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Journal article

**Personal independence payment forms, a de/re/constructive reading: re/positioning claimants, social workers and social work practice 'through' policy discourse**

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This is the author's accepted version of:

Alex Cockain, Personal Independence Payment Forms, a De/Re/Constructive Reading: Re/Positioning Claimants, Social Workers and Social Work Practice 'through' Policy Discourse, *The British Journal of Social Work*, 2021;, bcab221, <https://doi.org/10.1093/bjsw/bcab221>

## Article Information



Article Type:	research-article
Journal Title:	British Journal of Social Work
Publisher:	Oxford University Press
ISSN (P):	0045-3102
ISSN (E):	1468-263X
DOI Number:	10.1093/bjsw/bcab221
Volume Number:	00
Issue Number:	0
First Page:	1
Last Page:	19
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Accepted Date:	26-10-2021
Advance Access Date :	00-00-0000
	↑

# Personal Independence Payment Forms, a De/Re/Constructive Reading: Re/Positioning Claimants, Social Workers and Social Work Practice ‘through’ Policy Discourse

**Left running head:** Alex Cockain

**Short title :** PIP Forms, a De/Re/Constructive Reading

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## Abstract

This article critically reads a Personal Independence Payment Claim Form. All agents implicated in this form (e.g. the Department of Work and Pensions, assessors, an Office Manager and health professionals) are contemplated although of central concern is the positioning of claimants—or the persons filling in the form on their behalf—and social workers, and the constructions of social work practice resulting from such positioning. This article investigates discourse in the form itself, the discourse claimants are obliged to supplement and the discursive formations this text registers/generates. To read this form, I distinguish between overt, declarative and manifest content and the covert, descriptive, latent, perhaps unintentional but violent content, accessing the latter through a symptomatic reading, which draws upon my interpretation of principles associated with deconstruction, critical discourse analysis, decentering and positioning. Conceiving of PIP-related practice as possessing the dynamic qualities of an ‘episode’, this article argues that although the text provides help with costs, a corollary or side-effect, is that claimants and social workers are made to inhabit problematic positions within discourse/practice. Textual analysis may, nevertheless, unsettle, and re/position and de/re/construct relations, thereby decentering institutionalised ways of being.

This article highlights the problematic positioning of persons like claimants and social workers through

discourse on Personal Independence Payment forms. These positions are discordant with more expansive definitions of service users, social workers and social work in, for example, United Nations and British Association of Social Workers discourse and this discordance may have practice implications. Nevertheless, this article suggests deconstructing seemingly ‘natural’, or taken-for-granted, rules of conduct or practice, may productively defrost otherwise unexamined prejudgments which prevent thinking. [AQ2](#)

**Keywords:** deconstruction, elective affinity, Personal Independence Payment Claim Form, positioning

## Introduction

Critical approaches that register the constitutive role discourse plays in society and the ways language may register/generate unequal power relations have animated disability studies. Scholars have identified how social and medical model discourse interact in policy documents ([Grue, 2009](#)) and how policy documents eschew how ‘disability arises between humans and the world’, in ways that thwart potential for ‘social identity or collective politics’ ([Titchkosky, 2007](#), pp. 74–75). Even ostensibly inclusive government discourse claiming to embrace social inclusion seems to reinforce ‘abled’/‘disabled’ identities ([Cockain, 2018](#)).

Forms—namely, printed documents with spaces to insert required/requested information—have also been investigated ([Graeber, 2012](#)). Meanwhile, articles in this journal have explored the costs and benefits of direct payments (e.g. [Woolham and Benton, 2013](#)), acknowledging the opportunities they may provide for self-determination albeit whilst conceding outcomes may be uneven ([Priestley et al., 2006](#)). Other accounts have documented social workers’ experiences of allocating direct payments in the context of managerialism ([Ellis, 2007](#)).

It is in this context that this article critically reads a Personal Independence Payment Claim Form (PIP) in its 2018 iteration, an object produced by the Department for Work and Pensions (DWP). My attention to PIP began with what Smith calls a ‘sense of a problem ... and of something ... that could be explicated’ ([1999](#), p. 9) when encountering PIP alongside a relative with autistic spectrum conditions. This disquiet was a consequence of the form itself and the ways family members and I supplemented discourse on PIP with words, ostensibly of our own. Later, when discussing PIP during class with students, I became further troubled by the apparent brutality of the form and the way social workers were implicated in practice resembling definitions of structural violence. Structural violence denotes how social structures harm, disadvantage and limit persons in ways which are often subtle, and perhaps even invisible: they are ‘*structural* because they are embedded in the political and economic organization of our social world; they are *violent* because they cause injury to people’ ([Farmer et al., 2006](#), p. 1686, original emphasis). These thwart values like self-determination through the complicity of persons who may be obliged to act in ways which perpetuate their own domination and oppression.

This article, which tests this intuition, seeks to explore how claimants, or addressees, and social workers are positioned through PIP and the interactional identities, and practice, which are made available, and constrained, through the episodes which discursive acts combine to produce. More specifically, after elaborating upon methodological matters, this article investigates PIP itself, focusing especially upon how subject positions are constituted through discourse. Subjects emerge because of the prior existence of discursive positions which individuals then occupy and position themselves within (e.g. [Barker, 2004](#), p. 194). All agents implicated in this form (e.g. the DWP, assessors, an Office Manager and health professionals) are contemplated although of central concern is the positioning of claimants—or the persons filling in the form on their behalf—and social workers and the constructions of social work practice which emerge through such positioning. The notion of positioning is, as Harré explains, ‘based on the principle that not everyone involved in a social episode has equal access to rights and duties to perform particular kinds of meaningful actions’ (2012, p. 193).

Then, this article addresses the discursive conditions which make PIP possible, thereby attending to ‘discourse as actually occurring texts, and discourse as something “deeper” and more abstract’: ‘This second sense derives from Foucault’s ... usage ... where “discourse” is a set of rules constraining the forms and contents of specific acts of communication, who can say what to whom, and the boundaries of what can count as “truth” or “sense” for that community’ ([Hodge and Coronado, 2006](#), p. 531). Finally, conceiving of PIP-related practice as possessing the dynamic qualities of a performance, which connotes how lived storylines unfold in everyday social episodes ([Harré, 2012](#), p. 193), this article demonstrates how claimants and social workers are made to inhabit problematic positions within discourse/practice.

## Methodology matters

Informing the critical reading of discourse in this article are principles associated with poststructuralism, especially the sometimes enigmatic, and perhaps troubling, notion that there is no ‘real’ world although language, or discourse, as well as other signs may, nevertheless, ‘produce’ the illusion of a stable reality, and ‘truth’. Consequently, persons identifying with poststructuralist orientations may explore matters like the ways versions of truth are produced through acts of signification whilst also highlighting the violence and instability of the processes by, in and ‘through’ which signs ‘become true’.

Shaping this article’s stance toward language, or discourse, is Derrida’s critique of dichotomies (e.g. writing/speaking and male/female), and his elaboration upon how one term in a binary may be privileged over the other in ways which produce violent hierarchies (1981, p. 103). Even more central to this article is Derrida’s deconstruction, which exposes how meanings, and ‘truth’, are inevitably and irreconcilably unstable and undecidable (e.g. 1981, pp. 125–126). Deconstruction registers/generates the instability of meanings, highlighting how they are composed of levels, layers and voices even though certain themes and notions—at the centre of the text—may be ‘employed to systematically

exclude or inhibit other themes and categories' (Prasad, 2018, p. 270), thereby producing illusions of stability. Deconstruction thus 'opens up the text' so it may be regarded as encompassing 'explicit and hidden textual levels' (Kilduff, 1993, p. 15). Deconstruction is not synonymous with destruction but strives, as part of the title to this article registers (i.e. de/re/constructive), to decentre forms of discourse and the institutionalised categories of thought, and subject positions, they reflect/generate, so they may be re/de/constructed/constituted.

Also, shaping arguments in this article is not only Foucault's attention to discourse, and the ways it combines with power, to produce truth and knowledge and persons but also his lucid, and compelling, demonstration of how power 'flows' through organisations, people and systems of classification which occupy, inhabit and constitute persons, and the practice they make, and are made by (and through), in ways which disclose how power is productive (Foucault, 1977, p. 194). Emerging through such liaisons are discursively produced positions and persons, so that 'selves are located in conversations as observably and subjectively coherent participants in jointly produced story lines' (Davies and Harré, 1990, p. 48).

Providing tools of inquiry with which to orient towards language is a critical discourse analysis, which is intent upon 'demystifying ideologies and power through ... systematic investigation of semiotic data, be they written, spoken or visual' (Wodak, 2004, pp. 185–186) and seeks 'evidence of the covert exercise of power in supposedly "equal" interactions, or for indications of hidden ideological assumptions about "normal" ways of doing things that disadvantage minority groups' (Holmes and Wilson, 2017, pp. 415–416). To read PIP, I distinguish between overt, declarative and manifest content and the covert, descriptive, latent, perhaps unintentional but violent content, ~~albeit while becoming fixated upon~~ the latter of which constitutes the 'text's underlying presuppositions' (Buchanan, 2010, p. 462).

More specifically, I first attended to particular words, their prevalence and the ways they combine to form chains of discourse albeit whilst ~~being absences or omissions, albeit whilst~~ also asking if there are 'gaps, silences or "absent presences"' (Muncie, 2006, p. 75). To attend to the 'formal properties of the text' (Fairclough, 1989 [2015], p. 58), I initially applied in vivo coding, later making the text subject to thematic coding. My primary focus was upon how claimants are written about, or constructed/positioned, not only in and of themselves but also in relation to other persons, particularly social workers. Although this article is primarily concerned with PIP and the positioning *it* seems to produce, attention extends to other texts and the 'conditions out of which this text emerged': the 'social, cultural and political conditions which make this text possible' (Muncie, 2006, p. 75).

## To the formal properties of the text themselves

The paragraphs below attend to specific words and the ways they combine to form chains of discourse, or syntactic structures, at and beyond the sentence level. These formal textual properties not

only encompass words which pre-position persons, a term which registers a ‘discursive procedure for the ascription of an *attribute* to someone’ (Harré, 2012, p. 195, original emphasis) but also discourse claimants produce themselves. These supplement discourse which precedes and shapes (or pre-positions) their contributions. Attention moves from the surface of the text to sub-text, namely ‘backgrounded, hidden, repressed, or unconscious rather than explicit’ content (Chandler and Munday, 2011, p. 413).

### **Facilitating discourse and signifiers of rights-based policy**

The surface of the text may be read as combining with discourse which claimants supplement to produce an unproblematic framework which functions to allocate/receive resources. Through this prism, PIP may be regarded as a co-authored instrument of public intervention enabling independent living:

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*The form asks questions about your health condition or disability  
... This will help us understand the support you need. (page 3 of  
40)*

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When the right to independent living is ‘shored up by ... resource commitment’, it seems to be transformative, allowing many service users to ‘get on with their lives without having to negotiate continuous processes and obstacles imposed by society’ (Garabedian, 2014, p. 82), enabling freedom, control and improved self-esteem and mental health for service users (Stainton and Boyce, 2004) and widening horizons and promoting agency (Stainton and Boyce, 2004, p. 451).

It is, accordingly, possible to read PIP, and the policy, systems and structures it discursively registers/generates as part of the architecture of ‘right-based social policy’ (Stainton, 2005). This realises notions like empowerment and other beneficial outcomes for service users and carers, which suggest emancipation, defined here as relating to and facilitating ‘enhancing, securing and/or legitimating the power of oneself, another, or a collective’ (Stainton, 2005, p. 289), choice and self-determination. These qualities, or signifiers, seem to index elements of rights-based social policy, namely ‘support for people to articulate their claims’ (e.g. ‘If you need us ... we can provide the information ... in a different format’ (page 4 of 40)); ‘support for people to identify, obtain and manage supports necessary to actualize their claims’ and ‘providing control over the resources’ even though, as Stainton concedes regarding direct payments and people with learning disabilities, factors inhibit rights-based systems from being fully realised (Stainton, 2005, pp. 292–297).

### **How your disability affects you**

On page 1, the heading and sub-heading of the ‘letter’ introduces the form:

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*Personal Independence Payments*


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*How your disability affects you (page 1 of 40)*

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*The use of the pronoun ‘you’ operates in relation to both ‘we’ and ‘us’ through PIP:*  **{Comment by Author: This needs to be in ordinary font/format: these are my words, not those in the form.}**

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*‘This will help us understand the support you need.*

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*Only send us ... information you ... have ... We can’t return any documents to you’ (page 3 of 40, emphasis added)*

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Ostensibly inconsequential pronouns (e.g. you, we, us and them) produce in-groups and out-groups, and self and other. Personal pronouns like I, we, you, he, she and it are personal deictics which position readers either near to, or far away from, not only geographical, social and normative positions but also the speakers of discourse and persons (e.g. readers) who identify/do not identify with the positions such discourse registers. You, in contrast with I, or we, indexes distance, producing separation between speakers/writers and addressee, thereby contributing to the production of otherness and exclusion. This discourse produces a claimant ‘other’ whilst the text, as Fairclough explains of discourse elsewhere, constructs an “exclusive” *we* which refers to the writer (or speaker) plus one or more others [e.g. the GP, and social worker who are “named” in the form], but does not include the addressee(s)’ (1989 [2015], p. 143, original emphasis). Such discourse positions ‘you’, the addressee, as reliant upon more agentive persons who are ascribed with agency. This ideates distance between the positions of the persons authoring the form (e.g. the DWP); those whose judgements and practice the implementation of the form relies upon (e.g. GP and specialist nurse) and claimants, or addressees, whose discourse, and practice, is shaped by these other more agentive actors.

The size and frequency compared with other surrounding discourse also registers/generates power. ‘How your disability affects you’ is in a larger font, so that it looms over the surrounding discourse and



this chain of discourse (i.e. How your disability affects you) is repeated in bold (on pages 1 and 5) and constitutes the substantive part of the footer on pages with an even number—thereby appearing a further eighteen times. Repetition is a rhetorical device through which ideology circulates. Repetition holds discourse together, emphasising moral values, making structure visible (Tannen, 2007, p. 36) by virtue of indexing (underlying) discursive formations and ideologies.

So saturated is the text in allusions to individual lack—which persons engaging with the form are obliged to co-produce—these may be regarded as master signifiers, or what Lacan has called points de capiton, namely a ‘point of convergence that enables everything ... in this discourse to be situated retroactively and prospectively’ (1981 [1993], pp. 267–268). A point de capiton is, as Žižek explains ‘a nodal point, a kind of knot of meanings, ... not ... simply the richest word, the word in which is condensed all the richness of meaning in the field it quilts ... [Instead, it is] the word which unifies a given field, constitutes its identity: it is ... the word to which things themselves refer to recognize themselves’ (1989, pp. 95–96).

These units of language ‘suture’ the field of discursivity, knotting meaning together. These discursive acts (i.e. ‘How your disability affects you’) ‘prevent a shapeless mass of stuffing from moving too freely about’ (Bowie, 1991, p. 74). This (i.e. ‘How your disability affects you’) makes the endless movement of signification cease, thereby producing the necessary illusion of a fixed, unequivocal and unambiguous meaning, namely ability/disability as hermetically sealed, hierarchically ordered and ontologically separate ways of being.

This chain of discourse is adapted in questions which foreground, and even seem to give agency to, ‘health conditions or disability’ whilst making, or reducing, persons (i.e. ‘You’) and their everyday lives (i.e. ‘your day-to-day life’) to inert effects of this without recognising other mediating factors. Claimants are obliged to speak self-subjectifying (and self-subjugating) discourse, constructing themselves as a deficient to meet eligibility criteria/thresholds.

### **Characters—named/unnamed—and storylines**

PIP positions characters (e.g. claimants, GP, social worker and occupational therapist) in relation to each other. The central opposition is between the claimant and the DWP. Each is ascribed unequal rights, duties and positions, although the meaning becomes clearer as they are implicated in events, or episodes and the storylines these contribute to (Harré, 2012, pp. 193–194). On the one hand is the claimant repeatedly pre-positioned as weak, in need of help, deficient and lacking sufficient agency to author their lives. For example, in Q2a, the addressee is summoned to name health conditions or disabilities and the date of their genesis, and how medication impacts these (Q2b). On the other hand, the government, indexed by the DWP, is cast as a beneficent, supportive, facilitating ‘parent’ whose agency compensates for the lack, or deficit, ‘in’ claimants.

Addressees are, then, obliged to supplement discourse of their own. For example, Q3–Q14 compel the addressee articulate how ‘*your* health conditions or disabilities affect how *you* carry out day-to-day activities’ (page 8 of 40, emphasis added). Q15 is preserved for additional information. In so doing, addressees are obliged to position themselves.

The storyline culminates in a coda, which compels addressees to present themselves in a ‘face-to-face consultation’ with a ‘health professional’ (page 36 of 40). The episode this discourse registers/generates dramatises, and operationalises, a ‘test of fitness for citizenship’ (Hughes, 2012, p. 20). Claimants, effectively, become positioned as non-citizens by virtue of being positioned as deficient, lacking, incompetent and unable relative to others implicated in the form, even if they may be ‘absent presences’, namely persons who do not need to fill in the form and invisible others—for example the nebulous normate position.

Despite being repeatedly obliged to articulate their lack, the discourse addressees produce is insufficient—they cannot speak for themselves. Instead, the architecture of PIP subordinates their voice to more authoritative others, for example GP and social worker. Thus, the form discloses an episode in which there are hierarchies of voice—the DWP, the claimant, the experts called upon to judge and validate, the disability claimants produce for themselves through their own discourse on PIP.

The coda to the form (Section 4, entitled ‘What to do now’) highlights how the capacity to name, or label, is not something addressees can bestow upon themselves. Instead, addressees must evidence their disability in a ‘face-to-face consultation’ with a ‘health professional’ (page 36 of 40) and failure to ‘attend’ may impede attainment of PIP (page 36 of 40). Such construction of the consultation and the hierarchical health professional/addressee relationship exemplifies Foucault’s claims about how power-knowledge-truth come together (e.g. 1977, p. 27), in ways that position/produce persons as subjects:

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*The consultation will last about an hour; it’s not a full physical examination, but the health professional will talk to you to understand how your health condition or disability affects your daily life. (page 36 of 40)*

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## Discursive formations

PIP’s intra-textual properties combine with those in other texts to constitute an order of discourse. However, the group of statements (including, e.g. other textual representations of disability in policy documents and popular culture) constituting this order of discourse belong to a discursive formation. Like grammar and syntax, a discursive formation is that which in certain ideological conditions ‘determines what can and should be said’ (Pêcheux, 1982, p. 111).

A discursive formation is like gravity, constituting an environment which makes texts possible and whilst it may seem these texts speak in voices of their own, it is, as Hall explains, ‘discourse, not the subjects who speak it, which produces knowledge. Subjects may produce particular texts [e.g. PIP, etc.], but they are operating within the limits of the *episteme*, the *discursive formation*, the *regime of truth*, of a particular period and culture’ (1997a, p. 55, original emphasis). [AQ3](#)

PIP does not speak with one voice (see [Table 1](#)) but indexes how, as Wodak explains, texts may be ‘sites of struggle’, containing ‘traces of different discourses and ideologies contending and struggling for dominance’ (2004, p. 187). These voices disturb the unity of the text, so the text becomes constituted by ‘warring forces of signification *within the text itself*’ (Johnson, 1981, p. xiv, emphasis added) and the sociocultural, discursive and material conditions of possibility producing them.

**Note:** The table layout displayed in ‘Edit’ view is not how it will appear in the printed/pdf version. This html display is to enable content corrections to the table. [Please click here to view table layout.](#)

**Table 1. Five interwoven discursive formations speaking through PIP** 

Medical model
Normalcy/abnormalcy, ability/disability
Neoliberalism; productive subjectivity—commodification of self
Independence, personalisation—individualism
Managerialism, bureaucratisation (of social work) and violent social work practice

First, PIP hails addressees in ways that reference a discursive formation which constructs disability, and health conditions, as individual, and asocial, problems. PIP discourse denies claimants opportunity to articulate how social and environmental barriers, as well as the wider community, may be part of everyday experience and how these may mediate everyday experiences of disability and persons’ ability to function in these milieus. Ostensibly inconsequential discourse, the implication of which may be communicated more explicitly by adding emphasis to the possessive pronoun and pronoun (i.e. How *your* disability affects *you* (emphasis added)), vanishes the sociocultural, discursive, and material conditions which, as the social model of disability registers, combine to make disability. This discourse indexes a medical model, albeit whilst reproducing it, in ways which maintain disabling relations.

Secondly, dichotomies of normalcy/abnormalcy and ability/disability govern the positioning of persons within the time and space of PIP, manifesting in the othering to which this article has previously referred. Discourse on PIP makes an unequal binary, one of which is ‘dominant’: a power dimension in discourse that might be captured by writing **white/black**, **men/women**, **British/alien** (Hall, 1997 [2013], p. 225) and **normal/abnormal**; **non-disabled** (or **abled**)/**disabled**. The construction of

*abnormal* and *disabled* perpetuates recurring stereotypes common to disability portrayals (e.g. as pitiable and pathetic), especially the notion that disabled persons cannot be ‘part of the workforce’ (Barnes, 1992, p. 17), in ways which are forged upon, and measured against, a productive normate position—a figure who can (as opposed to cannot) (Cockain, 2020).

PIP also indexes, albeit whilst reproducing, neoliberal conditions, or discursive formations which, as Harvey explains, ‘proposes that human well-being can best be advanced by liberating individual entrepreneurial freedoms and skills within an institutional framework characterized by strong private property rights, free markets and free trade. The role of the state is to create and preserve an institutional framework appropriate to such practices’ (2005, p. 2). Claimants are obliged to commodify themselves with the value they accumulate heightened by lack of capacity, although this calculation is determined by more powerful others rather than claimants themselves. By producing self-subjectifying discourse of their own, claimants partake in their own regulation through forms of governmentality, namely the efforts of state and non-state actors to ‘shape, sculpt ... and work through the choices ... of individuals and groups’ (Foucault, 1991, p. 89). This produces, or becomes intertwined with, technologies of the self, namely processes through which persons work on their personalities and so on to ‘play the subject roles having strong resonance with wider socio-cultural discourses’ in ways that disclose how ‘power *circulates* throughout society’, working ‘through ... institutionalized practices that govern ... everyday lives’ (Prasad, 2018, p. 282).

Fourth, PIP is a discursive/material outcome of ‘independent living’ which, as a policy of independence and personalisation, is an iteration of underlying sociocultural and discursive constructions and ideologies of individualism which shape specific organisational forms and practice, including those in social work (Thorpe, 2018, p. 158). Nevertheless, PIP and the discursive conditions, which make this possible register/generate narrow conceptualisation of independence which may obfuscate disabling barriers and the wider shifts which may be needed to facilitate independent living (Garabedian, 2014, pp. 82–83). Notions like personalisation, independence, and individualism are, crucially, shorn of their potentially emancipatory connotations.

Fifth, PIP is made possible by structures, systems and discourses of managerialism and bureaucracy, which define positions for persons like social workers. PIP narrowly positions social workers as merely assessing individuals and families to determine if they meet eligibility criteria, in ways which differ from expansive definitions of social work as a ‘practice-based profession and an academic discipline that promotes social change and development, social cohesion, and the empowerment and liberation of people’ (International Federation of social Workers (IFSW), 2021).

In the ‘Introduction’ section, comprising only Q1, addressees must provide information about ‘the health professionals that support you’; ‘professionals’ who are ‘best placed to advise us on how your health condition or disability affects you’ (page 6 of 40). The form then proceeds to name potential professionals, that is ‘a GP, hospital doctor, specialist nurse, community psychiatric nurse,

occupational therapist, physiotherapist, social worker, counsellor, or support worker’ (page 6 of 40).

These ‘professionals’ side-by-side on the page within the larger ambit of bureaucracy resemble the ‘judges of normality’ to whom Foucault refers: the ‘teacher–judge, the doctor–judge, the educator–judge, the “social–worker”–judge’ (1977, p. 304). It is, Foucault claims, upon such persons that ‘the universal reign of the normative is based’ as these ‘judges of normality’ become instruments for ‘the formation of knowledge by virtue of the how they exert “normalizing power”’ (1977, p. 304). Such persons contribute to an economy of power in which power is devolved and spreads through persons—for example social workers and applicants for PIP—who through such implication and insinuation become nodes, or capillaries, in what Foucault calls a ‘carceral system’ or a ‘carceral network’ (1977, p. 304).

The managerialism, an approach that ‘stresses compliance and rule-governed behaviour rather than critical analysis and reflection’ (Doel, 2012, p. 37), which PIP registers/generates seems discordant with notions like relationship building, critical thinking and courage—characteristics of social work according to different definitions (e.g. Fenton, 2019). Instead, social workers are cast as violent presences who become implicated in threats like:

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*If you don't return the form ... we may end your PIP claim. If you currently get Disability Living Allowance this will stop. (page 1 of 40)*

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It is alarming to note the signatory of this threat is the ‘Office Manager’ (page 2 of 40) and to draw parallels with this strategy of depersonalisation and the distancing which Bauman (1989) claims operated during the Holocaust so that the bureaucrats making decisions over victims had no personal contact with them. Withholding a name limits potential for shared identification and connection. In this terrain of the page, and the practice which these words register/generate, social workers become accomplices in violent, perhaps even brutal, dividing practices and institutionally supported and justified, albeit ostensibly banal and mundane, forms of structural violence. These reduce the world and the persons therein, to simplified ‘abled’/‘disabled’ kinds with social workers implicated in the government of these reductive binaries.

### **Troubled/troubling positions, dissonance and re/positioning**

Discourse produces humans who ‘come into being hand in hand with ... invention of the categories labelling them’ and such making up, fabrication and invention ‘changes the space of possibilities for personhood’ (Hacking, 1986, p. 236, 229). The implications of such ‘making up’ of persons extend to practice since, as Hall explains, ‘all social practices entail *meaning*, and meanings shape and influence

... conduct—all practices have a discursive aspect’ (1992, p. 291, original emphasis). Language and ‘what people do’ combine recursively, a recursiveness this article indexes through repetitions of the slashed term register/generate.

As a woman wearing a dress, or speaking in a certain way, may articulate, or ‘speak’, a type of femininity defined by a dominant discursive formation, so persons implicated in PIP ‘speak’ in ways which cite, whilst invariably reproducing, prevailing iterations of what social work is and who social workers and service users, or claimants, really *are*. Even though PIP is created by an identifiable, and named, author (i.e. DWP) and the people who supplement this with discourse, ostensibly of their own (e.g. GPs and social workers), the words they use, and the meanings these may register/generate depend upon ‘the regime of truth’ (Foucault, 1980, p. 131) of a particular period and culture which accepts certain discourses, to such an extent they ‘become true’. Admittedly, meanings may be negotiated, and perhaps even contested and deconstructed, although through the prism of PIP discourse, and the practice this registers/generates, social work is defined narrowly in ways which do not seem congruent with definitions of social work (e.g. as reflexive–therapeutic, socialist–collectivist) although, admittedly, some readers may find PIP coheres with an individualist–reformist view which regards ‘social work as maintaining the ... social fabric of society, and maintaining people during ... difficulties ... so that they can recover stability’ (Payne, 2005, pp. 8–9).

PIP produces narrow and troubled subject positions for claimants and service users, namely positions considered negative and in need of change in contrast to an untroubled subject position which follows and adheres with discursive and normative ideals and expectations (Arnell, 2017, p. 166)—namely normativity. PIP perpetuates a storyline which consolidates this ‘trouble’, and writes against potentially progressive, or transformative, narratives which would ‘move’ speakers and writers from troubled to less troubled subject positions. Such positions for claimants as in deficit are forged, and fabricated, through the perpetuation of medical model ideology which, despite being critiqued for decades (e.g. Oliver, 1998) [AQ4](#) still shapes policy documents and government discourse, in ways which suggest an order of discourse, and a discursive formation. This not only mystifies and obscures disabling factors in society and the environment but also by virtue of framing, or discursively producing, disability as a property of individuals ‘encourages solutions such as medical intervention and compensatory benefits’ which contrasts with discourse recognising environmental factors which might encourage systemic solutions (Grue, 2009, p. 309).

Social workers inhabit equally troubling positions through PIP, especially by virtue of discordance between this iteration of social work and social values, as defined in other discourses. The positions PIP registers/generates for service users and social workers are dissonant with the theories of human behaviour and social systems, which underpin social work education and practice (e.g. Teater, 2010, p. 17), and which inform the ways social workers intervene ‘at the points where people interact with their environments’ (Lambley, 2010, p. 9). The othering language is also discordant with the more



empowering visions of service users encouraged in much social work discourse. Meanwhile, the positioning of disability, or illness as an individual problem is discordant with much discourse in social work and disability studies which increasingly deploy ecological, systems, eco-systems and relational theories, or models (Hall and Wilton, 2017), and regard disability as ‘an *emergent* property, located ... in the *interplay* between the biological reality of physiological impairment, structural conditioning ... and sociocultural interaction/elaboration’ (Williams, 1999, p. 810, cited in Shakespeare, 2014, p. 73). Pathologising medical discourse on PIP also writes against The United Nations Convention on the Rights of Persons with Disabilities, a human rights treaty intent upon moving ‘from viewing persons with disabilities as “objects” of charity, medical treatment and social protection towards viewing persons with disabilities as “subjects” with rights, who are capable of claiming those rights and making decisions for their lives based on their free and informed consent as well as being active members of society’ (United Nations, n.d.). PIP also writes against discourse ‘within’ social work, which ‘regards the contributions of people with lived experience of social work services and practitioner wisdom as equally valid forms of knowledge alongside other more traditional forms of knowledge generation’ (British Association of Social Workers, 2021).

Such discourse positions social workers/other ‘professional(s)’ (e.g. page 6 of 40) and service users, or claimants/addressees, in an antagonistic relationship which resembles sociological binaries like master and servant, colonel and convict and coloniser/colonised, an interdependence that is mutually destructive and debilitating. Although it is beyond the scope of this article to attempt to measure how the people implicated in PIP ‘use words (and discourse of all types) to locate themselves and others’ (Moghaddam and Harré, 2010, p. 2), PIP produces an environment that has implications upon practice. PIP positions persons in themselves and in relation to other in an event, episode or performance which persons contribute to as it unfolds, in ways which are discursively and practically troubling. Words, or discourse, and the representations they combine to construct, matter, as Richard Dyer lucidly explains: ‘how social groups are treated in representation impacts upon how they are treated and, moreover, that matters like poverty and discrimination “are shored up and instituted by representation”’ (1993, p. 1). Moghadam and Harré similarly observe that ‘with words ... we ascribe rights and claim them for ourselves and place duties on others’; and ‘it is with words that we ascribe rights and claim them for ourselves and place duties on others’ (2010, p. 3). Positioning, therefore, has moral implications, such as ‘some person or group being located as “trusted” or “distrusted”, “with us” or “against us”, “to be saved” or “to be wiped out”’ (Moghaddam and Harré, 2010, p. 2). Positions also ‘determine the way people have access to cultural resources’ (Harré, 2012, p. 194).

## Concluding thoughts

This article has explored discourse on PIP, the words addressees are obliged to supplement to inhabit positions congruent with the eligibility criteria for payments, and the discursive formations, and practice, this discourse registers/generates. Whilst PIP may be ‘read’ as a functional text facilitating

access to resources, it registers/generates troubling sub-text and positions for claimants, social workers and social work practice, positioning them in themselves, to the world and to each other in particular ways. PIP, and the practice it registers/generates, seems to emerge because of an elective affinity—a term Weber deploys to describe the relationship between Protestantism and Capitalism, whereby the teaching of one and the ethos of the other enter a mutually informing resonance and coherence even though, admittedly, people implicated in them may not be cognisant of this affinity (Scott, 2014, pp. 204–205)—between bureaucratic and neoliberal conditions, which register/generate forms of managerialism and not only a narrow iteration of social work but also reductive renditions of personalisation and independence.

Crucially, the systems of belief operating through PIP, especially the current political ideology and social structure of neoliberalism, are antithetical to, or ‘at odds’ with (Fenton, 2019, p. 7), other iterations of social work characterised by relationship building, critical thinking, courage and the importance of human connection (Fenton, 2019, p. 7, 21). Working in such conditions may engender ‘ethical stress’ and ‘ontological guilt’ in social workers (Fenton, 2015, p. 1417) and make students, and practitioners, dubious about linkages between theory and practice; classrooms and the field of practice so they may not be construed as mutually informing and symbiotic but, instead, as detached. However, it is even more alarming to regard bureaucracy through the prism of sociological literature which identifies their dehumanising qualities (Weber, 1921 [1968], p. LIII) and their capacity to manifest in extreme violence. For example, considering bureaucracy through the prism of the Holocaust, Bauman claims this practice was not an aberration in the otherwise functioning systems or structures of modernity but was, instead, a symptom, result, or ‘paradigm of modern bureaucratic rationality’ (1989, p. 149) and, therefore, a relatively ‘normal’ feature of modernity, ‘fully in keeping with ... civilization, its guiding spirit, its priorities, its immanent vision of the world’ (1989, p. 8). More recently, Graeber (2012) has lucidly elaborated upon the bureaucratic imposition of simple categorical schemes onto the world, conceptualising bureaucracy, and the ways this is operationalised, or governed, through forms, as structural violence. Perhaps, most disturbing is that these acts of violence are neither spectacular nor occasional but, instead, unspectacular, routine and ostensibly banal even though for many people, like service-users, these ‘omnipresent forms of structural violence ... define the very conditions of ... existence’ (Graeber, 2012, p. 105).

Power operates through PIP discourse, positioning persons in ways which ‘write against’ values like self-determination, implicating social workers in oppressive discourse and practice which seems to thwart and perhaps even undermine the fight against oppression and search for social justice, which is central to a global definition of social work (IFSW, 2021). These positions are discordant with how social work is taught, the values and theories which underpin, and inform, practice (at least in professional definitions, e.g. IFSW, 2021), and positive accounts of interdependence between social workers and service users, especially in accounts of relationship-based practice. Instead, social workers are positioned as violent agents, or practitioners, of normalisation.



Scrutinising ostensibly sedimented practices and texts discloses how they are unstable, and in process, and dependent upon the complicity of persons to coproduce, and thereby accomplish, not only them but also themselves, albeit in ways which thwart more expansive forms of self-determination. It is vital to question seemingly established and entrenched categories of thought. Change in social work, and the ways in which social workers and service users regard each other, is made possible through critique of “practices” (accepted ways of doing things) and “texts” ... [which] reveal hidden patterns and effects on practice’ (Hafford-Letchfield, 2015, p. 70). Permitting, and perhaps even enabling, discourse and practice to be ‘unsettled’ may, put differently, ‘open up new avenues of questioning practice’ (Hafford-Letchfield, 2015, p. 70), in ways which might expose alternate positions and practice.

This may, for example, uncover how ‘disability is *made* through ... relations’ and through ~~and of~~ ‘the cultural processes that shore up the capacity to divide persons’ (Titchkosky, 2012, pp. 83–84, original emphasis) so that ‘humanity is *achieved* through interactional work that makes use of typically unexamined conceptions’ (Titchkosky, 2012, p. 88, emphasis added). It may, furthermore, make visible, or decentre, the unexamined assumptions which transmit through texts and practice, highlighting how discourse contributes to the social production of reality. Critique may also highlight how personalisation is ‘insufficiently aligned with collective aspects of empowerment’ (Dodd, 2013, p. 260), and thereby permit thinking of more expansive notions of personalisation, or personal care, and individualism as well as independence and interdependence and alternatives to personalisation, like integrated living (Dodd, 2013, p. 267). Critique may further permit alternate positions for persons implicated in social work to occupy and inhabit. These would exist outside the narrow and confined orbit, forged and fabricated by hidden ways of thinking which imagine, and ideate, the world, the persons therein, and the relations between them through reductive, often hierarchical, lenses. These would, moreover, not only write and practice against the systems and distinctions of difference which the discourse and practice to which this article refers registers/generates but also partake in the production of new ways of being and becoming, seeing and being seen.

## Acknowledgements

The author would like to acknowledge the constructive suggestions and support provided by both editors and anonymous reviewers throughout the process from submission to publication of this article.

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