services.

‘We found we get people coming along to us, people who haven’t necessarily been with [the project], saying “oh I saw you with such and such, I really need to get in contact with them” and we can then pass on the details. Or I have had people come up and say, “oh they are right cows they are,” not you guys [the Co-production programme], but some on the council, and I will go, “well no actually, I thought that before, but speaking to them, they are quite human”. So rather than them bricking themselves about contacting them they’ll go through and speak to them’ (Focus group).

Turning the focus to staff experiences, some found the process ‘re-energising’ and ‘liberating’ (Local government case).

‘My path has sort of crossed into [the Co-Production Programme] from time to time, and I’ve always come out of it feeling positive. It’s been lovely, really good and it’s been especially good, because my relationship with other parts of [West Council] has not been good’ (Local government interview).

Turning to EBCD projects within the health service, changes in the practices and attitudes of staff were cited by a number of expert interviewees as an important outcome of different projects. This in turn supported the development of more relational approaches within service provision:
'It did end up changing the way people viewed the world, it changed the way they viewed patients and their responses to the service, it changed the way they viewed their own roles', (Health expert interview, 07)

'We’ve seen staff feeling more confident, staff having a completely different relationships with patients which is kind of more of a human relationship than the paternalistic one’ (Health expert interview, 03).

Whilst these organisational participative processes facilitated a sense of collective reflexivity and intersubjectivity, the continuing demands of ongoing services may limit the extent to which changes were embedded where some aspects ‘could easily be forgotten, and we could slip back into old habits’ (NHS Case, Staff). However other practitioners saw that the process had a long term impact:

‘It’s not something that you do, stop, and you forget about it. There are things that you do continue even unconsciously after the co-design group so that has been a really good thing’ (NHS case, Staff).

This notion of changed practice, which now has become ‘unconscious’ suggests altered practices and approaches emerged as a result of the project.

Previous evaluations of EBCD processes have illustrated that they may increase staff workloads where staff carry the ‘biggest burden’ of ensuring the success of collaborative processes (Iedema et al., 2010, p.81). Such projects could mean more work for staff yet they have been enthusiastic and motivated by the process (Iedema et al., 2008; NHS Institute, 2009c). Worker participation literature has portrayed how empowerment may mean additional responsibilities (Cooke, 2006), however extra workloads were rarely spoken of within the evaluation interviews. There are two possible reasons for this. Firstly, those staff who were not enthusiastic about the approach, or found the workload generated too onerous, disengaged with the process, as can be illustrated by some co-design groups faltering at an early stage. In these instances I was not able to speak to staff involved. Secondly, those staff who did get engaged and worked hard within the improvement
process, did so because the approach was aligned with their own personal or professional values. It is argued in this thesis that the extra work that people undertook was not due to some form of false consciousness, instead it is asserted that people spoke so positively about the projects because the processes enabled a connection with people’s own sense of personal and social identity and facilitated meaningful and purposeful relationships between service users and staff.

‘It touches your own values and beliefs about what you are there to do’ (NHS case, Staff).

The work brought to life the emotional and relational elements of public services, going significantly beyond service transactions. It could support staff to become more ‘active agents’, facilitating reflexivity and collaborative action around service improvements that they were in a position to have influence over.

7.4.2 Cultural and structural outcomes

Turning to the influence of the collaborative projects on the cultures of the organisations, within the NHS case people spoke about how the project had supported a greater culture of patient involvement alongside better team working. The local government case also saw a cultural shift:

‘The actual people within the policy functions, the kind of discussions that we have and how those have evolved…. There’s a greater willingness, I think, to challenge, there’s less defensiveness. There’s more cross-directorate working….There’s other reasons behind that as well, but I think [the Co-production Programme] has certainly contributed to that evolution of culture’ (Local government staff).

Institutional public sector structures tended to remain relatively unchanged as a result of these processes. Within EBCD projects the scope of the content of participation was based upon people’s experiences of services and the service interface:

‘What we were trying to do was redesign our model of emergency care from when the person hit our front door to when they left our front door’ (Health expert interview, 07).
Staff influence within organisational decision making and practices was a central point at which the influence of service user involvement could extend. Some expert interviewees saw the importance of extending the content and decisions of participation to a much wider arena:

‘The real challenge is how to stop people going into hospital in the first place and how do you take things to the next level where you don’t just assume existing services as given that you redesign and improve but you actually think about what are we trying to achieve, and what is that people themselves can bring to the table,’ (Local government expert interview, 04).

However asking these much wider, strategic questions was often difficult within organisations that were under continuing service delivery pressures. Analysing the outcomes and changes made to services and practices, they were often incremental improvements rather than discontinuous innovations (Osborne and Brown, 2010), fitting within wider professional and organisational trajectories. Many of the outcomes of the projects tended to operate at a localised level and participants were aware that projects could be critiqued for their localised impact:

‘One of the criticisms that often gets labelled at co-production, ok you’ve done that with that small community, but so what? That’s good but does it mean anything, when I’ve got 50 new diabetics a day being diagnosed’, (Health expert interview, 02).

The involvement and activism of families involved in the [Community Shop], again it is a massive story for them as individuals, and for what that makes a difference to as a community…. You can’t say across a county, getting on for 1.5 million people that that is a big thing but it is 100% for those people’ (Local government staff).

Within healthcare co-design projects some expert interviewees spoke of how changes made were often small yet had a considerable impact:

‘The evident big gains sometimes from small things’, (Health expert interview, 07).
‘A lot of the things that come out of EBD are, this is a really bad term, but are no-brainers, it’s like, well we’ve got to just change that now, whilst we can, because this doesn’t need to go through committee,’ (Health expert interview, 03).

‘Quite a lot of the changes are really small and so people feel that it is achievable and that they can actually do it and so it’s building people’s confidence at the same time… if you’re looking at just experience, you will improve experience quite quickly by making lots of small changes’, (Health expert interview, 01).

Such comments could be used as a critique of the process, illustrating its limits in managing to instigate wider structural changes. However such findings follow Smith’s (2008) and Greenhalgh’s (2009) illustration that within healthcare it is often small gestures from staff that can make a significant difference to how people feel. Indeed service user interviews illustrated this:

‘I was just desperate to have a shower, just to freshen up. I was exhausted … this absolutely brilliant nurse … took me into the shower room and showered me. And I was too exhausted to do it myself but I will love her till the day I die, just for that’ (Service user).

The importance of dignity and personalising care within ‘lean pathways’ have been highlighted as important through the EBCD process (NHS Institute, 2009d), where the ‘little things … really do matter’ (NHS Institute, 2009b). Smith (2008) suggests that rather than these relational care elements being ‘little’, it is the dominance of high-tech medicine that subordinates these aspects of care making them ‘invisible’ and ‘undervalued’.

Within the local government case the project highlighted the importance of positive relationships between service users and professionals, which had an important impact upon the quality of everyday services and the extent to which such services can be person-centred. The work with ex-offenders illustrated how it was often when staff worked beyond their specific roles and worked across different systems and organisations that a greater degree of rehabilitative support was able to be offered to ex-offenders which enabled them
to rebuild their lives. Where staff had gone beyond their specific professional duties and responded to service users needs in a holistic way, this could often make significant differences to people’s quality of life and experiences. One of the aims from this work was to implement a more person-centred approach that supported people leaving prison in a more holistic and integrated fashion.

The cultural influences from collaborative processes tended to extend across those people who had been involved in the process, however those staff who were unaware of the projects were left untouched:

‘I think its all slower than you want it to be, I can reel off 5-6 examples, but there’s loads more opportunities and if I looked at the people in this organisation and said how many people have been touched by this, it wouldn’t be nearly as many as we’d want, relatively speaking a bunch of 50 people maybe, 60, but there’s 3000 people in the organisation’, (Health expert interview, 07).

This slow process where many small actions began to slowly change aspects of the organisation was also highlighted as a key feature within the local government case:

‘There is kind of a conglomeration, a putting together of lots of small things but a million small things add up to something very significant … People often use the analogy about turning around a super tanker and I have discovered, by accident, how you do that. The really big super tankers, not only have the giant propellers at the back that send it front and back, they have loads and loads of little propellers down each side that help it manoeuvre and so I think that this is loads and loads of little propellers, not the giant one at the back. Hopefully as well as the giant one at the back, I think that you get to the giant one at the back more by stealth than by consultation, certainly that has been my experience of this as an organisation’ (Local government interview).

Thus the collaborative projects tended to generate many small changes in different localised areas, however wider structural power relations, institutional hierarchies and policy trajectories were left relatively unchallenged and unchanged.
7.5 National policy and political contexts

This final section places these contemporary examples of collaborative processes within their national policy contexts, then analyses how they are situated within broader social, economic and political contexts.

7.5.1 National policy contexts

Project outcomes and achievements need to be contextualised within wider policy spheres (Newman et al., 2004), ensuring that this analysis does not remain localised at an institutional level. Thus this section focuses upon the macro-level of the contextual influences and mechanisms of national policy. National policies could provide additional resources and impetus to make service changes in areas highlighted by service users, whilst priorities that were flagged up through the process could reflect more national issues. There is some evidence to suggest that localised project priorities and improvements may be reflective of more general, national issues within specific services. Within a co-design example of a rheumatoid arthritis project that I observed over a short period of time, the recommendations and actions that were generated by the project closely followed a much wider national study that researched key priority areas to improve services (Steward and Land, 2009). The national patient experience survey of cancer services (Quality Health, 2011) emphasised some similar issues that the local EBCD process highlighted, although there were also differences and understandings from the EBCD process were much more finely grained. National policy drives could also have an influence upon and provided additional impetus to actual co-design work. Sometimes the EBCD process would augment existing work where there were national priority areas. These national priorities sometimes provided additional resources to instigate changes that were also sparked by the EBCD project.

Within the local government project, staff were keen to relate local projects to national policy agendas. Some members of staff highlighted to me how the low income families report had been read by David Cameron, when he was Leader of the Opposition. However the extent to which it may have had an influence on Coalition policies can be questioned when considering the Coalition government’s benefit reforms. The community shop became described as an example of the ‘Big Society’ and the project work with ex-
offenders sparked the interest of the Ministry of Justice, the project emphasising the connections of the work with the ‘Rehabilitation Revolution’ (Ministry of Justice, 2010). These projects were originally conceived of and developed as a result of local issues that later increasingly had national policy resonance and these convergences were built on and developed to highlight project findings and practices. In this way the collaborative projects connected with wider policy logics, building associations rather than contestations.

The national and policy context that these projects operated within changed significantly through the duration of this research which began in December 2008, data collection formally ending in November 2010 (although contact and links with both projects has continued up to PhD thesis completion). The change of government in May 2010 alongside the Comprehensive Spending Review and new bills in local government and the NHS meant the policy context changed through this time. Within the local government case the organisation underwent a substantial restructuring in the light of the Comprehensive Spending Review in October 2010, which had an impact upon how much attention could sometimes be paid to the approach of the Co-production Programme:

‘I think that there is a hearts and minds job that needs to be done as well…. Dealing with those structural changes at the same time, we’re always competing with other reorganisations, other ways of remodelling services, redesigning them … to get a particular approach held within that is sometimes quite difficult’ (Local government staff).

‘There are a lot of things that produce organisational change and obviously constrained public sector finances is going to be the biggest driver of that now and that is going to be far more powerful because it is going to hit everybody in exactly the same way. I think a lot of innovation, actually is about finding non-traditional, non-linear routes through the problem isn’t it … you work across the organisational boundaries, you work through informal networks and that sometimes builds up to a movement for change, rather than a decision that we will change’ (Local government staff).

Within the NHS case the national focus upon efficiency savings and cuts had an important impact upon the culture of organisations:
‘Everybody just keeps talking about finance, finance, finance. So it is sending the wrong message because quality is just as important but that is getting lost somewhere in this message’ (NHS staff).

In terms of operationalising the projects, increasing service pressures could sometimes mean that it was harder to create space for the collaborative work:

‘The problem with patient-centred care work generically is that it can all be a bit waffley and it can all be a bit loose … especially currently if you are out there trying to deliver a service and you are being told to take a tenth out of your service’ (NHS staff).

Financial constraints led to people’s responsibilities and priorities growing wider. Within this there was a sense that sometimes projects struggled to keep momentum and that getting everybody round the table together at the same time was a challenge in itself:

‘It is very hard … we are very busy and to get people to commit to a meeting and drive this forward, you can’t ignore the busy schedule of individuals, but having said that, there are some fantastic people who absolutely went out of their way to attend those meetings’ (NHS staff).

The actual improvements themselves varied in the extent to which they could be tackled, with issues like waiting times being part of a much wider systemic issue:

‘Our patient numbers are not getting smaller, they are getting bigger and our staff, our workforce will not get any bigger…. There are some things that we can do but it is a bit tinkering around the edges’ (NHS staff).

Additional time and resources to facilitate collaboration on top of other ongoing responsibilities was not always present. Within the local government case there were increasing pressures to start developing income streams from the work, especially where finances were becoming increasingly tightened, some staff commenting that the project was
a bit of a ‘luxury’. Partially as a result of some of these pressures, the project started to explore the commercial potential of its workshops as a way to generate funding.

**7.5.2 Wider policy logics and political perspectives**

Turning to a broader political perspective (representing the mega level which may incorporate more global policy trajectories and influences), the trajectory of public service reform tends to be based on the marketisation of public services and the adoption of private sector practices into the public service arena. The NHS and the local government project were inspired by ideas from design, co-production and innovation practices in the context of policies that were increasingly highlighting the importance of both citizen and staff participation in developing innovative public services (Cabinet Office, 2008; Department for Innovation, Universities and Skills, 2008). Various organisations including The Design Council and the NHS Institute for Innovation and Improvement alongside trade unions such as Unison and the Trades Union Congress (2008) and think tanks such as Demos (Parker and Heapy, 2006) and Compass (Gannon and Lawson, 2008) were all considering the importance of these approaches. Various different private companies, social enterprises and charities offer consultancy and methods in social innovation and service design, often basing their work on ethnographic techniques and user and staff involvement. Networks for co-production practitioners have been fostered through the National Endowment for Science, Technology and the Arts and the New Economics Foundation alongside academic groups such as at the University of Manchester. Internationally there are similar practices and organisations including in Denmark, France, Italy, the Netherlands and Finland (Bason, 2010). Thus the two cases are part of a much wider phenomenon within public services.

Expert interviewees helped to trace the implementation of co-design in the public services arena. One interviewee provided an insight into how this was adopted in the NHS, explaining that when the policy document ‘Creating a Patient-Led NHS’ was reviewed, they found some shortcomings in practice:

> ‘We started to look around and said “ok, what, who else is a service and how do they look at linking in with their users”. And we looked at airports, we looked at hotels, and the retail industry. And actually what came to us while we were looking at those is that
there is a common denominator of an organisation that works with all of those people and that was service designers’

Within a neo-liberal context, it was private sector practices that were adopted and adapted rather than looking toward the rich history of social welfare movements and their campaigns for greater service user involvement, based within a philosophy of rights. The opening up of the public sector to private sector practices meant that many service design companies were increasingly looking to the public sector as a new context within which to apply their methods.

‘In lots of ways the only reason we’ve got designers punching around in public services is because it is a smart business opportunity for them. 75% of people are in services, public services have grown as a proportion of that. There’s good scope for being a designer in that, but actually they are on territory that other people have been on for a long time’, (Local government, expert interview, 04).

‘It seems that designers have come into fashion and everybody would like to have designers because now design methods seem to be what is hyped by organisations and I think that design companies profit a lot from that trend right now’ (Expert interview, 06).

The current policy discourse surrounding co-production is diverse and whilst Hurst (2009), a disability rights campaigner, highlights that co-production means that outcomes ensure that human rights are embedded over political and economic concerns, policy discourse on co-production and innovation is becoming increasingly associated with making public service cuts.

‘There is a slightly hard nosed, mean version of this which is that the better people are at self-resilience, the less of a drain on the tax payer they are going to be. So you can play that to a very hard line Conservative audience and you can say much the same things from an empowerment point of view to different sorts of audiences’ (Local government case, staff).
In contrast to these approaches welfare service user movements have tended to contest aspects of service provision and promote alternative models and emancipatory changes. Such movements and organisations tend to have less resources, power and influence within policy processes (Beresford, 2001, p.349). Independent user groups can be seen to have emerged from the failure of traditional services to meet the needs and rights of citizens who have had to use them. Groups are often instigated and run by users and activists who may give their time freely, some of whom may have become radicalised as a result of adverse experiences of services (Williamson, 2010). Groups have highlighted the political and social aspects of experience, attempting to transform wider structural power relations and establish emancipatory changes, contesting mainstream public service provision at a macro-deliberative and political level. Engagement with these social movement groups occurred less within these projects, tending instead to focus on more organisational and localised issues.

7.6 Conclusion

These three data analysis chapters have illustrated different collaborative processes that occurred between staff and citizens over a wide variety of different contexts. The consistent theme through all of these cases is that the collaborative processes could enable the mechanism of intersubjectivity between different stakeholders which was often facilitated by emotional recognition. However different service contexts impacted upon this process and such mechanisms were easier to facilitate within some services than others. This chapter has highlighted how it was essential to tap into the motivations of both service users and staff in activating long term involvement within these processes, in order to instigate changes as a result of the projects. Whilst service user involvement was key to highlighting what could be changed within services, it was the positions and resources of staff alongside their own motivations and values that could lead to significant changes within organisations. In this way, when considering the overall research objective of how staff and service user participation interact, the extent to which service user involvement is embedded is dependent upon both staff’s actions and their institutional and cultural contexts. To have impactful service user participation, staff themselves need to be open to reflection and critique and have time, resources and space to be able to respond to issues raised by service users. The structural and contextual features of organisations set some of the limits of participation, providing the broader situational logics for these collaborative
processes. Policy contexts can define the terms of reference, logics and discourses within which these collaborative projects operate. These empirical findings are now discussed further with respect to key theoretical debates within the discussion section of chapter 8, drawing final conclusions to this thesis.
CHAPTER 8

Discussion and Conclusions

8.1 Introduction

This final chapter draws together empirical findings alongside theoretical reflections and presents the theoretical, methodological and policy implications and contributions of this thesis. I began this research by considering how worker participation and service user participation interrelate, empirically exploring the two forms of participation within institutional contexts in projects that facilitated collaborative action between employees and service users. Case studies and expert interviews were chosen because they provided examples of where both staff and service users had collaborated together to develop public services. Taking a critical realist approach I have attempted to explain the underlying mechanisms that have enabled this collaboration between workers and service users to occur. I have also analysed the influence of particular organisational and policy contexts of these collaborative projects, and examined their outcomes, significances and limitations. Understanding this process of collaboration through a power lens enables an analysis of the uneven and dynamic relationships within these collaborative processes. This final chapter firstly summarises the findings of this thesis with respect to the research questions set out in Chapter 1. It considers the implications of the findings with respect to theoretical insights, methodology, policy and practice. The strengths and limitations of the study are reflected upon before considering future research implications. The thesis is completed with some final reflections upon the research process and findings.

8.2 Theoretical implications

The theoretical contributions of this thesis are considered here through an analysis of the research findings, discussed through the consideration of each research question in turn.

8.2.1 The processes and mechanisms of staff and user collaboration

The first research question considered the processes and generative mechanisms that facilitated collaborative relationships between staff and citizens and enabled change to occur as a result of this collaboration. Peters and Pierre (2000, p.9) suggest that the mutual
empowerment of ‘clients, lower-level officials, senior officials and local communities’ cannot be achieved, ‘attempts to enhance the power of all these players in the policy process is argued to create the probability of political conflict’. However, the examples in this thesis have demonstrated that mutual empowerment can be achieved, albeit through a carefully facilitated process that focuses upon the emergence of shared interests and concerns between different stakeholders, generally within institutional and situational logics. This section explores the research findings with respect to the framework of co-participation, developed within Chapter 3 and outlined within Figure 3.2. It further explores the collaborative processes and generative mechanisms that occurred within the projects, reflecting back to theories of deliberative democracy, co-production, co-design and co-creation. The importance of space to facilitate more relational rather than transactional approaches was illustrated within section 6.3.3. Here these findings are related back to section 3.4 which explored relational aspects of public services from different theoretical perspectives including service management literature, emotional labour, ethics of care and rights-based person-centred approaches.

Chapter 3 created the heuristic framework of co-participation to provide an analytic structure to explore the different elements of staff and service user collaboration. It has been found that in most cases service user involvement was dependent upon the extent to which staff created spaces and engaged with such collaborative processes. Because users were reliant upon staff to make changes within institutional procedures as a result of their involvement, staff themselves needed to be empowered and enabled to make changes. The importance of staff involvement as an avenue to greater service user involvement has also been highlighted by Beresford et al. (2011). The heuristic model of co-participation highlights this interrelationship between service user and worker participation and centralises the importance of both within institutional participative processes. In order for the collaborative projects described in this thesis to be successful the sponsorship and endorsement of front line and senior managers was important, creating the permissions, enabling resources and promoting the approach through the organisation. In terms of sustainability, managers had a key role in enabling ongoing participative mechanisms, developing their own management practices in more participative and empowering ways alongside ensuring ongoing forms of service user and staff participation. These findings can
be presented in relation to Figure 3.2 which analytically separated the key agents and their roles and the resources they bring to collaborative processes.

**Service users** Service users have access to the organisation’s decision making processes to the extent that staff enable them to. They may not have the same technical or professional knowledge that staff do and may be reliant on particular professionals and organisations for continuing services and resources. Theoretical concepts of co-production and co-design assume that service users are both active and motivated to participate within projects, however empirically this may not always be the case, as some service users could not get to meetings due to their ill-health. These issues can be seen to be associated with an academic critique of co-production where people may need additional support in order to participate and develop resources (Ferguson and Woodward, 2009) before they can contribute to these projects. If co-production focuses on strengths and assets of citizens, it may overlook the imperative to ensure that universal human needs are met (Dover, 2009). Service user motivation to get involved is key to enable co-production and co-design processes. Within health services this motivation could come from a sense of reciprocity where service users wished to ‘give something back’. Some participants saw that participation may achieve something of value either to themselves or others who might use particular services in the future. The importance of ongoing long term interaction with particular public services can positively influence the extent that service users may get involved in collaborative projects. It was highlighted how these ongoing relationships with particular services made a difference to people’s motivation to participate. The content of participation had to be of interest and importance to service users. Involvement in the actual processes of change alongside feedback about staff instigated change processes supported people’s long term motivation to keep involved within collaborative projects. Motivation seemed to be based upon pragmatic rather than political concerns, following Bang’s (2005) concept of ‘everyday makers’.

**Staff** Within institutional processes staff were often the agents who needed to initiate changes within services and the extent to which they could do this, sometimes depended upon their own influence within organisations. However it was also reported that collaborative work with service users often helped staff to legitimise and authorise changes that may have been more difficult to implement if they had not been directly working with
service users. The values, motivations and identity of professionals were important in ensuring their long term commitment to collaborative processes. Where professionals’ values were aligned with a strong sense of service user involvement the collaborative processes provided a new avenue through which they could encompass wider and deeper service user involvement within their jobs. Such staff were often very enthusiastic about the collaborative projects within the evaluation interviews. However not all practitioners engaged with the participatory projects in this way and factors that may have influenced this included the amount of time that they had to get involved, professional focus and values, and the extent to which the content of participative processes related to their job responsibilities. One particular limitation of this study was that interviews focussed upon people who had got involved within the collaborative processes so it was not possible to fully represent the reasons why some staff did not get involved.

**Managers** It was seen as essential to ensure at least some senior and service manager sign up to collaborative projects, although it was not considered essential that everybody within senior teams knew about and promoted the work. Managers needed to support and help to create the conditions for the projects to succeed. Where senior figures overtly promoted and engaged with collaborative projects this seemed to increase legitimacy and impact over a wider sphere. It was harder to instigate projects where there was not any senior sponsorship, thus it can be seen that within institutional participative processes it is power holders who give permission, and in effect, lend out control to enable collaboration to take place. The role of senior figures in promoting and sustaining service user and staff involvement beyond the lifetime of the projects was important. Top-down pressures from financial constraints and changing government policy seemed to impact the extent to which more senior figures were themselves empowered within organisations, facing both significant top-down directives and bottom-up operational pressures.

**Collaborative processes and mechanisms** Projects initially based their work on forms of ethnographic investigation, understanding the perspectives and lived experiences of different stakeholders. Such processes did not start from pre-formed questions, but began by exploring people’s lives and experiences (Brand, 2009; Yanow, 2009). This helped to bring alive previously unseen aspects of people’s experiences and could enlarge people’s consciousness beyond their own perspectives of daily routines and practices. It has been
illustrated that processes of intersubjectivity and collective reflexivity were key to collaboration. Within the health service, projects often relied upon a sense of emotional recognition and empathic response to catalyse a sense of intersubjectivity and understanding. Other projects in different services have used different activities, such as cooking together or developing a participatory video to bring people together in an informal way. Processes of collaboration centre upon finding issues of mutual concern and interest that different participants within groups could identify with and effectively sign up to. These purposes were carefully drawn out through understanding different people’s concerns, finding common areas and generating broad consensus from different participants on ways forward. In this sense facilitation was based on developing a shared understanding of ‘common goods’ that diverse stakeholders agreed with. The project processes tended to focus on areas where consensus could be built rather than fundamental conflicts and differences of interests. In this way the processes were unlike trade unions and independent social movements that may build their action upon contestation and conflict concerning wider structural power relations.

The key mechanisms of the projects followed theories of deliberative democracy, enabling processes of intersubjectivity which led to understandings of the ‘common good’. Facilitators developed intersubjective practices that enabled consensus about collective objectives (Vitale, 2006), different stakeholders coming together to negotiate common definitions of a situation and agree on ways forward (Habermas, 1987). As illustrated within Chapter 7, the project processes did tackle some critiques of deliberative democracy where emotional expression and informal participative processes occurred in some areas. The extent to which these collaborative processes enabled critical reflection upon established power structures (Dryzek, 2000) could be contested. There were areas where some particular organisational practices were critiqued and highlighted as problematic, both by staff and service users and indeed various changes were instigated as a result of this. However not all areas that were highlighted as problematic were able to be changed. Here wider organisational trajectories, strategies, policies and resources had an influence upon which areas were changed, and which were not impacted. Actions instigated as a result of the projects were shaped by structural, cultural and policy contexts. Collaborative projects also mirrored some of the critiques of deliberative democracy, where processes of participation may be more ‘muted’ and ‘institutionally friendly’ (Cunningham, 2002,
p.141) than social movement organisations that tend to critique wider political issues. Wider social inequalities impacted the process of collaboration, enacting ‘structural biases’ (Young, 2001) in some circumstances.

Relating these empirical findings to theories of co-production, co-design and co-creation the focus of this thesis has been on ‘projects’ based on co-production and co-design principles rather than exploring processes of the co-production of outcomes in everyday service interactions. In this way the collaborative processes tended to be overlaid on top of everyday organisational practices rather than them being an integral part of how organisations operated. Both cases made extensive use of co-design methods and principles, using narratives, emotional experiences and ‘touch points’ which could engender understanding between different stakeholders and facilitate more relational approaches between staff and service users. The findings follow Bate (2004) illustrating the importance of leadership that enables ‘havens’ and spaces for this work to take place within, responding to service users’ experiences and engaging with actual complexity rather than acting in accordance with bureaucratic rules and structures (Iedema and Carroll, 2011).

Within both cases service users and providers contributed resources and had voice and some power within collaborative processes. The role of service users within the EBCD process was to share their experiences of services and participate within discussions and decision making about how services could be better designed and provided to ensure more person-centred approaches that led to services better meeting their needs. The content of participation focussed upon already existing and the development of new services. The local government case focussed upon a broader content that was not always confined to public sector institutional services. They worked with voluntary and community organisations, enabling new connections between different groups, alongside supporting the development of a community organisation, led and organised by community members themselves. They fed insights from their work into organisational policy processes and brokered connections between different parts of the organisation and other agencies. In this way they had less visible impact upon specific institutional services. Following Bason (2010, p.153) both projects operated within ‘politically defined visions of the future’ rather than contesting wider structural power relations and political and policy trajectories.
The importance of relationships between staff and service users was identified within section 6.3.3 as an important aspect of the collaborative processes that took participants outside of the confines of their own roles, where people could relate to each other in new ways. These relationships can be explored using the different theoretical lenses that were identified within section 3.4, looking at the contributions of service management literature, emotional labour, ethics of care and rights based person-centred approaches. Firstly concerning service management literature, it could be suggested that some elements of these findings support the ‘virtuous circle’ thesis of Normann (2000) where managerial support, and staff and user empowerment enable improvements within services. However, Normann’s (2000) model does not acknowledge the plural and differential interests between these groups (Korczynski, 2002), only highlighting the confluent. This thesis has found that mutual empowerment can be achieved, but only in areas where specific stakeholders all agree on carefully facilitated shared interests. The content or subject matter of participation is essential to this confluence, and where different stakeholders may have had different interests these potential conflicts became carefully facilitated out of the process, no longer being part of the agenda. Such findings are further elaborated in section 8.2.2 which focuses on interests and alliances within a public service context.

It has been argued that the collaborative projects brought to life the emotional and relational nature of services, supporting staff in putting their own personal and professional values into action. Where the focus of the collaborative work could align with people’s own sense of personal and social identity, this facilitated meaningful and purposeful relationships between staff and service users. However, as illustrated within Section 3.4.2 emotional labour literature based on Hochschild’s (2003) approach cannot account for this emotional expression or interactive and relational process. Theodosius’s (2008) work which integrates emotional labour literature with Archer’s (2000; 2003) conceptions of agency can illustrate how authentic, collaborative relationships can be built between practitioners and service users. Similarly an ethics of care perspective helps to support an illustration of how staff often responded empathically and considerately to the difficulties portrayed within service users’ stories. Reciprocity and respect between service users and staff helped to build these collaborative relationships. Finally, the extent to which collaborative processes are grounded within a rights based person-centred philosophy is considered. Within the literature review on service user participation, two different forms of user participation
have been distinguished (Beresford, 2002; 2009). The managerialist model tends to focus
upon state concerns of efficiency and effectiveness. In contrast to this the democratic model
of participation is built on the collective action of citizens and welfare service users and
focuses on the redistribution and transformation of power relations. It is liberational,
political and focuses on social change with agency, autonomy and independence being
prioritised through a rights agenda, with users often developing and controlling their own
organisations (Beresford, 2002). The projects studied within this thesis did not fit easily
into either of these categories. The processes were not developed on a philosophical basis
of rights. Instead their rationalities and logics were built upon developing person-centred
approaches within institutions, where service users were conceived as active and skilled co-
producers. Whilst the projects were instigated and developed by public sector
organisations, the content of participative discussions derived from the experiences and
priorities of service users and staff. The health service case instigated a substantial number
of service improvements that were derived from the perspectives and experiences of service
users, whilst the local government case enabled local residents to set up their own
organisation, community members taking on the lead roles for this. Thus although these
participative processes were developed through institutions, they exhibited some elements
of both rights based and managerialist participative approaches. They fostered new forms
of embedded collectivity where different stakeholders came together to instigate changes
within institutions, moving against the trajectory identified within section 2.5.3 where
institutionalised forms of participation have generally become more individualised. The
impact of the institutional context is now explored further in section 8.2.2.

8.2.2 Institutional, social and policy contexts

The second research question considered how these collaborative forms of participation sit
within institutional, social and policy contexts. Chapter 2 drew out common themes from
reflections on participatory, industrial and deliberative democracy, this section exploring
issues of equality, the impact of institutional contexts and the dynamics of consensus and
conflict as they emerged through empirical findings, in relation to this second research
question.

Equality Whilst some co-production and co-design processes conceptualise service users
and staff as equal (Boyle and Harris, 2009; Bate and Robert, 2007a; Bason, 2010, p.173),
this analysis has illustrated that staff and service users occupy fundamentally unequal institutional roles with uneven access to resources, knowledge and decision-making. Thus equality, in terms of equal voice and influence within decision making, whilst possibly an ideal to strive toward, can be fundamentally effected by the social positions that different participants occupy and the institutions within which they operate. Within the local government community shop, staff did enable local residents to take control of the direction and budget of the project, working on the edges of institutional boundaries and practices. Facilitators of participative processes can strive toward equality of voice and decision-making as an ideal and practice can be supported through facilitators consistently reflecting upon how uneven structural relations may be influencing processes. For example, the local government collaborative processes tended to operate outside of traditional, professional meeting practices, which enabled a wider representation of different people within their projects. Striving toward equal relations within participative processes is a constantly changing dynamic which may depend upon processes, personalities, the content of participative discussions, contexts and resources. I suggest that by emphasising these ever shifting dynamics, this highlights the need for consistent reflection upon underlying power relations within participation. As Mansbridge (1996, p.54) noted even internally democratic collectives cannot achieve equality of power within decision making. This ideal of equality is particularly difficult to achieve within a wider context of unequal structural and power relations. Here an ethics of care perspective may be of use, as rather than striving toward an ideal notion of equality it acknowledges the interdependence and asymmetric ways in which different people may be connected (Pettersen, 2011). Equality is an important ideal to work toward, but by acknowledging asymmetries of power, these inequalities can be named and worked with in a context of wider structural inequalities.

**Institutional context** This thesis has illustrated how policy and strategy shape the situational logics within which co-production and co-design processes can take place. The projects were often very successful at implementing changes at a service delivery and design level, and the local government case, by working alongside policy makers managed to influence some strategic and policy areas. Although projects did instigate changes as a result of collective reflexivity, the tenacity and strength of underlying structures and cultures should not be underestimated. Archer (2010b) tends to highlight social change more consistently than stasis, obscuring the importance of enduring structural and cultural
features. It is considered that within the cases the structural context seemed to shape the conditions of possibility for collective reflexivity and whilst there were many different examples of improvements, there was less space for innovations that were discontinuous with institutional processes or conflicted with wider organisational strategies and policies. In terms of the wider context of this research, changes in government and new policy directions alongside financial restraints tended to set the context within which these collaborative projects then operated. However perhaps this localised nature of collaborative projects is to be expected if one considers the power relations between individual public service organisations and wider government structures. In terms of policy setting it is usually the government that provides the policy and legalistic framework within which these organisations operate. Thus whilst Newman (2007, p.7) may critique a local government project for only providing a limited set of alternative options for participatory decision making, it is not necessarily the local government agents that have limited the options but the structural and political circumstances. In this way the heuristic model of co-participation and analytic dualism is again useful as it separates staff as agents from the institutional and policy contexts that they work within. Thus it becomes easier to analyse where restrictions in participation can occur and highlights the institutional and policy constraints that organisational agents work within. This was highlighted through interviews where staff talked about how some aspects that service users wanted to change were within their ‘gift’ whereas other aspects were beyond their control. Again the importance of the interrelationship between service user and staff participation becomes apparent where staff may be constrained by their institutional contexts.

**Institutionalisation and independence** These collaborative processes followed the logics of other participatory governance approaches (Fung and Wright, 2003) where collaboration and consensus are emphasised, working within and attempting to transform institutional forms of decision making. Bate and Robert (2010) acknowledge that such institutionalisation may constrain some radical contestation, yet institutional participative processes are nearer to the locus of decision making. Institutionalised forms of participation may focus upon localised solutions in contrast to independent social movements, where personal experience becomes more politicised and wider structural relations, discourses, policies and logics may be contested and challenged. Young’s (2001) contrast between deliberative democracy and social movement activism highlighted several problems of
institutionalised forms of participation, where institutional structures are only legitimised, different groups are excluded, dissent and conflict is avoided, participation operating within limited agendas, mirroring wider structural inequalities. She suggested that both contestation and collaboration cannot occur together and that the constraints of institutionalised processes needed to be exposed. However Young’s distinction between social movements and deliberative democracy may be less stark than she portrays. Public institutional structures already have a strong degree of legitimacy and are unlikely to need to adopt participative processes purely for reasons of legitimacy. Different groups of people who may have less social capital may be less represented within some independent social movements, just as they can be within institutionalised forms of participation. Dissent and critique were not necessarily avoided within these cases of institutionalised collaborative processes but different people’s experiences were used as a starting point to explore areas of commonality. However Young’s point concerning limited agendas was reflected within the research, where structural power relations and wider policy trajectories were not contested within participative processes.

**Interests and alliances** With regard to the dynamics between independent activism and institutionalised deliberative democracy that Young (2001) is concerned with, the actual content of participation is important to examine. There are some areas of focus where consensus and common interests can be drawn and shared whereas there are others where significant claims on behalf of one group may be in contestation to the interests of another group. For example, service users and staff may collaborate to protest against the closure of a local hospital, against the interests of the state that perceives such closures as economically necessary. Service users are perhaps less likely to mobilise around public sector pension rights than they are about improving services that they themselves have experienced. Trade unions and staff may instigate strike action to campaign about employment terms and conditions, but strike action may adversely impact service users as well as the state. As Beresford (2002) notes, the interests of service users are not necessarily advanced by trade unions. The importance of dynamic multi-way alliances as illustrated by Leidner (1993) highlights the fluid relationships between different interests of diverse stakeholders and how these may both combine and interrelate, yet also conflict. Not all areas of interest will be able to be negotiated through cooperative means of participation if concessions to one group means a lack of resources to another. The different dynamics of
conflict and collaboration have already been visualised as processes of ‘boxing’ and ‘dancing’ (Huzzard et al., 2004) within trade union literature. It can be suggested that where different stakeholders may ‘dance’ together, such as within these collaborative processes, the content of participation tended to focus upon areas of localised importance that had joint significance to a range of different stakeholders. Where different stakeholders ‘box’ the content of participation may relate to wider distributions of resources and structural power relations, where one stakeholder’s claims may adversely impact another’s. Not all participative content mirrors this zero-sum relationship where the gain of one party means another’s loss and there are examples within this thesis that illustrate how diverse stakeholders can gain from collaborative processes.

### 8.2.3 Outcomes, significances and limitations

The third research question considered the outcomes, significances and limitations of the collaborative projects. Outcomes are firstly considered where it is illustrated how the many small changes that the projects instigated could have a significant effect upon staff practices and service user experiences. The importance of collective reflexivity across organisational boundaries is considered, illustrating how the projects were different to traditional training and personnel practices. This is related back to discussions within the methodology chapter that theoretically explored interdisciplinarity. The core mechanism of intersubjectivity is extended to explore how interdisciplinary understandings can facilitate greater person-centred approaches, whereby services become centred around the needs of the person, rather than current professional boundaries and contractual relations. The policy implications and limitations of these projects are further explored in Section 8.4 which analyses the significance of the cases within wider public service policies.

As discussed within section 8.2.2 improvements were often aligned with wider organisational strategies and trajectories and it could be critiqued that these projects sometimes struggled to generate wider strategic and systemic change, focussing instead on localised issues. However it has also been illustrated within section 7.4.2 how it could often be quite small things that could make a significant impact to the felt and lived experiences of service users. Within health it has been illustrated how these ‘small things that matter’ can have an important impact upon ‘the difference between a good and disastrous patient experience’ (Greenhalgh, 2009). Thus such small changes and service improvement cannot
be dismissed as having an insignificant effect. Staff often spoke of how their own practice had changed or they could see intangible changes in others’ approaches, however these aspects of changing practices were sometimes harder to evidence. Service users often highlighted the importance of the relational aspects of public services and participants valued the supportive relationships that could be built between service users and front line workers. The collaborative projects enabled staff and service users to discuss issues specific to the service outside of everyday service transactional relationships. Staff commented on how people came out of organisational roles more easily within these processes and were able to develop more collaborative relationships rather than in practitioner-service user roles. However whilst collaborative projects enabled the time and space for the development of these different relationships, this was harder to facilitate in the context of ongoing everyday service practices.

This thesis has highlighted the importance of the mechanisms of intersubjectivity and collective reflexivity where different stakeholders, including managers, workers and service users reach common understandings and agreements. Communication between service users, front line staff and managers within participative processes has been emphasised as key within the development of person-centred services (Beresford et al., 2011). Interdisciplinary interactions can play an important role in developing services that are centred upon the person rather than different professional roles. The collaborative projects created new forms of cross-hierarchical, cross-departmental and cross-organisational communication, yet these processes were not necessarily embedded into the everyday workings of the institutions. The projects enabled horizontal communication mechanisms, but these were not structurally ingrained. This finding augments Alford’s (2009) claims that for co-production and client focus to be central elements of public services, organisational structures need to support connectedness and co-ordination with regard to information sharing and problem solving.

Human resource practices and training within public service organisations have tended to overlook skills and competencies needed for collaborative and relational performance (Osborne, 2010b, p.421). Within the local government case it was seen that their approach was in contrast to traditional training structures where collaboration between different disciplines, departments and organisations was the learning in itself. Through the nature of
collaborative relationships between diverse groups, learning would ensue, where different perspectives, experiences and knowledge enlarged people’s consciousness and would enable people to ‘learn from each other for free’ (Local government staff). Professional education within public management and administration often relies on technical and rational expertise (Yanow, 2009), however these projects opened up possibilities of understanding new perspectives from tacit and experiential knowledge, lived experiences and multidisciplinary perspectives.

I have argued in this thesis that collaborative processes have enabled a sense of intersubjectivity, breaking down boundaries that separate ‘us’ from ‘them’. This can relate both to differences between service users and staff, and staff across different hierarchical, professional, departmental and organisational boundaries. Two concepts, first introduced in section 4.2 are of use here. The intersubjective process echoes strongly with the notion of universal solidarity (Bhaskar, 2010), the conceptual principle that anyone can come to understand and empathise with another person, emphasising unity over antagonism and split. Axial rationality suggests that there are basic logics of human learning that all people can access, which provides a basis for how different people can learn together (Bhaskar, 2010). These concepts form a grounding to illustrate how people from different epistemic perspectives, professions and backgrounds can begin to practically integrate knowledge from diverse fields, including different disciplines and professions, and explicit, tacit and experiential knowledge. In the case of person-centred public services the core focus of this interdisciplinary activity centres around the needs, skills and experiences of service users. Both the local government and NHS case illustrated how different disciplines could share perspectives that supported integration of different aspects of services, based upon the narratives and experiences of service users. Within the NHS it has been suggested that integrated care, ‘based on stronger collaboration among professionals and better co-ordination between services, offers the most promising approach to improving patient care’ (King’s Fund, 2011, p.7). It is suggested that these projects may provide some small and localised examples of how such collaboration may be achieved.

These core mechanisms of intersubjectivity and collective reflexivity could be extended to support wider reflection upon how different services can become reorganised around the integrated needs of a person rather than professional disciplines. The local government ex-
offenders work illustrated how different services were not always integrated around a person’s needs, individuals having to manage gaps, overlaps and contradictions. In order to provide holistic, person-centred support, individual service users may need access to many different forms of professional knowledge and support, which are usually organised according to professional specialisms rather than the integrated needs of a person. Not only are services professionally segregated but also contractually disaggregated into specific units of delivery through market disciplines within public services. Chapter 3 illustrated how person-centred services move away from a rationalistic new public management approach where services are separated into their component parts to a more holistic view of peoples needs and assets, putting the citizen at the centre of public administration and management rather than organisational procedures and structures. Such insights have important consequences for the organisation of public services, a theme which is further analysed in section 8.4 on policy implications.

8.2.4 Power dynamics within collaborative processes

This section primarily explores power dynamics within participative processes. It argues that participation can be reflexively designed in less institutionalised ways to ensure greater involvement from a wider diversity of people. Then a more explicit analysis of different theories of power (Section 2.6) is related to specific findings within this research. It illustrates how the projects exemplified different aspects of both power over and power to and with, illustrating the importance of a theoretical framework that incorporates different notions of power. Finally the dynamics of collaboration and critique within participative processes are explored.

Processes and power relations Section 8.2.2 developed a critical analysis of the extent to which equal relations within collaborative processes could be achieved within institutional and social contexts that are themselves characterised by uneven access to resources and forms of capital. However it has also been illustrated through this thesis that different collaborative and facilitative processes did have an important impact on the extent to which these differential power relations could be evened out. The unequal distribution of social capital can impact different people’s ability to get involved, yet the processes themselves can be designed to be more inclusive. In this way it may not be that people are ‘hard to reach’, rather that institutions expect different groups to conform to their own processes.
Whilst Barnes et al. (2006) question the priority given to ‘representation’ within participative forums, it is suggested here that representation is indeed an important element of participation. Implications for organisations are such that if participation can be designed to suit the different interests and contexts of citizens themselves, and if participative arenas are more accessible and less institutional this may support wider involvement. Whilst Bourdieu’s different forms of capital have been useful to this analysis, its lack of theorisation of conscious reflexivity limits the extent to which it can explore how social change might occur. More innovatory developments that were discontinuous with organisational trajectories tended to operate outside of professionally-based zones where projects worked in line with everyday practices and community contexts of local citizens, such as the Community Shop. This could on occasion produce dilemmas where citizens’ pursuits and interests were not aligned with institutional structures. Within the local government case facilitators became the buffers between citizen led projects and organisational requirements. They ensured that organisational logics and needs were fulfilled, yet at the same time facilitated an open space for community participants to develop their own projects.

**Theories of power** There is considerable evidence to support both an analysis of ‘power over’ that illustrates how participative processes worked within dominant institutional and structural power relations, and one that shows how collaborative action can develop agents ‘power to’ instigate important changes. The fact that changes generally followed wider institutional and policy trajectories could be seen as providing some evidence toward ‘power over’ and Foucault’s notion of governmentality, illustrating how particular logics and practices are exercised by agents in their own self-government. The projects had little impact upon ingrained institutional hierarchical relations and collectivities were overlaid upon unequal structural inequalities. Section 7.5 has illustrated how some of the localised issues raised within the processes may have had wider causes beyond individual institutional arrangements, participation becoming localised, technicised and depoliticised (Newman and Clarke, 2009). Yet a theoretical approach that focuses only upon ‘power over’ cannot account for the emotional connections and sense of collectivity that was facilitated within projects. Successfully facilitated collectivities between different staff and service users enabled a new sense of collective ‘power to’ within a variety of different contexts. Staff found that they could have a greater impact on particular issues and
problems where they worked together across departmental and disciplinary boundaries to change services in ways that benefited future experiences of service users. There were clear examples of ‘power to’ and ‘power with’, following Arendt’s capacity to act in concert and Piven’s (2008) notion of interdependent power. Some interviewees spoke of how staff sometimes had originally felt powerless or unable to instigate changes within their particular service areas. The resources and process of the project provided new avenues and mechanisms for staff to effect change within particular aspects of their working environment that they had control over. Whilst these changes could be small, the projects still had an impact in terms of staff’s own conceptions of the possibility of change, where there was a possibility that ‘maybe something can really happen here’ (Health case, Staff). Many changes were initiated and on occasion organisational policy was also influenced, helping to facilitate a wider culture where staff may feel more empowered to explore what they can change. Tackling neo-liberal reform and a market approach may not be on the agenda, but small steps can make differences over time, as approaches based on complexity theory illustrate (McMillan, 2004). The projects did help to foster a sense of ‘power to’ and ‘with’ that had not been present to the same extent before the collaborative processes had begun.

**Collaboration and critique** Staff and managers may be fearful that service user involvement will bring about challenge and critique (Beresford et al., 2011), however the EBCD process suffuses critique of services with positive experiences and comments which can support collaborative working. Where there was critique of services by patients within the EBCD process, this tended to be done in an understanding and respectful way. Theories of power often use stark contrasts between consensus and conflict yet within the participatory processes that I examined, interrelationships between different agents were much more subtle and dynamic. Both collaboration and critique could occur simultaneously and with careful negotiation and facilitation, processes of critique enabled some agents to reflect upon and change their own practices, although such critical reflective practice was not exhibited by all staff. The extent to which staff and service users could critique wider organisational trajectories was a contingent process where people needed to ‘rock the organisational boat without falling out’ (Meyerson, 2001: 8). The practice of project co-ordinators and facilitators was a dynamic process of both collaboration with different service users and staff and critique, where different aspects of institutional processes where
challenged and changed. This approach was one that was highly relational where trust and understanding needed to be built, creating spaces that enabled critique, but yet did so in supportive ways that didn’t invite defensive rejection but enabled space for collective reflexivity and practical action.

8.3 Policy implications

This section explores the implications of the thesis findings in the light of current policy developments within public services. Current Coalition Bills concerning the health service and local government are under scrutiny, consideration and debate as this thesis is completed. Key aspects of staff and citizen participation as they currently stand within the Health and Social Care Bill and the Localism Bill (2011) are considered in the light of empirical findings of this thesis. The dynamics of competition and collaboration are examined, assessing the extent to which collaborative processes are confluent with marketisation trajectories and policies that promote greater competition between services within England. Reflections upon the theoretical underpinnings of current policy directions and the processes of co-production are then presented, highlighting the disjuncture between market and co-productive approaches.

One of the main mechanisms promoted in both the Localism Bill (2011) and the Health and Social Care Bill (2011) is to increase choice of public services through promoting service provider diversity. Citizen and service user participation feature within the Localism Bill through proposals to enable community groups to challenge and enter procurement processes to run public services, following the ‘Big Society’ approach (DCLG, 2010). Within the current Health and Social Care Bill, the main body for promoting service user participation and involvement within the health service will be through bodies called HealthWatch that will be responsible for ensuring choice, facilitating complaints, and feeding back public and patient views into commissioning arrangements (DH, 2010). However there are concerns about how diverse patient populations will be represented, recruited and trained within these organisations (Murphy, 2011b). This study has pointed to the difficulties of ensuring representative participation where involvement processes may be professionally oriented or dominated. Whilst the health White Paper (DH, 2010, p.3) speaks of a health service where for patients there is ‘no decision about me without me’ the actual process for embedding patient involvement within all different aspects of the health
service seems unclear. This thesis has highlighted the importance of ongoing collaborative relationships between staff and service users within organisational contexts, yet within current policy there seems to be little strategy for how collaborative interactions between service users and staff can be facilitated. The Health and Social Care Bill (2011) is only being introduced within England, with Scotland, Wales and Northern Ireland treading different policy paths (Tudor Hart, 2011). Both Wales and Scotland have rejected reform paths based on choice, competition and the separations of providers and commissioners (Taylor-Gooby, 2008; Andrews and Martin, 2007) which will enable insightful comparative policy analysis in the future. Wales has retained Community Health Councils which provide different mechanisms and philosophies for the involvement of patients (Socialist Health Association, 2012). Thus there is a need to for future research to explore these different policy trajectories and their impact on different forms of participation.

In addition to the overarching Health and Social Care Bill there are a number of policies that promote the importance of patient experiences. For example, the NHS Operating Framework 2012/13 (Department of Health, 2011, p.17) highlights that ‘NHS organisations must actively seek out, respond positively and improve services in line with patient feedback. This includes acting on complaints, patient comments, local and national surveys and results from ‘real time’ data techniques’. The EBCD process, whilst ensuring that patient experiences are at the heart of the process, may need further adaptation and consideration to ensure that patient experiences are continually fed into service improvement processes beyond the lifetime of specific projects. Several staff who had participated within the EBCD process were very keen to find out to what extent patients experiences of the services had changed as a result of their improvement work. Yet within this Trust where the staff worked there were fewer ongoing organisational processes that ensured that information about patient experiences was being continually fed back into ongoing service improvement.

Focussing on the policy context within England, considering that staff engagement is a major priority of the Coalition government where staff will be offered ‘new opportunities to innovate, improve and inspire’ (Cabinet Office, 2011, p.13), there is perhaps surprisingly sparse reference to forms of staff participation within current policies. The emphasis on professional autonomy may sit uneasily with significant top-down reforms. Within the
health service Glasby et al. (2011, p.10) point to the problems that previous NHS structural changes have encountered, suggesting that top-down structural changes may actually ‘damage local relationships’ and ‘make some staff more change resistant’. Within local government, plans by some local authorities to outsource significant amounts of services to different market providers means job insecurity and changes to employment terms and conditions may be a concern for staff. Within both the Localism Bill (2011) and the Health and Social Care Bill (2011) the only detailed mechanism for staff participation is through the opportunity to set up social enterprises that offer public service provision. Within Chapter 3 it was questioned as to the extent to which mutuals and social enterprises might enable a greater degree of staff participation, empirical research of staff experiences in these organisations is currently thin. Partially as a response to this alongside initial reflections on my own research findings, I investigated the possibility of undertaking a third case study that incorporated both staff and service user involvement at a governance and management level. A health organisation that was developing a staff and community co-ownership model under the Right to Request legislation was found and initial enquiries and visits were made to this project. Although it was not possible to conduct any detailed longitudinal work, the two visits that were made to the project gave me an insight into some of the dynamics and issues within the organisation. My own limited observations suggested that changes in organisational structure did not guarantee greater staff and service user involvement. Job security and pension rights were considerable concerns and although organisational structures may have supported wider ‘ownership’, this did not guarantee employee voice and influence within organisational processes. I did not follow up this case further as it did not provide a strong empirical example of staff and service user collaboration, which is what I was searching for, and my resources and time were limited. However such an example illustrates how changing organisational structures does not automatically change organisational cultures (Beresford et al., 2011). APSE (2011) found little evidence to support the claim that co-operatives and mutuals were more beneficial organisational forms than other modes of public service delivery. These co-operatives and mutuals do not represent forms of participatory and workplace democracy, described by Pateman (1970) and Macpherson (1977), and are not based on the philosophy of worker control. Indeed the Department of Health saw its Right to Request Programme as part of a process of stimulating a market for community health services (NAO, 2011). The political emphasis on co-operatives and forms of governance that profess to give ‘power to the
people’ critiquing an overbearing state, may in fact be a ‘Trojan Horse’ that embeds the market as the dominant institutional form (Swyngedouw, 2005).

Section 3.3 illustrated how Conservative policy thinkers such as Phillip Blond highlight the importance of relational elements and mutuality and reciprocity within public service delivery, critiquing the dominance of both the state and market. Yet Coalition policies, whilst picking up on mutuality and community based approaches, merge this with increasing markets and competition within public service provision. However there are incongruities between integrated, collective and relational approaches and a competitive market environment. Top-down policy changes, especially more radical ones such as within the health service, may not support the important cultural elements of participation and collaboration. Collective approaches can not easily be dictated through top-down policy, but require horizontal growth and nurturing, following internally adopted change processes rather than externally imposed change (Beresford et al., 2011, p.363). Within both cases in this thesis staff involvement in collaborative processes tended to be on a voluntary basis and depended upon staff motivation to get involved. However the spaces and opportunities for this may be thin within a financial context of a squeezing of resources and substantial top-down organisational change which may effect some staff’s job security and terms and conditions. More than this, fragmented provider markets that may be generated through current policy proposals can create serious difficulties in providing integrated services across different institutional and professional disciplines, as illustrated in relationships between health and social care (Ham and Smith, 2010). Where health services are easily defined and outcomes simply measured it has been illustrated that competition can bring benefits to service users, yet in more complex cases collaboration and integration is needed (King’s Fund, 2011). Thus for long term conditions or complex illnesses market approaches may not be appropriate as they disaggregate different services according to contractual obligations. Where a person has multiple needs, a market approach may fundamentally contradict with integrated, person-centred services that build collaborative activity across institutional boundaries. The ex-offenders’ project illustrated the importance of working across institutional boundaries to develop person-centred approaches. Yet competitive structures may constrain collaborative working between institutions (Ham and Smith, 2010; Tudor-Hart, 2010). As illustrated within Chapter 3, marketised services rely on underlying theoretical assumptions of public choice theory and principal agent theory,
yet co-production is based on different principles that highlight the collaborative nature of generating public service outcomes. As Alford (2009) has noted, theories of new public management and the separation of provider and commissioner roles within a competitive market are ‘founded upon an inadequate conception of how the provision of public services occurs’ (p. 221). Theoretical concepts that conceive of workers as only producers and service users only as recipients, deny the important and necessary interrelationships between employees and users where services and outcomes are co-produced (Tudor Hart, 2010).

Section 3.2.1 illustrated the fundamental theoretical differences that underlay new public management and market approaches in contrast to co-production, and it explored how the developing model of public value management may better theoretically model these co-productive relationships within public services. However when this model of public value management is transposed into the current policy context several fundamental contradictions and incongruities emerge. Whilst Benington (2009) has developed the model of public value management within a framework based on the public and collective, current policies favour markets and competition alongside individualist modes of participation through consumerism and choice. This thesis has illustrated how the sharing of different knowledge and experience can create new emergent properties that can benefit both workers and service users, yet consumer and choice models of public service provision theoretically and practically set the interests of public service workers against those of service users. Public service consumer models are based upon transactional approaches in contrast to findings within this study that highlight the importance of the relational and interactive nature of public services. Market structures set worker and service user interests as opposed, yet to achieve positive outcomes, public services usually require co-productive relations.

8.4 Methodological implications

This study has been based upon a critical realist framework. This has enabled an analytic approach which examines the interrelationships between structure and agency, exploring how structures set a constraining context for agents, who may through reflexivity and action be able to generate some changes to their structural and cultural surrounds. Section 8.4.1 explores how this theoretical approach may contribute to governance studies,
providing an analytic framework that enables an understanding of how different levels of governance systems may interact and combine to create emergent properties. Section 8.4.2 then overviews the methodological contribution that this thesis has developed. Finally reflections on the process of collaborative research are presented (Section 8.4.3).

8.4.1 A critical realist approach to studying governance

It has been emphasised that there is a need for governance theory to encompass both the roles of social actors and the structures of the state within a more integrated and complete perspective (Peters, 2011). State-centred approaches often focus upon structural elements whilst some participatory governance approaches (e.g. Fung and Wright, 2003) highlight the importance of different non-state actors within governing processes, possibly overlooking the extent to which the state maintains control and steers these forms of participation, defining the conditions of possibility. It was illustrated in section 2.5.1 how forms of participatory governance can often depoliticise and localise issues, where actors are ‘everyday makers’ (Bang, 2005) rather than politically motivated agents. Chapter 7 illustrated how different participative content of localised projects can be caused by wider structural and policy issues, thus the extent to which agents had the power to tackle the causes of particular issues could vary. It has been illustrated how that whilst these collaborative projects did engender a new sense of collectivity and reflexivity, the processes operated within dominant hierarchies and policy contexts. The projects gave actors additional access to resources and processes, yet it seemed that to embed these collaborative processes within an everyday service context was a much harder challenge. Structural power relations were not impacted upon by these projects and forms of collectivity were embedded within hierarchical structures.

Within this thesis it has been suggested and illustrated that a critical realist approach can provide a solid philosophical basis for the analysis of both structure and agency within governing processes. The use of Archer’s (1995; 2000; 2003) work provides a grounded analytic perspective that illustrates the iterative relationships between structure and agency and this theoretical approach has been situated within a political context that also enables a focus upon power relations. It is suggested that a critical realist approach to studying governance may be a fruitful development and may be of analytic use to augment a new public governance approach (Osborne, 2010a). Where new public governance considers
that the analysis of policy implementation and service delivery should encompass the whole system of policy processes, public service organisations and agents within these, a critical realist analytic framework provides the conceptual tools to conduct this analysis. Social processes can be examined within an open complex system, analysing how different elements of policy, institutions, culture and agency combine to create particular emergent properties. The application of a laminated system is also useful to analytically integrate different levels of focus within governance studies. Different governance research may focus upon different aspects of the state, its various policies and institutions and different social actions. Stratifying these different levels of focus with the use of a laminated system is of benefit where different focal points of the state, policies, institutions and actors may require diverse methods. Thus, to explore how the concept of co-production is being employed within policy and for what purpose the use of critical discourse analysis (Fairclough, 2005) may be useful. In contrast to this, exploring how these concepts have been operationalised within specific organisations may require a more detailed, ethnographic study. Using a laminated system (Bhaskar and Danermark, 2006) a discursive analysis of policy can be integrated with studies of specific social actions within particular contexts which are themselves shaped by overall political discourses. Using critical realism allows for an explicit analysis of the interrelationships of these different levels, and the analytic technique of retroduction explores how particular governance levels relate and causally impact each other. In this way critical realism may be able to provide an analytic framework that integrates structure and agency within governance studies, providing an approach that Peters (2011) has highlighted as needed.

8.4.2 Critical realism, realistic evaluation and participatory action research

This section reviews the methodological contribution that critical realism has made to the development of this thesis. Chapter 4 provided an in-depth analysis of critical realism and its associated methodological approaches. Realistic evaluation has been the most operationalised methodological approach that stems from a critical realist philosophy of causality. However several problems with utilising a realistic evaluation approach were highlighted and although the research methods used within this thesis were initially informed by realistic evaluation, they have been developed and extended in several ways, with the support of Archer (1995) and Bhaskar and Danermark (2006).
The utility of this approach has been presented in several ways through the data analysis chapters. Chapter 5 began by introducing the two cases and developed and compared context-mechanism-outcome configurations between the two examples. Chapter 6 employed an analytic dualist approach that examined the structural roles that people occupied, separate from the people themselves, and was therefore able to clearly illustrate that whilst collaborative projects attempted to facilitate equal relations between different agents, when different structural positions are taken into account this illustrates the fundamentally unequal social context within which the processes are situated where there are significant differences in access to resource and decision making power. Chapter 7 extended this analysis by situating the collaborative processes within wider national policy and political contexts, utilising the analytic framework developed within Section 4.4.5. This framework helped to differentiate between different causal mechanisms at different levels, and enabled an analysis of how the collaborative processes activated different causal mechanisms that combined together, within wider policy logics.

Retroducing particular causal configurations and mechanisms did prove to be difficult. Many different dimensions influence and interact with each other, making their analytic separation difficult, different elements of structure and agency being likened to alloys within a coin (Hay, 2002). Yet analytic dualism was useful as a heuristic tool to examine the influence of both structure and agency, upon the other. It is suggested that the use of both Archer (1995) and Bhaskar and Danermark (2006) do constitute a contribution toward methodological approaches where these two different approaches substantially augment a realistic evaluation approach, enabling a far wider analysis of power relations within particular politically based programmes and an exploration of how particular policy logics shaped and framed these empirical examples. Whilst Bhaskar and Danermark (2006) illustrated their analytic approach through one person’s particular disability, this thesis has attempted to apply the approach to a much more complicated organisational process of systemic changes over time, incorporating a wider analytic focus. Despite difficulties in retroducing mechanisms within such complex organisational processes, this study has illustrated how examples of collaboration attempted to facilitate collective modes of reflexivity. Whilst it has been illustrated that this is a key causal mechanism the importance of structural and cultural contexts cannot be underestimated and these could have a
substantial impact upon the extent to which this process of intersubjectivity could be enabled. Whilst other evaluations of co-production and co-design often focus within institutional or programme boundaries, this study has situated such practices within their wider policy and political contexts.

Some of the limitations of realistic evaluation extend from its assumptions that empirical research can be value free and that the researcher can evaluate programmes from an independent standpoint. All research is value based, a fact that action research acknowledges and uses to inform a key aspect of participatory research where social change becomes a central concern. The methodology within this thesis used a collaborative approach with different organisations and participatory methods were used where appropriate. Whilst not explicitly action research, the research approach was active and collaborative with organisations, using interim findings and analysis to feed back and discuss with key project co-ordinators. Research findings have gone on to inform specific organisations’ activities and have supported practitioners in developing further collaborative processes. Thus this research involved collaborative cycles of action and reflection, ensuring the research met the specific organisations’ needs. Whilst Winter and Munn-Giddings (2001) and Houston (2010) illustrate the potential links between critical realism and action research, this thesis has made a tentative step toward integrating aspects of action research with a critical realist approach. It is considered that further development of these two approaches could be productive in providing more methodological avenues for critical realists and a stronger philosophical framework than relativism for action research that provides greater analytic focus on different aspects of a stratified social ontology. Just as within the participatory projects that this study investigated, action research advocates collaborative and co-operative inquiry where differential power relations are dissolved. This thesis has illustrated just how difficult this can be to erase such power relations when participative processes are embedded within social conditions of inequality. A critical realist approach may provide the action researcher with more analytic tools to reflect upon the power dynamics and wider political relations within co-operative and collaborative forms of inquiry.
8.4.3 Collaborative research

As illustrated in section 8.2.4 the concepts of conflict and consensus rendered themselves practically within this research in more subtle dynamics of collaboration and critique which has been a theme in this research, both within actual empirical work and in my own research position where I have collaborated with organisations, approaching the work from a critical realist perspective. I have envisioned my own place within the research as having one foot in the field of practice and the other foot in the field of academia. Between them stood a fence, which was on occasion a difficult and uncomfortable position. Using a different analogy, but one equally vivid and applicable to my own research position, I felt I have been at times ‘walking the tightrope of co-produced research’ (O’Hare et al., 2010, p.245). Many academics have warned about the ‘dangers of dual role compromises and the perils of dealing with practitioners, especially managers who expect relevant research to be congenial rather than challenging’ (Beirne, 2008, p.689). However coming from a practitioner background myself and moving to the academic field my immediate thoughts in developing this research were to ensure practice oriented and applied research. As I have developed this research I have come to understand the dilemmas that Beirne (2008) and O’Hare et al. (2010) speak of, yet I question the purpose and ends of academic critique. It may be easier for academics to critique from the sidelines within academic worlds, but how does this then relate to policy and practice?

There seems to be an inherent dilemma in the study of participation, both worker and service user, where a careful analysis balances both potential gains from participation with an understanding of its essentially political nature, where hierarchical influence and power relations may be diffused and less visible. Incremental reform can be important to participants on the ground, yet is often dismissed by critical theorists as proof that participation becomes a form of co-option (Beirne, 2008). My own reflections considered how academia often focussed upon the critique of participative processes whilst practitioners were more interested to know what made a pragmatic difference to services and experiences. Whilst collaborative relationships with practitioners were managed through being a critical friend, this level of critique was not sufficient for an academic audience. On two occasions I was critiqued in postgraduate seminars as not being critical enough. Just as this thesis concerns the analysis of collaborative relations between staff and
service users, questioning the ends that these processes work towards, in my own reflections I have considered what is the nature and ends of academic critique. Is academic critique just to be placed within restricted access, peer-reviewed academic journals or is it to have practical application? Who are critical academics directing their critique toward, for what purpose and to whose and what ends? Whilst academics can critique participation as a form of co-option, I see that there is a responsibility to actually practically explore how service users and staff can be enabled to generate both more fulfilling and enabling work that supports people who need public services to meet their diverse needs and enable control of their own lives. One can discuss the adverse impact of neo-liberal reform and the marketisation of public services, as I have in this conclusion, but my role as a social actor in this field of policy trajectories is minimal to say the least. However my collaborative role with different organisations does enable me to be a social actor within these fields and here my actions and reflections may be able to impact particular practices at a local level, just as these collaborative projects focussed on issues at a localised point.

8.5 Implications for practice

In addition to the evaluation reports that I have and will write for the case organisations, I have also contributed ongoing thoughts and reflections with various organisers and co-ordinators on collaborative projects. Both cases have been keen to diffuse their practices more widely and this research has supported reflection and action on ways in which collaborative projects can be developed. Both cases have already publicly shared aspects of my work, such as insights and quotes from interviews conducted, using my findings to help develop practices. On occasion, this sharing of work can be challenging in consideration of continuing to ensure anonymity of organisations. In the dissemination and publication of research findings it is important to reflect upon how organisations and representatives are described to ensure appropriate levels of anonymity (Tilley and Woodthorpe, 2011).

I have contributed to a practitioner’s guide on how to develop co-design processes within organisations. Issues highlighted from this research included ensuring that there were wider recruitment channels to encourage a range of service users to get involved in co-design processes, rather than relying upon service users who have been identified by professional gatekeepers. I also highlighted the importance of engaging independent user groups within these processes to incorporate a wider range of views and perspectives. In terms of service
user involvement Beresford et al. (2011) outline a number of positive approaches and it is useful to reflect upon these in the light of findings from this research. This research has studied a variety of different processes that had the aim of involving staff and service users within processes of developing person-centred public services. Some participative processes were quite formalised and institutionalised, whereas others were casual and informal. The local government case used different activities, alongside informal meetings in cafes to involve different people and had considerable success in engaging with people that might be deemed as ‘hard to reach’. Their informal approach enabled easy access and it has also been highlighted in other studies on participation that more formalised professionally styled meetings may put some service users off getting involved (Beresford et al., 2011, p.322). Ensuring an easy and accessible format where people do not feel intimidated or nervous about getting involved is important to ensure greater access to participative projects. Beresford et al. (2011) note the importance of regular involvement where participation occurs in everyday service interactions as well as collective processes. Within the cases they were successful at enabling and sustaining collective involvement over a period of time, however it was less clear how the projects may have impacted everyday ongoing involvement within service interactions. The cases tended to operate on a project basis and it was unclear as to the extent to which ongoing organisational processes were instigated to involve service users on an everyday basis. As well as resourcing specific projects that involve both service users and workers, thought needs to be given to how these processes are embedded within everyday practices beyond the lifetime of specific projects. In addition to this cross-hierarchical and cross-departmental communication channels can support greater responsiveness to the needs of service users as they arise in the course of everyday practice. Organisations may be better able to respond to ongoing issues arising from everyday practice with wider and more inclusive ground-up communication and involvement mechanisms for service delivery staff.

One of the main findings of this research is that the involvement and engagement of staff supports the involvement and engagement of service users, both in everyday practices and in specific involvement projects. Where staff have greater freedom and autonomy to respond to the needs of service users, this enables user involvement to have greater impact. However not all staff may naturally be inclined to get involved with projects and others may need training and additional support and resources to involve service users. Greater
staff participation supports wider service user participation and staff need motivation, support and their own involvement mechanisms to ensure that user involvement creates an impact upon the organisation. However there is an important proviso to these findings. Participative mechanisms that fit the context of people’s own lives are significant in users’ motivation and inclination to get involved. However if participative forums, such as meetings of the Community Shop, are very informalised, this in turn can produce difficulties for professional acceptance of these spaces where professionalisation induces a form of legitimation. Some professionals may feel much more comfortable taking part in a traditional professional meeting structure than they would an informal gathering where aims and methods are less clear. In addition to this, section 7.3.1 illustrated how where there were possibly wider perceived gaps between staff and service users, intersubjectivity and collaborative action was harder to catalyse. For example in the EBCD project, many of the service users I spoke to who were involved in the co-design improvements had professional backgrounds. Knowing the ‘rules of the game’ within professional meetings enabled them to contribute cogently and effectively. In contrast, within the Community Shop, whilst community participants felt comfortable and in charge of the group, some professionals were more disparaging of the group. This brings to question the degree to which one single inclusive dialogic sphere, based on the principle where staff and service users contribute equally, is able to facilitate collaborative action where there are greater perceived differences between staff and service users. These practical dilemmas relate back to the theoretical discussion in section 2.3 on multiple public spheres within deliberative democracy and have important implications for the question of how staff and service users can collaborate together. Fraser’s (1997) critique of a ‘single, comprehensive public sphere’ where staff and service users can collaborate together may actually exclude some people on the basis of its modes and logics of operating. Instead Benhabib’s (1996, p.73) ‘plurality of modes of association’ may enable wider inclusive involvement, yet potentially reduce communication channels between different interest groups through the interconnections between multiple public spheres. These dilemmas were more apparent within the local government case that worked with ex-offenders and low income families. In such contexts collaborative partnerships between staff and service users were sometimes harder to facilitate. Bourdieu’s theories on fields of social practices and habitus are particularly relevant here. Where people inhabit distinctly diverse fields, collaborative action across such boundaries may be harder to facilitate. This has important implications for the
practical potential of ‘co-participation’, as it suggests that where perceived differences between staff and service users is greater, it may be harder to facilitate more equal and collaborative relationships between staff and service users who may have potentially more diverse interests with fewer overlapping concerns.

8.6 Directions for future research
This section considers three major areas for future research. The first relates to the substantive focus of this thesis, exploring directions for future research with respect to practices of co-production and co-design within public services. The second concerns the methodological implications of this thesis, developing further theoretical links and methodological approaches from the fields of critical realism, complexity and action research. The third area for further research considers the importance of the relational perspective in contrast to the conception of agency as an autonomous, self-seeking individual.

The findings of this research are being built on already by different project partners involved in the EBCD project. A practitioners’ guide has been developed alongside using this evaluation research to explore EBCD as an approach to improving patients’ experiences, alongside other tools and techniques. I have been invited to other health research organisations that are using co-design within health services to present and discuss evaluation processes for co-design projects. South University are using some of my research findings and are further developing a wider evaluation of the project and its diffusion through other cancer services within the two Trusts. This research is also seeking to understand current patients’ experiences of the improved services, to explore whether the actions taken as a result of the co-design improvement process have led to improvements in current patients’ experiences. Are the same issues being highlighted in patient narratives or have the improvements tackled the causes of some of the difficult experiences that patients had? Within the local government case, their work has moved onto health services and there is potential cross-learning that can occur between the two projects. Long term sustainability of the projects, continuing and embedded worker and user collaboration and the impact of specific improvements made are all potential topics of future research. More than these project specific implications, there are continuing developments within wider
policy discourses and developments in public service co-creation. NESTA in their predictions for 2012 suggest that:

‘In 2012 a growing movement of leaders will challenge the separation of public and private sectors, united in a desire to generate social value through services that respect the complexity and chaos of human life.... This will destroy the dominant authoritarian style of public service management, where tasks are clearly defined and excessively monitored.... In its place will come a more participative and networked leadership style, involving employees, users and beneficiaries in co-creating solutions with those they intend to serve and depend on’ (Pope, 2012).

So roll on the future for co-creation? Such perspectives are derived from an ‘Open Public Services’ model as a normative good where different agents can share perspectives and collaborate together to develop innovative solutions. However this thesis has highlighted the importance of understanding the power relationships between different actors within such processes and the fact that co-creation is being framed and promoted in this way at the same time as the continuing marketisation and privatisation of the public sector. Further research is needed to analyse the use and development of co-production and co-creation as policy discourses that support the marketisation and privatisation of previously public sector services within a context of economic austerity.

The second area for future research is the development of a critical realist evaluation approach that goes beyond the technocratic approach of realistic evaluation (Porter and O’Halloran, 2012). Chapter 4 provided an important critique of realistic evaluation and its analytic weaknesses with regard to exploring power relations and the discursive and policy framing of particular ‘social problems’. This thesis has attempted to overcome these limitations of realistic evaluation by employing additional analytic tools developed from both Archer (1995) and Bhaskar and Danermark (2006) and it is considered that this approach can be much further developed to create a critical realist methodological approach to studying phenomena within their political and policy contexts. This methodological approach would follow Taylor’s (2006) important commentary that highlights the importance of the discursive construction of particular policy projects and deconstructs the ‘common sense’ of policy making’ (Taylor, 2006, p.246). This has two implications for
further research, both further developing and enhancing this methodological and analytic framework alongside utilising it to further analyse some of the findings within this thesis. This has been initially attempted within section 7.5.2, however there is much wider scope to conduct a deeper discursive analysis of some of the material within this thesis, alongside wider policy discourses on co-production. However the methodological implications of this thesis go beyond the development of a critical realist evaluation approach that takes account of power relations and political and policy discourse. Section 4.3.4 explored the relationships between critical realism and action research, this study analysing co-design processes (based on action research principles) through a critical realist perspective. Section 8.4.2 discusses the relationship between critical realism and action research within this thesis and it is suggested here that there is much potential for further theoretical development between the two approaches. The application of a critical realist approach may support action research with a greater number of analytic tools to explore power and wider political dynamics within collaborative forms of inquiry. Links between critical realism and complexity have also been discussed within the methodology chapter and it is suggested that there are many potentially fruitful links between critical realism and complexity.

The final area for further research considered here relates to the importance of the relational perspective in contrast to the conception of agency as an autonomous, self-seeking individual within markets and public policy. Vargo et al (2008), Vargo (2011) and Chandler and Vargo (2011) develop an understanding of market relationships from a systemic, interconnected approach where value can be seen as an emergent property arising from actors who act as ‘resource integrators’ within ‘shared systems of exchange’ (Vargo, 2011, p.220). Whilst various weaknesses of this argument were suggested within section 3.4.1 the utility of this approach stems from its basic challenge of the hegemony of Adam Smith’s legacy of tangible resource outputs and rational, autonomous actors. The focus on interconnection and the relational has also been explored from the perspective of a feminist ethic of care where a ‘relational ontology’ (Sevenhuijsen, 2000, p.9) can help us rethink wider political theory and social justice perspectives (Tronto, 1993; Sevenhuijsen, 2000). In line with Reason’s (2003, p.114) intentions for action research in that it ‘contribute to the flourishing of human persons, communities and the ecosystem of which we are part’, some of my own future research interests lie in exploring these different relational perspectives,
incorporating work from ecological systems thinking and drawing on approaches developed both within Scotland’s Centre for Human Ecology and Schumacher College.

8.7 Strengths and limitations of the study

This thesis has explored the interrelationships of service user and staff participation, studying processes of co-production, co-creation and co-design and grounding its analysis in a wider understanding of the theoretical and political history of participation. The theoretical approach has highlighted both the active and constrained nature of agency within social, institutional and political structures, and has not restricted its analysis to just one level of focus but has explored the interrelations between agents, institutions, cultures and wider policies. It has explored both ‘power over’ and ‘power to’, illustrating how these different elements of power were apparent within empirical data. Through its methodological approach it has illustrated how specific use of critical realist analytic tools may enhance a realistic evaluation methodological framework.

Some of the strengths of this thesis include its detailed empirical research of participative processes that was enabled through long term collaborative relationships with specific case organisations. However it did not just focus upon these cases and attempted to build wider reflections through the synthesis of a range of expert interviews alongside an examination of other evaluations that focussed upon similar projects. The wide diversity of different contexts and processes enabled a comprehensive focus but made analytic tasks more complicated. Nevertheless it is hoped that through the structured analytic approach taken this has provided an illustration of the similar mechanisms that operated through the diverse projects. Some of the limitations of this study include the focus of analysis whereby the projects that were concentrated upon were examples of where collaboration seemed to be working. Whilst this was a purposeful decision to explore how collaboration worked, the cases used can not necessarily be seen as representative. These issues may have been compounded by my research position where I adopted the role of an independent evaluator within the processes so may have been directed to examples where collaboration was working well. However within the cases there were examples of where collaborative processes had not worked so well which enabled an analysis of the different conditions that supported and constrained collaborative work. Other limitations include the range of people
whom I spoke with within my interviews where staff interviewees substantially outnumbered service user interviewees. This was an aspect of the research that I had no control over as all project participants were invited to take part in evaluations and people volunteered to participate. In addition to this the people who were interviewed had often been involved extensively within these collaborative processes so it was difficult to explore the perspectives of people who had not been so involved.

Considering improvements that could have been made to the research process alongside implications for further research, further detailed case examples would have been beneficial. In addition to this a greater analytic focus on the discourses and logics that operated within the projects would have drawn more insights into how different power relations operated within the projects. A problematisation of both co-productive practices and the concept of person-centred services may have added to an understanding of the embedded logics and assumptions of these approaches. Such an analysis is becoming increasingly important whereby co-production is often portrayed as an answer to the problems of public service cuts whereas user based groups highlight the importance of co-production in embedding human rights over political and economic concerns (Hurst, 2009).

Potential future research includes a detailed ethnographic study of both worker and service user experiences of newly formed mutuals and coops within public service provision, exploring the extent to which these new institutional forms enable stronger participative approaches. Theoretically, stronger links may be able to be drawn between the ethics of care literature, relational elements of public services, emotional labour and public management paradigms, exploring the importance of ontological assumptions of interdependence and relationality. Whilst service management authors (Vargo et al, 2008) explore this within a market context, an ethics of care perspectives may support such a social policy analysis based upon ethics and social justice, replacing economic assumptions of rational autonomous actors. Finally it has been illustrated how these collaborative processes can be seen as small examples of how interdisciplinary understandings and multiple perspectives can be brought together to enable services that are centred upon the person rather than professional disciplines or institutional structures. Whilst this was on a project basis within the case examples, further research is necessary to explore how these
collaborative processes might be structurally embedded within public service provision to support a greater person-centred focus.

8.7 Concluding thoughts

In analysing the interrelationships between staff and service user participation I have illustrated how the impact of service user participation can be reliant upon staff engagement and the extent to which staff themselves are able to instigate changes within organisations. Where staff and service users came together in collaborative projects this could create a new emergent power where staff had more authority and influence to instigate changes that had been agreed with service users. The extent of this emergent power seemed stronger where there were larger groups of a range of multidisciplinary staff and a number of service users, where staff had influential positions within the organisation. Organisational hierarchies therefore had an influence on the extent to which changes could be instigated as a result of the collaborative processes. Whilst some co-production and co-design literature highlights the importance of equal relationships between service users and staff, it has been illustrated that equality of voice and decision making power can be effected by wider social inequalities and unequal access to resources and social capital. Equal voice and power within decision making can be seen as an ideal to strive toward whereby those involved in collaborative projects consistently reflect upon how wider unequal power relations may affect the dynamics of collaborative processes. The concerns of collaborative processes were often localised, and although wider structural issues may have caused problematic concerns, the collaborative processes themselves tended to focus upon local solutions rather than wider structural causes.

Competitive market models based on the production and consumption of commodities may be incongruous with the co-productive nature of public services where outcomes are often reliant upon collaboration between practitioners and service users rather than through passive consumption of services. Current policies tend to be based on conceptions of service users as passive consumers who choose different services on the basis of information provided, overlooking the importance of embedding ongoing service user and staff partnership working through service interactions. Collaborative processes traversed boundaries between different practitioners and service users and have the potential to
illustrate how different public services may become more integrated around the expressed needs of service users, promoting person-centred approaches.
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Appendix 1

**Information sheet for expert interviews**

As part of my PhD I am conducting a series of interviews with a range of experts and practitioners who have been involved in designing, facilitating and developing projects within public services that involve both staff and users in generating service improvements and innovations.

These interviews are part of the larger work of my PhD that involves:

- A series of independent evaluations of projects that engage both staff and users in improving public services
- A review of existing cases that have involved both staff and users in service improvement and innovation.

This PhD is funded through an Economic and Social Research Council Quota Award at the University of Bath.

**Purpose, benefits and outcomes**

The purpose of the PhD is to generate further understanding of both the theory and practice of staff and user collaboration in public service improvement, focussing on concepts such as co-design, co-production and co-creation. The aims of the research are to:

- Compare different tools, techniques and processes designed to elicit the experiences of both staff and users and facilitate collaboration and joint decision making
- Understand how and why staff and user collaboration can generate service improvement and innovation
- Identify the operational principles and management practices needed to support and diffuse such practices through organisations. How can these processes and the changes they instigate be disseminated and made sustainable within organisations?

The final outcomes of the PhD research are to:

- Produce a review and synthesis of cases that have involved both staff and users in improving public services
- Have conducted a range of independent evaluations of projects that have involved both staff and users in service improvement and innovation, focussing on the processes and mechanisms of collaboration, the organisational context within which this occurred and the outcomes achieved for the various stakeholders.
- Provide practical guidance for the implementation, dissemination and sustainability of such projects
- Contribute to the theoretical development of staff and user collaboration within academic literature.

It is intended that this PhD research will be of benefit to a range of people including experts and practitioners in the field, organisations undertaking collaborative projects involving staff and users, and ultimately managers, staff and users of public services. All participants within the research will receive a copy of the summary of the research and outcomes of the project. If any participants are interested in the more detailed findings of the research these will also be available to them through access to an electronic copy of the full PhD thesis.
which will be publicly available via the University of Bath, OPUS Online Publications Store.

**Details for the expert interviews**

You have been invited to participate in an expert interview because of your experience and knowledge in the research area. The subjects covered by this interview will be detailed in the separate ‘Expert Interview Topic Guide’. This is provided to give you some initial guidance and a trigger for your thoughts, the subject areas covered in the interview will be tailored to your own specific knowledge and experience. The interviews will last approximately one hour at a venue convenient to you. All information and data that you give to the project will be anonymised and be kept confidential. If you consent, interviews will be recorded using a digital voice recorder. When an interview has been completed a transcript will be written and you will be able to have a copy of this. You have the right to refuse participation in this research at any time, you do not have to give a reason if you do wish to withdraw from the research and may withdraw any information you have provided. You will also be able to withdraw any specific information from your transcript if you wish.

**Storage of Data**

All transcriptions will be anonymised (identified through ID number) and will be held on the University of Bath IT system. Your transcription will be password protected, the voice recorder and any printed anonymised transcripts/analysis will be stored in a locked drawer.

**Custodianship of the data**

Through the duration of the project I will be the only person who will have access to both participant names and transcriptions which will be stored separately. Anonymised transcriptions may be shown to academic supervisors to ensure monitoring of the quality of the research.

**Use of your data**

The data you provide will be used for the purposes of my PhD research, it may also be used to develop associated papers for both conferences and future publications subject to your consent. Where direct quotes are used within any text they will be anonymised. My final PhD thesis, which may include anonymised quotes from your interview with your consent, will be publicly available via the University of Bath, OPUS Online Publications Store. Acknowledgement and thanks to all participants will be included within all papers.

**Contact details**

If you would like any further information about this research or have any concerns or further questions please contact me at:
Michelle Farr
Department of Social and Policy Sciences, University of Bath, Bath, BA2 7AY

The details of my academic supervisor are:
Peter Cressey
Reader, Department of Social and Policy Sciences, University of Bath, Bath, BA2 7AY

*Many thanks for your interest and any time you can give to support this research.*
Example information sheet for evaluation interviews

This information sheet provides some further details on the research and evaluation of [XXX] within [West] Council. This research is being conducted as part of a PhD study at the University of Bath, funded through an Economic and Social Research Council Quota Award. I am conducting a series of interviews with people who have been involved with [XXX], looking at both how and why [XXX] projects make improvements and innovations in services and the outcomes that [XXX] has achieved from the perspectives of different stakeholders. These interviews will be anonymised and used both as part of my PhD study and for an independent evaluation report for [XXX].

Purpose, benefits and outcomes of the research

The aim of my research is to understand how staff and service users can work together to improve public services. I want to analyse:

- The ways in which staff and service users can work in partnership to develop services
- How [XXX] supports this process and helps people to generate innovations and improvements
- The impact of [XXX] - what differences have [XXX] projects made to services?
- The operational principles and management practices that are needed to support and diffuse such practices through organisations. How are [XXX] tools and practices disseminated and made sustainable within the organisation?

As well as my work with [XXX] I am researching similar projects in different organisations which will contribute to the final outcomes of my PhD research which are to:

- Produce a review and synthesis of cases that have involved both staff and users in improving public services
- Have conducted three independent evaluations of projects that have involved both staff and users in service improvement and innovation
- Provide practical guidance for the implementation, dissemination and sustainability of such projects
- Contribute to the theoretical development of staff and user collaboration within academic literature.

It is intended that this PhD research will be of benefit to a range of people including:

- [XXX] staff who will be able to use this research to reflect upon and develop their work
- Staff and managers in different parts of the council who want to work with service users to help improve services
- Service users involved with [XXX] projects and other service users who may benefit from improved services.

Everybody involved in the research will receive a copy of the summary of the research and outcomes of the project. If anybody is interested in the more detailed findings of the research these will also be available to them through the internet, via the University of
Bath, OPUS Online Publications Store. This research has been ethically approved both by the University of Bath and [West] Council.

**Interview details**

You have been invited to participate in an interview because of your involvement with [XXX]. The subjects covered by this interview will be detailed in the separate ‘Interview Topic Guide’ which will be emailed to you before the interview. This is provided to give you some initial guidance and a trigger for your thoughts, the subject areas covered in the interview will be tailored to your own experiences. The interviews will last approximately one hour at a venue convenient to you. All information and data that you give to the project will be anonymised and be kept confidential. If you consent, interviews will be recorded using a digital voice recorder. When an interview has been completed a transcript will be written and you will be able to have a copy of this. You have the right to refuse participation in this research at any time, you do not have to give a reason if you do wish to withdraw from the research and may withdraw any information you have provided. You will also be able to withdraw any specific information from your transcript if you wish.

**Storage of Data** All transcriptions will be anonymised (identified through ID number) and will be held on the University of Bath IT system. Your transcription will be password protected, the voice recorder and any printed anonymised transcripts/ analysis will be stored in a locked drawer.

**Custodianship of the data** Through the duration of the project I will be the only person who will have access to both participant names and transcriptions which will be stored separately. Anonymised transcriptions may be shown to academic supervisors to ensure monitoring of the quality of the research.

**Use of your data** The data you provide will be used for the purposes of my PhD research and as an evaluation for [XXX]. It may also be used to develop associated papers for both conferences and future publications subject to your consent. Where direct quotes are used within any text they will be anonymised. My final PhD thesis, which may include anonymised quotes from your interview will be publicly available via the University of Bath, OPUS Online Publications Store. Acknowledgement and thanks to all participants will be included within all papers.

**Contact details**

If you would like any further information about this research or have any concerns or further questions please contact me at:

Michelle Farr, Department of Social and Policy Sciences, University of Bath, Bath, BA2 7AY

The details of my academic supervisor are:

Peter Cressey, Reader, Department of Social and Policy Sciences, University of Bath, Bath, BA2 7AY
If you would like to talk further about this evaluation of [XXX] at [West] Council or are unhappy with the process or would like to make a complaint about this research please contact:
[Name and Contact Details]

Many thanks for your interest and any time you can give to support this research.
Appendix 2 Interview topic guides

*Expert interview topic guide*

1. **Overview of projects that interviewee has been involved in**

2. **Processes and methods of staff and user collaboration**
   - What methods, processes and tools are used within the projects? What is the theory behind these processes?
   - How do you select participants/users/front line staff? Issues of representativeness/inclusion
   - Does the methodology used always follow a specific pathway or is it adapted to suit different circumstances?
   - Have there been any blockages/hurdles/points of contention within the implementation of these processes?

3. **Why do these projects generate innovative services?**
   - What is it about this process that facilitates ground up changes in practice?
   - How do the processes support motivation, commitment and action of participants to change services?
   - How do different actors’ interests influence the process? Do some have more power than others? How?

4. **Context within which change occurs**
   - What do you think instigates and inspires organisations to work in more co-productive ways? Are there particular characteristics of the organisations that you have worked with?
   - What management practices and institutional structures enable and enhance collaboration between users and staff?
   - Does it fare better with particular contexts and infrastructures?
   - Does the policy environment enhance or impede change?

5. **Outcomes of the process**
   - What has been the impact and the outcomes of such work?
   - How can these processes and changes be disseminated and diffused through the organisation?
   - Do different stakeholders react in different ways to the projects?
   - What are the long term effects of the program?
   - How does the process increase the power of users and front line staff?

6. **Other projects to include within the research**
   - Other studies/evaluation reports that may be included within the systematic review
   - Other people who would be good to talk to
Interview topic guide for service users in health service case

1. Introduction
   - Can you start by telling me a bit about how you found out about the project?
   - What made you first think you would like to get involved?

2. Processes of the project
   - What were your initial hopes for the project? Was there anything in particular that you wanted the project to do/achieve?
   - Can you talk me through how you have been involved in the project and tell me a bit about what it was like to get involved in the various stages?
     - What was it like being filmed?
     - Seeing the film at the patient event
     - Discussing the service with other patients at the first event
     - How did you feel about staff then going onto watch the film?
     - What was it like at the co-design meeting where staff watched the film, discussion afterwards?
     - Did you feel the priority areas decided reflected your own concerns?
     - Did you get involved in any meetings after the event? Which ones? How did they go?
   - What was it like to work with other patients and staff within the project?
   - What would you say were the best parts about getting involved?
   - Where there any disappointments or difficulties in your involvement?
   - Was there anything that discouraged you from raising issues that you felt were important to consider?
   - What do you think were the most important parts of the process? Why?
   - Did you see any particular obstacles/hurdles that the project needed to overcome?
   - Were there any parts of the process that had a particular impact upon you?
   - Do you think, looking back, that there is anything that could be done differently in the process?
   - Is there anything you think that would encourage greater involvement from a wider range of people? Anything that might put people off?

3. Outcomes of the project
   - Do you feel like you have had the power and resources to be able to change services as a result of the project?
   - What do you think were the successes of the project? Is there anything that didn’t go so well?
   - What do you think it is about these processes that makes these changes to services happen?
   - If you still use the hospital services have you seen any changes that may be a result of the project? Have your own experiences of the services changed?
   - Are there any parts of the service that you think still need to be improved?
   - Was there anything that made changing things within the service more difficult/easier?
   - Are you still involved with the project?
• Would you recommend others to get involved with similar projects? Why/ why not?
• If others were interested in using the approach what advice would you give them?
• Do you feel that these questions have covered your experiences? Is there anything else that you would like to add?
Interview topic guide for policy managers in local government

1. Introduction
- Your own role within organisation
- What are your experiences of working with [XXX]?
- How did you first find out about [XXX]?
- How did you get involved with [XXX]?
- Can you talk me through the work that you have done with [XXX]?
- Relationship between [XXX] and [your department]

2. The development of [XXX]
- What do you see as the key aims and strategic directions of [XXX]?
- What have you seen as the potential blockages/hurdles/points of contention within the development of [XXX]?
- Barriers to [XXX]: local and systemic
- How do you think these should be tackled?
- [XXX]’s aims to bridge service user and staff experiences with policy and strategy. Can you tell me a bit about how you have seen this happen in practice?

3. Context that [XXX] operates within
- How does the work of [XXX] fit with current policy directions?
- How do you think current institutional structures may be developed to incorporate more collaborative ways of working between policy makers, service delivery staff and service users and communities?
- How does [XXX] fit into current methods of performance management and measurement?
- How would you see these needing to develop to take account of more intangible outcomes?

4. Outcomes of [XXX]
- What have you seen the work of [XXX] change? What has it impacted?
- What has influenced or produced these results?
- Why have these changes happened?
- What would you consider to have been the most important of the changes made? Why? What has contributed to this?
- Are you aware of any unintended outcomes/effects?
- What would be your vision of [XXX] in the future?

5. Dissemination and sustainability of [XXX]
- How do you think that [XXX]’s ways of working can be disseminated more generally within [the organisation]?
- Do you envisage any difficulties in promoting and disseminating the work of [XXX]?
- Do you feel that these questions have covered your experiences? Is there anything else that you would like to add?
Appendix 3

Consent form for expert interviews

1. I confirm that I have received a copy of the ‘Information sheet for expert interviews’ for the above project and have had the opportunity to ask questions.

2. I understand that my participation is voluntary and that I am free to withdraw at any time.

3. I am happy for my interview to be digitally recorded and transcribed as described in the information sheet.

4. I understand that I will be given the opportunity to read through the transcript of my interview and have the right to withdraw any information that I have provided.

5. I understand that any of my comments used may be edited and will appear anonymously quoted. I understand that these anonymous quotes may be used in different formats including a PhD thesis that will be publicly available online, conference papers and future publications.

6. I agree to take part in the above study.

________________________________________________________________________
Name of Participant Date Signature

________________________________________________________________________
Name of Researcher Date Signature

When completed one copy of this form is given to the participant and the original is to be kept by the researcher.
Consent form for evaluation interviews

1. I confirm that I have received a copy of the ‘Evaluation of the [XXX] Project, Invitation to take part’ for the above project and have had the opportunity to ask questions.

2. I understand that my participation is voluntary and that I am free to withdraw at any time.

3. I agree for my interview to be digitally voice recorded and transcribed as described in the invitation sheet.

4. I understand that I will be given the opportunity to read through the transcript of my interview and can ask for any comments I have made to be removed and not be used at any time.

5. I understand that my comments (or part of them) may be edited and anonymously quoted. My comments may be used as anonymous quotes in different formats including an evaluation report for the [XXX] project, a PhD thesis that will be publicly available online, conference papers and future publications including books and journal articles.

6. I agree to take part in the above study.

_______________________  ______________  ______________________
Name of Participant          Date            Signature

_______________________  ______________  ______________________
Name of Researcher           Date            Signature