

# Integrated Report on Trust and Distrust at the Street-level of Public policy

## Deliverable 2.2

### EnTrust: Enlightened Trust: An Examination of Trust and Distrust in Governance – Conditions, Effects and Remedies

WP2: Trust and distrust at the street-level of public policy

Work package leader: UNIWARSAW

Due date: 28 February 2021

Submission date: 30 September 2021

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#### Project Information

Project Type: Collaborative Project  
Call: H2020 SC6 GOVERNANCE-01-2019: Trust in Governance  
Start date: February 2020  
Duration: 48 months  
Coordinator: Prof. Dr. Christian Lahusen, University of Siegen  
Grant Agreement No: 870572  
EU-funded Project Budget: € 2,978,151.25



This project has received funding from the European Union's Horizon 2020 research and innovation programme under grant agreement No 870572. The contents of this publication are the sole responsibility of the authors and do not necessarily reflect the opinion of the European Union.

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# Introduction to the Study of Trust and Distrust at the Street-level of Public policy

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## 1. Introduction

In scholarship on social policy and administration, the issue of trust is often analysed in reference to face-to-face relations between the representatives of the welfare state and the citizens. Various strands of research converge in the stance that trust is the essential aspect of relations between frontline workers and citizens (Fersch, 2016; Stensöta & Bendz, 2020).

This report presents the findings of some research carried out within the EnTrust project (Work Package 2).<sup>1</sup> Its aim was to analyse the levels of trust and distrust and forms of trust building in relations between citizens and street-level bureaucracy in the sphere of supporting disadvantaged families. Thus, we carried out individual in-depth interviews with frontline workers of social welfare institutions and citizens who receive social assistance in diverse countries such as: Czech Republic, Denmark, Germany, Greece, Italy, Poland and Serbia. 115 interviews with frontline workers and 117 interviews with citizens in total, conducted between March 2020 and February 2021, helped us collect qualitative cross-country comparative data about the levels of trust and distrust and forms of trust building at local policy level, and to determine lessons for trust building at the stage of public policy implementation.

The perspective we employed in this study seeks to link interpretive standpoints with a search for general issues and patterns of practising and developing trust and distrust in various institutions in diverse countries. Thus, we tried to explore how frontline workers and social welfare users subjectively understand trust, and how they make sense of trust and distrust in face-to-face relations. We also looked for objective processes and contextual factors that have an impact on trust and distrust between caseworkers and social welfare beneficiaries. Our research questions are prompted by literature on street-level bureaucracy, welfare regimes and social work practice.

Overall, we assumed that the welfare state regime might have an impact on trust and distrust relations between frontline workers and citizens. This follows i.a. Rothstein's (2001) arguments that a universalistic, citizenship-based welfare state regime contributes to a higher level of generalised trust and trust between frontline workers and citizens than residual welfare states which adhere to means-testing principles. The former model was found to contribute to spill-over effects between a high level of generalised

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<sup>1</sup> We are very thankful to the social assistance managers who helped us conducting interviews, as well as all frontline workers and citizens who devoted their time to participate in this study.

trust and the trust in the relations between frontline workers and citizens (Fersch, 2016:10). On the contrary, the negative impact of means-testing was proved i.a. by Jewell (2007) who argued that in contrast to the flat-grant welfare programmes, the policies based on individual assessments are detrimental to trust relations between citizens and frontline workers.

We also took into account the scholarship of Lipsky (2010) and his followers who prove a negative impact of high caseload levels and insufficient amounts of money and time. They also show that the control of the managers leads to specific practices when granting clients access to public services. More specifically, existing studies suggest that insufficient time for interaction, low likelihood of frontline workers and their clients meeting repeatedly and a strong asymmetry of information between parties, including not sharing information and not explaining the process of applying for benefits by the frontline workers, making the attainment of mutual trust even more elusive (Senghaas et al. 2019; Brown & Calnan, 2013; Brodtkin & Marston). However, within this stream of research, various analyses have found that frontline workers develop diverse styles of working to circumvent institutional constraints which possibly impact on trust relations. Within these frames, frontline workers' agency may be oriented towards sustaining these pressures, as in the case of "enforcer" or "indifferent" worker (Zacka, 2017), "state agent" (Maynard-Moody & Muscheno, 2000) or "state person" (Møller & Stensöta, 2019). However, it may also seek to resist those pressures, which is a strategy typical of a "caregiver" (Zacka, 2017), a "citizen agent" (Maynard-Moody & Muscheno, 2000) or a "professional" (Møller & Stensöta, 2019) who would develop and use their discretion to meet specific needs of clients and allow a trusting relation with them to thrive.

The literature on sources of trust in face-to-face relations between frontline workers in welfare state institutions and citizens converges in a stance that is the interplay of multifaceted and intertwined factors which create trust. Authors enumerate such trust-promoting features as: civil servants' fairness, equity in providing services, respect toward clients and honesty (van Ryzin, 2011); frontline workers' competences and moral dispositions (Hardin, 2001); clients' perceptions of caseworkers' expertise, judgement, honesty and caring attitude (Behnia, 2008: 1434); clients' perceptions of procedural justice, moral dispositions of trustees, communicative characteristics of relation and feelings (Fersch, 2016); trusting nature and dispositions of the client, trustworthy behaviour of the professional, and the features of their relationship (Robbins & Cook, 2018).

Accordingly, with this study we sought to answer the following research questions:

- What is the interviewees' subjective understanding of (dis)trust?
- What are the cross-country factors that contribute to (dis)trusting attitudes of citizens and frontline workers?
- What is the role of welfare systems and policy design in shaping (dis)trust relations at the micro level?

- What is the role of national (dis)trust cultures in this regard?
- In the case of frontline workers, how do resource scarcity, relations with supervisors, access to scientific knowledge, levels of autonomy and their own values play a role?
- In the case of citizens, what is the role of experiences with frontline workers, local cultures of (dis)trust, including contacts with populist attitudes and individual traits?

## 2. Research methodology

This report presents the findings of a research task (Work Package 2) whose main objective was to analyse the processes of building trust and distrust in relations between citizens and street-level bureaucracy. This was meant to be done in a cross-country comparative manner in order to deliver data about dis/trust building mechanisms at local policy level. Moreover, our goal was to deepen the understanding of (dis)trust building in the sphere of support to disadvantaged families. Finally, we wanted to determine lessons for trust building at the stage of public policy implementation.

The choice of vulnerable families as a researched group may be reckoned as selecting an “extreme case” in methodological terms (Flyvbjerg, 2006) – they represent a group in which trust in state is difficult to achieve. This allows us to understand specific problems which might be at stake. Accordingly, we decided to carry out our study in social assistance institutions. We interviewed frontline workers of social assistance institutions and members of families who receive welfare benefits or services in the seven aforementioned countries (Czech Republic, Denmark, Germany, Greece, Italy, Poland and Serbia). Since there are significant differences in institutional logics and organisation of social assistance in these countries, including i.a. different levels of institutional fragmentation and varying foci on activation, we aimed to find functional equivalents of social assistance institutions in the researched countries. More specifically, we have chosen the institutions or institutional units that provide welfare benefits or services targeted at vulnerable families with children.

Accordingly, we researched the frontline workers<sup>2</sup> of selected institutions who met our major criteria of street-level bureaucracy (Lipsky, 2010), namely: they have a say in granting benefits or services which are important for users; they have face-to-face relations with beneficiaries; they have discretion in handling cases. Thus, some important social assistance institutions which provide benefits to citizens, but do so without meeting the three above-mentioned criteria (e.g. they process applications submitted online and have no discretion with regards issuing decisions) were not included in our sample.

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<sup>2</sup> We use terms: caseworkers, frontline workers and social workers interchangeably.

Table 1, below, provides the list of locations and specific institutions whose frontline workers were interviewed.

*Table 1: Researched cases: Locations, selected characteristics and interviewee numbers*

country	location	institutional affiliation of frontline workers	number of interviewed frontline workers <sup>1</sup>	number of interviewed citizens
Czech Republic	Brno	municipality offices' frontline workers, labour office frontline workers, social housing facilities' frontline workers	15 [13 f; 2 m; experience: 2-29 yrs.]	15 [14 f; 1m]
Denmark	Two mid-sized municipalities: "Toldbro" and "Gammelborg"	family advisers of municipal family departments	16 [14 f, 2 m; experience: 1-22 yrs.]	16 [16 f]
Germany	"A-Stadt": a mid-sized city in the west of Germany and "B-Stadt": a large city in the east of Germany	Youth welfare offices, social welfare offices, jobcentres	21 [14 f; 7 m experience: 5-37 yrs.]	23 [19 f; 4 m]
Greece	Attica region: three municipalities	Community Centres; municipal 'social policy and solidarity services'	15 [12 f; 3 m; experience 1-35 yrs.]	15 [15 f]
Italy	Tuscany region: six municipalities	municipality offices, offices of 'local health unit', cooperatives providing social services, local units of ministry of interior/justice	15 [13 f; 2 m; experience from below 10 to 20+]	15 [8 f; 7 m]
Poland	Warsaw	municipality social assistance centres in five locations of the city	18 [16 f; 2 m; experience: 2-30 yrs.]	18 [12 f; 6 m]
Serbia	Belgrade	City Centre for Social Work in Belgrade and SOS Children's Villages	15 [15 f, experience: 5-25 yrs.]	15 [12 f; 3 m]
<b>Number of interviewees in total</b>			<b>115</b>	<b>117</b>

<sup>1</sup> "f" stands for female and "m" for male interviewees, "experience" stands for length of frontline workers' professional experience.

As presented in Table 1, locations of researched institutions include large cities (Warsaw, Belgrade, one of the German anonymised<sup>3</sup> cities), mid-sized cities (Brno, second anonymised German city, two Denmark locations) and small cities and municipal locations (also anonymised) in Attica and Tuscany. Locations were based on the criteria of availability and research feasibility. Thus, although our findings refer to important country-specific organisational solutions, they cannot be generalised at country-level where the research was carried out.

The second group of interviewees consisted of citizens<sup>4</sup> who were users of the aforementioned social assistance institutions (see Table 1). Given our focus on vulnerable families, we interviewed only those adult beneficiaries who have dependent children. As presented in Table 1, we tried to reach samples that are maximally diverse in terms of interviewees' gender, age and work experience (in the case of frontline workers), although we have female overrepresentation among our interviewees. A high share of women is, however, typical of both social assistance caseworkers and their users.

Interviewees' recruitment procedures are described in country chapters in a detailed manner. Overall, we followed a multistep procedure. In the case of frontline workers, after the selection of specific institutions, we asked their directors or managers for consent to carry out research and to distribute invitations for an interview among employees. Frontline workers were selected as a result of voluntary self-recruitment, or in response to managers' invitations addressed to caseworkers with e.g. the longest and shortest work experience. In the case of citizens, the recruitment process was more difficult and included both advertisements or invitations distributed in social assistance institutions, open advertisements on local public sites and social media, as well as snowballing. Country teams aimed at conducting 15 interviews with caseworkers and 15 interviews with social assistance users, however, in the case of Poland, Germany and Denmark, a higher level was reached due to additional guidelines' testing in Poland (WP leader) and overlapping confirmation of participation in interviews in the other two countries. Interviews with caseworkers were conducted on the premises of institutions, whereas interviews with citizens were mostly held in open public spaces. Covid-19 made our research significantly more difficult. The recruitment took longer than normal and was delayed at times. Nevertheless, whenever possible, we strived to conduct face-to-face interviews. They were done between Covid-19 lockdowns, from March 2020 to February 2021. Only in the case of Italy, due to heavy restrictions, most interviews with citizens were done on-line. All interviews were recorded and transcribed for analysis. Their typical length was about one hour, however the shortest Interview (in Czech Republic) was 36 minutes long, while the longest interviews (in Germany) lasted about 2.5 hours.

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<sup>3</sup> The choice of whether to anonymise the researched location resulted from country research teams' concerns about protecting interviewees' anonymity.

<sup>4</sup> We use terms: social welfare/assistance users/beneficiaries, clients and citizens interchangeably.

Interviews with frontline workers and citizens were conducted with the use of guidelines which were tested in all researched countries. The guidelines consisted of about 25 questions on such specific issues as: the process of applying for benefits and services, interactions with beneficiaries/frontline workers, reflections on trust in general and in social assistance, political attitudes and behaviours (in the case of citizens) and professional background (in the case of caseworkers). Interviews with case workers included one question which is referred to in country chapters as a vignette.<sup>5</sup>

We have conducted inductive qualitative content analysis of the collected material which followed principles of the grounded theory method (Charmaz, 2006). In the first stage, teams in all researched countries conducted open coding of four transcripts (two with citizens and two with caseworkers) and delivered codes with descriptions to the work package leaders. Secondly, a thorough comparison of codes and their descriptions led to elaborating a common set of codes (for interviews with citizens and for interviews with caseworkers) which was collectively discussed and tested by teams. In the third stage, country teams used these sets of codes for a selective coding of transcripts in national languages. The coding process was thorough, line-by-line with use of computer programmes for qualitative text analysis. Country teams also elaborated numerous memos i.a. to reflect on the meaning of trust in specific settings.

At all stages of our research, we paid attention to highest ethical standards. Interview guidelines and informed consent forms have been accepted by the respective ethical commissions from universities where research teams are affiliated. All interviewees gave us informed consent to participate in the study. When conducting interviews, we strived to guarantee circumstances in which interviewees can talk freely in the absence of third persons. At the stage of interviews' transcriptions, we paid attention not only to technical security of files but also to their immediate date anonymisation. When writing the report, we did our best to guarantee interviewee anonymity, as well. Thus, as mentioned, in the case of smaller locations, municipalities' names are not revealed. We also deliberately do not provide detailed information about interviewees' demographic features. Finally, we developed an internal "Quoting policy" document which pointed to several specific ethical issues that must be taken into account when writing the report, mostly focused on interviewee anonymity.

Thus, our analysis resulted in seven in-depth case studies on trust in social assistance institutions. However, unlike typical interpretive analyses, our case studies are not a collection of specific stories about local settings, but are also a comparable qualitative data

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<sup>5</sup> This is the wording of the vignette question: *A couple with children aged 3, 12 and 16 fell into poverty/trouble. The father used to have an unstable and low-paid job in a supermarket, but after an injury a few months ago found it difficult to work and had to cancel his shifts. The mother has been a stay-at-home mother. For some time, she has the symptoms of depression. The family has significant difficulties in making ends meet and they have debts caused by an unpaid flat rent. Their oldest son became aggressive and refrains from attending school. The family has previously used no social assistance schemes and they have little knowledge of what they can apply for. What kind of benefits and services would such a family be most likely to receive?"*

set in which the coherence of perspective and analytical vocabulary<sup>6</sup> is provided. This partial standardisation of findings results from the assumption that our seven researched cases are also a sample based on the “most diverse” comparative framework. Thus, commonalities found among cases suggest the presence of more general practices, problems and practices related to (dis)trust functioning in social assistance.

This report consists of seven country chapters with a similar structure and a concluding chapter. The final chapter firstly juxtaposes major similarities and differences among researched country-locations. Secondly, it seeks to list and analyse those salient repeating issues – themes which we discovered to be relevant in terms of (dis)trust functioning. They include the manner in which our interviewees understand (dis)trust, levels of trust and distrust and forms of trust building, as well as contextual factors.

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<sup>6</sup> This refers to analytical categories. However, country chapters are different in e.g. vocabulary used to name users of social assistance or local institutions. This is a deliberate choice which follows the vocabulary of the national languages we worked in. Thus, e.g. users of social assistance are referred to as citizens in the Danish report and as clients in the Polish report.

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# Trust and Distrust in the Realm of Bureaucracy in the Czech Republic

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## 1. Introduction

### 1.1 Welfare state regime and the organisation of social assistance in the Czech Republic

The welfare state model of the Czech Republic can be characterised as a post-communist hybrid, mixing conservative Bismarckian, neoliberal and social democratic elements. It consists of social insurance schemes with nearly universal coverage, relatively low but redistributive contributory and non-contributory benefits, conservative family policies<sup>7</sup>, and less complex policies and social services with respect to the labour market. The past two decades have seen only limited changes to the hybrid model as all governments aimed to maintain social protection and redistribution, as well as low expenditure (Sirovátka & Ripka, 2020).

Czech social policies aimed at children and families in need are fragmented both vertically and horizontally (Sirovátka, 2014; Kuchařová & Hošťálková, 2016). Universal financial support for families with children involves maternity benefit (replacing women's income several months before and post birth, available only to employed women participating in the sickness insurance scheme, handled by the District Social Security Administration), and parental allowance (a long-term non-contributory benefit for all parents who care for young children up to four years, handled by the Labour Offices). Low-income families are further entitled to long-term non-contributory financial benefits, such as child allowance and housing allowance, and a one-off birth grant (after their first or second child is born). In addition, extremely low-income families who cannot improve their living situation through their own efforts may be eligible for financial benefits aimed at people in material need (living allowance, housing supplement, and extraordinary immediate assistance). All these benefits are handled by the Labour Offices and are primarily contingent on family income; other circumstances, such as housing costs, job seeker registration, etc., are also considered to qualify for some benefits (European Commission, 2020; MoLSA, n.d.-a; n.d.-b). Social services (including social housing) are coordinated and sometimes directly provided by municipal and regional authorities who

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<sup>7</sup> By conservative family policies we mean that these policies are "familist", that is, motivating women to stay at home with small children rather than supporting for and investing in day-care (Saxonberg & Sirovátka, 2007). Although small changes occurred in the past decade, they had no substantial effect on the overall trend (Sirovátka & Ripka, 2020).

often take relatively different approaches (Kuchařová & Hošťálková, 2016). Other providers of services, when registered by local authorities, are non-governmental non-profit organisations (MoLSA, 2009; n.d.-b).

## 1.2 Organisation of Research in Brno

Data was collected in Brno, the second largest Czech city. Among factors affecting social vulnerability, relatively high housing costs (Obce v datech, n.d.) or the presence of socially excluded localities (i.e., localities with a high poverty rate and relatively high concentration of persons living in inadequate conditions) close to the wider city centre (The Agency for Social Inclusion, n.d.) can be mentioned. The unemployment rate is slightly higher than the national average, but is still modest from a European perspective (Brno City Municipality, 2021).

Interviews with frontline workers were conducted between June 10 and September 7, 2020. We used convenient sampling for the recruitment of interviewees. The interviewer contacted the institutions that met the inclusion criteria (see below). The heads of department of selected institutions asked several employees about their willingness to participate, and gave contact information to the interviewer. The interviewer then contacted these recommended employees. The sample consists of 13 women and two men (approximate age range: 26-60) working in various positions – six social workers, six specialists of material-need benefit granting, three people working in the administration of institutions providing social services – with work experience in the field ranging from 2 to 29 years ( $M = 11$  years). Those who were recommended by the head of the department of a given institution were usually very willing to participate. They were very often open and honest about their work, claiming that they are happy to see that someone cares about social services in the Czech Republic. The interviews ranged between 46 and 88 minutes ( $M = 61$  minutes) and took place at the participant's workplace during their working hours.

Interviews with citizens who use social assistance were conducted between March 2 and September 22, 2020. The citizens were recruited through their social workers, who were interviewed during the first round of data collection. The social workers asked clients fitting into the desired profile about their willingness to participate, and clients then contacted the interviewer. The sample consists of fourteen women and one man (age range: 30–50 years). Six participants have used social assistance for more than 10 years, seven participants have used it from 5 to 10 years, and two participants have used social assistance for no more than 2 years. The willingness to participate was high overall. The interviews were conducted either at participants' apartments or in cafés, and lasted between 36–68 minutes ( $M = 53$  minutes).

All interviews were conducted by one team member; two other team members were involved in coding. For clarity purposes, an interview with a frontline worker and one

with a citizen were coded by both coders. Codes from these interviews were compared and discussed. The coders shared their understanding of the codes' meanings and any ambiguity was cleared up. The coders then coded the rest of the interviews and gave each other detailed feedback on the codes. The coders wrote two memos for each interview (for frontline workers: *general style of work* and *trust*, and for citizens: *general attitude towards the system* and *trust*). Apart from that, 112 additional memos were written. In our team, the two coders regularly discussed findings while writing the report, and another team member gave feedback on each part of the text, as well. After the main part of the report was written, the whole team met and agreed on the conclusion.

## 2. Interviews with social assistance frontline workers

### 2.1 Frontline workers' professional backgrounds

In our sample, it is important to distinguish between three types of interviewees based on their **functions and job responsibilities**. The first group involves social workers (usually working at the Municipality Office) who engage in direct work with clients, including, e.g., social counselling and offering assistance in communication with other social institutions. The second group involves specialists of material-need benefits<sup>8</sup> (working at the Labour Office) whose responsibility is mostly benefits' granting and dealing with the administration work associated with it. The third group involves interviewees currently working in the administration of institutions that grant social services. These interviewees usually do not engage directly with clients, and are responsible for the coordination and provision of social services. However, all have had previous experience of direct social work with clients.

The majority of the interviewees have an **educational background** in the field of social work. However, most of them studied only at vocationally-oriented colleges specialising in social work, and did not get a university degree. A few frontline workers studied social pedagogy, and a few finished secondary school in a field unrelated to social work. The interviewees without a university degree work as specialists of material-needs benefits. They usually mention that they did not plan to work in the social work field and say they started to work in their current position by chance. On the other hand, interviewees who previously studied social work more often express their long-term interest and passion for working with people. They planned to work in the field. Nevertheless, they often describe their path to the current position as rather accidental, as well. The majority of the interviewees have quite rich experience regarding the length of **professional experience** (most of them have been in the field for seven years or longer), as well as the

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<sup>8</sup> The job title of two interviewees in this group is 'social worker'. However, their job responsibilities do not differ greatly from the rest of the group.

number of social institutions they have worked in (e.g., non-profit organisations, various state institutions providing social services). Several frontline workers mentioned that their beginnings were quite difficult as they had to deal with extensive paperwork, complicated rules, or screaming and abusive clients. However, most of the frontline workers appreciate those adverse experiences since they helped them to do their job better today. Just a few interviewees had worked in a completely different field before they secured a job in social services.

## 2.2 Granting benefits and services: overview of the system

Interviewees' clients are mostly families with children, or single mothers with various social problems such as housing issues, low income, or unemployment. The frontline workers mention two main ways of **getting into the system**. Either the clients seek out help by themselves, or other institutions, e.g., non-profit organisations, or the Office for Social and Legal Protection of Children (CZ abbreviation: OSPOD), recommend them to get in contact with a specific institution (especially the Municipality Office). Regarding the former, the clients usually look up important information on the Internet, or they get it from friends, acquaintances, or family members who also use social assistance. One way or the other, it seems that clients use the services mostly voluntarily. The only exception mentioned by the interviewees are clients who live in social housing provided by the city's Social Services Centre. These people must agree in the rental contract that they will cooperate with a social worker. Apart from the main ways of getting into the system, one interviewee also describes a situation when their institution targeted potential clients:

*When there's simply a problem, such as when (...) rooming houses were about to be shut down (...). We were personally going there, to those people, asking them what they needed, and so, we tried to help them somehow (...).*  
(CZ SLB 2)

When talking about clients, the interviewees mostly use the **terms** 'clients', 'the people' or 'families.' Interviewees working in social-housing facilities also talk about clients as 'applicants' or 'tenants.'

Probably the most significant **feature of the Czech social system**, emerging from almost all interviews, is the strict formalisation of the process of granting help. Clients have to undergo fixed steps in order to start using social assistance. The interviewees often demonstrate this through the sample documents that the citizens need to provide:

*It's very strictly stated what they simply must bring (...) and there's no way out of it. If they don't provide it, then, even if we were the kindest people, it's a document that is necessary, so we can't change it. (CZ SLB 7)*

Importantly, the frontline workers admit that the number of necessary documents is extensive, and the system as a whole is overcomplicated. Therefore, they understand that clients often struggle with getting everything right: ‘Neither I would understand that if I didn’t work within all of it’ (CZ SLB 11).

Only few interviewees explicitly talk about **system goals and values**, but they often express certain dissatisfaction with the system and mention its unfairness. On the one hand, some interviewees think the system sometimes cannot help those who, according to the interviewees’ interpretation, truly need it (e.g., single mothers) because they do not meet important criteria (e.g., their income is too high) to receive certain types of benefits. On the other hand, according to some interviewees, there are citizens for whom receiving benefits is a ‘lifestyle’ (CZ SLB 6; CZ SLB 9), who do not work (or work illegally) and just ‘exploit the system’ (CZ SLB 13), even though their living standard is relatively high. Some frontline workers link these perceived practices to the Roma ethnic minority. According to some interviewees, the system does not motivate many citizens to work legally and to improve their overall situation. One interviewee comments on this issue as follows:

*(...) they often work illegally, or they just prefer to claim they can’t find a job, because they’re afraid that, when they really find something properly with an employment contract, then a significant part of the money will be deducted from their income due to their debts. (CZ SLB 8)*

Nevertheless, a few frontline workers indicate that some parts of the system do not lack incentives for people to work. For example, some social housing facilities<sup>9</sup> apply the ‘merit principle’ (CZ SLB 13), which means that applicants who work and show the motivation to improve their living conditions have a better chance of securing a place to live in the housing facility.

Regarding **the rationale of contacts** with citizens, it is crucial to distinguish between frontline workers from the Labour Office and the rest of the sample. While the former group focuses almost exclusively on granting benefits, the latter usually works with clients in a more complex way. Therefore, the Labour Office frontline workers talk especially about verifying eligibility, means-testing, and cross-checking information. These interviewees relate the aforementioned rationale to verifying *whether* the clients can be granted various benefits. They describe that they mostly have to follow fixed criteria on which they base decisions regarding granting/refusing benefits to clients. The interviewees from other institutions mention verifying eligibility as well; however, its purpose is rather to advise clients *which* benefits they are entitled to, according to what the interviewees report. Moreover, this is much more often associated with exploring a client’s overall situation, identifying their needs and issues. However, these interviewees

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<sup>9</sup> Not all, though.

do not have any formal power to decide whether benefits will be granted to the clients or not.

The above-described differences affect **procedures** of the granting help process. For instance, all interviewees mention meeting their clients at home. However, the Labour Office frontline workers do this just to check the client's standard of living and their property to verify whether they have told the truth during the office interview (e.g., when clients apply for extraordinary immediate assistance for beds because they say they do not have any). Frontline workers from other institutions meet the clients at home to identify their needs, or in order to offer social counselling. All interviewees talk about meeting and interviewing clients in the office as well; however, they almost always associate it with handling documents, a procedure often described as a crucial one.

Regarding **what citizens are granted**, the majority of interviewees highlight various types of financial benefits. Even social counselling, provided by the Municipality Office, is to a large extent focused on exploring which benefits can be obtained, and helping the clients with filling out forms correctly and preparing proper documents, so they can be granted the benefits.

On the subject of **other services granted**, frontline workers usually mention mapping clients' social and financial situations, resolving clients' housing issues, helping clients communicate with offices and other third parties, financial advising, or professional re-training. The system also provides citizens with social housing facilities or shelter services. Interviewees barely talk about social work methods per se. An important exception is a frontline worker working in a shelter service where social workers set up an action plan with clients, or support them in daily activities (such as cooking, taking care of children, etc.).

### 2.3 Frontline workers' organisation of work, routines and values

Similar to the previous section, there is a difference between frontline workers from the Labour Office and other institutions in relation to **workload**. The former often talk about difficult beginnings of each month, when the office is crowded because most clients come and bring the necessary documentation to get their benefits as soon as possible. Such days are described as stressful by the Labour Office frontline workers as they have to meet a tremendous number of clients. Therefore, they do not have time to offer something extra, such as advising them how to fill out the forms. Ironically, one interviewee even says that clients sometimes 'delay us from work' (CZ SLB 9) when they come and ask 'superfluous questions.' Interviewees from other institutions do not describe situations in which they were completely overloaded. They meet no more than ten clients a day (usually fewer).

Many frontline workers complain about the amount of paperwork they have to deal with. This, again, applies especially to the Labour Office frontline workers. Due to the

amount of paperwork combined with a big **caseload**, they often do not have enough time to talk to clients and get to know them better. However, the interviewees who are more engaged in direct work with the clients mention that there are ‘too many forms’ (CZ SLB 8), and the amount of paperwork is ‘terrible’ (CZ SLB 2). Regarding **bureaucracy**, several frontline workers talk about minor, though regular changes to social benefits legislation. This complicates interviewees’ work as they have to go to extra training sessions quite often to learn about these changes. In relation to recent **Covid-19 circumstances**, interviewees describe that direct contact with clients was largely restricted (e.g., meeting clients at home was completely prohibited). Instead, communication took place much more via e-mail or phone-call – some of the interviewees express surprise that this worked quite well. One interviewee complains that face-to-face communication with clients is difficult because of face masks.

The interviewees differ in how they perceive their **discretion**, autonomy and flexibility. Some describe their work as mainly stereotypical because there are certain rules that must be followed. Therefore, these interviewees think their colleagues do not work with clients in a different manner. However, other interviewees express the opposite opinion. One interviewee thinks some of her colleagues are less willing and helpful than others:

*Well, it's different for each. For example, (...) when a person comes and says (...) "I need help with child allowance." So, they help them with child allowance, and that's it. Alright? Now I look and say: "But you (...) could also ask for this, ok?" and somebody doesn't care, somebody helps them more, alright. (CZ SLB 4)*

The Labour Office frontline workers say that there are formalised criteria regarding the eligibility and generosity of benefits. However, they can make some decisions based on their own assessment, which can affect whether clients are granted certain benefits or not. For instance, when a client asks for material need benefits, the frontline workers can decide whether they will or will not take into consideration some of the client’s property. This can affect the result of the means-testing procedure. Some frontline workers also mention they are quite **flexible** in relation to the frequency of meetings with some clients. For instance, they do not require every client to come and bring important documents each month. They do this when they anticipate a particular client’s situation (e.g., their income) is not going to change in the near future and, at the same time, when they consider the client reliable.

The interviewees do not talk about any **managerial pressures**. A few just say they sometimes consult supervisors on more complicated cases. However, the Labour Office frontline workers mentioned an important organisational change, called ‘rotations,’ implemented by the office headquarters. It has seriously affected the process of granting help

because it means regular changes of frontline workers with whom a given citizen cooperates. These changes negatively affect cooperation with clients: 'It's really very difficult to start from scratch again and get to know them, build trust...' (CZ SLB 10).

The interviewees do not describe any sort of structured **teamwork** within their institution. Nevertheless, a few of them mention they consult more complicated issues with colleagues or ask them for help. Apart from this, frontline workers from one office often communicate and cooperate with frontline workers from **other offices** (e.g., the Municipality Office with the OSPOD) to cross-check the information provided by clients, or to ask them to solve some of the clients' specific issues (e.g., the Labour Office asks the Municipality Office to help clients with form filling). However, a few interviewees complain that some frontline workers from other institutions are unwilling to provide information about clients. The Municipality Office frontline workers also talk about communication with flat owners when helping clients to resolve their housing situation. Several frontline workers also express concern about non-profit organisations with which their clients cooperate. A few frontline workers think some non-profit organisations provide clients with incorrect information, making their expectations unrealistically high, helping them too much, not leading them to improve their overall situation and not motivating them to be more autonomous and less dependent on both the services and the benefits provided by the system. This is associated with the belief of several interviewees who believe that the main goal of the system should be to help clients improve their situation in such a way that they no longer need help from the system.

*Nowadays, different helping organisations are taking over lots of competencies; they do phone calls instead of a client, they handle completely everything instead of them; a client sometimes doesn't even need to get up and go somewhere because an assistant goes there. (...) And I think this is a big problem. (CZ SLB 14)*

Regarding the interviewees' **goals and values**, they often talk about trying to be **helpful** and to provide clients with support when handling their issues. Quite frequently, the frontline workers associate the goal of being helpful with **influencing clients' behaviour** in terms of motivating them to improve their overall situation and offering them solutions to their problems. In relation to influencing clients' behaviour, several interviewees try to teach clients to be more 'responsible':

*I, personally, want to see them every month, for example. I think it's simply important. On the one hand, they need to have an order, a regime, and (...) at least, they come once to the office. Otherwise, they wouldn't do anything at all, alright? (CZ SLB 9)*

However, one interviewee describes that she sometimes helps the clients, e. g. with form filling, although she is convinced they could manage it by themselves. She does this so the process of granting benefits is not prolonged because of incorrectly filled-out forms, but she also thinks this approach makes the clients less autonomous. Therefore,

the values of being helpful and influencing clients' behaviour happen to be in conflict sometimes:

*They (...) come to us knowing they have support, help, in us (...) sometimes, they're even lazy, alright? Bringing the forms, not knowing how to fill them out. Or they could manage it by themselves, but, actually, we're taking the autonomy from them a bit (...) that they come, give us the forms, and we, obediently, fill out everything. (CZ SLB 8)*

The frontline workers also say they try to **show understanding and respect** to clients, especially in situations they describe as undesirable and unpleasant. For example, the interviewees claim they understand that clients are sometimes frustrated or even a little aggressive because they are often in a difficult situation. One interviewee also expresses understanding about clients' occasional lying or cheating (e.g., telling inconsistent or false information, withholding important information): '...probably, they have a reason for that' (CZ SLB 14). On the other hand, the frontline workers also mention that the respect and understanding shown to their clients must not be at the expense of following the rules.

The Labour Office frontline workers usually meet their clients once a month in the office, where clients have to bring important documents in order to be granted benefits. They also carry out household evaluations either once every six months, or every time a client applies for a new benefit. The Municipality Office frontline workers say that **frequency of meetings** differs depending on clients' needs – they only meet some clients once a year, others many times a month. Most of the interviewees think they **know the clients** in detail. More frequent contact, home visits, and client openness help the frontline workers get to know them and their families better, interviewees say. However, as described above, the so-called 'rotations' pose an obstacle for the Labour Office frontline workers in getting to know clients better. When talking about **the character of relationships with clients**, the interviewees mention they rather maintain boundaries in order to keep the relationship at a 'client – social worker level' (CZ SLB 3). Nevertheless, some interviewees say that relationships tend to be closer when cooperating with a client for a longer period. Also, a few interviewees mention they have a different approach to clients whom they perceive as more competent, cooperative and responsible (e.g., they are not required to come to the office so often).

Above mentioned elements seem to **improve relationships with clients**, in general. Most interviewees perceive that relationships are better with clients who appear 'responsible', 'independent', 'cooperative', 'well-informed' and 'motivated to change their situation' to them. Correspondingly, frontline workers consider clients' uncooperativeness, irresponsibility, and unwillingness to improve their situation as **an obstacle to establishing better relationships**. The interviewees often mention that it is difficult to establish a well-functioning relationship with clients whom they perceive as overdemanding or as having unreasonably high expectations. For instance, some interviewees talk

about clients who think they are eligible to receive services or benefits which they cannot be granted by the system. The interviewees further mention that when these clients realise they will not be granted what they want, they have a tendency to be suspicious, or they start yelling at the frontline worker, which the interviewees interpret as a form of client defensiveness. A few frontline workers also assume difficulties cooperating with some clients due to low levels of intelligence.

Regarding **communication style**, many frontline workers mention the importance of providing clients with full information. According to them, explaining the competencies and responsibilities of each party within the process of granting help to clients, and clarifying the eligibility criteria to receive benefits are crucial. The interviewees mainly do this to lower clients' expectations which are sometimes unrealistic (see an example in the previous paragraph). Some interviewees also highlight the role of being sensitive and truly listening to what clients are saying. In particular, a frontline worker from a shelter service emphasises this element, as the social workers in the shelter service often work with victims of domestic violence. The interviewees also describe the main strategies when dealing with clients' aggression, lying and cheating. When clients are aggressive, the interviewees approach the situation from a position of power (e.g., they end the meeting and tell clients to come another day). When clients lie or cheat, the interviewees often confront them with their lies, trying to be straightforward with them, and explaining the consequences of their behaviour:

*(...) it pays off to be straightforward with clients (...) So I tell them: "Look, I know this isn't true because it cannot be like this. So, you'll tell me the truth right now, or you'll come to tell me later (...) but you won't lie to me." (...) I tell them (...) that if they lie to me, I can't help them. (CZ SLB 15)*

## 2.4 Trust understanding, sources and functions

The interviewees often understand trust in terms of the **possibility to reveal and open up**. They point out that clients must often share very intimate information about their lives and some of the clients feel ashamed. The frontline workers describe clients' willingness to share such information as a sign of trust. Moreover, some interviewees associate trust with the fact that clients sometimes tell frontline workers, without any incentive, what is happening in their lives and which problems they have:

*(...) a client sometimes tells us... sometimes he doesn't have an easy life situation, and, like, trust in me is, for example, that sometimes, like, he calls me, knowing, he can lean on me (...) It means to me that, like, the client's truly trusting us, (...) knowing that I won't tell the information somewhere else, if he doesn't wish that. (...) We've got, like, clients who regularly call us, (...) sometimes they just want to have a talk, tell us what's weighing them down (...). (CZ SLB 8)*

Some interviewees define trust in terms of **support and help giving**, as well. For these interviewees, trust means that clients seek out support in them and believe that the frontline workers are able to help them. Some interviewees define trust as **truthfulness**, or more precisely, they often speak about distrust in connection to clients' cheating or lying. A few interviewees also associate trust with a **mutual relationship**. In particular, this aspect of trust seems to be highly relevant in the shelter service:

*(...) we've set it up in such a way that each social worker has three clients in order to, simply, be able to, let's say, bond with each other, but in a professional sense. In order to build trust with each other. Not to be, like, every day someone else comes. (CZ SLB 14)*

Some interviewees say they **tend to trust** the clients when they meet them for the first time. These frontline workers usually highlight the role and importance of trust: 'If I didn't trust them by default, I couldn't even cooperate with them' (CZ SLB 11). A few interviewees mention they sometimes judge a client's trustworthiness based on first impressions, especially when the client appears decent and reliable. However, some interviewees mention that they used to trust clients based on the first impression but, after being disappointed several times, they **tend not to trust** clients or trust them less by default now. These interviewees talk about clients who had appeared trustworthy at first, but later the interviewees found out that the clients had been lying or cheating.

Most importantly, many interviewees say they are unable to guess whether they could trust a client at the very beginning. They point out that trust is usually built within long-term cooperation with clients as both sides get to know each other better. They say that 'it needs time' (CZ SLB 9) to find out whether someone is trustworthy or not because the first impression is often misleading:

*I used to trust the people of whom I had thought that yes (i.e., that they are trustworthy), but I found out that no (i.e., she has found out they were not trustworthy). And those of whom I had thought that no, then yes. (...) as time goes by, we, like, are building it (trust), them towards me, me towards them. But during the first meeting, I don't even try to analyse it (trustworthiness of a client), because it's not possible. (CZ SLB 7)*

Regarding **general factors affecting trust**, some interviewees think that the system's incapability to truly help some citizens, such as single mothers, causes distrust of such citizens. These interviewees admit that the generosity of benefits is insufficient for some clients, and there are citizens who would need social assistance but are not eligible to receive it. Apart from this, one interviewee perceives that the system is unable to help citizens with housing issues, which leads them to distrust the system. A few interviewees also assume that public and media discourse cause clients' distrust. They say that public institutions are often portrayed as unhelpful, unpleasant places, and the bureaucrats are depicted as arrogant, unwilling, etc. Therefore, clients often come to the institutions with such preconceptions and distrust from the very beginning.

Among **the client-related factors which make them (dis)trust**, several interviewees describe that clients express distrust when they do not get what they expect, especially if their demands do not reflect what they are eligible for. One interviewee associates this with the Roma, who, in her opinion, feel discriminated by the system, and therefore, trust less. However, the interviewee thinks that the Roma often regard situations when they are denied benefits which they are not eligible for as discrimination. The interviewees also mention two important **frontline worker-related factors which affect clients' trust**. Firstly, clients trust more those frontline workers whom they perceive as pleasant and sensitive, and secondly, client trust rises when they perceive frontline workers as helpful, interviewees think.

Speaking of **client-related factors affecting frontline workers' trust**, the majority of interviewees say their trust decreases when clients are unreliable and do not do what they agreed on with a frontline worker. For instance, some interviewees mention situations when clients promised to bring an important document to the office but failed to follow through. Apart from this, most interviewees associate their distrust with clients' cheating, lying or giving them inconsistent information. This is closely related to the belief of some interviewees that many clients just exploit the system and have the benefits as a side income:

*(...) we're (...) more distrustful. (...) Because we've often been confronted with the fact that the people cheat, that they, really, forge documents, they work illegally (...) we're often confronted with it, that they work, yet they don't report it to us. (...) Or they come to ask for extraordinary immediate help. They want it, for example, for beds for children, and we go to the family home and see that (...) they, actually, have everything, that they're just trying to make use of it (benefits). And this really (...) makes you more distrustful (...).*  
(CZ SLB 6)

Correspondingly, some frontline workers talk about trusting those clients in whom they see an effort to improve their financial and social situation (e.g., when they find a job).

Several interviewees mention that trust serves an important **function** in their job as it facilitates cooperation with clients, and, vice versa; mutual distrust makes cooperation more difficult. This seems to be valid on the side of frontline workers as well as their clients, according to what some interviewees report. On the one hand, a few frontline workers claim they are 'more alert' (CZ SLB 4) and 'have more work' (CZ SLB 2) when they distrust a client because they have to cross-check the information more often. On the other hand, when clients distrust a frontline worker, they tend to argue during office interviews, one interviewee says. Some interviewees think that cooperation is easier when both sides trust each other because, for example, clients are more willing to share intimate information with frontline workers, or discuss their problems. One interviewee also says that if she trusts clients, she is more willing to stand up for them even if they make a mistake (e.g., when they occasionally miss a rental payment).

*I think it's extremely important here (social housing institution) because, even on the side of the clients, if they trust the social worker, then (...) they discuss many more of the issues. But for me, it's important too. (...) If there's no trust, cooperation is more difficult, even when I need something from them, when I need to discuss something with them (...), the cooperation's completely different, than when somebody, whom you trust, is sitting opposite you, for whom you can stand up and say that (...) although it hasn't been working smoothly this last month, it's for this and that reason (...). (CZ SLB 5)*

However, trust does not seem to play a positive role every time. One interviewee describes that clients sometimes trust social workers too much. This leads to situations where the clients give up control and want the social workers to make important life decisions, such as whether to have an abortion or not. The interviewee emphasises that social workers cannot make such decisions for a client.

### 3. Interviews with citizens using social assistance

#### 3.1 Social background of interviewees

About half of the interviewees are **single mothers**. Some of them are divorced or separated, and there is one interviewee whose partner committed suicide. A few of the interviewees live with new partners who are not the biological fathers of their children. The rest of the interviewees either do not talk about their relationships with their partner, or live with their husbands/partners. Almost all the interviewees have rather **larger families**, and all of them live with their children.

Regarding **reasons to use social assistance**, many interviewees describe their **economic problems**, usually when speaking of their children's needs. It is very common in the sample that interviewees put all their spare money into their children's school needs, and it is not enough (usually due to the family's size). This problem becomes even bigger for single mothers who typically do not receive any alimony from their children's fathers. Many respondents **do not have jobs** and live exclusively on benefits, or work illegally (because it is more convenient for them). Another reason for poverty is debt. Some respondents are in debt, and even with a stable job, there is no spare money.

Almost all the interviewees talk about previous or current **poor housing standards**. Moving to social housing is quite common. Some of them were evicted from their apartments because of their landlord's illegal actions, or debt. Some were planning to move out because the apartment was mouldy and extremely dirty, or because the rent was too expensive and the apartment, too small:

*So, at first, we lived in a rooming house (...) except that the man, actually the landlord, was in debt (...), and he simply kept saying: "Don't worry, no one will throw you out" and eventually (...) simply we had to move out (...) The*

*toilet was outside, there was no shower on our floor, so we had to go to the first or the second floor to shower (...) Sometimes the water was running sometimes not, but regularly the water was not running. (...) there were bed-bugs, cockroaches yes, so I left everything there (...). (CZ CIT 6)*

Half of the interviewees mention **health problems in the family** (e.g., cerebral palsy, cancer, heart disease), and **children's psychological problems** (e.g., autism, behavioural disorders, ADHD). A few of the interviewees' family members were in prison, or have had some other **criminal issues**, and some interviewees experienced **domestic violence**.

About half of the interviewees have **no interest in politics**. The other half usually talks about politics with family or friends. The most common **media** used for following politics is Facebook. Besides Facebook, some interviewees mention watching the news. However, they do not name the TV station (a few of them watch commercial TV stations or the website of a commercial TV station).

The majority of the interviewees **do not have trust in politics**. When speaking of distrust, some interviewees mention unfulfilled promises of politicians, frustration and feelings of helplessness, distrust in fair elections, inequality between politicians and citizens (on salary and work conditions issues), manipulation of the people, the increasing power and wealth of the current Prime Minister, etc. A few interviewees express hate towards politics. Generally, the interviewees' opinions about politics are rather negative, as can be illustrated by the following:

*(speaking of politicians) when you see them sitting there, half of them are asleep, and they get a hundred and fifty thousand crowns<sup>10</sup>, and on top of that, they have official cars, laptops, cell phones, and food at the canteen for ten crowns and here - a simple workman who has to provide for his family and works hard, twelve hours a day (...) gets eighteen thousand crowns, so where is the justice (...). (CZ CIT 1)*

**Lack of interest and distrust in politics** is often expressed with regard to elections. Some interviewees do not vote at all, and some voted in the past but cannot recall for which party. If the interviewees proclaim support for any political party or politicians, they mention Czech Pirate Party (liberal, centre-left), Czech Social Democratic Party, Freedom and Direct Democracy (national-populist movement), or the current Prime Minister, Andrej Babiš. Some interviewees consider these parties/politicians as caring about people. However, in most cases, the interviewees think that **the government and politicians do not care about citizens** or their social problems. Some think that politicians have the skills and money to change something in the social system, but they do not bother to help citizens. The interviewees express various opinions about national-level policies, most of them being complaints. The most common one is that there are not enough jobs and that the salaries are too low, so it is not very attractive for people to

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<sup>10</sup> Czech currency

work legally. Interviewees say the government should provide people with more jobs and motivate them to work with higher salaries. Some say they are forced to work illegally to survive. Some other opinions are that the government should care more about single mothers, homeless people, children with special needs, make living more affordable and promote Czech companies. To sum up, citizens' widespread opinion is that politicians do not care about them, and do not invest any money in them.

Some interviewees **perceive the EU** as helpful and would not vote for leaving it. On the other hand, other interviewees are against the EU and would vote for leaving it. The reasons for staying in the EU are mostly EU grants, and the reasons for leaving the EU are a potential introduction of the euro, feelings that the EU dictates and rules what people in the Czech Republic should and should not do, or the EU's alleged support for immigrants. Only a few interviewees do not express any opinion about the EU.

### 3.2 Applying for benefits and services and opinions on the social assistance system

Most interviewees have visited two different departments of the Labour Office and the Municipality Office. Other institutions, to which interviewees are related, are social housing institutions such as social apartments, rooming houses and shelter services. Some of the interviewees have cooperated with OSPOD and a few with non-profit organisations. Most of the clients have been receiving social benefits and services for a while, and regularly.

The interviewees say they need a **large number of documents** to receive social benefits, and the rules are slightly different for each benefit. In general, citizens must have a permanent residence to ask for benefits. For most of the benefits, citizens need to bring many filled out forms, personal documentation (e.g. birth certificates), contracts (e.g. rental contract), and they have to provide documents confirming their income and expenses. The interviewees report there are too many forms, and they do not understand them. The interviewees often do not have the forms filled out correctly, and would appreciate clear instructions for doing so. Some interviewees declare that they use social workers' help to fill out the forms correctly and bring all the documents needed.

The most common **external source of information** used by institutions is a reference from the OSPOD. A couple of interviewees say that they needed this reference to get to social housing, and one of them describes being allowed to move into a social apartment much faster than usual because of this reference. Citizens also claim that they need expert medical assessment to receive extraordinary immediate assistance, or social assistance benefits for people with disabilities.

Regarding the **interviews in the office**, the interviewees talk about a significant difference between the Labour Office and the Municipality Office. There is a common belief that the Labour Office's frontline workers are unpleasant, unhelpful, unfair, have double

standards, and only care about the forms, not the clients. Interviewees say there is no interview and frontline workers ask them no questions related to their specific situation or their story. Some interviewees even complain that they were asked inappropriate questions such as: *Why didn't you stay where you are from, why do you have so many children, or why don't you put your autistic son in institutional care, etc.*

*(...) she (Labour Office frontline worker) opens my file, looks at the rent, looks at the computer. Goodbye. She says a date when you have to come back. You leave. That's it. (CZ CIT 10)*

Meanwhile, the social workers from the Municipality Office are perceived as helpful and good advisers, *but* also as powerless in terms of helping the clients access benefits. They help clients fill out the forms correctly (they print out the documents and fill them out with their clients), they give advice, but it is not in their power to decide whether the client can qualify for benefits. Social workers in social housing usually try to map the situation of the client, ask questions related to their living situation, and sometimes set out an action plan.

One of the procedures for receiving benefits or services is **home visits**. Most of the interviewees have an understanding of them and describe them as a little talk with the social worker. However, a few interviewees are angry about their home visits because of **unpleasant** or very strict social workers (e.g., commenting on untidiness, checking food expiration dates, etc.). It is notable that interviewees' opinions on the home visits depend on the purpose of the visit, and the social worker's personality (too controlling, kind, laid back, etc.)

Interviewees usually mention that they **obtain benefits** such as housing allowance, child allowance, parental allowance, assistance with material needs, an allowance for living, and extraordinary immediate assistance. The most common **obtained services** are social housing and social counselling. Some interviewees mention charity services (e.g., child mentoring) and donations (e.g., food packages). Citizens receive most of the benefits monthly and on time. However, some of them waited years to get into social housing.

A common topic of **delayed benefits** emerges throughout the interviews. When citizens' incomes increase, it is very probable that they will not get social benefits. For example, when income increases because of delayed benefits<sup>11</sup>, the usual benefits are stopped (since it looks like the family does not need financial assistance anymore).

Speaking of **opinions on offices' organisation**, interviewees talk about one department of the Labour Office where they spend hours waiting in queues; sometimes they have

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<sup>11</sup> Benefits might be delayed because of poor communication between offices, or because a client does not submit all the forms. So, the office sends the benefits later all at once and the family income increases rapidly. Therefore, client's benefits might be stopped. Sometimes it looks like the system works against itself because when clients receive a new social benefit from another office, their income increases, and the current benefit might be automatically stopped.

to return another day because the frontline workers were too busy with other clients, and nobody was answering phone calls or e-mails. Another reason why interviewees think the aforementioned department's organisation is lacking is because the frontline workers are not assigned to clients, and therefore clients can see a different frontline worker every time. All interviewees perceive this change in the system as very wrong because the waiting time is longer, every frontline worker is different and wants something different from the client (frontline workers' rules vary according to the interviewees). Moreover, the frontline workers do not communicate with each other, and clients' forms sometimes get lost. More importantly, one interviewee says she cannot trust the frontline workers when she sees a different one every time. There is no opportunity to build trust in them.

Although the interviewees generally express various **opinions on system and procedures**, almost every interviewee recalls some situations in the process that they perceived as **unfair or not rational**. Some interviewees feel that the procedures are unfair for them in comparison to the Roma. They think that the Roma get higher social benefits and are given precedence on waiting lists for social housing. They are convinced that if they were Roma, they would not have to work, and would get more money from the state:

*Interviewer: (...) and why do you think the system is wrong? – Interviewee:  
I'm not a gypsy. (...) If I were a gypsy, I'd have everything. (CZ CIT 5)*

Others talk about the **unfairness of the system**, in general. They usually express feelings of helplessness and incomprehension towards the procedures and decisions of the frontline workers. They see that some people get higher benefits, or get into social housing sooner, and they do not understand why. This belief is sometimes connected to another common opinion that the procedures and the system are not transparent. Interviewees perceive the **lack of transparency** in terms of the benefits, generosity or the criteria to obtain a particular benefit, and in the process of form filling. In general, some interviewees do not understand why they were denied some benefits, or why they get a certain amount because they only receive a letter with the final decision, but with no further explanation. Some interviewees complain about how **exhausting the procedures are**. These interviewees are usually single mothers who have to bring their children to the offices with them, or mothers with disabled children, or interviewees with health issues in the family. Even though interviewees' opinions on the system and procedures are mostly negative, some interviewees see certain positive aspects of the system or procedures. Some of them state explicitly that the **system as a whole is fair** (even though they perceive a few elements as unfair), and some **describe the system as good** because of the obtained benefits.

Most of the interviewees express their **disappointment** in the system or have found the help **insufficient**. Some believe that the system does not care about them, and some of them happened to be in a situation where they needed help immediately (usually in the

case of disabled children, or a sick family member), but ‘no one cares’ (CZ CIT 7). Some say the social system in the Czech Republic is far worse than in other countries, as one of the citizens argues:

*But I think that in other countries, it's a bit better. Better regarding children. (...) I'm going to give a simple example – if a child wants to be part of a club, have singing lessons, learning how to play piano, our system doesn't take this into account. (CZ CIT 2)*

Even though interviewees, in general, consider the help small, some are **thankful** for every crown they get, or appreciate the possibility of living in social housing. A few of the interviewees say they are **dependent on the system**; they would end up being homeless without its help. Some emphasise that it is crucial to keep trying and fighting with the system. This theme relates to the advantage of having some experience in the system, of **learning how to deal with it**. One interviewee says frontline workers at the Labour Office do not tell her what kind of benefits she is eligible for, and she has to find this information out on her own and ask for the benefits by herself.

### 3.3 Relations with frontline workers

Interviewees mostly call social workers either by their name ‘Miss (*paní*) Veselá<sup>12</sup>’ or ‘social worker (*sociální pracovnice*)’ and the frontline workers at the Labour Office ‘official (*úředník / úřednice*).’ The **frequency of meeting** frontline workers depends on the institution’s rules, according to the interviewees, but it usually varies from once a month to once every six months.

Another factor depending on the institution’s rules is **how well interviewees and frontline workers know each other**. Some interviewees say that they have been cooperating with social workers from the Municipality Office for years, and therefore the frontline worker gets to know the family well. On the other hand, at one department of the Labour Office, where frontline workers do not have assigned clients, they do not get to know each other at all, some interviewees claim.

Interviewees have different opinions on whether frontline workers **have power in the system** and whether they can affect important decisions concerning benefits. Some interviewees say the frontline workers are powerless because the system is formalised (or there is some managerial pressure), and even if they had a very good relationship, the frontline worker would not be able to help them. Others think frontline workers have the ability to affect the decision-making process (mostly during home visits when applying for extraordinary immediate help). However, almost all interviewees talk about how

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<sup>12</sup> The name is a pseudonym.

much the frontline workers vary, and how important it is to have a good frontline worker.

*And it also depends on the attitude of the social workers, because he's (interviewee's husband) got such a witch, it's unbelievable. And a different one's willing to help with everything, right? It's like every door has different rules, right, but they (social workers) are under the same (institution), but each one of them does it the way they want. (CZ CIT 7)*

Even though some interviewees say frontline workers are powerless, when speaking of the **importance of having a good frontline worker**, it appears frontline workers do have power, at least in small things such as accepting a form that is not correctly filled out, or allowing a client to sign the form for a sick husband, etc. In general, interviewees agree that every frontline worker is different, wants something different from them, and the form of procedures in the system depends on the person they are assigned to. Regarding the organisation of offices, interviewees criticise **frequent changes of frontline workers running their case**. One interviewee says her trust in the system would increase if the frontline workers assigned to clients did not change so often.

Most interviewees perceive the **relationship with their social worker as close** (mostly from the Municipality Office). Speaking of close relationships, interviewees mention that they have worked with their social worker for a while (usually for years), and some interviewees have been sharing details about their personal life with their social worker. Most of them say that their social worker calls them regularly to ask how they are doing and whether they need anything. According to the interviewees, most of the social workers visit SLBs regularly at home, meet their family, talk to them about their specific situation, and get to know them well over time. Therefore, the relationships are described as personal. On the other hand, a few interviewees speak of **having formal relationships with frontline workers**, especially the ones from the Labour Office. One client describes the relationship as 'being in the bank, as a client' (CZ CIT 11).

As described in the second part, clients perceive social workers from the Municipality as very good counsellors, although they are seen as powerless regarding any decisions in the system. Interviewees **speak of these social workers in a very positive way**, and say they are a **big help** in the system. One interviewee called her social worker a 'life advisor' (CZ CIT 2). The interviewees declare that social workers help them with the whole process of applying for benefits – **giving advice**, explaining what interviewees are entitled to, printing forms, filling out forms, calling offices, if needed. One interviewee described the importance of the help provided by her social worker as follows:

*(...) she's an excellent woman; she finds out all information for me. She really helps me. Otherwise, I'd know nothing. (CZ CIT 7)*

Interviewees usually evaluate social workers with whom they have worked for a longer time as very **kind, understanding** and **competent**. Some interviewees appreciate when

the social worker is straightforward with them. On the other hand, some interviewees evaluated frontline workers as **arrogant, unpleasant** and very **rude**. These opinions usually refer to frontline workers who are not permanently assigned to the interviewees, that is, with whom the interviewees do not meet regularly.

### 3.4 Trust, understanding, sources and functions

Some interviewees define **trust as help giving**. For example, some say they tend to trust the frontline workers when they go to the office, and the frontline workers help them, advise them on what to do, and they know that if they need something, they could go to the frontline worker and ask for help. Other interviewees understand **trust as truthfulness**. This can be related to the documents (whether the frontline worker trusts that the interviewee has not forged any documents), or to what the interviewee says (e.g., one interviewee told the social worker she did not drink alcohol and the frontline worker got her tested, anyway). A few interviewees used the word **'relationship' when describing trust** between themselves and frontline workers. Speaking of **distrust**, a few of the interviewees associate it with **carefulness**. One interviewee describes an unusual understanding of trust and speaks of its function at the same time:

*So, I'd say trust equals peace. Where trust is, there is peace because things can be solved when there is trust. And when the trust is right, things will get solved, and man has peace because he can cope with it. (CZ CIT 2)*

Some interviewees say **the frontline workers do not trust** them. One interviewee does not think the frontline workers trust her; she feels as though she bothers them. Some others believe the opposite is true – they perceive they are **trusted by frontline workers**. They say they have not felt distrust from frontline workers. For example, one interviewee says she has never had the feeling that a frontline worker was suspicious or would accuse her of lying. A few interviewees believe it is up to the individual, and that some frontline workers trust clients, while others do not.

Throughout the interviews, a common theme emerged: that **interviewees do not trust the frontline workers or the system**. Some say they do not trust the frontline workers who are not assigned to them and do not see them regularly. Others say they are distrustful as persons, and therefore they do not trust the frontline workers, in general. A few interviewees talk about distrust towards the system in relation to the unfairness of the system. One interviewee says she does not trust the system or the frontline workers because it is all 'unpredictable' (CZ CIT 15). A few interviewees are somewhere in between, and trust only some of the social workers they have a relationship with, or trust the system only in relation to some procedures, but not others. **Some interviewees trust the frontline workers**. One says that it is 'the office' (CZ CIT 1), so it should be trustworthy. Another interviewee trusts her social worker because she is reliable (in terms of

sending benefits on time). Some interviewees agree they need time to build trust towards frontline workers; they need to know the person better first. A few interviewees talk in this part of the interview again about the **importance of cooperating with the same social worker over time**:

*Well, I think that trust would increase if everyone had an assigned worker, alright? With whom one'd be for some time...years or months until he (the worker) can really help one (...) Not that you are being thrown from one door to another, to another door, to another door. And then you're frightened who you'll get: "Jesus, I got a bad witch." Alright? And now I have someone good, and who will it be next? (...) (CZ CIT 14)*

From the other perspective, one interviewee says **frontline workers need time to trust the clients**, as well:

*Look, it's not like you come somewhere and immediately (...) they see you as a good person. No, you also have to prove it to them, slowly. (CZ CIT 10)*

A few interviewees have been disappointed by the system or a particular frontline worker, even though they used to trust the system by default.

Regarding the **factors affecting (dis)trust**, the interviewees are usually disappointed and distrustful after frontline workers (or the system) **refused to help them** (e.g., their application for some benefits was denied), or did **not keep their promise** and turned out to be **unreliable** (e.g., the frontline worker forgot to do something for the client, or the interviewee had been promised a new apartment, but did not get it). Another factor affecting distrust, mentioned by the interviewees, is when **frontline workers are suspicious** and do not trust what the clients say. For a few interviewees, it means they will not trust the frontline worker, either. On the other hand, one interviewee says if the social worker trusts you to do what she says, she trusts the social worker, too. A few clients describe how frontline workers either wanted to **take their child away** from them, or actually took it. After this event, they do not have trust in them at all. Among the factors affecting trust, interviewees mention again the importance of working with the same social worker, and say the fact that they see a different frontline worker every time at the same department of the Labour Office affects their distrust towards the frontline workers very strongly. One interviewee describes how she perceives social workers' home visits in relation to trust. She does not feel like she is treated as an individual:

*Well, trust...it's not trust. It's their job. And...for them, I am a number, I think. Or simply some object that they sometimes have to check (...). (CZ CIT 13)*

Many interviewees talk about **honesty and transparency** in relationships as crucial **factors affecting trust**. They describe this in two ways – they trust the frontline workers who are honest and straightforward, and frontline workers trust clients who are truthful

with them. Interviewees emphasise they should be straightforward and not fake anything; one interviewee thinks that when clients lie, they lose frontline workers' trust and 'there's no way back' (CZ CIT 14). Another important factor for gaining frontline workers' trust, according to interviewees, is **being obedient and following the system's rules**. A few say frontline workers begin to trust clients when they see how they act, whether they do what they are supposed to and when they seem decent. A similar factor affects trust the other way around. When interviewees see that frontline workers are nice, helpful and have a good relationship with them, interviewees are more likely to trust them:

*Interviewer: How did they gain your trust this strongly?*

*Interviewee: They've been helping me. (...) They've been helping me. They've been helping me a lot. Whether I need help, or to look for jobs or new housing. "Miss X." for example, "What's troubling you? You look troubled." Right? So, I said for example, this, this and this. (CZ CIT 10)*

Throughout the interviews, there appear to be two main **functions of trust**. Some interviewees talk about the practical aspect of trust – when the frontline worker does not trust clients, some procedures might take longer (e.g., frontline workers do not make any exceptions regarding forms, or dwell on the details), and vice versa. Another example of the practical aspect is when an interviewee, disappointed by a frontline worker, has learned she cannot fully trust frontline workers. Therefore, she asks extra questions to check whether they have done their work properly (e.g., whether they have sent the right forms). The second function of trust, described by interviewees, is having a relationship. Some interviewees talk about calling social workers whom they trust, and their ability to confide in and rely on them.

#### 4. Summary and conclusions

- Both frontline workers and citizens perceive the social system as complicated – they have to deal with excessive paperwork; the forms are difficult to understand, and the procedures are often time-consuming and exhausting.
- Many interviewees emphasise the role of trust as a factor which makes cooperation easier and faster. Correspondingly, when one of the parties distrusts the other, cooperation becomes more complicated as the parties do not show understanding and are not responsive to each other, and they tend to verify some of the information more precisely.
- Some frontline workers and citizens consider the system to be unfair, and the unfairness of the system plays a role in distrust towards the system.

- There appears to be poor communication between some frontline workers and citizens. Many citizens do not understand procedures and some rules of the system (in relation to decisions about benefits), and therefore they ask questions that are exhausting and time-consuming for frontline workers.
- The interviewees highlight that they need to cooperate for a longer period of time in order to build trust towards the other party. However, the organisation of some offices complicates or even disables this. This seems to be an important factor affecting distrust within the Czech social system.
- Other common factors affecting distrust are dishonesty and unreliability within certain attempts at cooperation.
- On the other hand, honesty and transparency in relationships are perceived as crucial. Both frontline workers and citizens appreciate it when the other party is straightforward.
- There appears to be a paradox in perceived frontline workers' power in the system. The system, in general, is very formalised, and frontline workers seem powerless, but both frontline workers and citizens describe how some frontline workers can make seemingly minor, though substantial decisions.

The frontline workers and the citizens seem to be coherent in how they perceive important features of the Czech social system. Both groups talk about the complexity of the system, and many of them point out the unfairness of some of its parts. On the one hand, this leads many citizens to distrust the system as they often perceive that the eligibility criteria are unclear, the procedures are exhausting, and the system does not help them enough. On the other hand, the frontline workers understand citizens' distrust because they perceive the abovementioned aspects of the system in a similar way.

The frontline workers and citizens' portrayal of an 'ideal' relationship and system seems to be almost the same. Their values appear to be very similar (e.g., both frontline workers and citizens realise the importance of long-term cooperation, honesty and reliability in the relationship), but they are powerless to change something because of the deep-rooted features of the system. Another interesting paradox is that frontline workers who spend more time with clients, and thus know their stories and families in detail, have no power in decision-making because they are only counsellors. Ironically, some of the important decisions are in the power of frontline workers who do not get to know their clients at all. This probably prevents frontline workers from favouring some clients in decision-making processes with whom they have a closer relationship.

The evidence collected from both frontline workers and clients indicates the presence of fragmentation within social assistance in the Czech Republic, in which help is provided by several institutions that sometimes do not cooperate with each other and are often perceived in a radically different light by clients. There seems to be some key characteristics of the system and its culture eroding trust between frontline workers and their clients. One of them is a high level of formalisation and paperwork, due to which clients

feel treated in a depersonalised way, and the role of many frontline workers is reduced to verifying eligibility and means-testing. Quite paradoxically, another system characteristic eroding trust seems to be that the formalisation is not absolute and allows some limited room for frontline workers' autonomy when granting benefits. Although some frontline workers use this room to help their clients, the boundaries of frontline workers' autonomy are often unclear to citizens who, in turn, might attribute unfavourable decisions to frontline workers' personal aversion or personality. The emphasis on financial benefits, versus providing services, seems to be another particularly significant feature of the Czech social assistance system. This situation, in which even social counselling is to a large extent oriented towards helping people cope with state bureaucracy when applying for benefits, is likely to create mutual suspicion, as many citizens can start perceiving their primary goal as *to beat the system*, while many frontline workers (who are granting benefits) might define it as *not getting cheated*. On a more positive note, our interviews have suggested that one possible way to improve mutual trust is to build on long-term relationships between particular frontline workers and citizens, that is, the opposite of regular changes of frontline workers in certain institutions.

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# Trust is the Cornerstone in the Work of Social assistance and Families with Vulnerable Children but ... - Insights from Denmark

Anne Brus

## 1. Introduction

### 1.1 The Danish welfare state regime and the organisation of social assistance in Denmark

Denmark is commonly perceived as a well-functioning welfare state based on universalistic principles with an open, stable economy, high taxes, and a high degree of social cohesion (Kangas & Kvist 2019). The Danish welfare regime is founded on the **Nordic welfare model**. The universalism model is financed by high taxes and a high degree of social equality. Generally, the Danish welfare regime can be distinguished by the high level of trust of its citizens. People trust each other, and Denmark is a safe country to live in. Yet, the **universal principles** on which the Danish welfare model are based, have come under threat and empirical data measured with the GINI-coefficient shows signs of **an increase in vertical inequality** in Denmark (Greve 2020). The risk of living in poverty in Denmark has declined a little, from a percentage 13.1 in 2009 to 12.1 in 2020<sup>13</sup>. Regarding **horizontal inequality**, the negative cycle of social deprivation is still something that is difficult to break ((Heckman & Landersø, 2021). Still, if we look at measures other than the economic situation, Denmark is ranked as the second happiest country in the world on six parameters: GDP per capita, social support, healthy life expectancy, freedom, generosity, and corruption (Martela, F., Greve, B., Rothstein, B. & Saari, J. 2020). This was also true during the Covid-19 pandemic of 2020 (Helliwell, J.F., Huang, H., Wang, S. & Norton, M. (2021).

Generally, the Danish welfare tasks are governed by the public sector (the state, the regions, and the municipalities) but for example, the pension system is based both on a public as well as a market solution. The governance of welfare is rather centralised: the central government and the Parliament ('Folketinget') establish the basic legislation for the distribution of benefits and services. The regions are responsible for running the hospitals. The regions and the municipalities are independent and governed by regional

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<sup>13</sup> Eurostate, TESP010, downloaded the 11th of May 2021. Relative poverty is measured as a percentage at less than 60 % of the median income

and local councils elected by citizens<sup>14</sup> every four years. The municipalities have a high degree of autonomy to implement the social policy laid out by the 'Folketing'. To some extent, the municipalities have the autonomy to prioritise how they use their resources. This means that local decisions are taken by the political majority in the municipal council.

As a result of this flexibility, the local social service level differs from municipality to municipality (Greve 2020). For example, some municipalities prioritise a shorter waiting list for kindergartens than others. Other municipalities prioritise lowering their level of unemployment.

The Danish labour market is based on a 'flexicurity model' that combines a flexible market, an individual unemployment insurance system and an active and passive labour market policy (Kongshøj, 2015). Every citizen in need has **the right to receive social benefits and social services no matter how they relate to the labour market, but they also have a duty to be available for work.**

However, there is a tendency towards de-universalisation of the flexicurity model in connection with unemployment (Andersen 2015; Kongshøj 2015). The universalistic right to receive a social benefit is restricted by many legislative measures and rules. For example, Andersen (2015) has pointed out that there is a shift in unemployment benefits from tax financing to an insurance model. This is manifested by a reduction in the period that people can receive unemployment benefits and through more restrictive access to such benefits. Another example is a cash benefit ceiling from 2014 that reduces the families' combined state benefits<sup>15</sup>. The argument in favour of reductions is that there must be a financial incentive to return to the labour market (Greve 2020). If citizens are unable to meet these demands, the municipality are allowed to sanction or stop the benefits, in part or in full.

Many rules make the Danish welfare system complex and difficult to comprehend, and increasingly rely on expert knowledge to navigate through (Ydelseskommissionen, 2021). In addition, the development in granting benefits and services is moving from means testing to a law defined right. Many benefits are controlled by the Ministry of Employment, for example sick benefit, early retirement benefit for flexi-jobs, cash benefits, and benefits for rehabilitation programmes.

Further, the task of processing the welfare benefits to citizens has been entrusted to the national institution 'Udbetaling Danmark' (Payment Denmark) since 2013. To make the

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<sup>14</sup> Throughout the report we will use 'citizens' when we are talking about families with children who apply for help. We are aware that they are 'clients' as well, but in Denmark, the word relates to a negative view of citizens.

<sup>15</sup> In the legislative proposal, the purpose of the law describes that the cash benefit ceiling has been introduced so 'it is worth the effort to work' (Greve 2019, p. 95)

process as simple and effective as possible, the payments are based on digital self-service solutions. In part III, 'Interviews with citizens using social assistance', the topic of digital self-service solutions will be elaborated on further.

The civic society and voluntary social organisations provide social care that complements the public sector, especially within areas of art, sport, and hobbies (Duru et.al. 2018). On both national and local levels, many councils of users are established to involve citizens in policy decisions. Some municipalities have a local and independent 'Ombudsman' to secure a better dialogue between the municipality and citizens in cases of complaints about administrative procedures.

The municipalities provide citizens with a broad spectrum of social services such as care to the elderly, children's day-care, rehabilitation, activation of unemployed citizens, and health care. Likewise, they are responsible for socially excluded groups, for example citizens with physical and mental disabilities, alcoholics, and drug addicts. Another area of responsibility is the monitoring of the living conditions of children and young people.

As already mentioned, the welfare system is rather complex. Every municipality in Denmark has a website ([Borgerservice.dk/name of the city](http://Borgerservice.dk/name of the city)) for its citizens, filled with information about the welfare service, as well as all kinds of self-service solutions which citizens must fulfil to receive a benefit or a social service. Most of the service centres and Borgerservice are located at the townhall. The centres offer different kinds of services depending on what type of problem the citizen needs help for. The number of centres differ from municipality to municipality, but typically there will be around 10-12 centres. For example, a 'Centre for Labour', 'Centre for Family and Children', 'Centre for Disabilities', 'Psychiatry', 'Centre for School and Education,' 'Centre for Culture and Leisure' etc. To all these centres, there are many sub-centres or departments with different targets and purposes. Further, the different centres will usually be divided into welfare service areas. For example, families, children, and youth centres will have: a Family Department, a Department for Kindergartens, a Department for Schools, respectively.

While this research was conducted in only one of the many centres of the municipalities, namely the Family Department, we will describe the policy area in more detail here. One focus point in the latest<sup>16</sup> 'Child Reform' from 2011 is to ensure disadvantaged children the best opportunities to thrive and develop their personal and professional skills. Another focus point is to strengthen vulnerable children's rights, enshrined in the Convention of the Rights of the Child article 3<sup>17</sup> on which the reform is built. The overall purpose of the Child's Reform is to ensure continuity in a placement, stable and close adult contact for vulnerable children, 'early problem tracing', more quality in case processing and

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<sup>16</sup> <https://socialstyrelsen.dk/tvaergaende-omrader/sagsbehandling-born-og-unge/om-sagsbehandling-born-og-unge/barnets-reform>

<sup>17</sup> <https://www.ohchr.org/en/professionalinterest/pages/crc.aspx>

case efforts, to strengthen consideration of the welfare of the child instead of the welfare of parents, and a better framework for the local authorities' efforts, including de-bureaucratising. It means that the municipalities have an obligation to assist children who need special support and to establish prevention efforts to children in need. Depending on the priorities in the municipality, it could be a personal adviser, pedagogic or social worker support in the family or at school, economical support to prevent a child from being placed in care, therapy for the child or the family. To ensure high quality in the implementation of the Child's Reform, the National Board of Social Services (NBSS) has been working with several initiatives that support the Municipalities in their case handling.

## 1.2 Organisation of the research in two municipalities

The research was carried out **at the Family Departments in two municipalities**, 'Toldbro' and 'Gammelborg'. At the request of the Family Departments' leaders, the names of the municipalities have been anonymised. Denmark is a small country with almost 5.9 million inhabitants. Because of the anonymisation, we have omitted many details about the two municipalities. What we can say is that the municipalities represent an average-size city with over 50,000 citizens. It means that they are two of the 50 largest cities in Denmark. Both municipalities have gone through some organisational changes in recent years. For example, both municipalities have been part of the initiatives that the NBSS launched to ensure a high quality in the implementation of the Child's Reform. The municipalities have prioritised to shorten the period of a child's investigation<sup>18</sup>. This means less time on administration and more time with the children and the parents. Toldbro and Gammelborg are characterised by a mix of different social classes. In comparison to other municipalities, they have relatively high expenditure needs per capita<sup>19</sup>. This means that the municipalities have more cost-intensive citizens than average in Denmark. They are also characterised by a proportionally high share of citizens with non-western backgrounds<sup>20</sup> and low voter participation in connection with municipal council elections.

Interviews were conducted with 16 family advisers and over a period of almost two months from the 4<sup>th</sup> of May to the 29<sup>th</sup> of June 2020. All the family advisers are employed in a Family Department as what we call 'family advisers' in Danish. All the interviews were carried out at the city hall in the Family Department where the family advisers work and hold meetings.

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<sup>18</sup> A child investigation is huge examination of the child's development and behaviour, family relationships, school conditions, health conditions, including e.g., alcohol consumption or drug consumption, leisure and friendships and other relevant matters.

<sup>19</sup> <http://www.noegletal.dk/>

<sup>20</sup> <https://www.dst.dk/da/Statistik/Publikationer/VisPub?cid=29446>

The two leaders of the Family Departments acted as gatekeepers and the family advisers were recruited via snowball sampling. It has not been possible to meet the requirement for diversity regarding the interviewees' gender, age, and length of work experience because of lack of diversity in the staff in the Family Departments. Therefore, all except two of the family advisers interviewed are female. Over half of the family advisers are in their twenties or early thirties. The other group of participants are in their 40s or their 50s. Because of their overall work burden, the family advisers were booked for only an hour per interview. Despite the time constraint, the process of being interviewed was a positive experience for the family advisers. It seems that it opened a space for reflection in almost all the family advisers. They chose to use more time for the interview than scheduled. Every interview took minimum one hour, most of them one hour and a quarter; the longest lasted 1.5 hours.

The first interview with citizens was conducted on the 11<sup>th</sup> of August 2020, and the last interview on the 22<sup>nd</sup> of September. The recruitment period was long and stressful. The proposed recruitment methods did not work. Therefore, we opted for the following recruitment strategy on the social media Facebook. More recently, a more personalised and private form of civic involvement has proliferated using social media e.g., Facebook. This tendency that has gained in strength after several social reforms have deteriorated the conditions of unemployed (see p. 2). As gatekeepers, we used two local Facebook leaders of a group called "Næstehjælperne"<sup>21</sup>.

Thereafter, the recruitment process was enabled through a snowball sampling where the citizens contacted us through work e-mail or work phone. There are no men among the recruited citizens. The gender bias in this sample of respondents can be explained by the composition of the Facebook group from where we recruited respondents. Most of the women in "Næstehjælperne" are single parents, unemployed, with problems making ends meet. Regarding age, there is a good age spread across the interviewees. The youngest is in her late twenties, the oldest are in their fifties. The citizens are predominantly parents who have been part of the social security system for a very long time, although two of them have requested benefits because of an acute situation in the family. Almost all the citizens opted for the interview to take place in their home. One interview took place in the local library. All interviewees were open and willing to share their experiences with the municipality; the length of interviews shows this. All the interviews lasted for more than an hour; mostly for one hour and a half.

The interviews were conducted by the author of this report, Anne Brus. The core findings were discussed with Hans-Jörg Trenz and the necessary adjustments to the report in its present form are made by Anne Brus and Hans-Jörg Trenz.

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<sup>21</sup> "Næstehjælperne" ('Help assistance') is a social movement that operates on Facebook. The members of the group help each other e.g., by giving away things they no longer need like clothes, furniture, etc.

## 2. Interviews with social assistance frontline workers

### 2.1 The family advisers' professional background

Fourteen of the interviewed family advisers have a 3.5-year bachelor's degree in social work<sup>22</sup>. Two of the family advisers are 'social facilitators'<sup>23</sup>. They worked at the municipality while attending university. One of the family advisers explained the difference between the two educations in this way:

*Yes, a social facilitator and a social worker ... There are two different ways to take your education, but it is the same exams you go through. It is the same academic content, and it is the same censors. It [the education] is just called social facilitator because your practice is in the municipality where you work, and over the years you take the courses, build your knowledge up over a couple of years. The social workers go to school most of the time and they only have short periods of practice (DK FA15).*

Another family adviser differentiates the two educations by underlining that a social worker's education is an independent education. A social facilitator receives information from the citizens and focuses on case handling but as the family adviser underlines: *"I am not a case handler; I am a social worker. I advise people"* (DK FA2). Due to the claim of anonymity, the concept 'family adviser' will be used throughout Part II. In addition to the two educational pathways into social work, a few of the family advisers have completed tertiary educations. One social worker has a master's degree in social work, and two mention that they have supplemented their education with a diploma<sup>24</sup>-course in vulnerable children and young people. Two thirds of the family advisers have only a few years of work experience as social workers (from 3 month up to 3.5 years). Despite their relatively short period as social workers, five in this group have work experiences from other jobs and are in their forties. The remaining third of the social workers have between 8 and 22 years of work experience within their profession.

The five family advisers with other work experience other than social work aimed at taking a bachelor's degree in social work. The rest of the family advisers mention that an education in social work was not their priority. They talk more generally about 'working with children' as a motivational goal, and social work as a random choice.

### 2.2 Granting benefits and services: overview of the system in the Family Departments

All the interviewed family advisers work at the Family Department in what they call a

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<sup>22</sup> In Danish, socialrådgiver

<sup>23</sup> In Danish, socialformidler

<sup>24</sup> A diploma course is a course with a specific topic at bachelor's level

**social psychological team**, apart from one interviewee who works **in the receiving team**. Therefore, the analysis is mainly based on data from interviews with family advisers from the social psychological team. When the family advisers talk about their work at the Family Departments, they use vocabulary that is closely related to the Service Law they are following. They call their clients 'citizens'. Citizens with children that are granted a service are called 'the family', or 'the child' and the family advisers work with 'a case'. In the following analysis, we will track the vocabulary that the family advisers use.

Independent of which team the family advisers are working in, their job is based on the Service Law and its legislative measures **on special support to children and young people**. It means that they are obliged to be investigative if a child needs help, or the family needs help with the child. Also, they must follow the political intentions related to the interpretation of the law. Mostly, the municipalities have their own capacity to support the child and the parents, but in cases of extreme urgency, they buy in services from private providers. A family adviser describes the responsibility in this way:

*My authority responsibility? Generally, I have two kinds of authority. I have a responsibility to the children and families. Hm, I must ensure that they receive the correct treatment and a ... professional solid treatment. But I also have an obligation in relation to the system that I represent. I represent the system in a proper way, and I also live up to the responsibility that the system has given me. And of course, that I adapt to the law ... and of course, I also adapt in relation to, for example, the goals of my municipality's policy. That I follow the intentions of the policy and that I put them into practice (DK FA15).*

The family advisers operate with different preventive measures such as family or trauma treatment, a family school for parents and children that offers help to solve problems within the family, a contact person, pedagogical support in the home, an investigation of parental competence, a relief family or placing the child into custodial care. The preventive initiatives are voluntary. Therefore, many of the family advisers talk about their work as building relationships – and/or motivational work. Mostly, the motivational work is targeted towards the parents. As one family adviser notes:

*There is no doubt that the relationship with the children is just as important as the one with the parents, but our legislation and our new thoughts are based on the parents. The parents are the ones who make a change for the children. We can't come from outside and make a change for the children if the parents are not included in the process. They must approve that a change is needed (DK FA13).*

**Some of the family advisers point out that the law defines the prevention initiatives as something that must be progressive, not compensatory.** It means that there is an expectation of development in the cases.

**The families get into the system** because of a notification. Mostly, the notification comes from professionals (e.g., from a day-care or a school), but also citizens – generally

anonymously – who report their concerns about a child. There are also examples of parents who contact the family department by themselves.

**The family adviser in the receiving team** handles new cases at the Family Department. They are usually the first family advisers that the family meets at the Family Department. When the Family Department receives a notification, it is the receiving team's job to access whether it is a case for the family department or not.

Family advisers have the competence to grant a service without asking their leaders:

*It is me who accesses what we are going to do with a case. Is it a case for the Family Department? If not, I am the one who closes the case. Or if I access that it is a case for us, then I am the one who decides whether the case should proceed to a shorter conversation sequence. In these situations, I may proceed the case myself and order a § 11.3 progress [a conversation with a social worker, a psychologist, or a therapist]. Or I will proceed to a notification of progress. If I have doubt about the decision making, I can always ask my team leader or my team (DK FA16).*

Further, the family adviser will carry through some informative network meetings at a school. Sometimes, a school prefers to send a notification in writing rather than calling in a family adviser. In these situations, someone from the receiving team will call in the parents for an examination. In addition, parents have the possibility of sending notification in writing. If the parents have submitted a notification in writing, the family adviser will do the same as described above. They will call in the parents to discuss the notification. Sometimes, the receiving team has the responsibility for acute cases. It is called the "duty". When the family advisers from the receiving team have the responsibility for the duty, they will organise their working week with an open calendar, so they are ready to act immediately when a case turns up.

When **the family advisers in the social psychological team** receive a case from the receiving team, they will usually phone the family, present themselves, tell the parents that they are responsible for the case and would like to discuss the case with the parents. They will talk with the children and their parents about the problems they have, and together with the family, **they will identify the family's needs:**

*Yes, it is me who somehow has the last say in relation to what I as professional assess there is a need for in a family and then you can also say that all the preventive efforts [taken to prevent children's social problems] are always voluntary. My job is to motivate them. I also have the authority to remove a child if I assess that it is better for the child to live with a foster care family. So, yes, it is a big responsibility you have! (DK FA1).*

All family advisers in the social psychological team cover different geographical parts of the municipality. When they talk about their citizens, they usually mention the local day-care centres and schools that the children and young people attend.

Once a week, some of the family advisers are situated in a local school to be closer to the children and the parents. According to some of the family advisers, this change of location facilitates communication with the parents. They find that it is easier

to build up a trust relationship. A family adviser describes it in this way:

*There is a huge difference in introducing oneself as a school adviser or a family adviser... It is as if one - literally speaking - meets a wall when the parents hear the word 'family adviser'... they think a family adviser will take their children away from them but ...it takes a f..... lot to end up in this situation (DK FA1).*

According to some of the family advisers, the system builds on trust towards the family advisers and their capacities to handle single cases. They emphasise their professional competence as something of importance. They are in a position where they can take the right decision with the citizens. They might as well grant individual benefits, but it depends on what the family adviser deems is necessary for the child's well-being (the family advisers mention e.g., a leisure activity or a stay at a boarding school).

Some of the family advisers think that the financial issues disturb their work with the families. The benefit depends on the family's economic state and is means-tested. Discussions with the families may occur if the family advisers say no to a benefit. Below a family adviser reflects on this and expresses a normative stand on what is a reasonable/unreasonable benefit for the municipality expense:

*Sometimes, the discussions are hard to be in because I may not be able to accommodate them. What I can do is to make them feel that I am listening. There are also some parents who ask for some completely unreasonable things... They want us to pay their rent and there are a lot of people who think that the municipality can pay for a taxi so that their child can go to school. There are some things there may well be the municipality's job and then there are some things that are tasks for parents, i.e., a parental responsibility and driving a child to school in the morning... It is not a municipal task (DK FA2).*

The family advisers talk about three different kinds of meetings with the citizens in relation to their case handling. There is the clarification<sup>25</sup> meeting, the start-up meetings, and the follow-up meetings:

*Well, my clarifying meetings will often be the first meetings I have with the citizens. It is to clarify what the family would like to talk about and why, I am here... Hm, I make it clear to them what I know from the receiving team, and why it is me who is handling their case, rather than those they have already met. The start-up meeting, hm I find out what they think; and from their point of view, what are their challenges? What is now going to happen? ... It is when we talk about what kind of course or treatment we can offer... Follow-up is to follow up on how it goes. Is there any progress with the child?*

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<sup>25</sup> In the family department, clarification means a §50 – investigation. It is an examination of the child based on a professional's assessment. Also see Note 6.

*And whether the action plan makes sense, and whether the process makes sense and what should happen next (DK FA 8).*

Clarification meetings and start-up meetings are not only meetings held with the family. The family advisers talking about the clarification process as a significant investigation that includes obtaining information about the child e.g., it involves the day care and other experts who know the child, as well as some decisions for the progress of the case. There are many questions they must deal with to decide what kind of action plan the family needs:

*And when the investigation is clear, then you must also point out something for the visitations. What is going to happen? Does the family need some pedagogical practical support in the home? It is a big intrusion one can say because some total strangers from 'outside' come in the citizen's home, right! Or do we have to offer them some conversations at our family school or is the solution the family room where the family learn what it is like to be a family and such things. Then you just must clear it all with the parents of course! To some of the parents, our solutions come as a shock to them... Therefore, it is important that you have a good and close relationship with both mother and father, and the child if the child is big enough to be able to understand it. When it is done, and the case is examined further, then we must make some action plans. Then we must find out what exactly is it we want the psychologist to work with, or what is it the therapist must work with in this family. Then you set up some goals and when the family understands what is going to happen, then it is also my job to ensure that there is a start-up meeting. At the start up meetings, the parents talk to the therapist, and they talk about mutual expectations. The therapists are the family's authority figure from here, so it is important that they understand that everyone agrees on the solution. Then we have follow-ups meetings, including a lot of network meetings with the school and with ... all sorts of people (DK FA6).*

After the action plan is started, the family advisers will have some follow-up meetings with the families. According to the family advisers, these meetings keep the family motivated with whatever is decided in the action plan. But the follow-up meetings are also a form of control while the family advisers assess whether the development of the child's wellbeing is in progress. Sometimes, contact with the family is informal in the sense that a parent or a child or young people call the family adviser to discuss something about the development in the action plan. Follow-up meetings are also necessary if the action plan fails. For example, when the parents or the child do not meet the expectations of a negotiated action plan. In these cases, adjustments can be made, or an entirely new action plan is negotiated.

Many of the family advisers at the early stage of the clarification process will prioritise holding a meeting in the family's home. According to some of the family advisers, it gives them important insights into the family situation. The family advisers indicate that many of the families are more relaxed in their own home. They think that the citizens feel less

under the authority of the family adviser when the meeting is held in their home setting. In addition, some of the family advisers call attention to another important point. The family's home is a good place to start a conversation with the child. It is optional for the family to agree to a meeting at home, but they usually open their doors for the family advisers. In one of the municipalities, the leadership encourages the family advisers to go on home visits. Other family advisers talk about another competent manner of creating a good relationship. It is to set up a walk-and-talk situation. The family advisers think that a walk in the neighbourhood is a more informal way of talking, and it sometimes works better than meeting in the home or at the Family Department, especially with children and young people. A few family advisers have good experiences with a walk-and-talk with parents.

The case handling and the process of building up a good relationship with the family are described as both an intensive and unpredictable period. It is an integral part of the job where the family advisers inform the family about every step they take, and where they have dialogue with the family about what kind of action the family needs to act on the worries about the child's well-being. But even though there is dialogue about the action plan, the family does not always agree on the plan:

*I think of my job as one requiring integrity. When I decide on something, the decisions I make... then I know that the families are not that surprised because we have had this dialogue about what is going to happen. But I am working in a job where I must be prepared for negative feedback on my suggestions. Even if the parents, their children, or the young people know what is going to happen; then it is not certain that they think it is a good idea (DK FA7).*

In addition to the resistance mentioned above, some of the family advisers express an understanding of this resistance. They talk about the social service as help that many of the families do not want from the public sector. If the parents are divorced, it is even a greater level of conflict because the parents bring their conflict with each other into the conversation.

Some of the family advisers mention their authority to place a child in an out-of-home placement and the authority to give the parents' injunctions. They talk about this authority as difficult to put into practice and fraught with dilemmas. The power is not an authority that family advisers tend to use often:

*Well, I represent an authority that I completely agree with. And we have power as an authority, too. But I experience it is power that we do not have at all. It is mostly because it takes a lot to make the decision. If the parents say we do not want to cooperate; then we cannot do anything. And if we don't have information [about the child's situation] that is serious enough to say, we do it anyway ... so using this authority is never taking lightly. Then there is the parental order where we have the possibility to sanction the parents. It is not to say that I think that constraints are a good thing. Not at all! But to me, authority is just a concept I can use in situations like ... 'Now, I*

*have to tell you this and that'. And it is certainly not the way to create good collaboration (DK FA12).*

Another point is that it is very difficult to gather all the information needed to persuade the local Committee on Children and Young People to enforce an out-of-home placement order:

*There is a judge, and there are also psychologists. There are also professionals represented at the meetings, and a lawyer who is often a judge (DK FA12).*

And then there are the consequences for the vulnerable child. The whole set-up goes beyond the children and their well-being. The lawyers are hired to take care of parents' rights to their child. Usually, the lawyers will act against the family advisers' responsibility to honour what is in the best interests of the child (Article 3 of the UN Convention on the Rights of the Child):

*I am not crazy about my out-of-home placement cases. I feel okay with the families, with the parents and the child... It is the thing about having the cases up on the children and young people's commitment, and then there are the families' lawyers... You know the assessors<sup>26</sup>! It is hard! And it places an extreme burden on me. I spend a lot of resources on getting frustrated; that a lawyer is sitting there lying about mum and her amazing skills ... it is so annoying ... and for the child who must not be at home with its mother and something like that. And we have descriptions of how this child suffers every time it is with his mother. The administrative processes around these cases. It is heavy to have out-of-home placement cases. And the parents' assessor, they love to put the blame on us. They love it when we make mistakes; even it is a completely stupid little administrative mistake that has no significance for the child; then they recommend the case be rejected or there is going to be a retrial, just because of a wrong date. It frustrates me because it is not what we are hired for. We are hired to take care of the children's welfare while the lawyer is hired to create the best opportunities for the parents (DK FA15).*

Apart from meetings with the family, the family advisers talk about meetings with third parties which are called network meetings. In addition, there are team meetings with their colleagues every one or two weeks. All family advisers talk about the team meetings as something useful. It is a space where the family advisers consult each other about existing cases, as well as distributing new cases. Many of the family advisers mention that they have developed an expert role with a specific group of citizens. For example,

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<sup>26</sup> An assessor is an assistant who can support citizens during meetings with, for example, the municipality. They can help the citizens to ask relevant questions and keep track of what is said and decided on during the meeting. The role is limited in the sense that they serve the sole purpose of supporting the person through their presence. The assessor is not allowed to lead or take over a case. They can neither negotiate nor make decisions on behalf of the person.

one talks about an expertise in handling cases with mentally ill citizens; another is specialised in cases with young people, and another with divorced parents.

After the preliminary questions about general features of the system for granting help and the process of granting help at the municipalities, all the family advisers are asked to reflect on a **vignette** and to comment on how they would assess the case. They describe the case as complicated because it involves several administrations at the municipality. There are the money problems, the mother's depression, the family's housing insurance, the young boy's aggressive behaviour, and the family's two other children. The main issue is, as one of the family advisers says: "*We have to look at the case in a holistic way*" (DK FA15). Some of the family advisers think that the case is unusual; others say that is a normal case. The difference in the two views of the case is due to what the family advisers consider in their reflections. When they say the latter, it is because they emphasise that the case family is one that the family advisers can meet at the Family Department. When they stress that the case is the former, it is because they are not handling the family's money problems. It is not part of the Children's Social Service Law to grant benefits. Still, some of the family advisers mention that the money problems are something that may hinder the family's likelihood of receiving the help they can offer at the Family Department. Therefore, many of them will advise the family to go to the benefit office or the dept counselling office. All the family advisers' comment that the son is most likely the reason why the family is in contact with the Family Department. In one of the municipalities, they do not serve families with children over 15 years. They are submitted to the Youth Department. So, when they are reflecting on the case, they are told to think about solutions that are targeted at a 15-year-old boy. One important thing to think about in a family like the one described in the vignette is the family dynamic and the boy's school? Why is the boy aggressive? Why does the boy not want to go to school? Is it a family problem, a social or a learning issue? Is it teen problems or is there drug abuse involved? One family adviser mentions the 13-year-old girl. Maybe she shows signs of cutting? Then the family advisers will move forward by following the procedure already mentioned before in this section, by following up on the receiving team and their report. Does the family adviser need more information, more talks with the family, or more network meetings with the school? Regarding services, the family advisers agree that the service depends on the level of concern in the investigation they make. Their suggestions are different, but they are all in the **category of social work standards** mentioned in the introduction of this report. Some suggest a contact person to support the son, so he has someone to share his thoughts with. Others talk about the Family School. A Family School is a school for families and their vulnerable children when there are concerns about a child's development and well-being. Others again suggest granting the family a specific payment for a leisure activity for the boy.

To sum up, the family advisers mostly work with guidance of families with vulnerable children. They support the families from a holistic perspective, granting them tailored services to cover their various needs. The family advisers describe their work as motivational work, where building up a relationship with the families is of great importance. However, there are many obstacles that hinder its success. For example, some of the family advisers mention the parents' unwillingness to agree on the family advisers' action plan suggestions. The family advisers have the authority to bring children into an out-of-placement. The authority is seldom used but is still a factor that influences their work. Most of the family advisers are uncomfortable with the legislative power they are

given to take decisions on behalf of society to remove children because their welfare is threatened.

### 2.3 Family advisers' organisation of work, routines, and values

The family advisers organise their work based on individual cases they oversee. **Their case load** varies but, on average, a family adviser in the social psychological team oversees 28 to 35 cases. Some have fewer cases, but this is mainly because they have other responsibilities in addition to case handling, or because they recently have closed many cases at around the same time and are waiting for new cases to be assigned. According to the family advisers, there is an official upper limit of 25 cases. Still, the number of cases is not a problem. It is not indicative of how much time they spend on each case. Further, if it is a sibling case, it is considered as one case. It is the **general workload that puts pressure on them**. An example of this is all the unexpected things that happen during a day. When they are describing a typical workday, family advisers stress that there are no two days that look the same; things are constantly in flux, with the unexpected ever present:

*The only thing that is typical about my job is that you make plans for your day... but when the day is over; then you have handled everything else but the things you had planned (DK FA3).*

It may be an acute situation e.g., a child in one of their cases is suicidal. A family adviser describes these situations as combustibles:

*There are periods that are not so good, especially when some of your cases burst into flames. Then, you must spend lots of time on 'quenching the fire'" (DK FA10).*

Another family adviser talks about dealing with work overload:

*You get better at it but sometimes you are under heavy pressure in your cases in general... Then I think 'stop' and try to control my calendar. I block out some days because you think, it does not work in this way. You must stop the work pressure. And it happens every fortnight, so it happens quite often because we have many phone inquiries and notifications that come with our cases. So, the calendar, it is my management tool... Of course, I can only speak for myself, but I am better at handling the pressure now (DK FA4).*

The point is that the family advisers find that the **flexibility** in their job is a disadvantage in terms of working under huge pressure. But it is also an advantage in **terms of independence** in organising their job. Many of them use the word 'freedom'. Freedom is about having a great influence on the planning of their working day, when to meet and go home from work, whom to meet during the day, how many citizens to meet daily, meeting the family in their home or at the department, taking one day off in the calendar just to focus on documentation work, etc. In addition, many of the family advisers emphasise the possibility of being together with the citizens.

Some of the experienced family advisers also talk about a feeling of freedom when finding the right solution for a child. In the citation below, the experienced family adviser underlines that success in a case depends on the possibilities the municipality offers the citizens, as well as the family advisers' own view on what will work in a concrete case:

*Well, I think I have the freedom to find the best opportunities, but I must of course professionally be able to argue for them. Hm, I experience that it succeeds ... It is very rare that my suggestions are dismissed... I am also very good at accessing what is realistic! ...They are not completely crazy things I come up with, but I often think in alternative suggestions when I discuss the possibilities of granting a service with the family (DK FA15).*

Further, the experienced family advisers point out that the workload handling becomes easier over the years, and that they are more successful at finding a balance between demands and possibilities, as described above. Through the working experiences, the family advisers learn to understand their cases better, to categorise them and to assess better what work with a family is, what expectations one may have, and what prevention initiative is realistic. DK FA 15, 2020 gives an example of this. According to this family adviser, it is sometimes necessary to go beyond what they are supposed to do according to the legislation. In this concrete example, the family adviser suggests a compensating treatment and not a progressive treatment as the family advisers, by law, are supposed to suggest.

To further explore the organisation of the family advisers' tasks, they are asked some questions about **institutional influences**, for example about teamwork, supervision and managerial pressures, scientific knowledge, and relations to thirds parties. The family advisers do not see the institutions' invisible management control e.g., static calculations, grant sheets, team meetings, evaluation of cases or supervision as a form of control. They view these as a huge help:

*Actually, I know it (evaluation of cases) is a form of control, but it is also a support to me. It makes me think of my cases. Do I get the results that I want? (DK FA12).*

For example, the team meetings and supervision are experienced more as mentoring conversations. It gives the family advisers a sense of improving their work.

Many of the family advisers also talk about how they use different **scientific tools** in their case handling. Some of them are free to use (they mention 'the three houses', 'genogram', the 'dreamhouse'). Some of them are prescribed, for example, Feedback Informed Treatment (FIT). FIT is a new digital tool. The idea behind this digital dialogue and measurement of effectiveness tool is that the success of the prevention initiative depends on a good relationship between the family adviser and the family. The rating system is used every time the family advisers have a meeting with the parents and the child. Before the meeting starts, all participants evaluate the child's well-being. After the meeting, all participants evaluate each other. Some of the social advisers find this tool useful, especially for the child. Still, others describe the situation as a bit awkward and

transgressive, e.g., at the beginning of a case when they have not established a relationship. **In relation to third parties** and network meetings, one of the family advisers mentions a scientific model called 'The Sign of Safety'<sup>27</sup>.

When the family advisers talk about their **style of work and their goal and values**, many of them talk about how they work on **influencing the citizens' behaviour**. It is not only when they must stop a meeting because of a parent's aggressive behaviour; it is also when they are working with the parent's motivation to change their situation. A family adviser comments on this by saying that some may think of it as a form of manipulation, but she calls it a dialogue, and gives the following example:

*I think of it as a dialogue. When it is a difficult notification e.g., it can sometimes be a little difficult for the parents to talk about their problems. And if it is violence and they will not recognise that there is violence in the home, then I will perhaps reply: 'Well, your child says it...!' And I continue: 'But I do not have to discuss this issue with you. It is a job for the police. It is not my job. And this is how I try to motivate to them. I am also using conversation techniques to find out what is working with them, and I do not hesitate to tell them if I think something is not okay... because they also just need to know it's not okay (DK FA12).*

Another family adviser works with motivation by **showing the citizens respect** through recognition. Below, a family adviser talks about this:

*Well, I have three values: Recognition, honesty and integrity. They are some of the values I appreciate highly... I think they form the basis of a good relationship. It is what I can offer, and it is important that the parents dare to make use of what I can offer. It is recognition, honesty, and integrity; that you treat them properly, so for example when a mother sends me a text message, then I think it is proper to call her immediately and say: 'It is okay, there is actually nothing to be worried about' (DK FA15).*

Another important part of showing the citizens respect is to be available. For the elderly family advisers, availability is a way of showing that they are reliable and professional, people who will not let the parents down:

*I have more frequent follow-ups than we need to do in purely legislative terms, but I try to be available as much as I can for those who I know are really under hard pressure (DK FA7).*

Showing availability is thus part of building up a good and trustful relationship. Therefore, and especially in the complicated and intensive cases, **they try to get to know the family** ". Some of the family advisers even mention that they share some information about themselves to build trust with the family.

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<sup>27</sup> Sign and Safety focuses on the question of how social workers can build partnerships with parents and children in situations of suspected or substantiated child abuse and still deal rigorously with maltreatment issues.

Further, many of the family advisers mention the importance of **being transparent**. An aspect of being transparent is to inform the family about all the steps that are being made in their case and that the citizen can count on them; one of the family advisers replies to the question on personal work style:

*It is important that the citizens can count on me; that if I promise something and forget it, then it is fine if they remind me of it. But I have this kind of contact quite early in the process. I always underline if ... it goes too fast, or I forget something, then they contact me. They must not be afraid of me; or I say, just call me if you have any questions, and I will call you back... you can always count on me calling you back. It is also trustful from the perspective that they must know I am there for them (DK FA4).*

In particular, the older family advisers talk about being **very engaged in their work**. They explain their extraordinary engagement in two ways. Firstly, their own children are grown up, and they are more independent of others in their private life. This means, for instance, that they can field calls at home more easily. It might not be all the time, but they would still check the phone regularly during their free time to hear if there are cases of emergency. They know it is important to the citizens that they are **accessible** to the citizens:

*We decide for ourselves whether or not we have our phones on at home. But I prefer to be accessible to the citizen. I always have my phone with me at home. I turn it off in the evening, right, and when I drive home in the car, I turn it off; and then I turn it on in the morning before I go to work. And at the weekend, then there are times when it just is 'on silent' but for example this weekend, I had a case where I just had to call and do some things... But I can control it! And sometimes, I can easily see if the phone rings three times; then I say straight to my partner, I must take this call. Or I get a text from a citizen ... I know if I take my time to talk to the person then I know I can de-escalate the situation for example, by saying: 'Hey try to listen to me. I can come by your place on Monday.' Then I will do this and talk to them, and I will get hold of the contact person and something like that; so, this is what I do (DK FA10).*

Secondly, and most importantly, their extra engagement with the families leads to better results. They feel that their extraordinary engagement has a positive influence on the family:

*We are like an 'emergency phone' to the family. When a problem occurs, the parents must get it out of their system, immediately. I have learned that if I make myself available for the family in these acute situations, I can nip problems in the bud... (DK FA15).*

All the above experiences are reflections on what the social advisers normally experience in their job. But while the interviews with the family advisers have been conducted during the **Covid 19 lockdown**, it is evident that the corona pandemic changed many of

their routines and habits. At the beginning of the lockdown, the municipalities sent the family adviser's home. It was a special situation because they had to adapt from one day to the next. As one of the family advisers says:

*What could I do? I phoned all the families, all my collaborators. I said: 'Let's see what is going to happen but call me if needed. I am still at work!' And suddenly, everything died. Nothing happened for a long time. We did not receive any notifications... At the beginning, the children from our out-of-home placements managed okay. But after three or four weeks, they reacted to the situation. They felt that the lockdown was a prison. They said: 'We want to get out of this prison'! And I understand them. It was strange. Suddenly, the notification fell to half of what we are used to. Maybe it is the lull before the storm? (DK FA10).*

To all the family advisers, the lockdown situation forced them to be creative and they have been forced to do things differently. But the consequences of the lockdown split the family advisers into two groups. To the family advisers with children, the lockdown has caused many problems. They talk about the difficulties working and teaching/taking care of their children at the same time. But to the other group of family advisers, they stress that they have had more time, and it has mattered a great deal to the quality of their work. For example, they mention that they have had some good and long conversations with parents in new cases. Furthermore, they mention that they have had the time to get up to date with all their cases, and that the written case handling has improved. They have had more time for their work due to not being able to meet the citizens, colleagues, and third parties face-to-face. Some of the family advisers have prioritised to meet some of the citizens in open spaces, especially in emergency situations. It has been acceptable to hold online meetings with other institutions, but not with citizens.

Summing up, the family advisers on the one hand describe their job with families as one where they are constantly under pressure to reach the targets that are set for them. On the other hand, they underline that they are free, up to a point, to organise and plan their job. They emphasise the freedom as something of great value to them. The family advisers find it of great importance to show the citizen respect by being transparent during the process of granting a social service. They try to get to know the families and in relation to this work, they underline 'accessibility' as a valuable work method, especially in acute situations.

## 2.4 Trust understanding, sources, and functions

When the family advisers are **asked about their own understanding of trust**, they hesitate a little before answering. Many of them start with: "... oh, it is everything", or: "... if you trust somebody, it is a good relationship", but they also find the word a bit complicated to define. Still, a few of the family advisers try to formulate their trust understandings. They talk about trust as something elementary in life, not necessarily something

that they pay attention to. But when trust surfaces, it is referred to positively as openness and respect for others. Trust is crucial to humans and develops over time. Trust is also relational:

*Well, to me ... it is an important word and a very big word because... hm, trust it is actually ...I have a lot of trust! ... If I must define it, then I really think it is ... [long break] it's ... Damn! It is difficult to say ... hm, trust is confidence; trust is ...hm openness; trust it is... Oh, there are many values linked to trust! I think it is about being respectful to others. It's not something that is easy to define. It's something that happens in the relationship, and it is something that is enormously crucial for our existence. Yes, I think so! Because if you do not trust your environment, if you don't trust yourself ... then, then you cannot commit yourself to others (DK FA12).*

The difficulties for many of the family advisers in defining trust as an overall term may be ascribable to the situation. They talk about their job for almost an hour when they are asked about their definition of trust. But when they are asked about how trust is reflected in their work, then their answers are quite clear.

Almost all the family advisers say that they **are rather trusting of the citizens by default**. According to the family advisers, trust by default is a premise of their work. No matter what situations the family advisers are talking about, they find that trust is fundamental in their work, and it is the best way to bring about a progressive development in relation to family dynamics and a child's wellbeing.

A few of the family advisers say that **they conditionally trust the citizens by default**. They trust the citizens, but it is problematic to have too much trust in them. It is better that trust goes the other way round, that the citizens trust them. The point is that there will always be a risk of failure with an action plan and at times, the failure is even more likely than the possibility of success. The family is simply not able to meet or fulfil the requirements, even though they have agreed to the action plan:

*I do not really trust the citizen. Yes, I think you must be careful with that; to have too much trust in them because there is a risk of getting disappointed ... No, it's not because I get disappointed if they do not comply with our agreements. But I think I must find a balance with myself. What kind of expectations do we have of the citizens? Because sometimes, we trust them too much! Are they capable of changing their life as we expect them to do? It is maybe a bit unrealistic. I would rather have them trust the other way around, to trust me. I want them to know that I trust them; that they are acting as we have agreed on... I want them to take it seriously that we have set up some goals and that it is important to follow the plan. So yes, I have properly experienced too many times that NOW, NOW things are changing! ... but then, after a while, then they cannot maintain what we have agreed on (DK FA5).*

**There are many family-adviser-related factors that increase the citizens' trust over time.** One example of this is about establishing a **mutual relationship that is built up**

**over time and built on the family advisers' trustworthiness.** Therefore, it is especially important at the beginning of a case to invest time in the family so that they experience that the family advisers are trustworthy. The role of trust as trustworthiness is to convince the family about the possibilities of success where the supportive strategies offered to them are concerned. It is important to inspire confidence, to take the citizens by the hand, to take them to the next step in their life:

*Hm, I give them time ... I give them time. I am not pressuring them; I am not taking a decision if they are not ready to trust me. If they do not want to tell me what the problem is, or if they are not open about their challenges to start with, then I give them time. Then I have more conversations and take on more home visits. Hm, then I maybe also involve their children a little bit more. I have more conversations with their children because then the children tell the parents that it was nice; that it was a nice conversation. Sometimes, it is a good way of creating a better and trustworthy relationship; that the parents can hear it from their children, that it is not so bad (DK FA8).*

Another family-adviser-related factor of trust building is to be **open and honest with the parents.** Therefore, many of the family advisers tell the family what they think about the family's situation. 'Think about' is not meant to hold the parents responsible, or to put down their parent abilities. They are honest with the families in relation to what the family advisers observe, and what they think; that the families can rely on them in what they say. Trustworthiness means that the family advisers **do not have a hidden agenda.** Trust as trustworthiness is when the family tells the family advisers something confidential, or when the family reveals their vulnerability to them. In these situations, the family advisers are confronted with a dilemma. The confidential knowledge is shared because of the trustworthiness that they have built up, but the information can be used against the parents. Therefore, they try to handle the information sensitively and confidentially:

*Trust is something you build up over time. It comes as a continuous thing. They [the citizens] find out that they can rely on me, and after a while, they experience that it is okay to tell me things about themselves, that it is okay and that I do not use my knowledge about them or blame them for something. Then they trust me (DK FA12).*

An important part of the family-adviser-related trust building is to make an alignment of expectations. The challenge is to convince the parents not only with good arguments, but also to leave them in good faith that it is okay to leave some of their responsibility of childcare to the family adviser. **The family advisers, therefore, give priority to come to an agreement with the parents about the different and realistic opportunities they can offer them:**

*It means a lot that the citizens have confidence in me; that they know I am there to help them ... and that they can well leave some of the responsibility to me. I think it is quite important ... yes, but then, trust comes over time. It is clear there is no one who has trust after the first meeting with the municipality. Maybe not the second or third or fourth time. But trust comes when they experience that okay, I do not actually take their child from them. I talk*

*with them; I say what they are doing well; that they create changes for their child. And then after some time, they understand that we [the family adviser and the parents] can cooperate about this together. Then, they open more and so on ... (DK FA2).*

One of the family advisers' calls building up trust, "...a work of translation" (DK FA12). Trust is to translate the help-giving in such a way that the intention of help is not misunderstood by the parents. If a parent is reported for beating their child, the family adviser must find a balanced way of informing the parent. It is their job to tell the parents that it is forbidden to beat a child, but they do not do it in a condemnatory tone, so it may appear as a matter-of-fact statement.

According to the family advisers, they will usually not perform the authority role unless a situation in the family forces them to use their power. They prioritise a mutual relationship, first and foremost. The family needs to feel that their views are examined and respected. Then, trust as a mutual relationship is a possibility:

*Hmm, in the beginning ... because some of the citizens are worried that I will 'take their children' into an out-of-placement home... so I talk to them about what I can offer, and I am not going to remove their children, but I am there to help them with the challenges they have. Then, I think trust will come to them. So, when they contact me ... the relation is not only one way; when they contact me and ask me if I can help them with this or that ... When they start contacting me, I think it shows that they trust me (DK FA8).*

In some situations, some of the family advisers call attention to the importance of demonstrating the power asymmetry in the relationship with the citizens. It is something that **increases trust**:

*I am an authority. It is a role that I take on my shoulders when it is needed, but I always do it in a friendly and proper way. I try to perform the role in a way, so it is not experienced as a threat (DK FA15).*

But usually, the power asymmetry is something that the family advisers try to reduce to a minimum. A few of the family advisers even mention that they share some private information about themselves to minimise the power asymmetry:

*I start to tell a little about myself. It is the first information. It is about who; that I am an employee at the municipality, and I am a mother of three children, and such things. It is something they like to hear. I know it because they always tell me: 'Okay, you are a human being. When you are around, it is not just a system we meet. You are also a real person.' So, it is the first information I give. It is who I am; also, who I am as a person, both professionally and privately. Thereafter, they willingly give me information. I ask them to tell me something about their everyday life and what they find difficult at home... It is not a conversation; it is more a dialogue (DK FA6).*

Many of the family advisers also mention humour as a way of disarming the initial diffidence towards them. Others, especially the young and inexperienced family advisers talk about their age as something that creates distrust. Especially in the beginning of a case, they have experienced that their personal situation, being young and not having children, influences the citizens' trust in them. The following is an example of this. As the only family adviser, she also mentions gender as something important in the mutual relationship:

*So, I am young. And I really think I am good at my job. But there is no doubt that I can easily feel when parents see me the first time— especially those who are already sceptical – when they see it's a young blonde who receives them in the waiting room. Then, they look at me and wonder if I can help them with something. But I probably sometimes say that I do not have children. And then they say: 'What do you really know about children's well-being if you have not tried it on your own body and personality'... But I think it is a short-term thing. It is not something that I think has influence on my cases over a long period... but it does have a meaning as most things have; you know, what gender we have, and so on (DK FA13).*

Some of the family advisers talk about **their authority role as a factor which may lead to the citizens' distrust**. It is the family advisers' job to prevent an illegal situation (beating a child) from being repeated. They have the power to recommend an out-of-home placement for the child. But out-of-home placements are the worst-case scenario, and the family advisers are supposed to avoid such situations. Therefore, the citizens' distrust is institutionally bound and tied to the law and to the Family Department as a whole. Parental responsibility is something private, and the family department is considered a threat to the parents' privacy. Most of the parents have not asked for help. It is others who think they need help. This is the reason why trust is so important, but it is also the reason why trust-building sometimes fails, and the family advisers must give up a case and hand it over to another colleague.

**A citizen-related factor which is at risk of increasing the citizens' distrust** is related to the parents' mental illness. The citizens' diagnoses are something that the family advisers must take into considerations when they are building up a mutual relation:

*Distrusting, yes, I think. Sometimes, the citizens are mentally unstable... We have a lot of citizens with diagnoses, so we also must know how people act based on what diagnosis they have, and there I probably think that both trust and trustworthiness are something you must be aware of. So, if you work with young people who also have diagnoses, then you must be aware of it. But over time, trust will come (DK FA4).*

When the family advisers are asked about **functions of trust and distrust, some of them mention** time pressure as a distrust function. One family adviser mentions that the process of receiving notification to the start of the action plan is too long, and that it is too long a time for the family to wait. The family is challenged, and the waiting time seems irrelevant, as one of the family advisers maintains.

Other family advisers mention structural functions and legal constraints that create distrust; these influence their work when building up trust. They mention the many structural changes they have been undergoing in the last couple of years as a function of distrust:

*So, I think it is important that we are closer to the family. Legally, we must follow up every three months, and then every six months. That is, in principle, you see your family adviser twice a year. But we are replaced all the time. I think we lose insane amounts of trust, because of that. So, there is something structural that makes it difficult. We are under pressure, and we are stressed, yes stressed. In the few years I have been working in this municipality, almost one third of the employees have been replaced. And I think it creates an insane amount of distrust hmm for the citizens. I also want to say: It has taken me over a year to get a grip on my cases; to understand what it is all about, so if we are replaced every year? I will risk my neck and say that, under these conditions, it is difficult to take care of the citizens ... (DK FA14).*

To sum up, the family advisers underline that trust is fundamental to their work with the citizens. They find that a focus on establishing a mutual relation built on trustworthiness helps them to increase the citizens' trust over time. They build trust by being open and honest, and by showing the citizens that they are trustworthy; that they have no intention other than helping the family and their vulnerable children.

### 3. Interviews with citizens using social assistance

#### 3.1 Social background of interviewees

The interview sample consists of 16 citizens, nine interviewees are from Toldbro, and seven interviewees are from Gammelborg. Half of the interviewees are in the early 40s, two of the citizens are in their 50s, and the others are in their 30s. **From an overall perspective, the interviewees belong to a socially vulnerable group with a complexity of economic, social, and mental problems.** Many of the interviewees have a long 'story' in the system using social assistance. A few from the group have escaped from a domestic violence relationship, and another few have their children in an out-of-placement care. Almost all interviewed citizens live in a non-profit rental house with a good housing standard, a few live in their own house. Half of the interviewees have continued their education, for example a short vocational education. The other half have no education other than the mandatory primary and lower secondary school degrees. Many have struggled with what they describe as problems in their childhood. Many have a mental/physical illness, take medicine, and are/have received psychological/psychiatric assistance.

To get a snapshot of a possible relationship between media use, political social milieu and (dis)trust, the interviewed citizens are asked about their media consumption, their interest in politics and potential political sympathies, both on the national and EU levels. Regarding media use, a few citizens highlight the Danish Public television service or the competing channel TV2 News as their favourite news media, but otherwise, they mostly

listen to different music channels or read their news on Facebook. The only direct connection to media use, the political milieu and trust in Denmark relates to a young politician from the Socialist People's Party. A few citizens mention that they follow the young politician, Jacob Mark. He is deemed a trustworthy politician because of his engagement in children's well-being and social justice.

On the question of political attitudes, most of the interviewee's state that they have **no interest in politics**. But when the citizens are asked about political issues, many of them have **some interest** in Danish political issues, such as social and immigration policy. Further, they agree that their interest in politics increases before an election, and when their own interests are at stake, for example, about the discussion of the cash benefit ceiling (see Introduction, p. 2), or child welfare.

In addition, among our interviewees, there is a general agreement that the left-wing parties are the most caring when it comes to vulnerable citizens. Many citizens we talked to votes for the Social Democratic Party, followed by the Socialist People's Party and the Red-Green Alliance. A minority group sympathises with the right-wing populist parties, the Danish People's Party, or the new right-wing party, New Right:

*I'm not a racist. I have children of my own, but an immigrant who comes to Denmark and gets 80,000 kr. and then travels back with 140,000 kr. in his luggage. That's one thing; another is a man who comes to Denmark with his 20 children and gets child benefit for all of them ... It goes against the rest of us who are in society. We are the ones who are being punished; with less child benefit; with the hours rule<sup>28</sup>; with fewer cash benefits; with less housing benefit etc. I cannot understand why we spend money on feeding them and giving them food and accommodation before they go home. I cannot understand (DK CIT6).*

Independent of political attitudes, there is general agreement on how well the Danish Prime Minister from the Social Democrat Party, Mette Frederiksen, has handled the corona virus situation.

When reflecting on the insufficient problem-solving capacity of policymakers, the interviewed citizens give a pragmatic explanation of this: One citizen, for instance, refers to the existence of a Facebook group called Næstehjælperne<sup>29</sup>: *"Then they would probably have solved them by now"* (DK CIT8). Another citizen draws attention to a problem at the structural level:

*Hm, immediately, no... no, I do not think the politicians can solve the problems. I think they may have some intentions of really wanting to make things better. Hm, but, but, then I think it lies deeper than this. It is about all the*

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<sup>28</sup> The rule means that cash benefits to citizens will be reduced if they have received assistance for a total of at least one in three years and have not had at least 225 hours of ordinary and unsupported work within the preceding 12 calendar months. This is meant to tighten up the rules for benefit receivers, making them more available to the labour market.

<sup>29</sup> See p 6 for further elaboration

*laws; they must be changed. All the rules... they ought to give social workers a slightly larger, hm, a scope of action under which they can work (DK CIT16).*

Beside a few Eurosceptics, most of the interviewees would vote to remain in the EU. One argument against Europe is the standardisation of rules: *“Why do we need to have common rules on everything?”* (DK CIT 8, 2020). Another argument against the EU is that Denmark would be a richer country without EU membership: *“Great Britain manages well, so can we!”* (DK CIT7). Pro-Europeans are not Europeans with a big E but prefer to stay in the EU for pragmatic reasons because Denmark is a small country. According to most of the interviewed citizens, it is important to be part of a community with the countries that are geographically close to Denmark. All in all, there are no clear signs of coherence between the political milieu, media use and (dis)trust. But what we can observe is that some citizens are conversant with the negative attitudes against refugees and immigrants of known right-wing parties.

### 3.2 Applying for benefits and services, and opinions on the welfare system

When the interviewed citizens talk about their experiences within the social service system, they usually refer to **many different centers at the municipality**. They have been in the welfare system **for a long period of their adult life and have been on and off cash benefit and educational cash benefit for many years**<sup>30</sup>. **Some were even part of the system in their childhood, as well**. The cash benefit system is constructed in such a way as to cover receivers' immediate needs for a short period. If the cash benefit receivers are not able to fulfil the demands necessary to receive cash benefit, they will usually be offered a rehabilitation programme or early retirement pension. The interviewees in this research project are either in a rehabilitation programme,<sup>31</sup> or in a flex job<sup>32</sup>. Some of the citizens receive early retirement benefit<sup>33</sup> but they are still in contact with the social service system because of their children or their mental illness. A small group of citizens are receivers of lost earnings benefit<sup>34</sup>.

Many of the interviewed citizens also receive housing benefit. In addition, they receive

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<sup>30</sup> From an overall perspective, the cash benefit system consists of three different benefits: Cash benefit, educational benefit, and integration benefit. Many of the interviewed citizens are on different forms of cash benefit. No interviewees receive educational or integration benefit.

<sup>31</sup> A rehabilitation programme is on offer for people who are at risk of being granted an early retirement pension. The focus of the programme is an interdisciplinary and coherent effort to get citizens back to work, or to further their education. The programme consists of offers in accordance with employment legislation (guidance and retraining, company internship, employment with a wage subsidy and mentor), as well as efforts in accordance with other legislation, including in accordance with the Health Act and the Service Act. The receivers of a rehabilitation programme benefit get the same amount of money as citizens on cash benefit. But it differs because their possible capital will not be drawn from the amount as it is when citizens are on cash benefit.

<sup>32</sup> A flex job is a job in a private or public company that is part-time and with special care, either physical or mental. This means that the citizens ability to work is considered.

<sup>33</sup> The receivers of early retirement benefit have left the cash benefit system. It means that some of the interviewees are talking about how they have experienced the cash benefit system and the rehabilitation programme system before they retired.

<sup>34</sup> Lost earnings benefit is a compensation which means that the municipality compensates the parents' salary while they are on sick leave because of their children.

single benefits. A single benefit is, for example transport, special equipment for citizens or their child/ren, leisure activity payments, lower secondary-level boarding school for 14–17-year-old children, and/or a loan for a deposit on an apartment.

As the case-handling procedure at the different subdivisions of the Cash Benefit system and the Family Department differ considerably, the procedures in the two administrative sectors are presented separately:

a) The Cash Benefit System and the Rehabilitation Programme System

In particular, the few citizens who are receiving lost earnings are **very satisfied** with the process of being granted a benefit. A social worker at the hospital is taking care of all the procedures. To them, the procedures run smoothly and the only thing that they are obliged to do is to upload their pay slips onto the digital self-service system platform. It means that they can take care of their children without thinking of their economic situation.

For all the other citizens, the process of applying for help is a long one of being under pressure from the system. When the citizens enter the cash benefit system, they must **apply for benefits via a digital self-service system**. The digital self-service system is defined as the citizens' digital access and contact to/with the authorities. If the citizens know how to navigate the website, there are links to specific forms or applications. If the citizens can find the right application and to fill it out for a benefit, they will be asked to upload the application and the necessary documents on the website.

Regarding documentation, the most important point to mention is that the citizens must prove that they are in a situation where they need help, and in addition to this, they have to sign different forms including digital solemn declarations. One of the interviewed citizens who applied for early retirement talks about a huge number of documents related to her case and her many years as a user of the social system. She also says that the authorities themselves upload documents to her case at borger.dk.

Not all the citizens refer immediately to the digital self-service system when they are asked **about their first meeting with the social system**<sup>35</sup>. But when the digital system is mentioned, citizens express many frustrations and a few of the responders even have aggressive feelings: *"I HATE the digital system"* (DK CIT7). This points clearly to the rather severe problems some of the citizens have in using the digital system. The self-service system is built on the underlying expectation that all citizens are digitally competent. But according to some of the citizens, they are not able to meet this expectation, and they do not get the help they need to use the digital system as they are supposed to do. When DK CIT7 explains why she hates the digital system, she describes herself as *"old fashioned"*. She forgets to check her e-boks<sup>36</sup> and she prefers to phone the authorities, as she explains:

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<sup>35</sup> Maybe it is related with the other starting point to the system in this report, the Family Department. The system meets the citizens in another way as will be described in the next section

<sup>36</sup> E-boks is an electronic post box. Aside from many other things, e-boks is used by the municipality when they write to the citizens. E-boks is free and is linked with the citizens' cpr-nummer (civics' personal registration number).

*Well, I generally do not use e-mail. I would rather call because then I get ... I hear it better than I read it ... and then I can put it [the phone] on 'listening' and record the conversation. Because sometimes, I think that others should know what we are talking about... The cash benefit department, I call them at least once a month and I do it because I must be sure that things are as they ought to be. For example, sometimes ... then, they may pay my medicine; pay it this month (DK CIT7).*

The website is also filled with information about the municipality, what kind of help the citizens can apply for and how the citizens can get in contact with specific centres and departments at the municipality (e-mail or phone). All calls and e-mails go through to a secretary who forwards the call or e-mail to the right frontline worker.

In the digital self-service system, the citizens can sign up for a personal conversation at the citizens' service centre, in Danish "Borgerservice". It is usually situated in the City Hall. Below, one of the interviewed citizens describes a meeting at Borgerservice. She signed up for a personal meeting because she has problems using the digital self-service system. To begin with, **the atmosphere of the meeting is unfriendly**, but it changes because the citizen insists on being treated in a helpful manner:

*No, it [the meeting] was not very good. I felt that they completely rejected me... She [the counter consultant at the Borgerservice] did not ask any questions; she was just hugely dismissive. She gave me some papers that I had to fill out and blah blah blah blah ... it went too fast. Well, first, she asked me to document my income base, and then some proof of rent and expenses. You must prove every expense you have. Then the bank statements for 3 months back... But I got hugely upset and left the building crying... After 10 minutes, I went back to show her what she had done to me. You know, I went back and said: 'Listen to me! I am actually asking you to help me'. And then she listened to me, and she took care of me. She explained it a bit better and said I could always come back. So, her mood changed completely (DK CIT 1).*

Other citizens refer to situations of encounters that are conducted in **an atmosphere of helpfulness**. Mostly, these positive encounters take place in one of the offices at the job centre. Below, a citizen describes how a case handler helps her in an emergency. She has been in the cash benefit system for a couple of years but is now under pressure because she is about to be hit with the 225-hour rule (see Note 10). The citizen is also involved with the Family Department because of her daughter's situation in school. Because of this, she participates in a lot of network meetings and is not able to work as much as required to keep a full cash benefit:

*My case handler at the job centre is immensely sensitive. One time, I called her; I was upset, crying because I was about to get hit with this 225-hour rule. If I were to avoid the rule, I had to work 37 hours in a week by a specific date... hm and how should I do that, when I had so many meetings with PPR, and with the school, and with social workers and all this. So, she went in and exempted me from that rule... so I think it is positive (DK CIT16).*

All the citizens agree that the granted benefits are economically important for them. Most of the citizens **do not have any other income other** than the help they get from the municipality. **They appreciate the help they get.**

But according to many of the citizens, the system is built on distrust. As part of this distrust, the interviewed citizens describe the many processes of control they must go through when they are in the system. For example, they must document their need for help every three months and are drawn through many ready-to-work initiatives that have the opposite effect than intended. But from the citizens' point of view, the initiatives are without notable success. Instead, the citizens find that they are under huge pressure. Many of them mention that this pressure triggers their mental illness to the worse. They underline that they really want to work, but not before they have recovered from their illness.

The pressure from the system may be one of the reasons why almost all the citizens find **the demands exhausting**. Below, a citizen describes her way through the system and the many educational opportunities and jobs that she has not been able to carry through and how the system keeps on finding new ways to prepare her for the labour market, as the cash benefit legislation demands:

*Yes, hm, I have been on cash benefit since my son was born. He is 16 years old now... Well, I have been on and off cash benefits because I have also been on a lot of different courses but at that time, I did not know that I had a borderline personality disorder. So, I can really see now, why I have not progressed because I have had a hard time...being abused and bullied in my childhood... So, four years ago, I was admitted to a resource building programme where I had some trial jobs and some things like that. But it triggers my mental illness. I cannot manage the demands of a job... I have been on the rehabilitation programme for four years, [the maximum granted is five years]. So now they [the municipality] have granted me a health coordinator. I have had one meeting with her where she said a lot of different things... so now they [the municipality] have arranged a meeting with someone... It is an examination meeting where we are going to discuss whether I can be granted a flex job (DK CIT15).*

Another citizen describes the exhausting processes as a form of “municipality stress” (DK CIT9). The citizen defines municipality stress as something that is caused by the long bureaucratic procedures. The citizen is dependent on the granted benefit and has worries about her economic situation. If they refuse her application, she must move from her apartment.

From the citizens' point of view, the procedure of being granted a benefit is not only exhausting; it is **humiliating**. The citizens perceive that the system questions their state of illness at a moment in their life when they are in crisis and their health condition is bad. The citizens' illness is not visible to others, and they get the feeling that the case handlers suspect they are lying about their condition:

*I almost think I have just repressed it all. It's such a big black spot! It was so awful, especially during the clarification process. But I think some of the most*

*humiliating ... it was, oh I cannot even remember what they called the meetings, but there were so many people at these meetings, my two caseworkers and a psychologist and maybe some person from the union, an attendant, or my husband ... often five or six people. And we had to discuss my case, and it was this feeling that maybe they did not really trust me; that it was true that I suffered; that I had a problem. And then you must sit and justify why you are sick (DK CIT14).*

Another form of humiliation is when the citizens are asked to answer intimate questions, for example, about their role as single mothers. Every year, single parents must confirm whether they are living alone with their child/children. If the situation has changed and the municipality is not informed about the new household situation, it is considered as welfare fraud:

*They ask what kind of boyfriend you have and how often he sleeps at your place and if he has a toothbrush here, how much laundry he has. They are just interested in signs of whether he is coming here regularly, and I find it humiliating (DK CIT 8).*

Further, many of the citizens find that the rule and control-based cash benefit system **lacks transparency**. As one of the citizens remarks, “...the system is certainly not fair, and it only follows the rules. And it is difficult to understand. It is like reading Russian” (DK CIT8).

#### b) The Family Department, PPR and the schools

Apart from being in the cash benefit system, **almost all the interviewed citizens are related to the Family Department and/or the pedagogical psychological counselling (PPR)**<sup>37</sup>. Many of the citizens are not able to distinguish between the Family Department and the PPR. Therefore, PPR is included in this section although it is a unit under the school system.

As we have seen in the family adviser part II of this report, the process of applying for or getting a service from the Family Department differ from the help given in the cash benefit system.

The few citizens on lost earnings are very satisfied with the process. They have entered the system via a case handler from the hospital, and it is the case handler from the hospital who has taken care of contact with the Family Department:

*We have been able to concentrate on taking care of our son and supporting his treatment and well-being. And it has been a relief not to have to speculate*

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<sup>37</sup> PPR is a special unit under the municipalities and has several tasks for children, young people and families that require special psychological or special pedagogical knowledge, e.g., when a psychological assessment must be carried out, or when a special pedagogical assistance is to be initiated for children, or if special education for a pupil in primary and lower secondary school is needed.

*about our economic situation. Actually, I did not know we could get 'lost earnings'... Well, we had managed anyway but yes it was nice. I think it is a great help because we have kept our income and we have been able to concentrate on taking care of him during treatment and it has been a relief not to have to speculate about our work situation... Well, we would have managed anyway, but yes it was nice (DK CIT5).*

But to most of the citizens, the connection to the Family Department **it is not perceived as voluntary**. The citizens have not asked for help. Rather, it is perceived as a duty or even a threat. For example, some of the citizens find the unwanted contact with the Family Department **transgressive because it is directed against them as 'good enough' parents**. Below, a citizen **describes** two situations with the municipality. The first situation is with two representatives of the system who visit her at home without warning. The other situation takes place at the Family Department, that has called for a meeting about her children. Both situations are experienced as an interference in her private life and from the citizen's perspective, the system's representatives are patronising:

*It was an anonymous report. Someone had told the municipality that my children had been severely neglected. After the municipality received the report, they came on an unannounced visit. I had just had a migraine attack. They wanted to see the kids' rooms and they wanted to see their clothes and if there was some food in the fridge. They asked about the children's school and so on ... but there was nothing to come after! But they also convened a meeting at the Family Department. Well, our family adviser ... she was SO, so cruelly provocative. She stood up, looked at me and said: 'I hear what you are saying' [the citizen imitates the social worker, speaks condescendingly and very slowly]. 'I understand what you are saying'... I simply wanted to take her head and bang it on the table because it was so condescending. And that conversation, I will never forget it! It hit me so deep, you feel that you are just one in a row. There is nothing human here (DK CIT7).*

Another group of citizens refer to **the system as** problematic and powerful. They **must fight** for their children and their children's right for a social service when the children's health and development are threatened. The municipality does not listen to them and when the service is finally granted, new problems with their children are raised. They perceive that the procedures **lack transparency**:

*I think it is probably the school that has been so contradictory. I even informed them that I thought my son had a problem, but they did not see the same problem as I did...Still, the school kept on reporting my child to the municipality [about her son's misbehaviour], but they would not recommend another solution other than the one they could offer at the school. Therefore, I contacted the municipality [the Family Department]. I talked to the receiving team; and I was also at a meeting, but nothing happened! The receiving team told me that when the problem is in school, then it is the school that must deal with it... then I got back to the school, but they still refused to help*

*me; PPR as well ... Then, I went to my doctor, and finally I was referred to a psychiatrist, but my doctor could not figure out how to arrange a visit for me with a public child psychiatrist, so I went for a private examination (DK CIT3).*

In addition to the above-raised problem of transparency, the citizens also call attention to bureaucratic problems. For example, the municipality is not able to find the right institution: there is no place for a child at a special school, or at the municipal family school.

A few citizens point out that they are not able to comply with the demands that they have agreed on in the action plan. They find the demands from the system incredibly hard to tackle:

*I was under psychiatric treatment... and throughout that period, I was bad. They [the pedagogical help] pressured me mentally. You don't do this enough... They kept making demands on what to do with my son. The result was that I had so many things smashed in my home [her son's violent reactions] because of their 'advice' (DK CIT11).*

However, as described at the beginning of this paragraph, many of the citizens are not ready to start working, and as DK CIT 15, 2020 has pointed out, the pressure from the system to shorten their period on cash benefit can further impact their illness. They are vulnerable and they find the system incredibly hard to tackle as the citation below shows:

*And then, I say: 'So sorry, two seconds!' I explain that I am not quite ready for work because I still have some disabilities and I am in an assessment process because I maybe have PTSD... But it was as if she was not listening! It is as if it does not matter what you say and what you do ... and no matter how many issues you have (DK CIT6).*

In this section, we have described the citizens' encounters with the cash benefit system, rehabilitation, and the Family Department. Some of the citizens are critical of the digital system they are obliged to use when they enter the cash benefit system. In addition to this, there is a highly reliable citizen perception of the social system as exhausting or humiliating, as well as concurrence that the system lacks transparency. As we will see in the next section, the negative experience with the system continues when the citizens are asked about their relationship to the many different frontline workers they meet when they are in the system. But there are exceptions and for the most part, these exceptions are connected to either the Family Department's family advisers and mentors<sup>38</sup>, and almost never refer to the different social workers in the cash benefit system.

### **3.3 Relationships with frontline workers**

The citizens use different vocabularies when asked to talk about their frontline workers.

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<sup>38</sup> All citizens are allowed to be granted a mentor. A mentor is offered by the municipalities to help citizens to achieve or maintain an education-oriented or an employment-oriented course or job.

**The vocabularies are either formal, informal, or personal.** When using a formal vocabulary, they refer to the persons' work position. Informal ways of addressing them often relate to the person's biological gender or an ordinal number (see an example of this on p. 46). The most personal way of addressing them is with their first name. Because of the many vocabularies, we will use 'frontline worker' as a general term, and the different vocabularies when the context is important for clarity.

Here are examples of formal form: Case handler ("sagsbehandler"), family adviser ("familierådgiver") or work consultant ("jobkonsulent") are among the most frequently used words. Less used are flex consultant ("flexkonsulent"), work adviser ("arbejdsrådgiver"), adviser ("rådgiver"), visiting nurse ("sundhedsplejerske"), ombudsman ("ombudsmand"), mentor ("mentor"), support person ("støtteperson"), psychiatrist ("psykiater"), psychologist ("psykolog"), doctor ("doktor"), foster family ("plejefamilie"), speech therapist ("talepædagog"), family therapist ("familiepædagog"), teacher ("lærer"), pedagogue ("pædagog").

The most frequently used informal form of address is *she*, hardly ever, *he*. Sometimes, they talk of the "*person from*" ...and they also use "*numbers*" (see p. 46).

The third category is the use of the personal form, where the citizens call the persons by their first name. In Denmark, it is not uncommon to call an authority figure by her or his first name, but as we will see later in this report, some of the citizens use a frontline worker's first name privately, with warm feelings involved (see an example on p. 49).

The frequency of the meetings with frontline workers differs depending on the case and social situation. Some of the citizens are in contact with different frontline workers on a weekly basis because they are physically disabled and in need of intensive care. A few of those with a reduced-hour job are seldom in contact with their frontline worker, maybe twice a year. It is the same with the citizens' contact with the Family Department. The frequency depends on whether the case is running smoothly. If the action plan needs to be changed, then contact will increase. But even if the action plan is running smoothly, some of the citizens prefer to keep in contact with the family advisers. They make use of the possibility of contacting the family adviser if they need to discuss anything about their child.

Many of the citizens have experienced that the frontline workers **look top-down** on them and **patronise** them. These cases nearly always relate to the cash benefit system, but also occur in other parts of the system. The two examples show that the citizens are sometimes 'walked over' by the frontline workers in cases where sympathy and understanding are called for. The first example below occurs in a discussion between a citizen and a case handler and is about the citizen's economic situation. The citizen is desperate and under economic pressure, but at the same time she depends on the case handler's willingness to help her with her money problems:

*I had been there several times; and she said to me: 'You cannot afford it at all if you don't do this and that; and not at all with four children'. And I was just sitting there... I know I have four children and I know I cannot afford it. You don't need to hit my head on a wall. I am not stupid. Well, you know. I get a little reluctant. What does she take me for? I am not a small child, and*

*she is certainly not my mother. Well, I don't know. I think it is hard to explain, but I am reluctant I think (DK CIT6).*

The other example is even more patronising because the frontline worker not only asks the citizen to change lifestyle, but she also uses a coaching language that shows how little the frontline worker knows about the citizen's life problems and vulnerability:

*I hate the feeling of them when they have this know-all attitude. You know, I was at a meeting. And there was this woman, oh she was such a goose! She told me I had to consider reorganising my life and see the possibilities instead of the limitations (DK CIT4).*

Almost all the citizens complain about **the frequent changes in staff and persons who run their cases**. It is a problem that is independent of the different sectors the citizens are related to. A consequence of this is that some of the citizens give the frontline workers numbers instead of using the frontline worker's first name:

*I give them numbers. When I reached number six, I thought to myself that it was not worth remembering their names, but I know that the one I am talking about, she is number 13... It's deeply tragic but I must give them numbers because I cannot remember their names and they will disappear in half a year (DK CIT7).*

The many employee shifts give the citizens an unforeseen opportunity to compare the frontline workers' competences and social skills. This may decrease the power asymmetry in the relationship because the citizens are given an unexpected opportunity to judge the frontline workers' professionalism:

*I just think he's a snob. Yes, I might get a little annoyed! I think: 'Why can you not help me ... and you cannot even figure out how the computer works.' Yes, I get a little annoyed because before that time, I had a really good job consultant. She helped me and got things done. For example, I got a raise in my salary at work because she said I was worth more than what they offered me. But he [her new job consultant] cannot do anything. He is such an office mouse! (DK CIT13).*

In addition, some of the citizens raise a problem about the lack of information that the many replacement staff bring into their meeting with the system:

*Well, I had two different caseworkers at the job center while I was in a flex job ... I had a family adviser who stopped and then I got a new one without being informed. It was only when I called and said: 'Hey, I want to talk with my family adviser' ... and then they said: 'She is not here any longer'. Well, okay! Hm, so now, I don't know who my family adviser is... (DK CIT12).*

Maybe the many changes in the frontline workers are one of the reasons why almost all the citizens characterise their relationship to the frontline workers as **pragmatic or distant**. The frontline workers represent a distrustful system that is bureaucratic and ruler-

and control- based. In the example below, a citizen describes why she meets the front-line workers with a pragmatic attitude. Her many years in the system have taught her that the frontline workers react negatively to her resistance towards the system's demands:

*No, the effort is not worth the expense! To knock on the table and be offended and slam doors. They are stunningly indifferent to how you react. If you do that, you don't get any money. So no, that's how the system works so it is not worth the effort...You must prepare yourself; think about why and what you want before you ask for a benefit. You must give them, hm, a reason why you do not want it [e.g., an activation job] or why you really want it... (DK CIT8).*

Further, the pragmatic or distant character of the relationship is a way to protect citizens from being disappointed. They refer to their mental problems and the risk of being let down by an authority who does not understand their feelings and problems:

*It's sometimes a big fight. I have a fear of losing ... it is something from my childhood. Yes, I am afraid of falling to pieces because what if it is one of those [frontline workers] who do not understand me (DK CIT4).*

The citizens also call attention to the frontline workers' experience. In particular, the citizens who are in contact with the Family Department are sceptical of **young females**. They find it a bit over the top that a young woman has the authority to tell them something about how their life ought to be, or how they ought to take care of their children. They call them immature 'girls' and explain that it is hard to talk to someone who is much younger than themselves:

*Now, when you [the interviewer] mention experience! Our first family adviser, she, she was simply a child. She was immature and uninterested and so on. Everything she said was 'by the book' and rule bound. I did not feel she listened to me properly ... For example, she would not involve the school" (DK CIT11).*

Until now, we have focused on a negative picture of the citizens' perceptions of how they relate to frontline workers, but there are exceptions to this overall negative view. We find it important to emphasise the positives to understand what citizens define as a trustful relationship. Our interviewees describe two different forms of constructive relationships, an extreme form that involves private feelings and a cooperative relationship that is built on honesty, transparent communication and the social workers' engagement and personal characteristics.

The extreme form of relationship occurs in the cases where a mentor is involved. A little group of citizens talk about a relationship that has developed as **warm, close, and private**. They see their mentor outside the mentor's 'office-hours' and the relationship involves 'private feelings' as one of the citizens points out. The citizens talk about it in a confidential tone to the interviewer. According to the citizens, it is something they keep to themselves because the municipality will remove the frontline worker to another area of work if the private relationship is detected:

*I am close to Mona<sup>39</sup>... Usually, I am careful about not mentioning it to others ... but we are seeing each other in private ... we talk; we are bonded... I also have had something private with some of my home helpers. We exchange private feelings and thoughts, etc. with one another. Yes, so with Mona, I have private feelings and thoughts (DK CIT4).*

The cooperative relationship is developed over time and through constructive cooperation centering around the citizen's child. Here, the relationship is based on the family advisers' professional engagement that is described as **honest and transparent**. The citizen has been in the system for many years and still, it is the first time that she is able to communicate with a family adviser:

*Well, now I have had a lot of caseworkers and it is actually not many of them I have been able to communicate with because they are so superior, and they simply think it is their own money they are granting... My new family adviser is just straightforward in her manner. Well, maybe it is because she has heard a lot of things about me; that I was able to run around with all people or at least the people at the municipality... but I could not do that with her. I really like it [the cooperation] and her demands are not unreasonable so that's how things are now. No discussions or other nonsense, if I wear blue socks or yellow and so on (DK CIT8).*

Another example of a cooperative relationship relates to a family adviser and a citizen. Here, the family adviser is **empathic and understanding, and shows the citizen respect**:

*So, she is just understanding and attentive and I feel she respects me. I feel that she sees me. It is nice. She is very understanding and shows empathy towards us. To give you (the interviewer) an example. One time, I wrote to her: 'Something must happen now because otherwise, I will mentally go down; drop into a black hole. I give up'. And she was very empathetic and told me: 'Of course, something has to happen. I completely agree with that, and I will return to you as soon as possible'. Then after a while, I received the papers about my son. I e-mailed them to her at once. I wrote: 'I do not know if you got the papers yourself but now, I'm sending them straight to you'. Immediately, she writes back that she has also received them. She writes the recommendations about what kind of help I need and within an hour or so, she sends them back to me so I can read them, and she asks me: 'What do you think? Is it okay?' I write back and say, 'Yes thank you!' (DK CIT3).*

Others underline the importance of having a mentor that is **helpful, open and who offers good explanations and advise**:

*Hm, she has always done something good for me. If she had not helped me, I would not turn up at the meetings... She is always open, and we talk about*

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<sup>39</sup> The name is made anonymous

*things. You know, she suggests something and says: 'I think it will be good for you'. And if I am tired of something, I can always call her... because sometimes, I am sick and tired of myself and my situation. I am on my seventh year now, and I have been four years in the rehabilitation programme, and I have not progressed at all ... but then she says: 'I will talk to your job consultant. It is not tenable to keep you in the rehabilitation programme. You are going down every time you start working. You must get on with your life' (DK CIT15).*

Summing up, the citizens' relation to the frontline workers depends on where the frontline workers are situated in the system. There is a clear tendency that the cash benefit system treats the citizens differently and in a more patronising way (except for the mentors) than the Family Department (apart from the parents who are threatened with an out-of-placement home). According to the citizens, it is unusual to establish a good relationship with someone in the cash benefit system. At the Family Department, the relation may turn out as something meaningful to the citizens. The most important learning point from this section is that it is possible to build up a cooperative relationship where the citizens perceive that they are being helped, even though they distrust the system by default. In the next section, we will see how the citizens reflect explicitly about trust and mistrust in their relationship with the frontline workers.

### 3.4 Trust understanding, sources, and functions

When the citizens are asked directly about trust, many of the interviewees reply with a: "Oh, it means everything" or "a lot" (DK CIT1, DK CIT2, DK CIT3, DK CIT4, DK CIT7, DK CIT8, DK CIT9, DK CIT13). But when they develop their answer to the question, they underline that they are challenged when it comes to trust because many people have let them down in their private life and in their life on public support:

*Hm, trust means everything, but I have a hard time and it is difficult for me to believe in trust... I have been let down both in my private life but also by the system ever since I was small (DK CIT7).*

Still, many of the citizens are quite clear when they talk about how they understand trust. Meeting a system that is built on distrust, citizens depend on the public face of the system e.g., by being emphatic, understanding, open etc. From the citizens' perspective, trust has something to do with another person's **trustworthy** behaviour. The citizens have a strong preference in favour of building individual trust relationships with persons they feel confident in, who will support them and back them up within the system. According to them, this form of trust is of special importance because citizens must reveal themselves and give away very private information when they ask for benefits or social services:

*Well, trust is when you can talk about things with a person and that the things you talk about are not being told to anyone else (DK CIT1).*

*Oh, I think well ... it's hard to put into words! ... well, it means a lot ... you just feel that you can say everything you want to the person in front of you... it means a lot that there is trust (DK CIT3).*

In addition, some citizens highlight **the reciprocal dimension of trust as a mutual relation**. They accentuate the importance of a trustworthy person who is handling the information they give as something that remains between the two parties. At the same time, a few of the citizens are aware of their own role as receivers of public support. As a result, trust has a self-disciplinary aspect. When the citizens ask for a benefit, they must be trustworthy themselves. i.e., behave in a special way to be trusted:

*Well, trust means that what I say will be heard and received and I trust that it will also be treated confidentially. Trust is to expect that someone will help me when I come and ask for help, and that they trust what I say is true, and I do not try to cheat them; that I do not try to lie (DK CIT5).*

As we have seen earlier in this report, the citizens' opinions on the system are predominantly negative. In relation to the question of (dis)trust by default, the citizens give many examples of their dissatisfaction with the clarification process in the municipality, both in the cash benefit system, the PPR and the school system. They talk about delays in the case handling process and endless meetings. The decision-making process is based on formal and bureaucratic rules based on which benefits, or social services are granted. This bureaucracy is often neither comprehended by the citizens nor perceived as transparent, and mostly the bureaucratic processes cause frustration and suffering. The point is that the citizens perceive that **the cash benefit system and rehabilitation system are built on distrust by default of the system towards the citizens, which again engenders a generic distrust response**. As one citizen puts it in reply to the question about the decision-making process:

*I do not trust bureaucracy and what can you say the oil that should make the wheels run smoothly. The wheels run very, very slowly! But I trust the persons at the municipality. But the system as a well-functioning organism, I do not trust (DK CIT14).*

A concrete problem is, as one of the citizens says, that it takes ten good meetings to offset one bad meeting (DK CIT13). Another citizen complains about how the system has treated her with distrust by default. The system always suspects that she is not doing enough for her child and that there is something is wrong with her, not only as a mother but as a person (DK CIT11).

Sometimes, the citizens have the chance to meet a person with authority within the system who nevertheless encourages them and is willing to trust them, as we saw in the former section about the citizens' relationship with their social workers. The citizens rely on people who **give them trust on credit**, handle their case in a trustworthy manner and believe in what they say. Usually, it is a mentor or a cooperative family adviser, but it can be anywhere in the system:

*Well, I think that my consultant at the job centre trusts me. She has confidence in me. She knows that as soon I get things under control on the home*

*front, and I am ready to start on a new job, then I will perform better. I think she has shown me a portion of confidence by saying: 'Now that you are getting your life under control, we can talk about a job' (DK CIT16).*

The point is that many of the citizens have mixed experiences with the system. They alternate between **distrust by default related to the overall system, mistrust related to specific persons working in the system and trust towards some of the social workers**. They talk about distrust by default, for example, at the job centre, or mistrust towards a job consultant, but at the same time, they have a mentor or a family adviser in whom they trust. The system is complicated as one of the citizens explains (DK CIT 3, 2020). It is difficult to navigate and to understand the system, and the citizens are lucky if they meet a person who is engaged and makes their case run smoothly (DK CIT 3, 2020). A citizen describes exactly this. First, she talks about trust towards her mentor:

*Well, trust means that you can trust someone, and you know the person well. But I also know that my mentor has a duty of confidentiality. It is of great importance because I know she will not say anything about me to someone else. And I just feel comfortable because she is a nice woman. She supports me in many ways. When I must go to a meeting, she picks me up because otherwise I would cancel the meeting; and she helps me when I am having a meeting with a job consultant. She cares about me (DK CIT14).*

The citizen continues to talk about distrust by default and representatives of the system by comparing trust with an exercise often used in trust-building training called the trust fall. Someone stands in the middle of a circle with their eyes closed. They announce that they are ready to fall, and the circle responds by keeping them upright/catching them. She relates the exercise to her bad experiences at the jobcentre, and the high turnover of job consultants she has encountered:

*The exercise was transgressive, and it was really a transcendent experience. There, you find out what trust is really like. But I made it! It is how you feel when you ask for help at the municipality. They do something, and then I fall ... You know, to sit at the jobcentre, to sit in front of the computer, to look for a job... It triggers my anxiety..." [The citizen continues by talking about the many job consultants she has met at the job centre]: "...It is very annoying. I have had so many job consultants. The problem is that when I finally become attached to a job consultant or a case worker, then they are gone when I come to the next meeting. One time, I got a new consultant every month. I just get to know the person, then a new one arrives (DK CIT14).*

Apart from the problem of staff turnover, some of the citizens speak of **time as a possible trust-building factor**. They talk about how their mistrust towards their family adviser, case handler or job consultant has changed over time. Such a perception of change in their relationship built over time is corroborated by both sides. According to the citizens, mistrust is mutual. It is both the person from the municipality and the citizen who mistrust each other. The change from mistrust to trust depends on the persons and the situations involved, but it happens, even after many years in the system. Below, a citizen on early retirement benefit talks about her son's family adviser, and how a relationship

of mutual mistrust, over time, developed into one of mutual trust resulting from their successful collaboration working together on the son's problems, and overcoming his vulnerability:

*In the beginning, I did not trust her. I could not talk to her at all. I thought she was terribly, terribly, terribly horrible, but then we got closer and closer to each other. I think it is because we had to work with each other about my son, and then I found out along the way, well she may not be so crazy anyway... But I also think it was because she did not like me, either! Because of all the family advisers and case workers and everything. They had told her that I was completely indifferent... She is weird, insane and things like that, so I kind of think she had also built such a barrier between us (DK CIT8).*

A few citizens talk about how the risk of an out-of-home placement affects their trust in the family department (DK CIT3 & DK CIT7). The citizens are very emotional when they talk about it. Others are indignant at PPR and the schools because they have refused to help them, despite clear signs that their children had problems at school (DK CIT3, DK CIT10, DK CIT11 & DK CIT12). A few citizens are enthusiastic about the help they have received (DK CIT2 & DK CIT9), but most of the citizens are dissatisfied. They mention that their trust is negatively affected because they are not getting the help from the cash benefit system, they think they have a right to (DK CIT1, DK CIT4, DK CIT6, DK CIT7, DK CIT8, DK CIT13 & DK CIT16). For example, a few citizens point out that they are refused help for economic reasons:

*Yes, I know that some of the decisions are made with a view to a financial basis. But I sit at the other side of the desk with some emotions. I don't care about their finances! I am frustrated because my child is not just a 'spread-sheet'. I want her to grow up and become a whole person. Therefore, those who hold the purse strings must find a solution to it (DK CIT16).*

Based on their experiences and meetings with the social system, many of the citizens recommend changes for the betterment of the social system, and for the political system to embrace the citizens as human beings. Some citizens mention a need for change in the way the social system distrusts its clients by default. As one of the citizens puts it:

*Basically, the system ought to meet people with trust by default. I believe that when you come and ask for something, then it is because you need help. Yes, some people cheat but it is after all only a few. It is the attitude the system meets people with... People are not seeking help for fun. There is no one who comes and asks for help if they do not need it; rather the opposite! (DK CIT5).*

Other recommendations are directed towards politicians. They think that the cash benefit ceiling is creating more problems than it solves. Here is an example of this:

*The cash benefit ceiling is not good enough; not very good. You don't want to be branded as a bad payer or something, so you pay your bills; and then you do not have money to buy food and then it affects the kids ... so the cash*

*benefit ceiling, it needs to be removed! It is bad! In general, you should not grant people cash benefits ... If people think they are sick, then they should put them immediately on what is called unemployment benefit. And then get them examined by the doctor. Get it done immediately instead of telling people that they must be on cash benefits for a whole year before they find out whether you are too sick to work. So, find it out immediately! (DK CIT13).*

The last category of recommendation is directed towards the job centre system, and more individual solutions and caring:

*You must stop this box thinking! You must look more at the individual and what kind of challenges they are facing. Individuals don't fit into these boxes they want to put you in. They must take it seriously when people come and ask for help because it is only something you do when you are truly completely in a fog (DK CIT16).*

Summing up, the citizens perceive the system as distrusting by default. A good example of this mechanism of generalised distrust is the very first moment when the citizens enter the social system. They are confronted with a highly digitalised self-service system where opportunities to engage in trust-building communications are low because of the system's nonhuman and 'faceless' character. Another example is the exhausting process citizens must go through to be recognised as a receiver of a benefit, which is often experienced as over-bureaucratic and humiliating. The Family Department works with trust by default, but still many of the citizens talk about a distrustful relation because they are forced into cooperation with frontline workers. Despite these generally high levels of distrust, however, there are also some examples of reciprocal trust relations being successfully built, and situations where citizens feel safe and rely on frontline workers' good intentions.

## 4. Summary and Conclusions

Based on the analysis of 32 interviews from two middle-sized municipalities in Denmark, respectively with 16 family advisers working at the Family Departments and 16 parents with children from the same municipalities, we can draw these main conclusions about trust and trust building in the relationship between citizens and authorities.

### **The family advisers:**

- Although the family advisers' work is organised through a rather fixed and controlled time management planning, including supervision, team meetings, different digital and scientific tools, the family advisers find a freedom of scope in their work.
- For the family advisers, time plays an important role for trust building. As much as their own work pressure allows, they give the parents' and the children time to establish a cooperative relationship with them.

- The family advisers find it important to act as trustworthy authorities. An important ambition in their job is to convince the citizens that they do not have a hidden agenda when they suggest a social service that they find realistic in relation to both the family's resources and what the municipality is capable of offering. Though the limit between manipulation and trustworthy behaviour is somehow vague in these situations, it is when the family advisers vary between authoritarian trust and personal trust that a trustworthy and cooperative relation to the citizens is developed.
- Yet according to the family advisers, a trustworthy and cooperative relation to the citizens is threatened by a general overload in work that sometimes results in decision-taking that is based on a routine rather than an in-depth investigation. Work pressure may affect the possibilities of developing successful cooperation with the family.

#### **The citizens:**

- The vulnerable citizens meet a fragmented system with many different forms of control and regulation depending on the policies of the specific area of social service and benefit. Still, they perceive the system as a whole unit.
- Vulnerable citizens find that the focus on standardisation, regulation, and control in both the cash benefit system and the rehabilitation system lack transparency. They get exhausted and are at risk of developing 'municipality stress'.
- The many shifts in staff increase the citizens' distrust by default.
- The citizens will usually meet the Family Department with distrust by default. They perceive the Family Department as a powerful authority they must obey.
- The citizens find it important that the system is represented by a trustworthy frontline worker that they can rely on. A trustworthy frontline worker will increase the possibilities of developing a trustful relationship over time.
- Some of the citizens give examples of a mutual and trustful relationship where the citizens and the frontline workers cooperate with each other. This cooperation can contribute to a reduction in the generalised distrust by default, and even sometimes develop to a trustful relation.

While the study has conducted interviews with both the family advisers and the citizens, it would be interesting to check whether there is any coherence or lack of coherence between the findings in the interviews. Because of the fragmented structure in the Danish welfare system, it is a challenge to make a comparison. Almost all the interviewed citizens reflect on the welfare system as a unit. In contrast, the family advisers mostly refer to their work experiences with the families and their vulnerable children, not the cash benefit system or the rehabilitation system. As we have described already, the cash benefit system/the rehabilitation system and the social service system have different policy defined approaches to the citizens. It is interesting that the different approaches are not being highlighted or recognised as something that relates to the family departments by the interviewed citizens, but it can be explained by the fact that the citizens' entrance into the system is not perceived as voluntary in any of the systems, and that

the frontline workers act from a powerful position, independently of what part of the system they represent.

All in all, the effort of building up a culture of trust in the Danish welfare system is threatened by a distrusting digital bureaucracy that requires vulnerable citizens to follow rather anonymous procedures and routines of work, which overall decrease their trust in the system. An example of this is the digital self-service system. Digitalisation of the public sector has not only established new anonymous working routines in the municipalities but has also changed the dominant view of the role of citizens that apply for benefits or a social service in the Danish welfare system. By following the logic of the digitalisation of welfare, the citizens are now expected to be actors in their own life (Schou & Hjelholt, 2019). All the citizens are supposed to work with the digitalised system by themselves; to find the needed information on the municipality's website, to write and send a digital application for a social benefit and receive and send online post to the municipalities: *'There is both quality of life and good economy in spreading digital welfare solutions, that gives freedom and makes the individual more self-reliant'* (The government, 2016 p. 29). Or as Schou & Hjelholt (2019) describe the digital situation, the citizens have become their own case handler. When they enter the digital system, there are more than 100 case handling areas they can choose from. As we have already described in this report, the highly distant and anonymous bureaucracy is a factor that is at risk of creating generalised distrust towards the authorities. The expectations to make the citizens' freer and self-reliant probably belong to the privileged citizens that can use the system. But our research also shows that the citizens have difficulties in meeting the underlying market understandings of citizens as actors in their own life. There is a risk of excluding the less privileged citizens even before they enter the social system. This is obviously a problem since the vulnerable citizens will usually be the citizens that the very same system is supposed to serve, not exclude. It is a dilemma that the Danish Agency for Digitalisation has shown an awareness of (Digitaliseringsstyrelsen, 2021), but as we have pointed out in this report, the problem has not yet been resolved. Another dilemma is that the digitalisation has also changed the next step in the application procedures. Usually, this step will be a meeting between a frontline worker 'behind the desk' and the citizen, but if the vulnerable citizens need guidance with the digital self-service system, the procedures of the application will usually take place in an open computer office. Here, the focus will not only be on the citizens' needs and the frontline workers' professional guidance, but also on helping with the technology itself.

Maybe this is the reason why both the family advisers and the vulnerable citizens highlight trust as a cornerstone in the meeting between the citizens and the frontline workers. Building up a personal and trustful relationship is a way of compensating the distrustful and controlling welfare system. The Family Department is built on an effort of trusting by default. It serves the citizens with a 'soft' and psychologically oriented power based on motivation work (Mik-Meyer, 2017). On the one hand, this system supports compliance: the citizens will usually comply with the demands and perform as worthy parents who deserve the welfare service that is offered to their children. Even though they obey, their decisions will appear as voluntary and not by constraint in compliance with the model of responsible parents. On the other hand, both the frontline workers and the vulnerable citizens describe trust as reciprocal trust that is developed over time. They also agree on the importance of a trustworthy frontline worker. When trust is developed, it happens through different kinds of actions where the frontline workers and

the citizens defy the demands that are set up to control them, or when the frontline workers are acting helpful and working on behalf of the citizens, as seen with the mentors. But as the title of this report suggests, there are many 'buts' that hinder trust being developed, especially because the expectations of the vulnerable citizens are too high, for example, not only about documentation and digital competences, but also because the system distrusts the citizens by default.

In synthesis, we can conclude that trust is a process rather than a static condition. Trust is rather 'trusting' than 'to trust'. Trusting is developed through an intense period and requires the constant efforts of both the frontline worker to appear trustworthy, and the citizens to show their willingness to cooperate. Mutual trust is best achieved by agreeing on a target that both find meaningful and important, and that engage both in full cooperation. A trustful relationship is only successful if the cooperation results in a productive solution that both the citizens and the frontline workers find satisfactory.

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# Professionally Trusting by Default? Notions of Trust in the German System of Welfare support for Families

Stephanie Schneider and Ulrike Zschache

## 1. Introduction

### 1.1 The welfare state regime and the organisation of social assistance in Germany

Esping-Andersen's classic typology considers the German welfare state as the archetypal example of the conservative model (1990). It features a contribution-based and status-centred system, introduced as early as the 1880s by Bismarck, reaching a relatively high degree of decommodification at its peak development. At the same time, the conservative German welfare state regime has been shaped by an explicit family policy where the state feels responsible for the protection and support of families (Kaufmann 2002: 429-430), but in comparison to more comprehensive welfare states, this support is "more narrowly focused" (Gauthier 1996: 6). Following the subsidiarity principle, the level of state support for families has been traditionally moderate and has privileged financial support over service provision, pointing to a relatively low degree of defamilialisation (Gauthier 2002: 452-453; Pfenning and Bahle 2000: 24). After the Second World War, however, the German welfare state underwent a remarkable expansion and differentiation proceeding until the 1970s, including, among others, the development and expansion of various job markets and qualification policies, health and care services and a broad range of social services, including child, youth and social work (Schmid 2012). In the newly emerging Keynesian social welfare state, safeguarding of individual welfare became public responsibility, and the social welfare state was viewed as an "addressee of expectations of protection, support demands and calls for help" (Lessenich 2009). At the turn of the century and after a long debate about the inability of Germany to reform its model, significant changes took place (Seeleib-Kaiser 2016; Blank 2020). Activating features and means-tested tax-funded elements (instead of contribution-based) gained importance. Most famously, the 2010 Agenda of the Social-democratic and Green coalition government of 1998-2005 introduced the principle of "demanding and promoting", aimed at interlinking welfare-state benefits with measures that activate beneficiaries' self-responsibility and seek to (re)build their self-reliance by returning them to gainful employment as quickly as possible. Moreover, activation and promoting self-responsibility became relevant in many other areas of the social security system. This also includes social work, where support measures became more strongly oriented towards empowerment, capacity building and the idea of providing help to self-help (Lehmann and Dick 2016; Lutz 2008).

In terms of organisation, the German welfare system is unique in its corporatist structure, conceptualised as a dual system of "free" and public welfare (Boeßenecker and Vilain 2013: 25). The general principle of both this relationship and the federal system is summed up under the notion of subsidiarity based on conservative-catholic social

teaching (see Pilz 2009: 101), including the obligation to self-help, on the one hand, and the primacy of the lowest level as well as the non-public over the public institutions of welfare, on the other. In other words, the state is seen as the provider of the last resort. For example, municipalities, not the regional or federal government, are tasked with administering and financing social assistance, child care, and many other services, and they do so by partly channelling funds to non-profit organisations, which then run, for instance, kindergartens, retirement homes or care services. However, all municipalities and providers have to follow the federal social security code (SGB) which codifies and integrates the social benefit and social services system.

Due to the vertical and horizontal diversification of the German system of social assistance and welfare provision, benefits and services for families who find themselves in financial or psycho-social difficulties are varied and spread across institutions (Mätzke and Ostner 2010). Depending on the particular life circumstances of a family, they might, for example, apply for financial benefits or social services at the Federal Employment Agency (Bundesagentur für Arbeit, BA, responsible for child benefits and unemployment benefit I), the Jobcentre (responsible for unemployment benefit II and social benefits for members of the 'community of need' who are not capable of working), the Social Welfare Office (in the following: SWO, responsible for housing benefits and for social assistance pursuant to SGB XII, i.e., benefits for people not capable of working), and the Youth Welfare Office (in the following: YWO, responsible for child and youth welfare according to SGB VIII), or the pension, accident or health insurance funds. The institutional diversification of the German social system is inextricably interlinked with a strong legal fragmentation into distinct systems of social law, while there is also a plurality of different financing models (Boeckh, Huster and Benz 2011: 135).

## 1.2 Organisation of research in A-Stadt and B-Stadt

The findings presented in this chapter are based on interviews that were conducted in two German municipalities which, for the purposes of this report, we will call A-Stadt and B-Stadt.<sup>40</sup> A-Stadt is a small-sized city located in the west of Germany, B-Stadt a medium-sized city located in the east. While overall vulnerability in both A-Stadt and B-Stadt is low, there are districts in both cities in which relative vulnerability is rather high.

Between February and November 2020, we conducted 21 interviews with frontline workers of social assistance in both municipalities.<sup>41</sup> In order to recruit social assistance employees, we first approached the respective heads of YWOs, SWOs, and Jobcentres. After official permission to conduct fieldwork was given, they supported us in approaching employees working on the frontlines of these institutions. Most of our interviewees are from the YWOs, which had a particularly strong interest in our study. While SWOs and Jobcentres were also supportive and interested, they appeared to be massively affected by the surge of people applying for social benefits during the Covid-19 pandemic which made it more difficult for them to arrange interview meetings with us. Overall,

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<sup>40</sup> We decided to anonymise locations since some of our interviewees occupy rather unique positions within the local social security system and could be identified by insiders of the institutions.

<sup>41</sup> Since we conducted research in two different municipalities, we decided to slightly increase the number of interviews to allow for future comparative analyses.

our sample is quite evenly distributed concerning age, and length of professional experience. Among the staff we interviewed, employees with a university degree (mostly in social work) dominate our sample, as do female employees (14 female, 7 male). In the context of the pandemic, we were still able to conduct the interviews with frontline workers face-to-face, mostly in larger meeting rooms on the premises of the institution under investigation. The interviews lasted between 75 minutes and 165 minutes.

Recruiting citizens using social assistance to participate in the study proved rather difficult.<sup>42</sup> Over the course of nine months (between June 2020 and February 2021), we used various recruitment strategies and different kinds of incentives (shopping vouchers, as well as a remuneration in cash that was financed by the university). The youth welfare offices of both municipalities supported us in our recruitment efforts by including our call for interviewees in their mailings to citizens, but the response rate was very low. In addition, we circulated our call among social service providers, social department stores (“Sozialkaufhäuser”), “Stadtteilbüros”, and social and family counselling organisations, and posted it using social media. At the time of writing, we had conducted 23 interviews with citizens. The vast majority of interviewed citizens are female (19, and 4 male). Most interviewees are between 20 and 40 years old, some are in their mid-40s and one person was 18 years old. Most of the interviews took place in public places, such as parks and cafés, a few at our office at the university, and some interviews were conducted online. Interviews with citizens lasted between 45 minutes and 160 minutes.

The interviews were conducted and subsequently coded and analysed by the two authors of this report, collaboratively. We regularly exchanged information on the progress of fieldwork and data analysis. After a first round of individual open and inductive coding, we coded two of each other’s interviews using the finalised coding scheme and engaged in intensive and fruitful debate to harmonise coding. Memos and discussions about the draft report served to develop the analysis further and reach agreement on the main findings of this report.

As regards our analysis of interviews with municipal frontline workers, we concentrated mostly on interviews with YWO-staff rather than presenting a general picture of the German social security system. Where appropriate, interviews with Jobcentre and SWO staff are used to complement or contrast the findings. A comparison between the different institutions would certainly be interesting, but our data basis is not sufficient to render reliable results in this regard. Furthermore, we found that the differentiation of tasks *within* institutions might be just as important in shaping the logic of casework as differences *between* institutions. In comparison, the empirical material from interviews with citizens is more inclusive of experiences with different offices providing support for families, especially with regard to the YWOs and the Jobcentres. However, also in this case, we are not able to present a proper comparison between experiences with different institutions because the perceptions and opinions of interviewed citizens appear to be highly shaped by their encounters with individual staff members. In fact, “it depends” is an expression often used at the beginning of answers.

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<sup>42</sup> We assume that issues of shame and the particular psychological and financial strains put on families played a role here, probably aggravated further by the pandemic.

## 2. Interviews with social assistance frontline workers

### 2.1 Frontline workers' professional background

All of our interviewees have face-to-face contacts with citizens on a regular basis<sup>43</sup>. In addition, some of them exercise leading functions (as team leader, leader of a particular department, etc.). Most of our interviewees work at the YWO and are professionals with an **academic background in social work or social pedagogy** (mostly at Master's or diploma level). Staff working in the general social service (Allgemeiner Sozialer Dienst, ASD) of the YWO are **responsible for case management**, i.e. steering support measures for individual families and monitoring outcomes in regular meetings with families and service providers. Their responsibility is focused on social psychological issues, with the protection of child welfare and wellbeing as the overarching goal. Other employees within the YWO are responsible for various forms of counselling, guardianship, foster care or adoption procedures, and issues relating to divorce and separation, including maintenance claims.

In addition, we spoke with Jobcentre and SWO staff responsible for administering the **financial aspects of family support** or providing **counselling and services in the area of employability**. Some of them also work in more specialised areas, such as housing, neighbourhood management, or social security benefits for asylum applicants and refugees. Regarding their professional background, most of them are **administrative civil servants** by training. In addition, some of them had studied social work or business administration at university, or studied at the commercial school. Two also have a background in industrial or office management.

The professional experience of our interviewees ranges from five to 37 years of work in the same institution. YWO staff often **express a personal interest** in working with people, they stress the responsibilities and challenges associated with working at the YWO, and some mention that it is the variety of tasks and the combination of social work and administrative tasks that made the job attractive to them. Although interviewees from the Jobcentre or the SWO also mention a personal interest in working with and supporting people, **job security and stability** feature as further important aspects of their occupational choice.

### 2.2 Granting benefits and services: Overview of the system

Probably the most defining and consequential characteristic of the German system of social assistance is the differentiation of institutional responsibilities (see the introductory chapter), both according to the principle of subsidiarity and according to the different books of the Social Code. Across institutions, our interviewees often describe as their first task the **determination of whether their institution is responsible for a particular case**. At the YWO, central criteria are the presence of minors or young adults, and proof

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<sup>43</sup> During Covid-19 related lockdowns, however, these were temporarily suspended and replaced by contact via phone and e-mail.

of current place of residence. Further important documents are birth certificates, documents on parental custody and acknowledgment of paternity.<sup>44</sup> The socio-educational support and counselling services of the YWO are not means-tested and are thus available to all families in need of support. At the Jobcentre or the SWO, the determination of responsibility involves detailed **means-testing and in-depth enquiries** into health issues, employment status and history, and personal circumstances. This is not only to identify needs, but above all to clarify which claims take priority: Are applicants eligible, for example, for 'unemployment benefit I' under SGB III (paid to employees who have contributed to compulsory social insurance for at least twelve months during the qualifying period of 30 months preceding job loss)<sup>45</sup>, 'unemployment benefit II' according to SGB II (paid to people not or no longer eligible for unemployment benefit I, but who are fit for work), social assistance according to SGB XII (for people who cannot support themselves by their own means or efforts, nor with the help of a third party), or could they claim child supplement or housing benefits, and thus avoid having to rely on social assistance? Due to these differentiations and the different definitions of who belongs to the household, family or 'community of need', families or individual family members might receive social **support from several different institutions**. The ensuing complexities can turn the application process into a quite challenging endeavour, and application procedures are not always readily understandable to users. A social worker who supports citizens in filling out the application forms describes her approach thus:

*It is like this, for example, the person who receives unemploy- / Hartz IV cannot apply for housing benefit. And no child supplement either. Because it's always about the priority, right? And sometimes it's so close together that you don't know what the priority is, right? And then I submit the applications in parallel, because if I apply for unemployment benefit II now, for example, and they then say, no, no, they have to apply for housing benefit or child supplement, that's priority, right? Then the application would have to be re-submitted and then we would have to wait for the result again, and if I submit all three at the same time, hopefully one will pay. You know? (DE SLB 4/SWO).*

While the Jobcentre and the SWO act on application only, interviewees at the YWO emphasise that it is important to differentiate between cases where families seek contact **voluntarily, and cases where families are forced into contact** with the YWO:

*It is important that you know beforehand in which area you are moving. Whether it is in the area of assistance needs, endangerment, or review (DE SLB 6/YWO).*

If the YWO receives information about potential child endangerment from third parties (e.g., schools, kindergartens, paediatricians, or neighbours), it has a duty to check whether the information is reliable and whether the child is indeed endangered. If so,

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<sup>44</sup> In the case of maintenance claims, the YWO (or the family court) will also enquire into the financial situation of the person liable for maintenance payments.

<sup>45</sup> The entitlement period is limited to a minimum of six and a maximum of 24 months, depending on the length of contributions paid and on age at the time of becoming unemployed.

parents are forced into cooperation with the ASD and the main rationale of early contacts is risk prevention and control.

However, no matter how first contacts are initiated, in departments concerned with providing services by means of social-work methods, interviewees describe the actual work with citizens as being **focused on the identification of the problem**, an **inventory of available resources**, and the identification of adequate support measures. The latter often takes the form of building-up support networks, or providing families with the necessary information about where to seek support. YWO-staff, in particular, emphasise the importance of citizens' motivation to participate and cooperate in support measures. In the interviews, the notion of **self-help, or of empowering families to help themselves** constitutes a central expectation or goal to be achieved in the process of casework. That is, the overarching principle of **subsidiarity** not only applies to the institutions of the system of social service provision, but is also reflected in interviewees' accounts of their interactions with families: The **safeguarding of the family** as the basic and primary unit responsible for childcare features as a central system goal. The family is conceived as a provider of first resort, before all state or charitable intervention. At the YWO, however, the child protection mandate, according to §8a SGB VIII, can sometimes conflict with parental rights as enshrined in the German basic law. Next to the tension between help and control characterising social work in general, this is a conflict frontline workers have to resolve on the ground (and sometimes in court). It is their legal duty to check whether the parental household provides a suitable environment for child development and growth. Concurrently, our interviewees emphasise that, although their work is **child-centred**, they have to consider the needs of all members of the family system in order to develop solutions that help to keep the family intact.

Speaking in general terms, our interview partners emphasise that the users of their services are a diverse and **heterogeneous group** of people. Typical issues mentioned in the interviews are unemployment, economic hardship, housing problems, divorce or separation, drug problems, violence, and social or psychological problems of children and/or parents. Frontline workers at the YWO most often refer to citizens in terms of their function within the family system (families, children, youths, parents, mothers, fathers), or in terms of their role vis-à-vis the office, e.g., as "Hilfeempfänger" (i.e., recipients of help/support), applicant, addressee, or "Ratsuchender" (somebody seeking counsel/advice). Alternative and more general terms are citizens, clients or (particular types of) cases. Interviewees tell us that within the YWO, the term "Hilfedynastien" (roughly: assistance lineages) is common to denote families receiving support over several generations. The term "multi-problem-families" is used to highlight the complexity of issues many 'typical' families receiving YWO-support are faced with.

Employees of the Jobcentre use the term "customers" (in line with the institution's official jargon). Staff at the benefits department handle unemployment benefit II applications, while case managers at the job placement department focus on 'profiling', i.e. on assessing citizens' 'employability', on identifying potential obstacles, and on offering adequate training measures and potential job placements. Since only persons who are not fit for work, who cannot help themselves and are not entitled to other forms of social benefits are entitled to social assistance according to SGB XII, interviewees of the SWO describe their work as being more focused on **identifying basic material needs** and on providing possible solutions to overcome difficult life situations rather than 'activating' families in need to work on their employability. When talking about the users of their

services, they use a number of different terms, including clients, customers, people, citizens, human beings, foreigners, etc.

In all three institutions, the differentiation between the **administration of granting financial benefits and that of social services implies a fundamental and consequential distinction** regarding both frontline workers' tasks and duties and the procedures that citizens have to follow when applying for support. Our interviewees frequently mention how they are responsible for service provision while other units within the institution deal with financial matters (or vice-versa).<sup>46</sup> They sometimes describe the different departments as if they constituted different worlds, each with their own kind of logic. At the risk of oversimplifying, one could summarise that, according to our interviewees, the **granting of financial benefits follows a more purely bureaucratic logic** (with a strong focus on complete and accurate paperwork), while the granting of social services is characterised by a dominance of professional (social-work or pedagogical) considerations (with a strong focus on the individual case, and more profound personal encounters with citizens).

**Contractual elements** are important features of the procedures at the Jobcentre (where 'customers' have to sign an 'integration agreement') and, in part, at the YWO (e.g., where families have to agree to 'support plans' and 'protection plans'). Citizens' failure to cooperate (e.g., in providing documents, in applying for jobs, or in working towards the goals defined in the agreements) can result in the termination of benefits and support services. Sanctioning of insufficient cooperation is particularly formalised in the provision of financial support. In the payment benefit department of the Jobcentre, this follows a strict protocol (a written request, followed by two reminders), with fixed time limits and clearly **defined sanctions**. In case of non-compliance, pending incomplete applications are stopped, or ongoing benefit payments reduced<sup>47</sup>. When applying for means-tested support from the YWO (e.g. stationary housing benefit for minors), applicants have the duty to disclose **funding-relevant information** and the provision of basic **documents**, and a lack of cooperation may lead to the rejection or termination of support. In comparison, in areas of both the Jobcentre and YWO, where non-financial, social-work-based assistance is granted, there are **no clearly defined** strategies of how frontline workers should react to and sanction insufficient cooperation. It rather depends on individual frontline workers' assessments of the case, of the necessity and adequacy of support and of how they perceive the individual citizen's motivation and ability to meet certain aims and expectations. However, if parents' failure to take action leads to child endangerment (e.g., in the event of an action of eviction), the YWO has the power to switch from voluntary support to mandatory protection measures.

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<sup>46</sup> 'Well, I'll put it this way, when they come here first, then we have the big division, the benefits department, there are the colleagues with the financial background who do everything, and then there is us from the job placement department, right? And the colleagues from the benefits department clarify whether there is a need for help, while I am responsible for the job placement part.' (DE SLB 10/Jobcentre)

<sup>47</sup> However, in November 2019, the German Federal Constitutional Court declared longer-term cuts of more than 30 percent as unconstitutional. In the following, sanctions have been somewhat relaxed through directives of the Federal Labour Ministry and the Federal Labour Office, while the legal reform is still pending. In addition, during the Covid-19 pandemic, controls and sanctions concerning beneficiaries of Hartz IV were partly suspended.

Regarding the **vignette**, our interviewees agree that it describes a case constellation they encounter frequently in their daily work. The multidimensionality of a family's problems is described as something very typical:

*There is usually somehow a conglomerate of different areas needing improvement on different levels, which influences the family's problematic situation and has effects on all forms of living together (DE SLB 1/YWO).*

Interviewees emphasise that they would need more information and longer personal conversations with the family in order to evaluate what kinds of **financial benefits** the respective family could possibly claim.<sup>48</sup> Regarding **social support services**, interviewees say it is important to identify the most pressing **needs** and work on stabilising the situation. With regard to the mother, they would first enquire into her health situation and, if necessary, provide her with information on where she could get psychological support. To unburden her and to improve the children's situation, they mention the possibility of seeking educational guidance, or of applying for family assistance, or a parenting counsellor. In the case of the 16-year-old, they would also contact the school to enquire further into the situation. Regarding the rent arrears, they would refer the family to a debt advice service and the unit responsible for housing problems at the SWO. Furthermore, interviewees refer to services such as the Employment Agency's or the Jobcentre's profiling instruments and training measures to check and potentially increase the parents' employability. Social workers, in particular, emphasise the importance of enquiring into the resources that the family has at their disposal, too. Establishing a network of support between the different institutions and service providers is a common and recurring theme in the interviews and, according to our interviewees, forms an important part of their work.

### 2.3 Frontline workers' organisation of work, routines and values

The interviews provide rich accounts of daily life at the office, a dominant theme being a **perceived imbalance between paperwork and actual encounters with citizens**. While the **general workload** is not problematised as such, interviewees complain about not having enough time to meet with citizens due to all the paperwork involved in the processing of cases. A perception shared by many of our interviewees is that the requirements concerning careful documentation of each contact and each step of casework are constantly being raised. Some of them experience this as a conflict:

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<sup>48</sup> Interviewees list a range of financial benefits that the family could possibly be entitled to: unemployment benefit I, unemployment benefit II, social assistance, top-up benefits for the working poor, child supplements, sickness benefits, accident insurance benefits, housing benefits... While unemployment benefit I is calculated as 67% (with children) or 60% (without children) of the previous net assessed earnings, the amount of unemployment benefit II, social benefit, and social assistance according to SGB XII is calculated by means of the so-called standard needs rate (reduced by available income and assets after deducting exempt amounts), plus assistance with additional needs, including accommodation, heating, health care and benefits for "education and participation" of children. In 2021, the monthly standard needs rates are 446€ for a single individual, 401€ for each partner of a couple, 373€ for a teenager between 14 and 17 years old, 309€ for a child aged six to 13 years, and 283€ for a child below the age of six.

*We always have to remain in this official dilemma that we need a lot of documents, even though we are actually social workers who advise a lot. But then there is all this paperwork (DE SLB 13/YWO).*

An overload of cases and a **lack of personnel resources** are a recurring theme in the interviews, in those with YWO-staff in particular. According to some of our interviewees, this contributes to a high staff turnover which, in turn, constitutes a problem with regard to the quality of work, and working with citizens.

In the context of the **Covid-19 pandemic**, this situation was further exacerbated. Our interviewees mention the reduction of face-to-face contact with families as the most important consequence of the pandemic for their daily work. While YWO-staff appreciate that the lockdown gave them a chance to catch up on all their paperwork, they voice concerns about a lack of information concerning the details of how a particular case is developing. They could still meet citizens in cases of emergency, and were available via phone, but did not have regular contact with families. They consider this as a potential problem especially because information about child wellbeing and welfare from third parties (such as schools and kindergartens) was missing in the context of the lockdown.<sup>49</sup>

Concerning the organisation of their own work, most interviewees at the YWO emphasise the **freedom and flexibility** they have in making appointments with families, service providers, and network partners. This often relates to having to be available in crisis-situations. Interviewees stress how some elements of casework are not foreseeable and cannot be planned, but rather require the capacity and willingness to react quickly and readjust the working day to the circumstances at hand. This kind of availability is a value shared by many of our interviewees (even though some of them stress that their work would become much more difficult if citizens could just call or walk in anytime without an appointment). YWO-staff say that, depending on the circumstances of the case, they are **free to decide where to meet families** (in their homes, at the office, in some neutral place), and to respect families' or staff preferences. This kind of relative autonomy in the spatial and temporal organisation of work is among the things they appreciate about their job. In other respects, though, they have to follow very strict rules, such as: sticking to fixed deadlines, following a strict protocol regarding the steps that need to be taken and in which order, keeping their case records in order, but also taking into account concerns about public spending and cost pressures:

*Of course, you're only free to a limited extent. Administration is far too well structured for that, and far too hierarchically structured to be able to speak of free social work. And then that is naturally [...] a curse and a blessing at the same time. On the one hand, it is of course a clear specification and a clear order delegation in the end, on the one hand, to keep an eye on the cost pressure and, on the other hand, to pass on the corresponding help according to the legal needs or statutory claims and, on the other hand, to move within the realm of one's profession and to keep that permanently in balance. The*

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<sup>49</sup> Jobcentre staff even speak of a reduction of contacts to almost zero. Sanctions were temporarily put on hold, i.e. when somebody missed a meeting or was not willing to participate in job training measures due to concerns about Covid, benefits were not reduced as they usually were before the pandemic.

*other side is, of course, that these specifications and these structures that are required here also give you a sense of security, and very clearly define room for manoeuvre and, especially in grey areas, sometimes clarify things (DE SLB 1/YWO).*

Some of the social workers in the YWO describe this mixture of professional and bureaucratic tasks and requirements as one of the things that attracted them to the job in the first place. As the quote above illustrates, they **value the security the bureaucratic rules and procedures can offer, and the freedom and autonomy to act professionally** within the confines of these rules. Others, however, perceive this as a tension or contradiction.

The ways in which conversations with families are conducted, the interpretation of their statements, the overall assessment of the case, and the choice of suitable support measures are described as a matter of professional discretion. Although interviewees mention that they always have to stick to the standards and rules defined by law and the relevant administrative guidelines, they stress the importance of their personal **professional approach** in the encounters with citizens:

*But I do think, as far as evaluations are concerned and the assessments that we make in a professional context, I would say that I have a relatively large amount of leeway at this point, but that does not imply that I can extend any standards (DE SLB 1/YWO).*

Regarding institutional influences, the courts are of central importance for the work of the YWO and the ASD, in particular. Our interviewees repeatedly emphasise how their work must always be **transparent**, and how every step taken during casework must be carefully documented in order to be accountable in the event of litigation.<sup>50</sup> Some stress how essential it is to cover their backs at all times. Having a **good, well-functioning team** and supportive superiors is highly valued in this context. In the YWO, the “four-eyes-principle” and formal as well as informal **collegial consultations** form an integral part of the organisational culture.

The ASD is one of the YWO departments with the most long-lasting and intense relationships between frontline workers and citizens. Thus, we wish to sketch out in more detail what a typical process looks like. Opening a case follows a protocol that is based on social work methods and involves developing a genogram together with the family, discussing the case with colleagues, and coming to a consensual agreement on solutions appropriate to the individual issues, life circumstances and problems of the family. The initial assessment may also include contacting other institutions (schools, kindergartens, doctors, etc.), provided that parents have waived confidentiality. After having devised and agreed on a support or protection plan (that is signed by all the parties involved, i.e. parents/guardians; YWO; social service provider), the professionals of the ASD mainly act as case managers. They are brokers between the family and other actors and institutions, and are responsible for steering, but not for delivering the actual help/support:

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<sup>50</sup> Interviewees from the Jobcentre, too, mention how particular work strategies (such as complete documentation, but also efforts to clarify things in personal encounters) help to avoid legal disputes.

*According to necessity and suitability, we check what kind of support the family can get from us, our department, so to speak, [the] youth welfare office, our office. To what there is a legal entitlement, so to speak. And other support options, they would either have to organise themselves with other service providers or, if they cannot do that, that would also be something where we say that this is, so to speak, for the benefit of the child, that parents are able to ask for support. If they cannot do that, then we would, for example, either through counselling ourselves or through family assistance, try to enable them to apply for funds, to apply for benefits. That they deal with health insurance if necessary, right? That's what the people to whom we delegate tasks are there for (DE SLB 14/YWO).*

Once a support plan is put into action, the **rationale of further contact with the family is mainly to monitor their progress and to check on the children's situation**. Personal meetings for this type of monitoring (so-called "Hilfplangespräche", HPGs) usually take place every three or every six months. In the meantime, families are in close contact with the service provider (through family assistants, for example), but not so much with the YWO, except for crisis-situations and cases of emergency.

Across the various departments within the YWO, **values** described as important by our interviewees are, first and foremost, **being transparent, showing respect and understanding, and being helpful or giving empowerment**. Interviewees emphasise how providing full information and explaining the different steps of work, the duties and responsibilities of all parties involved in an understandable way are important to forming good work relationships with families. An expression they frequently use is to "get the parents on board". According to our interviewees, this is particularly important in coercive contexts, and can help avoid having to take children away from their families. They say it is vital that families reach an understanding of their own problems, the different options available, and possible consequences. They describe this as an important first step towards the development of insight into the necessity to change, and acceptance of the support offered by the YWO. As mentioned above, self-motivation, voluntariness, and willingness of families to cooperate are described as a basis for working relationships and casework, in particular, to progress successfully. The overall aim, according to our interviewees, is geared at **empowering families to conduct their lives in ways that are in the best (or better) interest of their child(ren)**.

Concerning **face-to-face relations with citizens**, our interviewees frequently mention **openness and transparency** as important factors for improving relationships with citizens. Some of them describe this as showing authenticity to citizens, 'only human' or 'a human being like them', a person doing their work. Others emphasise that transparency is also about communicating in a very direct way, without sugar-coating things. A further aspect that interviewees deem important in their interactions with citizens is **showing respect and understanding**. They often use expressions like "meeting on an equal footing", or "not looking down on somebody", and emphasise that status differences between frontline workers and citizens should not be too pronounced (or at least, should not be acted out as such). Communication strategies reported by interviewees involve using a **language that is authentic, understandable and close to the life-worlds of citi-**

**zens**, rather than using administrative or socio-pedagogical jargon. To some of our interviewees, meeting on an equal footing concerns not only frontline workers' manner of talking and acting, but also their outer appearance.

Obstacles frequently mentioned during the interviews are citizens' **fear or mistrust** and their lack of understanding regarding frontline workers' expectations or procedural requirements. Several interviewees from the YWO underscore that their capability to help is considerably hampered when citizens try to present an embellished, polished-up image, or even seek to manipulate or deceive YWO staff.

*Basically, I've learnt that parents always present themselves in a better light, so to say. Often, they aim to present an image, and are then affronted when I explicitly say that I take what they just presented as an ideal image and that this is not necessary because I don't need that. What I need is the real family and not an image. [...] Relations with families get difficult when they present an image and stick to it under all circumstances. (DE SLB 19/YWO)*

An interviewee at the Jobcentre points out how citizens' fears may be related to the fact that the Jobcentre as an institution requires very detailed, **very intimate information from citizens**:

*Because we know everything, so in the end they have to do a total / well, I'll say a total 'striptease' here. From bank statements, rental agreements, personal circumstances, who is the father of the child? Does he pay maintenance, does he not pay maintenance? Such things. Where did you work, how long, why not anymore? That's already / you get very, very close. (DE SLB 12/Jobcentre).*

From her perception, citizens are often anxious about the purposes and possible uses to which this information may be put. Interestingly, she distinguishes citizens she describes as 'mistrustful-insecure' from those she calls 'mistrustful-confident'. For the former, she says it suffices to explain everything in a transparent, friendly manner. For the latter, she has to offer "hard facts", that is, to present them with the relevant sections of the law stipulating their duty to provide all required information.

In the YWO, situations concerning **child endangerment** are experienced as particularly tense by interviewees:

*There is always an alarm on all sides, because everything can be interpreted. It's about the nitty-gritty, can my child come here or not, or does it have to stay in care. Do I have to let someone into the family now? Am I being controlled for drugs now. So, it's really about the very biggest guns that we have, because then it can also be about the public prosecutor and the police, and all sorts of things. Exactly, the situation is super tense there (DE SLB 13/YWO).*

In cases where drug abuse or **violence are an issue**, interviewees often ask for police support. Difficult or tense situations are always dealt with in the team. Our interviewees stress the importance of collegial support and advice, and of having a space to reflect

on their interpretation of the situation or even just to let off steam. Some interviewees mention supervision as a further element in the professional handling of dangerous or encumbering situations.

## 2.4 Trust understanding, sources and functions

In general, our interviewees describe trust as a **mutual relationship that slowly evolves over time** and is dependent on the behaviour of both parties involved. It is associated with feelings of **warmth and security**, the absence of fear and the knowledge that disclosed information will not be used to one's disadvantage. Some interviewees also mention that trust involves a form of **dependency on the other person's behaviour** and that hierarchies and power or status inequalities may be detrimental to the development of trustful relationships.

Applied to the work context, our interviewees frequently mention parties' **reliability and truthfulness** as important elements of trust. YWO-staff, in particular, stress that being authentic is essential, to mean what one says, to keep one's word. Truthfulness and reliability in this sense are strongly related to concepts of transparency and authenticity:

*I think I am perceived as trustworthy and I also know that [...] they appreciate the fact that I am very clear in what I say. So, I'm not wishy-washy. Exactly. Because I know that they know exactly how things stand. This is very important to me. And I don't inspire hope if there isn't any. That also has something to do with respect and appreciation (DE SLB 21/YWO).*

**Mutual respect and appreciation** are repeatedly mentioned in the interviews as further important elements of trust: *'So for me it has something of / or that you somehow also feel and know the person takes you, well, takes you seriously, doesn't judge you'* (DE SLB 5/YWO). In the context of their tasks and responsibilities, developing respect and an understanding for different, sometimes deviant, lifestyles, values and orientations seems of particular importance for their daily casework, and closely related to trust as a foundation for their work with citizens. Interviewees mention that it is part of their professional ethos **not to be judgemental** concerning citizens' behaviour, but to maintain a neutral, yet empathetic stance.

Across institutions, our interviewees describe trust as an **important requirement for establishing rapport with citizens and for doing good work**.<sup>51</sup> They perceive the initial stages of their work with citizens as often being characterised by caution or apprehension, sometimes even mistrust, on the part of citizens. Regarding their own stance, they stress that they have a kind of **basic trust in citizens and the information they provide**. Without such a basic trust, doing the work would not be possible or at least it would be much more difficult: *'So I have to believe a lot of what they tell me, right? Otherwise, I won't get anywhere, will I?'* (DE SLB 4/SWO). Concurrently, our interviewees emphasise how **important it is that citizens open up** and disclose the information that is relevant

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<sup>51</sup> However, difficulties may arise when citizens misinterpret caseworkers' "professional trust" as a personal, intimate form of trust (DE SLB 1/YWO; DE SLB 4/SWO).

to the case. For this mutual trust to develop, frontline workers need to signal to citizens that they are professional, reliable and actually interested in helping and supporting them: *'They know, okay, we're trying our best. They know, if I go there, I will be helped as long as I stick to certain rules of the game. I am being taken seriously as well. (...) That is important'* (DE SLB 12/Jobcentre).

Based on the interview material, the default setting that characterises frontline workers' stance towards citizens might therefore most aptly be described as "**professionally trusting by default**". By "professional trust" we refer to a kind of basic trust (in human beings, in human kindness, in a general willingness to aim for the good or for the better) that coexists with a critical, sceptical and vigilant eye with which interviewees encounter citizens from a professional distance. This is particularly important when it comes to the YWO, where child wellbeing is at stake and the YWO has to function as a custodian. While, according to our interviewees, a generalised distrust would severely hamper the accomplishment of tasks, professionally trusting means remaining open to irritations and accepting that citizens might not always be telling the truth with regard to certain facts, but not letting this affect the generally positive outlook on people and their willingness to change. Professional trust in this sense also implies that caseworkers do not experience it as a personal affront when citizens do not reciprocate their trust:

*Those are things that I can actually/ if I do my job the way I want to do it and how I understand it, I cannot turn off trust. And, of course, I have to take into account that my trust may sometimes run into the void* (DE SLB 1/YWO).

In principle, therefore, our interviewees from the YWO are willing to accept parents' statements or the documents they provide as true. Often, they describe this form of a "**credit of trust**" as something that they give in exchange for citizens' trust, openness and sincerity. Hence, they are aware that trust building develops in reciprocity and that their own attitude is likely to have an impact on citizens' behaviour:

*But if I were just so suspicious all the time, I think that would have an effect on the collaboration. Namely, that this will not be a really good and sustainable collaboration. And maybe that is something too, to come back to the question of what somehow also defines me; I am also willing to give my clients a certain advance credit of trust. You know? So that they can also, well, prove to me to a certain extent that they are not playing games with me* (DE SLB 5/YWO).

Even when there are indeed indications to the contrary (e.g. when a police report contradicts citizens' statements), this does not necessarily imply a fundamental rupture of trust in citizens. On the contrary, some interviewees tell us that when citizens do not open-up, when they withhold information or even lie outright, this can be a prompt for caseworkers to reflect on their relationship, their own behaviour and improvement options. Social workers, in particular, conceive trust as an important element of professional work relations with citizens, and often **connect issues of trust with citizens' motivation to change** and cooperate. Some of the younger interviewees also put this in the larger context of a change in approach in social work. This change, they argue, consists

of reframing the dual mandate of help and control, and moving away from control towards an emphasis on the voluntariness and willingness of citizens' participation in support measures.

However, according to our interviewees there are cases where a certain extent of (mutual) distrust never seems to disappear. This is related to the YWO's central task, the protection of child welfare and wellbeing. In this context, *'blind trust would be fatal'* (DE SLB 14/YWO). As one of our interviewees put it, the youth welfare office is always either too early or too late, but never on time. Many interviewees in the YWO have the impression that, in the context of judicial scrutiny and media attention, caseworkers need to be on the alert most of the time:

*And it is especially in cases where drugs play a role again and again, or violence and that is not named, I just stay suspicious for a long time and actually forever, because I think to myself that if they cannot express that, then I don't have a handle here either. Because then I can't address it myself, but I know for sure that there is something going on. And as long as there is no voluntariness to talk about it openly, I am a bit restricted in my actions, too. And then I remain suspicious because of this restriction of action, because there is always this sense of, where is the next danger now, where could it pop up now and who could now prove to me that I did not act correctly. There I probably have to remain suspicious, ex officio [as a result of my status/position] (DE SLB 13/YWO).*

As the last sentences of this quote illustrate, institutional influences and relations to third parties may also affect trust relations on the frontlines of social service delivery.

**Time** plays an important role in the dynamics of trust and distrust. While trust may be eroded at some stage and in exceptional cases, our interviewees more often describe it as something that needs to be built up gradually – either by conscious effort on the part of caseworkers, or by the parties getting to know each other better across time. In this regard, interviewees stress that both the time available for each individual meeting with citizens and the length of sustained overall contacts are important for building-up reliable and trustful relationships. Some interviewees problematise the **high staff turnover** and describe a stronger continuity of responsibilities as a desideratum. High caseloads and too much paperwork are mentioned as further factors negatively affecting time resources for personal encounters with citizens. Time therefore constitutes an important intermediating factor between trust and frontline workers' organisation of work, routines and values (see section 2.3 above).

Among the factors affecting citizens' trust or distrust, the **emotion of fear** plays a prominent role in our interviewees' accounts. They tell us that they frequently encounter citizens with either a fear of the unknown or fear based on previous negative experiences. According to our respondents, such fear can lead to distrust on the part of citizens, and is something that needs to be dealt with before trustful relationships can develop. Previous negative experiences with the social security system are perceived as particularly challenging in this regard. Interviewees stress that in such cases, citizens need time and they need confirmation that frontline workers are reliable and are actually there to help (and not to control or harass) citizens:

*And there the trust is much, much more intense. That customers also said, yes, it took me a long, long time to see that you really wanted to help me. But then it's just really consolidated. Yes. They then really have to experience that it works and is going well, that they are being helped (DE SLB 11/Jobcentre).*

While this is an impression shared by interviewees across institutions, it is of particular importance in the case of the YWO, where – according to our interviewees – many parents are **afraid that their children might be taken away**. Even if they trust the individual caseworker, they might stay distrustful of the institution and its powers as such:

*So I think if I were to refer to a family, for example, (...) the family has now understood that I don't even want to get to the point where their children are taken away. But a certain, maybe not mistrust, but a certain worry remains, or I do believe that a certain residue remains with this family that it could still happen, right? (DE SLB 5/YWO).*

Another important factor that interviewees think impacts citizens' trust is frontline workers' **transparency and openness** about steps taken and, importantly, the reasons why. That is, caseworkers perceive particular communication strategies (providing full information in an understandable manner, being transparent, being authentic, being reliable) as having a positive effect on citizens' belief in their trustworthiness. Again, this is all the more important when citizens have had **past negative experiences** with the institution, or have heard relatives or acquaintances talk about such experiences: *'That doesn't happen overnight and they first have to recognise you as a reliable partner'* (DE SLB 10/Jobcentre).

Interviewees also state that it makes a difference **whether they share certain characteristics** (such as gender, age), or particular experiences (such as having children) with citizens. According to their experience, it helps to build trustful relationships if citizens get the impression that frontline workers can truly relate to their problems and that they are not alone. This may also involve a certain opening-up on the part of frontline workers, including the sharing of personal details while maintaining professional boundaries. The reciprocity of trust is central in this regard:

*And when I say like, yes, I have children too, and I've got through that, too, then I trust my parents quite a bit. Because that's really something personal. [...] I'm not a robot. And the parents also open up and then, when they open up, I can trust them a little and can open up a little, too (DE SLB 16/YWO).*

One interviewee also mentions how **trust among colleagues affects** his own behaviour towards citizens. He opens up a causal chain between a perceived lack of security, bonding and warmth in the workplace, and a lack of empathy with citizens. Even though this interviewee is the only one expressing this in such explicit terms, the relationship between frontline workers' working conditions and institutional influences (see 2.2 and 2.3 above) and their behaviour towards citizens is mentioned in more subtle terms in other interviews, too.

Regarding the functions of trust or distrust, a recurring theme is that **mutual trust makes work with citizens easier** or, in the case of the YWO, even provides a basis for successful casework in the first place. Interviewees who are mainly responsible for administering financial benefits frame this in a rather instrumental way: Trust is not strictly necessary, but it makes their life easier since citizens who trust the institution (or rather, the individual frontline worker) will be more willing to provide caseworkers with all the necessary information. **The more information caseworkers get, the more efficiently they can go about their work.** Trusting relationships also help to avoid legal disputes, since unclear or complicated matters may be clarified in personal encounters before citizens enter a formal objection to administrative decisions. Interviewees in departments that contain a mixture of bureaucratic and professional logics perceive trust more fundamentally, as a necessary foundation to proceed with casework:

*I believe this is also our relationship work hub. Without such a small amount of trust in what we are doing here, we cannot act. Because then neither colleagues could take each other seriously. Then we wouldn't be able to decide anything because there would be no consensus; it's very simple. And the clients might come to the consultation and then let it go immediately, so let go of all the recommendations, accept nothing. Then we would have to go via the court all the time because without trust, there is no relationship and without relationships, we cannot provide help. Then everything would take place in a coercive context. And then a lot of help would come too late, not come at all or, yes, for everything the road would be bumpier (DE SLB 13/YWO).*

As the quote above illustrates, in the YWO, trust among colleagues is just as important as trust between citizens and caseworkers. Since decisions can never be taken by individual caseworkers, but must be based on a consensus reached in collegial consultation within the team, social workers have to have a **reciprocal trust in each other's professional competencies**, especially when dealing with difficult and complex cases. This also involves admitting to mistakes and misinterpretations, and trusting that colleagues will not turn such information against them.

Regarding distrust, we have already demonstrated that a certain measure of caution, or even suspicion, is important for the work, too. Professionally trusting also means staying vigilant. In the context of the YWO, a certain form of mistrust is functional in its role as guardian and protector of child welfare and wellbeing. With regard to the SWO and the Jobcentre, mistrust serves as a prompt to crosscheck citizens' statements and verify eligibility criteria, i.e. to prevent abuse of the system.

### 3. Interviews with citizens using social assistance

#### 3.1 Social background of interviewees

The citizens we spoke with in A-Stadt and B-Stadt are a diverse group of people in terms of socio-economic status and the reasons they came into contact with the institutions. The majority of our interviewees speaks of (at times severe) **financial difficulties**, but some of them are in relatively comfortable economic situations and are in contact with

social assistance institutions for other reasons (e.g., because of separation/divorce, or disabilities, or their children's psychological problems). Many have experienced **job-losses and phases of unemployment**; some were in **precarious or part-time employment** and dependent on top-up benefits. Slightly less than half of our interviewees are married or live with their partners, the rest are **single parents**. One interviewee was pregnant at the time of the interview, all the other interviewees have children. Separation and divorce led to economic difficulties for quite a few of our interviewees. Some interviewees speak of **past or present experiences of domestic violence**, including sexual abuse; some also mention (their own or their partner's) drug-abuse. A couple of our interviewees or their family members have **health problems**, some mention that they suffer from depression or burn-out.

Regarding interviewees' stance towards **politics**, some of our interviewees have no or very little interest in politics and are too preoccupied with other problems and issues to follow political debates and events regularly. The majority has some interest in politics, but finds that parties or politicians often talk excessively without acting or taking on responsibility. Some of the interviewees explicitly relate this to trust, and underscore the importance of having some information about the individual politician:

*Because I think that the actual implementation ultimately also depends on that [the individual person]. Well, I think that a lot of people can sit down together, developing a great concept is relatively easy. But then to find concrete personalities who really want to take on responsibility and risk sacrificing their careers for a good general purpose. That, I think, creates more trust to support something like that (DE CIT 15).*

Our interviewees mostly use the internet or new social **media** to inform themselves about politics, some watch television (mostly public channels), while very few read particular newspapers regularly. In general, our interviewees express scepticism about the motives and intentions of politicians:

*Nobody believes anymore in any/ In the past, it was always very clear: some CDU [Christian Democrats], the others SPD [Social Democrats]. And today they are all ..., [...] who should you vote for? So most of them are completely undecided and have no real trust, I think, no longer. A lot is always promised before the elections. And with some things that are promised there you actually already know they cannot be implemented at all. I also find it difficult. Difficult for politicians, too (DE CIT 2).*

Despite this sceptical stance, most interviewees **vote**, considering it important. Many use the "Wahl-O-Mat" (a voting-advice application) when forming their voting decision, and some also look at parties' election manifestos. Quite a few mention that they base their decision at least in part on their sympathies for individual candidates and not only on party preferences, some make their decision spontaneously on election day. Regarding **support for political parties**, most interviewees express preferences for the greens or other left-wing parties. The right-wing party "Alternative for Germany" is mentioned explicitly in several interviews as a party that interviewees distance themselves from, as a party that one simply does not vote for. Some interviewees also express criticism of the Liberals (FDP) and, in part, of the Christian Democrats. They are seen as not caring

enough about people with little or no income and as serving only the interests of those with high incomes.

Concerning the **EU**, roughly a third of our interviewees have a decidedly positive stance towards the EU whereas the rest are rather ambivalent, or feel uninformed and incapable of saying anything substantial on the topic. One interviewee is explicitly against Germany remaining in the EU. Among the positive aspects mentioned during the interviews, peace features prominently, followed by solidarity, freedom of movement and the monetary union. Negative aspects mentioned are, among others, that the EU is too far removed from people's life realities, serves the interests of big companies, is somehow artificial and that its members only have their own interests in mind.

### 3.2 Applying for benefits and services and opinions on the social assistance system

Our interviewees are **related to a number of institutions** and many of them report about personal experiences with more than one of these institutions. Most interviewed citizens are in contact with the YWO (receiving family or educational assistance or counselling related to separation and divorce), many are also with the Jobcentre (receiving unemployment benefit II, or top-up benefits for the working poor), or the unemployment agency (receiving child benefits, federal child support for needy families, or unemployment benefit I), and some are with the SWO (receiving housing benefits, or other services, like the financing of early intervention measures or therapies for their children).<sup>52</sup> As we mentioned in the preceding sections, contacts with the YWO may be structured and experienced differently by the parties involved, depending on whether they take place in a context of coercion or voluntariness. This is also reflected in our interviews with citizens. Furthermore, according to our interviewees' accounts, **procedures** also differed depending on whether they had applied for financial benefits or social services.

When applying for financial benefits, interviewees had to provide an extensive number of **documents**, particularly at the Jobcentre. Whereas applications for child or housing benefits are described as rather straightforward and not going into too much depth, the application procedures at the Jobcentre are described by many as a kind of "making oneself naked", as a process during which interviewees were forced to reveal a great deal of intimate information (including documents on all kinds of property and income, from all members of the household, employment, living, and housing conditions, health issues, etc.). Interviewees differ concerning their assessment of the difficulty and complexity of the procedure, but they agree on describing it as time-consuming and exhausting. Some of them fail to understand why the different institutions repeatedly ask for the same documents, even though – from our interviewees' perception – they must already know everything about them:

*Why, if you are a Hartz IV person anyway, you are examined down to the last detail anyway. Yes? Why don't the individual authorities communicate with each other, dammit? Why do I have to go to the Jobcentre when I have filled*

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<sup>52</sup> Due to health problems, some were also in contact with the pensions or the health insurance funds.

*out the whole shit, sorry, because it's really a lot, I copied 70 pages. But then I change from the Jobcentre to the job / employment agency and then I have to start all over again. Why can't the employment agency, which is even located in the same building, just fetch it? If I just sign a declaration of consent, for all I care. Maybe we can still introduce that. But you're screened anyway. Those are things, it makes it that easy. And it / yes, it's written everywhere, anyway. If the Jobcentre wants to, they can look at my account. They don't even need me for that. They click, click, call, let us have a look and that's it (DE CIT 1).*

With regard to **personal encounters at the institutions**, interviewees describe their first contacts with the benefits department of the Jobcentre as rather impersonal and detached. They say this is reflected in the architecture of the welcome space of the institution, too, in the sense that staff (who can always vary) are seated behind large counters, whereas applicants have to stand. Interviewees sometimes experience this as being forced into a position of having to beg for benefits. In comparison, interviews with the job placement department are perceived as more personal, friendly and characterised by greater respect and understanding for the individual applicant. Concerning applications for counselling, or family assistance at the YWO, our interviewees speak of having to provide only a few documents (mostly birth certificates and proof of residence). The administrative procedure itself is described as relatively easy and not time-consuming.

Similar to frontline workers' description, the **personal interview** with social workers of the YWO (at home or at the office) features prominently in citizens' accounts of the procedure. Interviewees tell us that these interviews mainly revolve around the reasons for applying for help, and around trying to identify the issue, the problem that is at stake for all the parties involved. Often, the YWO met them and their (ex-)partners in separate meetings first, and then invited both parents to a joint meeting. Interviewees describe this mostly in terms of a chance to detail their perspective on the problem. In many cases, citizens experienced the YWO as open and supportive when they had asked for help of their own account. They describe the interview atmosphere as friendly, trustful and open. Some interviewees (especially those in forced contact with the YWO), however, compare the interview setting at the YWO to a police interrogation. Yet others tell us about very frustrating and disappointing experiences where their requests for help and support were turned down. They describe feelings of having to justify their need for help, of not being understood by caseworkers, of being left alone and having to wait or even fight for receiving support. As one interviewee put it: *'I found it, yes, quite humiliating, how we were treated as if we wanted to sneak something, yes, that we are not entitled to'* (DE CIT 8). In such cases, interviewees themselves brought in information from external sources (medical reports, statements of paediatricians or psychologists/psychiatrists, etc.) to prove to caseworkers that they or their children actually do have special needs. In other interviews, it was the institution that commissioned expertise from doctors or psychologists, or referred to reports from neighbours, relatives, schools, kindergartens, or the police.

In terms of interviewees' **assessment of offices' organisation**, case overload and lack of personnel (and the ensuing lack of time to have sustained contacts with, or to deal with

cases on an in-depth basis, as well as a lack of information and delays in receiving support) are a recurring issue in the interviews. Regarding their **opinions on the system of social service provision** in general, interviewees are appreciative of the help and support they have received. They also express an understanding for the bureaucratic requirements of the procedures, and say they are conscious of the fact that the state has to take precautions against fraud and a misuse of the system. However, interviewees are critical of the perceived opacity of differentiation of tasks and institutional responsibilities. Many of our interviewees recount that they had not been proactively informed by the institutions about possible entitlements they might be eligible for:<sup>53</sup>

*The Jobcentre should educate more. Even if they might have to spend more money as a result, they definitely need to educate more. They would have to sit down very clearly and say, you now have such and such a case, you have such and such rights. And not just say you have such and such duties. So, they really have to educate people about everything and more, much more. And give a lot more help. Without this air of condescension: We are something better, we are working. (...) You all just want to rake in the money anyway, like that. Well, that negative feeling again (DE CIT 20).*

Furthermore, interviewees are critical of the fact that they have to provide the same information repeatedly and to different institutions even though they feel they are being screened and controlled excessively anyway. Many interviewees express the wish for more centralisation with the hope that this would lead to easier procedures, increased transparency, and a more holistic and individually-tailored approach to service provision.

Regarding their **own attitude towards the system**, many interviewees are thankful for the help and support they receive, but some of them also state that (at least initially) they felt embarrassed and ashamed of applying for help even though it is a legal entitlement. For some, this feeling is further exacerbated by the perception of the institutions (the Jobcentre and the YWO, in particular) as powerful and monolithic. Such experiences can evoke feelings of helplessness and powerlessness, and many interviewees tell us they were anxious and fearful of the outcome of procedures. Interviewees are of the opinion that assessments of their case depend to a large extent on the individual frontline worker and that it is largely a matter of luck whether one gets “the perfect caseworker”. Some explicitly speak of what they perceive as elements of arbitrariness in the procedures. Furthermore, single mothers, in particular, describe feelings of being left alone by the institutions, of being told by the YWO that they had to shoulder the responsibility for dealing with difficult situations in the family.

Many interviewees recount instances where they felt they had to fight to receive the help they were entitled to. In the context of a perceived lack of information, many feel they had to engage in extensive research and become experts themselves. Other forms of insisting or fighting consist of questioning frontline workers’ assessments of their

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<sup>53</sup> Some interviewees suspect that this lack of transparency is a deliberate strategy by the institution to reduce the amount of benefits paid out to citizens.

case, of contacting superiors, of getting third persons to accompany them to appointments at the office, and of filing complaints against administrative decisions. Some experienced the necessity to fight as a form of unfairness:

*I would say it's unfair in that you have to fight extremely hard for things that you actually have a right to. And if you don't know that you have a right to it and can vouch for it and still have the strength, then you probably won't do it and that's why I think it's unfair that, yes, benefits that you can actually get by law, sometimes are denied, because a Jobcentre is upstream there to implement these legal levels or not. And the Jobcentre is not an office that treats people and their concerns in a benevolent manner (DE CIT 17).*

Strategies to deal with this situation also include learning how to handle the system. Interviewees told us how they have started to communicate in writing only, always asking for a confirmation of receipt, and collecting and keeping copies of documents important to their case. Some even keep their own excel-files to check the accuracy of the institution's calculations. That is, interviewees have learnt to adapt and conform to the bureaucratic elements of the procedures, sometimes going beyond the usual requirements as a means to retaining some form of control. Other forms of dealing with the system include actively trying to control one's emotions, of maintaining a neutral or even friendly stance during the interactions with frontline workers, even when things get difficult.

### 3.3 Relations with frontline workers

When describing their relations with frontline workers, our interviewees distinguish between encounters with staff working at reception desks during general consultation hours, and frontline workers who are personally responsible for a client's case. Encounters at reception desks were experienced by the interviewed citizens as rather formal and impersonal, and when speaking about the respective staff, they often refer to them as **'the man/woman from the [...] office'** or **'the staff member from the [...] office'**. This kind of contact is typically experienced in the Jobcentre's benefits department, where general office hours are used to hand in requested documents, or to discuss running applications or benefit payments. In contrast, our interviewees' encounters with frontline workers in charge of their case have been shaped by more personal interrelations. They involve personal meetings in the frontline worker's office upon appointment, and allow citizens to get to know the person responsible for them, at least to some extent.<sup>54</sup> Accordingly, interviewees often refer to them as **'my clerk in charge'**, **'my caseworker'** or **'my (personal) advisor'**. Interviewees who had direct encounters with frontline workers upon appointment consistently say that **they were assigned to them** on the grounds of a predefined criterion, mostly related to their (child's) family name or living address. Sometimes, interviewees were assigned to a new person, for instance, when the previous caseworker left the department. In a few instances, interviewees underline that

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<sup>54</sup> However, in the context of the Covid-19 pandemic, interviewees report an enhanced use of telephone and e-mail communication.

their responsible caseworker was replaced due to unbridgeable differences, and after interviewees had complained to the respective supervisor.

The **frequency of meetings**, and thus also the intensity of relationships, with a frontline worker in charge varies according to the issue at stake. In many cases, questions were solved in the course of a few appointments. However, our interviewees were involved in more regular meetings as soon as they had to commit to an action or support plan, for instance with the Jobcentre's job placement department or with the YWO's ASD. According to our interviewees, they are in (personal or phone) contact with the frontline worker from the job placement department once a month or every few months.<sup>55</sup> Meetings with ASD caseworkers to evaluate developments with regard to the agreed support plan usually take place every three or six months.<sup>56</sup>

Regular meetings with frontline workers allow citizens to **get to know the person responsible** for them somewhat better. Nevertheless, more often than not, interviewees say they still do not really know their frontline workers, or cannot really predict or understand their behaviour. At the same time, many consider continuity in the working relationship as important in order to know what to expect and learn how to cope with the demands and individual working style, as exemplified by the following statement about an ASD caseworker:

*Sometimes I wish that the other one would go to hell, please a new one! But in the meantime, I got so used to him, to his way of speaking and reasoning, that I am sometimes already able to see through him (DE CIT 22).*

Our interviewees consistently highlight the **heterogeneity of experiences with different frontline workers**, and the importance of being assigned to a helpful, open-minded and committed person. They perceive this as all the more important since the frontline worker's attitude is considered not only to affect the interaction as such (e.g. in terms of friendliness, openness, respect and appreciation), but also the responsiveness to their individual needs and the extent of support they receive. Many interviewees share the feeling that their caseworker has considerable **leeway when taking decisions**. On the one hand, they perceive them as having a certain freedom in the way they organise their work, for instance, in terms of the frequency, place (in the office or at home) and character of meetings (face-to-face or by phone). On the other hand, our interviewees point to frontline workers' **discretion when it comes to granting benefits and support**. As to the granting of benefits, a repeated observation is that some frontline workers are very strict and formal when it comes to citizens' obligations to cooperate, for instance, in terms of providing documents or fulfilling other requirements, such as applying for a monthly agreed number of jobs or attending trainings, while others show more understanding of a citizen's particular situation, less rigidly apply the rules and make concessions. Furthermore, our interviewees report remarkable differences between individual frontline workers' willingness to provide information about citizens' rights and entitle-

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<sup>55</sup> Particularly in the context of the Covid-19 pandemic, phone conversations increased and replaced many of the face-to-face meetings according to our interviewees. E-mail communication, particularly for handing in documents and proofs, also gained importance.

<sup>56</sup> During the Covid-19 pandemic, and particularly during strict lock-downs, such discussions were also partly led over the phone.

ments (e.g. which income sources are relevant for means-testing, what other cost categories can be declared under what conditions, which other support schemes exist), which to some degree directly affects the extent of benefits they receive. In comparison to the granting of benefits, the discretion of frontline workers who have to decide over non-financial forms of support is described not so much as a question of reducing or suspending support, but rather as a question of how much influence they exert on the definition of the objectives of a support plan, or how much autonomy they grant to the citizen involved, and how benevolently they assess citizens' cooperation and motivation to change before turning to more coercive measures (e.g. threatening to take their children away).

Based on their heterogeneous experiences with various frontline workers from several institutions or departments, or with various frontline workers from the same institution or department, interviewees often compare and distinguish between different experiences and characterise their relationships with frontline workers in different ways. Overall, their reported experiences show traits of relationships that can be associated with five basic types. First, interviewees report about rather **harmonic, personal and friendly relations** with certain frontline workers. In this context, they express feelings of sympathy, gratitude, openness and trust towards the person dealing with their concern. Interviewees express such positive attitudes mostly with regard to personally assigned caseworkers from the YWO, or the job placement department at the Jobcentre. They explain that in such relations, they feel more comfortable and find it easier to open-up, tell their story and reveal problems and reservations because caseworkers are perceived as being 'relaxed', 'cool', 'non-intrusive', 'open-minded', 'human' and 'understanding', which is well illustrated by the following quote:

*My contact person at the Jobcentre is very cool [...] and relaxed. He barely meddles in anything. He says what's going on. That at some point I have to look for a job again [...] And he then said that one always finds a solution. [...] I then speak point-blank to him. [...] I always tell the truth. It is not necessary there to beat around the bush. [...] And then he says, okay, this is understandable (DE CIT 21).*

Secondly, some of the interviewees' descriptions point to **pragmatic relations** with caseworkers. In this context, various interviewees underline the reciprocal character of working relations, explaining that frontline workers' attitudes are influenced by the way in which interviewees approach them. According to interviewees' experience, certain types of behaviour such as being polite, respectful, calm and factual are important in encounters with frontline workers in order to be treated well, but also to avoid conflicts, and to have requests dealt with as smoothly as possible.

In addition, having a pragmatic attitude involves complying with caseworkers' expectations and demands, and cooperating as much as possible in order to receive help, even if this makes them uncomfortable and requires some effort. One aspect of such a pragmatic cooperation incident some interviewees draw attention to is being open and honest, telling the whole story and avoiding presenting a whitewashed picture for merely strategic and non-trust-based reasons, as is reflected in the words of this interviewee:

*I disclose everything he wants. And I go in there like an ice block. [...] Meanwhile, I also go in there unbiasedly, simply sit down [...], listen to him, give him the answers – all the faster can I leave again. [...] At the Youth Welfare Office, to be open and sincere is one of the most important things to do, [...] to really pull yourself together. [...] A lie always comes out in the wash (DE CIT 22).*

Another example is the provision of complete, unredacted bank account statements for means-testing. Here, interviewees say they would prefer to black-out entries relating to their own expenses in order to preserve a minimum of privacy, and some of them even claim to know that formally, they are only obliged to provide information about income. However, in order to avoid conflict and delays in the processing of their request, they give in and submit fully transparent bank account statements for pragmatic reasons.

A neutral, pragmatic stance towards frontline workers is also reflected in the opinion that the single clerks are simply applying laws and institutional rules, and thus cannot be blamed for their decisions. On the contrary, an unsatisfactory decision is not perceived as a matter of a clerk's low commitment, malevolence or other personal characteristics, but as a matter of professional judgement, against which a citizen has the right to appeal in order to have it revised. This idea is underscored, for instance, in the following statement:

*When I am of the opinion [...] that I was entitled to a benefit and it was declined, then [...] I would not be disappointed in the clerk. [...] I would treat this independently from the person. [...] I know that this has nothing to do with it, and that a friendliness during a consultation has nothing to do with the eventual decisions. Those are two separate things. Even the friendliest clerk is [...] bound by existing legal regulations (DE CIT 10).*

Thirdly, various interviewees explain having rather **formal, weak or distant relations**, most typically in encounters with the changing, non-personally assigned frontline workers in general reception offices. Here, they feel that meetings are particularly shaped by the institutional environment, which they perceive as being impersonal and bureaucratic. In this context, frontline workers are often described as behaving in a strictly fact-oriented, and partly schematic, detached and brusque manner.

In this regard, some interviewees complain that they feel like “a number”, while others express their understanding of the frontline workers who have to deal with a large number of citizens. Occasionally, interviewees also report rather distant and cold relations with the caseworker assigned to them, whom they describe as being emotionless, cold and without empathy for their problems and situation. In such cases, the lack of empathy is, for instance, linked to the assumption that the respective caseworker is too inexperienced and thus unable to put themselves in the shoes of the person seeking help, as expressed by one woman we interviewed:

*To start with, she was very emotionless. No cordiality. [...] I tried to explain my feelings, my fears [...]. No emotions. Absolutely nothing. Instead, [...] someone is sitting there who has a catalogue of questions, who makes all the queries and assesses them. [...] No compassion. Perhaps she could not*

*have it as she just came from university, did not have her own child. [...] For me, totally out of place (DE CIT 2).*

In addition, some interviewees describe themselves as being careful and distanced because they are afraid of disclosing something that could be used against them, or could be misinterpreted. Overall, distant and impersonal relations largely seem to be a matter of the number and frequency of contacts. In many cases, citizens refer to experiences of weak and detached relations when their contact with the frontline worker in question was only fleeting and superficial, while they tend to be less so when they had the chance to build up a more constant, longer-term working relationship. However, the intensity of contacts does not appear to be the only relevant factor here. Next to the aforementioned workload of staff, some interviewees suggest that the detached manner in which some of the meetings took place might also be due to the anonymity of staff working in reception offices.

Fourthly, a theme that is very salient in many of our interviews is citizens experiencing **power asymmetries** in their relations with frontline workers. This involves feelings of limited or lacking opportunities of codetermination, dependency, anxiety, and of being forced to comply with requirements and accept measures conflicting with their own interests.

Power asymmetries are particularly felt in contexts of coercion, when, for instance, children are being taken away from a family by the YWO, or when parents are told that their child's wellbeing is at risk, and that it may be taken away unless parents comply with the caseworker's requirements. Besides the actual use of coercive measures, different interviewees emphasise that they feel particularly pressurised by caseworkers who repeatedly threaten them with a potential imposition of coercive means. According to them, the permanent fear of their children being taken away substantially shapes their relation towards their caseworker and the institutions as such, as exemplified by the following:

*In this current situation with the Youth Welfare Office, I cannot lead a relaxed life because of the fear that they stand in front of my door always every five minutes, because, if it happens that my home is untidy, [...] everything disturbs the Youth Welfare Office. Even if a napkin lies on the floor, [...] they moan, they grumble. That really gets on my nerves, constantly living in fear (DE CIT 22).*

Apart from more evident circumstances where institutional power is at play, the perception of inequality and the lack of interaction 'on an equal footing', as well as the feeling of being small, help- and powerless appear to be experiences that variously arise with frontline workers. Some interviewees underline that they felt treated in an encroaching manner when a caseworker evaluated aspects of their living, working or health conditions, and took decisions in ways that interviewees regard as inappropriate and/or unfair. Particularly with regard to individual experiences with the YWO, different interviewees express concern about caseworkers having a great deal of freedom and discretionary power in interpreting their observations in light of the question of what is best for the child.

When it comes to the application for benefits or other forms of support, witnessing power asymmetries involves the impression of being ‘petitioners’ who have to justify their requests in front of clerks who may or may not accept the reasons and explanations presented. Decisions made are perceived as incomprehensible, non-transparent and arbitrary. An example repeatedly mentioned is the assessment of unemployment benefit II entitlements:

*You simply receive a letter and then it is suddenly written “You have been blocked” or “You cannot receive benefits any longer” and then you are simply helpless. [...] No one cares and you are totally surrendered and then you are also really in despair. [...] You are really afraid of them. Also, because they have such uncanny power, right? And also, this arbitrariness, right? This is just the worst (DE CIT 5).*

The feeling of being at a frontline worker’s mercy is perceived all the more as a problem when interviewees know that there is a legal entitlement to the requested type of support. Experiencing power asymmetries also comprises feelings of being controlled, compounded by having to give up one’s right to privacy and self-determination. Moreover, some interviewees describe imbalances because they were requested to complete their applications swiftly while the clerk in charge took a long time to revise an incorrect decision and showed little understanding of the matter’s urgency. In addition, some interviewees see themselves in a disadvantaged position because of their experience that the burden of proof lies on them, and that they may only defend themselves if they attend meetings together with a ‘witness’, or have agreements or documents countersigned by the frontline worker on the spot.

Finally, some interviewees report about relations with individual frontline workers that are shaped by **conflict**. According to our interviewees, conflict partly occurred when they sought to complain, openly expressing their opinion and defending their position self-confidently, and when frontline workers took offence and reacted rigorously, for example by threatening them with a ban on entering the building. In other instances, interviewees explain that conflict with their caseworker arose due to their own unwillingness to cooperate, their own impolite or capricious behaviour, or obstructionist mindset. In very few cases, conflict is attributed to a negative, either uncomprehending or even malevolent attitude of caseworkers who, in the interviewees’ view, aimed to work against the citizen and, in order to follow their own agenda, even twisted the facts and misused citizens’ statements against them.

When asked about their perception of frontline workers’ characteristics, interviewees provide detailed descriptions of features they find beneficial or detrimental in their relations with administrative staff. Several interviewees mention **age** or the length of professional **experience** as relevant factors. Some interviewees prefer younger caseworkers because they are perceived as more liberal, open-minded and relaxed, and more empathetic towards citizens who are (relatively) young themselves. Others believe that relations are better if the caseworker is older and more experienced in both their private and professional life, instead of being fresh from university and having a rather theoretical understanding of the matter at stake. In the context of relations with YWO staff, some also regard it as important that their caseworker has children, as they assume this enhances understanding and empathy, while others find this less relevant.

Moreover, **knowledge, know-how and competence** are regarded important for a fruitful working relationship, while their perceived absence is considered detrimental. Often, interviewees link their judgement of a caseworker's knowledge and competence to the question of age and experience. Again, views are divided as some believe that younger caseworkers are better informed and more competent because they are equipped with up-to-date knowledge from university, or are more motivated to acquire new information, while others find it more important that their caseworker has acquired longer-term practical professional experience.

When speaking about beneficial or unfavourable characteristics, interviewees most extensively address aspects relating to frontline workers' **engagement and communication style**. Here, the most salient issue is the extent to which frontline workers are considered **helpful, open and willing to offer explanations and advice**. Frontline workers are regarded helpful when they show sincere interest in and assume responsibility for the citizen's particular case, are willing and motivated to engage with them, and are committed to adapting support instruments and solutions to the citizen's individual living realities, specific challenges, circumstances, needs and capacities. This is expressed by one interviewee in the following way:

*Also, the readiness of the clerk to be willing to take on responsibility. And not simply to rationally work it through and to say, "Well, it was just a number, it does not imply anything to me, also no responsibility", or so – and such a feeling I did not have with her. With her, I really had the feeling that she has a sincere interest, or also has good motivation: "I really want to help and take on responsibility", to give me good advice and to guide me on my life's journey [along] a way that effectually is expedient (DE CIT 15).*

Adequate support also involves frontline workers offering support measures that help citizens in the long run, like finding stable and suitable employment, rather than focusing on short-term solutions and measures that only serve 'to remove someone from the statistics' (DE CIT 15). Frontline workers are also considered helpful when they do more than is required – instead of working 'in a dull, mindless' way –, for example, by suggesting or even contacting other institutions or organisations in order to assist citizens to get additional support measures underway, by providing practical recommendations or when they take the time to explain the procedures or decisions comprehensively and in an easily understandable manner. Frontline workers are also regarded as helpful and open when they allow citizens to participate in decision-making, for instance concerning the aims of support measures, or the choice of service providers. More specifically with regard to YWO staff, different citizens appreciate that their caseworker mediated in conflict situations within the family, or with a former partner.

In contrast, a problem repeatedly addressed is that some frontline workers appeared to be unwilling to take the citizens' concerns seriously and to further process their requests, or to deal with a cause in a timely manner. Moreover, citizens are dissatisfied when frontline workers are curt and provide no information beyond the absolutely necessary minimum, and hence do not give any advice that could be advantageous to the citizen. In such contexts, interviewees also argue that frontline workers **act in schematic, procedural or superficial ways**, just following the rules without adapting to the individual case, and do not do more than what is formally required.

Next to helpfulness, our interviewees underscore **kindness and empathy** as crucial characteristics of frontline workers. Interviewed citizens often give examples of experiences with frontline workers they perceived as ‘nice’, ‘friendly’, ‘easy-going’, ‘relaxed’, ‘cool’, ‘warm and sincere’, ‘positive’, ‘human’, ‘comradely’ or ‘like a buddy’. In addition, being ‘empathetic’, ‘sensitive’ and ‘respectful’, ‘taking concerns seriously’ and ‘showing understanding’ for a citizen’s particular problems, life circumstances and choices are forms of behaviour valued highly by our interviewees. In many cases, kindness and empathy are closely intertwined with the perception of a frontline worker’s helpfulness, as the following statement exemplifies:

*She is simply very friendly. And eager, as I said, to provide support. Sympathetic, also empathetic, she can put herself in one’s shoes very well. [...] Well, she always [treated] me very kindly, respectfully, thus, I never had the feeling there that I am a second-class person or so. I just had the feeling that I am a person in need of help and that this help is granted to me (DE CIT 5).*

In comparison, there are various examples where citizens report about opposite experiences. Here, interviewees either emphasise that they missed the above-described kindness and empathy. Or they point out that frontline workers appeared to be ‘**unpleasant**’, ‘**cold**’, ‘**heartless**’ or ‘**insensitive**’. In our interviews, such experiences mostly emerged in contexts where citizens had applied for financial benefits. More often than not, such negative experiences are witnessed when relationships with frontline workers are weak and contact sparse. Sometimes, frontline workers are also described as ‘repellent’, ‘detached’ or even ‘hard-nosed’, ‘impudent’ or ‘cunning’, an impression which is described by one interviewee in the following way:

*As regards the second caseworker, there I have to say [...] that is a witch. [...] In the sense that she was absolutely dishonest. Devious. And I believe she was very clever and because of this, she was put in this position, especially for us. She appeared to be really hard-boiled. [...] And I found this very very very hard. In a place [...] where I go with a problem and where I hope for help, where I wish that there is someone who shows sympathy and who offers something on their part, then I must say that this was the complete opposite (DE CIT 8).*

Furthermore, interviewed citizens repeatedly complain about frontline workers they perceive as **biased, partial and having double standards**. Sometimes, interviewees refer rather generally to the way in which they have been treated (e.g. do citizens have the feeling of being regarded as ‘inferior’, ‘lazy’, as a ‘slacker’ or as ‘hysterical’, or simply as a person seeking help in a difficult situation in an unprejudiced, open-minded way). Other times, biased behaviour, examples of (im)partiality, of taking sides and having double standards are discussed as a matter of partisanship. Often, such experiences are linked to situations in which frontline workers operate as mediators between two or more conflicting parties (e.g. between separated parents, or between parents and foster families). In these instances, some interviewees claim that (consciously or unconsciously) their caseworkers took sides with one party, or applied their considerations about a child’s wellbeing one-sidedly. This view is shared, for instance, in this statement:

*At the moment you enter the Youth Welfare Office, very much is about sympathy. Either the sympathy lies with the mother or with the father. [...] And then it is mostly acted accordingly. [...] And often decisions are taken based on sympathy. And that I always dislike because it is not about the child (DE CIT 2).*

Moving beyond biased behaviour, various interviewed citizens complain about frontline workers who **look down on them, are judgemental and patronising**. While the overlaps between the previously-mentioned attitude and this one are rather fluent, judgemental and patronising behaviour seem to be even more normatively charged. Moreover, such behaviour appears to have a stronger impact on frontline workers' decisions with regard to requirements they impose on citizens, be it in relation to job-seeking issues, the upbringing of children, housing choices, or other aspects of a citizen's life choices, customs and values. In such instances, interviewees perceived a lack of respect for their own living conditions and decisions, reinforcing the impression that their frontline workers seek to enforce their own standards and ideas on them, illustrated by the following statement:

*And then I gained the impression that depending on how you present your request and how relevant the staff finds what you put forward and why you need a certain benefit, that this also has an influence on the extent to which you receive help or not. [...] [I was] also criticised with regard to personal decisions that are none of the staff's business. In fact, often I had the feeling that it was interfering in my lifeworld and my lifestyle, and that staff were evaluating how reasonable my life choices are with regard to my professional future (DE CIT 17).*

Interestingly, interviewees seldom criticise their frontline worker for being **controlling, intrusive or nosy**, while the system as such, or a specific institution, are more often described as controlling (see 3.2 above). Only in a few instances, interviewed citizens complain that their frontline worker behaved like an "inspector", asking them a battery of questions which, from their perspective only partly related to their request, and encroached on very private matters.

In addition, an aspect occasionally addressed is the extent to which a frontline worker is perceived as **honest and transparent**. In several instances, interviewees underscore how much they appreciate their frontline worker being clear about the rules, providing comprehensive information and speaking openly about both opportunities and limits, instead of nurturing overly-optimistic expectations. Sometimes, interviewees complain that they miss sufficient clarity and transparency in a frontline worker's communication style. Finally, in very few instances, positive or negative characteristics are discussed in light of the question whether frontline workers are **responsive and keep their promises**. While some interviewees have had positive experiences in this regard, others were dissatisfied, for instance, because a frontline worker failed to deliver a supportive written comment, or did not keep in touch with the citizen in order to follow up the progress of the support measure as promised.

### 3.4 Trust understanding, sources and functions

Our interviews comprise a variety of meanings and definitions of trust. Most frequently, interviewed citizens understand trust as a **possibility to reveal and to open up towards one's counterpart**. Often, they make a clear distinction between private relationships and relations with frontline workers. In private relationships, interviewees find it much easier to talk about their own problems, weaknesses or other personal matters. This understanding of trust is expressed by one woman in the following way:

*To me, trust means when I can reveal my weaknesses, that this will not be used against me. This is a very crucial point for me. That means trust to me. This is the umbrella term of trust for me. When I reveal [...] something about myself then it is usually something that might cause me harm. Because I undress myself. And if the other person guards this well and treats it respectfully, then I speak about trust (DE CIT 2).*

Still, they widely agree that the circle of persons to which they can open up completely, reveal everything no matter what, be authentically oneself and 'drop one's mask' is very limited. In relationships with frontline workers, many interviewees describe themselves as rather inhibited or resistant to opening up and revealing sensitive details about their private life and other personal issues for fear that such information might be used against them. In various cases, revealing information to frontline workers is thought to be used in a strategic, tailored manner, calculating the possible benefits and disadvantages. Yet, as previously said, a friendly and longer-lasting relationship with one's caseworker that is based on empathy and respect can help to overcome such barriers.

Closely related to the concept of trust as the possibility to reveal is the understanding of trust as a **confidential sphere**. In this context, opening up, 'confiding something to someone' and sharing sensitive or private details is inextricably linked with the expectation that the other person(s) will keep everything secret and not disclose it to third parties.

Furthermore, trust is often understood as a matter of **closeness, feeling a bond or at ease, feeling sympathy or empathy**. Generally, this is expressed by emphasising that trusting relationships are something 'intimate' that only exist with very close family members and friends. With regard to frontline workers, interviewees highlight that sympathy plays a crucial role for building a certain degree of trust. Yet, trust relations based on bonding are said to be very rare and confined to single individuals among the frontline workers. More than in any other understanding, the personal characteristics of one's counterpart are described as crucial. When asked about the role of trust in the working relationship with frontline workers, one interviewee explains:

*Every time you have a caseworker, it is a question of sympathy, when you meet each other personally the first time and talk with each other face-to-face for the first time. [...] For me, it is important that you understand each other [...]. You need to feel understood somehow, or at least feel that the person, the caseworker really wants to help you (DE CIT 23).*

A further meaning repeatedly addressed is the idea that trust involves a **mutual relationship** in which one's own readiness to trust is influenced by the extent to which the

other person is perceived as open and trusting. Moreover, some interviewees discuss trust as a matter of reciprocal relations particularly with regard to symmetric communication. For them, trust is given in encounters where both parties meet each other on an equal footing and are thus able to treat each other in a humane, open-minded way, as is exemplified by this interviewee's description:

*For me, trust is when the basis is provided that you can be in harmony with each other [...] And that you behave in a way that is on an equal footing at least to some extent. This will never be the case because [...] one person is the petitioner and the other one the person who grants the benefit, or not. But at least you can deal with each other in a humane way (DE CIT 17).*

In this context, they also mention attitudes such as mutual "respect", "thoughtfulness" and "acceptance".

In addition, trust is often perceived as a matter of **reliability**, of (explicit or implicit) agreements being kept. Reliability is often described as dependability, for instance, as "the feeling to work jointly and not against each other, and to be able to rely on agreements" (DE CIT 17), or as relying on another person "to always be there [for you] when needed" (DE CIT 3), no matter if there are differences of opinion or other conflicts or challenges. With regard to relations with institutions, reliability is also considered a question of benefits being paid regularly and on time.

For several interviewees, **truthfulness** also plays an important role in their understanding of trust. Closely related to reliability, it concerns the accuracy, completeness and veracity of information provided by others, and is closely intertwined with honesty, sincerity and authenticity.

Next to these dominant understandings of trust, there are a couple of further meanings that emerge in the reflections of interviewees. A number of interviewees highlight that trust is closely intertwined with **support, help giving, loyalty** and solicitude. With regard to encounters in public offices, trust is experienced when frontline workers show sincere interest and commitment to helping and giving citizens the feeling that they are taking responsibility for the case. In addition, trust is also discussed in terms of **carefulness**. In this context, it is mostly argued that being mistrustful means to be careful or cautious. While there are considerable overlaps with concepts of trust as having to do with the possibility of revealing and with the confidentiality of information, dis-/trust as carefulness is used in a somewhat broader context. With regard to public offices, some examples refer to one's carefulness with the provision of personal data and information, in general, in order to protect oneself from data misuse. In other examples, citizens report being careful and prudent in how they behave towards frontline workers, raising the question of whether it is wise or not to complain or make unfair treatment public, for fear of repercussions.

Finally, and somewhat related to the former, trust is occasionally discussed in terms of **giving up control**. In the few instances where this idea is explicitly addressed, interviewees tend to speak about long and complex benefit notices, highlighting that they prefer to trust in their correctness rather than invest time and energy in crosschecking the calculations and decisions.

Our interviews provide a multifaceted picture when it comes to the question of how interviewees reflect on **trust and distrust as a default position with regard to themselves and the frontline workers** they met. In both cases, interviewed citizens sketch out various positions between the two extremes of being always trustful and always distrustful. With regard to their own position, very few citizens describe themselves as generally trusting. What is more widespread is that citizens trust if certain conditions are met. This form of conditionally trusting takes different shades depending on citizens' expectations about their counterpart's trustworthiness. There are interviewees who tend to trust more often than not because the factors that make them trust can be met relatively easily. Then there are those who sometimes trust and sometimes do not. And then there are citizens who seldom trust except under very specific conditions, otherwise are rather cautious. Finally, a few interviewees underline that they never trust as a default setting, while none of them clearly states they distrust as a general default setting. When it comes to citizens' trust towards public offices or frontline workers, ambivalent positions and cautious positions with a tendency to 'better not trust' prevail, while there are also optimistic stances where citizens are rather inclined to trust an institution or frontline worker. In comparison, few interviewees express a basic distrust in a specific public office or frontline worker (e.g. due to negative experiences or the institution's negative reputation), while none of the interviewed citizen said they always trust in institutions or frontline workers.

Similar to the variety of personal trust and distrust positions, interviewees are of the opinion that some frontline workers are rather trustful and others appear rather sceptical, or even distrustful. When citizens speak about frontline workers they perceived as trustful, their descriptions remain relatively vague and short. Following their experiences, trust in citizens is barely made explicit by frontline workers. Thus, assumptions about trustful frontline workers are often interrelated with perceptions of friendliness, helpfulness and the absence of additional inquiries. When it comes to non-trusting or distrust as a default setting, the picture is more complex. On the one hand, interviewees make a clear distinction between an institution as such and the frontline workers they met. In this regard, it is salient that particularly those institutions where means-testing and controlling of proofs play a crucial role are assumed to have distrust institutionalised as a default setting. On the other hand, interviewed citizens make a differentiate between a sceptical, cautious attitude of frontline workers *ex officio*, what we called "professionally trusting" (see above), and a distrustful stance they consider to be motivated by a frontline worker's personal attitudes or experiences. Typically, interviewees conclude that (a certain extent of) distrust is at play when they have to fill out very detailed forms and to deliver a broad range of proof, when frontline workers call their documents or statements into question, inquire a lot and seek to dig deeper, or when frontline workers were perceived as unfriendly, suspicious, disparaging and having prejudices towards citizens. One interviewee, for example, describes her experiences in a Jobcentre the following way:

*They do not trust their people. [...] With most of them I had the feeling that they think this is a workshy bunch of people. [...] It is not necessary to say this. It is simply such an atmosphere that prevails there. Also, this snappish behaviour [...] how they treat you (DE CIT 5).*

According to our interviewees, the **time factor** plays an important role for adjusting initial default positions. Particularly with regard to sceptical, less trustful stances, the continuity of relations helped to improve trust. This is particularly true for those cases where a low level of trust is based on uncertainties and carefulness. In this context, citizens underline that repeatedly changing contact persons in public offices was an obstacle to improving trust relations over time. However, if low trust or even distrust are grounded in more deeply rooted negative experiences (e.g. in a citizen's private life or past experiences with public offices), or when citizens and frontline workers do not find common ground, then it appears to be more difficult to overcome these obstacles. And sometimes, distrust is even fuelled and cemented as the working relation between a citizen and a frontline worker proceeds.

When reflecting about trust and distrust in their relations with public offices and frontline workers, interviewed citizens address a broad range of **factors that shape these trust or distrust relations**. Most of the time, our interviewees refer to aspects having to do with their perception of frontline workers' attitudes or forms of behaviour, while they barely speak about own personal factors. The factors that are most frequently said to influence interviewees' trust or distrust in frontline workers strongly overlap with the features interviewees find most important with regard to frontline workers' engagement and communication style (see Chapter 3 above). In our interviews, the most salient factor affecting (dis)trust is interviewees' assessment of whether a frontline worker (or the system as such) **granted or refused help**. This finding corresponds to the prominent role interviewees assign to a person's helpfulness when evaluating their experiences with frontline workers. Hence, citizens are more likely to trust the system, a specific institution or individual frontline workers when they receive what they requested, or feel that their caseworker is supportive and seriously committed to helping them. In comparison, they find it more difficult to build trust (or they even develop some form of distrust) if their request for help was – fully or partly – declined, as this goes along with the impression of being disappointed and let down. This is particularly true when a decision is not plausible, when citizens assume they are legally entitled to support or when, for instance, a frontline worker appears to be biased and to take sides with another party:

*It was the only time that I complained and said "Listen! Now I want to talk to someone else, it does not work like this!" And this person then really helped me. And on the spot, she also gave me very good advice in terms of where I can turn [...]. In this regard, I must say, with one person trust was destroyed, and with the other person it was rebuilt. [...] And this time I was not disappointed, and I am quite happy about it (DE CIT 18).*

Secondly, interviewees often explain that a frontline worker's **honesty, truthfulness and transparent behaviour** significantly influenced the extent to which they could open up and build trust towards them. In comparison, distrust was fuelled if citizens had the impression that a frontline worker was dishonest, followed a hidden agenda, kept secret files or concealed information (e.g. about other possible forms of support, or how pre-conditions for a successful application process can be met). In the following example, one interviewee describes how the lack of information about citizens' rights and entitlements fed her distrust of the Jobcentre as an institution:

*I just distrust them because I know exactly that they seek to enforce their tricks, so to say, so that they have to pay less, can get money back in one way or the other. [...] In general, that's the Jobcentre, [...] if one does not know his rights and the foundations and does not know what form of money one can keep – they stay there "Here, give me!", right? So, when it comes to getting money, the Jobcentre is quite quick (DE CIT 20).*

Occasionally, interviewees also reflect on their own trustworthiness and state that they have to be honest and truthful themselves in order to build a good working relationship with their caseworker.

Thirdly, our interviewees often mention that the extent to which they trust or distrust is affected by a frontline worker's **responsiveness and feedback**. Here, interviewees underscore that they are more likely to trust if a frontline worker is perceived as approachable, committed and understanding and gives good feedback in a pleasant, personable, unbureaucratic way. In contrast, they are less inclined to build trust, or even establish some sort of distrust, if frontline workers are unresponsive, detached, do not take time to listen and understand, brush them off with superficial comments, disregard citizens' concerns and hence do not deal with their request as expected.

Moreover, many interviewed citizens also find it important to be treated with **respect, acceptance and appreciation**. When they feel that a frontline worker accepts and respects their opinions and life choices, deals with them as equals and appreciates what they have achieved, then they can more easily trust them. Yet, if their counterpart appears to be judgemental and prejudiced, to look down on them and to lack respect and understanding, trusting becomes more difficult and unlikely, while some also take this as a reason to distrust a frontline worker, and to protect their privacy as much as possible. One interviewee reports about a positive example in the following way:

*I felt comfortable with her/ in the meeting with her. And this was the most important thing. [...] She was very human in her dealings with me. That means, she did not behave as if she were "I am everything, you are nothing". [...] And I found this very pleasant because it is important that when you are supposed to work with each other, then this should happen on an equal footing. Not that one thinks "I am the Croesus and you are.../ Come, crawl at my feet!" or so. Then I do not trust and am not willing to talk, really not (DE CIT 18).*

In addition, a repeated (dis)trust factor mentioned is frontline workers' **reliability**. According to several of our interviewees, the experience that everything proceeded as agreed helped them to trust their frontline worker(s), while situations where a frontline worker did not stand by their pledges and did not act as agreed made citizens feel uncertain, doubtful, disappointed and less trusting or, depending on the issue at stake, even distrustful.

Particularly with regard to relations with YWO staff, a number of interviewees also highlight that their relations with the YWO and individual YWO frontline workers were shaped by poor trust or even distrust because of their **fear that their children might be taken away**. This concern is fuelled by frontline workers' threats, the interviewees' own

negative experiences, or experiences of family members or friends, or by negative media coverage and public opinion.

Another noteworthy trust factor brought into the discussion several times is **face-to-face meetings**, which are regarded relevant to assessing if a frontline worker is sympathetic and to establishing a personal level of interaction, to gain a more personal impression and to revise and reduce prejudices. Furthermore, it appears relevant to citizens if they **are treated in a tailored rather than in a schematic, superficial way**, or if frontline workers are **able to admit and correct their own mistakes**.

Finally, when reflecting on the **functions of (dis)trust** in their relation with public offices and frontline workers, interviewees have divided views. For some, trust is an important precondition for a good and fruitful working relationship, while distrust is regarded as detrimental. For others, trust or distrust play a minor role because they perceive the working relationship and the behaviour of frontline workers from a very pragmatic perspective according to which everything proceeds on the basis of institutionalised rules, which are only professionally applied by frontline workers to their best knowledge, and based on available capacities.

## 4. Summary and conclusions

The analysis of the empirical material has revealed a number of ways in which trust and distrust become salient in the interactions between citizens and institutions. Our main findings may be summarised as follows:

- The institutional differentiation and fragmentation of the German system of social service provision have a tangible and direct impact on trust relations on the ground. Since frontline workers first have to determine whether their institution is responsible for a particular citizen's concern, it often implies that (at least from citizens' perspectives) the initial focus of attention lies more with the procedure than with the citizen. The relatively low level of coordination and information exchange between the different institutions results in citizens having to provide the same information repeatedly, making procedures complex and exhausting. In the face of uncertainty and opaqueness regarding institutional responsibilities and the experience of frequent referrals from one institution to another, citizens tend to feel abandoned in the system, but also hampered by a system that dispossesses them from fully exercising their rights and making use of their entitlements. In this respect, the lack of sufficient assistance and transparency emerge as important factors that negatively affect citizens' perceptions of the institutions' trustworthiness.
- The administration of financial benefits seems to follow a very different (and more bureaucratic) logic compared to the provision of social services (in which notions of professionalism are of greater importance). This observation applies across institutions. Distrust seems to play a comparatively greater role when it

comes to means-tested benefits. In fact, in view of the extensive control mechanisms, a certain degree of distrust appears to be institutionalised in the system of benefit provision. Citizens applying for or receiving financial benefits seem to react to the distrust they meet with some suspicion on their part, and own empowerment and control strategies. In comparison, the areas of the social security system responsible for social services and social work are shaped by a professional approach where building trustful relations with citizens is a core principle.

- Trust is very much conceived as a mutual relationship based on reciprocity, and the same applies to distrust.
- Time is a major factor contributing (in mostly positive ways) to the development of trustful relations.
- Sustained and reliable contacts and clearly defined responsibilities attributed to individuals (not to anonymous institutions) seem to improve trust relations in most cases.
- Trust is functional in a number of ways. For frontline workers, it can help to make interactions run smoothly and proceed with casework quickly and efficiently. Especially in social work contexts, getting citizens to trust and open up is essential for developing good working relations, and is a necessary precondition for achieving the aims of casework. For citizens, trusting 'their' frontline worker can have a disburdening function. Especially when procedures seem very intricate and not readily understandable, trust in an institution or the frontline worker reduces complexity.
- Mistrust or distrust are also functional. As we have highlighted with regard to "professionally trusting by default", scepticism and vigilance form important parts of frontline workers' work ethos and coexist with a fundamental form of basic trust in their counterpart's willingness to aim for the good. As regards citizens, a certain measure of mistrust seems prudent as a precautionary measure, especially when frontline workers are perceived as acting in arbitrary or unforeseeable ways.

Regarding commonalities and differences between frontline workers and citizens, we would like to highlight that there is considerable convergence regarding the importance of reliability, transparency, honesty and sincerity. Both citizens and frontline workers agree that for trust to develop, it is vital to know that confidential information will not be shared with third parties without consent, or used to one's disadvantage. Citizens also emphasise that willingness to help and provide support are important components of trust relations. While this aspect also appears in interviews with frontline workers, it is not as explicitly featured as an important factor – possibly because, to frontline workers, it is self-evident that they are there to help.

Another way in which the statements of the two groups of interviewees converge concerns the importance of the norms and values guiding interactions. Respect, appreciation, transparency and the absence of prejudice are important aspects of caseworkers' interpretation of being professional (cf. for instance Bohler 2013) and, at the same time, they are among the things that citizens expect from frontline workers. However, citizens

reveal various experiences where these expectations were not fulfilled, where they felt disappointed and let down by the institutions or individual frontline workers. Hence, while it belongs to the professional self-conception of caseworkers to be “professionally trusting of citizens by default”, failures to conform to professional norms may negatively affect citizens’ trust in the system of social assistance. This points to the importance of the mutuality of trust relations. At the same time, the tendency to trust or distrust is not solely determined by the character of face-to-face relations. Structural characteristics and institutional influences seem to be just as important. Among the factors affecting trust relations on the ground are media portrayals of the institutions, and organisational problems such as understaffing, case overload and staff fluctuation. Both frontline workers and citizens agree that it is detrimental to trust relations when caseworkers are changed regularly, negating follow-through and trust building opportunities. From the citizens’ perspective, this is further aggravated when, systemically, individual contact persons are not provided for – as is the case at the reception area and the benefits department at the Jobcentre. The anonymity of the institution and its staff make it difficult for them to trust.

When it comes to differences, one interesting observation concerns the importance of trust in general: While frontline workers unanimously find that mutual trust is of vital importance in their work (also Senghaas, Freier and Kupka 2019), citizens often have a more pragmatic approach and do not always find it necessary to trust the individual caseworker. In many cases, it suffices for them to rely on the institutional procedures and the professionalism of the staff, while keeping a certain ‘healthy’ degree of carefulness and vigilance. This finding resonates well with a debate in social work about “trust antinomy” or “paradoxy” (Helsper 2016). Here, it is argued that in (social-)pedagogical working relations, cooperation and co-production of professionals and clients are essential for the achievement of results. Yet, such cooperation requires that trust is mutually granted and implied between two parties who are actually not familiar with each other and, what is more, whose relationship is typically characterised by power asymmetries, one-sided dependencies and interventions that may directly affect the clients’ integrity (Helsper 2016: 55). Thus, “professionals have to demand trust [...], which their clients can only assume and grant on a very fragile basis because in view of the asymmetry and dependency outlined above, there would be a lot to speak in favour of ‘healthy mistrust’” (ibid., transl. UZ; also, Schütze 1992: 136; 2000). Developing strategies to cope with this tension appears to be particularly important since the German social security system is currently characterised by a policy of activation and empowerment steps toward self-help, where cooperation and co-production by social assistance users play an essential role. Accordingly, recent social work research points to a shift from more coercive-controlling working approaches toward more affective and trust-oriented approaches in worker-client relations in activation-centred welfare regimes (e.g. Penz et al. 2017).

Overall, our findings indicate that the dispersion of responsibilities and the importance of the subsidiarity principle in the German system of social assistance have a strong impact on trust relations on the frontlines of service delivery. While citizens tend to be tolerant of the shortcomings of the system, they feel badly treated when, in the face of the complexity of the system, they are not fully informed about their rights and entitlements by the institutions, but feel they have to accumulate the relevant information and knowledge themselves. This gains a particular salience in situations where citizens find

they have not received the benefits and services they are legally entitled to. While the multiple differentiation of the social service system that we have described in the introductory chapter might seem straightforward and familiar to caseworkers, it seems opaque and unnecessarily complex to citizens (cf. Boeckh, Huster and Benz 2011: 135). Importantly, some of the interviewees do not see this as a neutral fact, a given feature of the system, but suspect that fragmentation and a lack of transparency are part of a strategic withholding of services and benefits, a state manoeuvre to reduce expenditure. That is, citizens may sometimes feel deceived and defrauded in very personal ways.<sup>57</sup> In addition to the institutional-legal diversification, the principle of subsidiarity and the primacy of self-help, with their particular focus on the individual family as the primary unit responsible for safeguarding the wellbeing of all family members, can sometimes be experienced as an inappropriate subjectification of responsibility. As we demonstrated above, single mothers often feel abandoned by the system; they are left to fend for themselves and are forced to deal with precarious living conditions, health issues within their family, or destructive behaviours of their ex-partners on their own.

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<sup>57</sup> It has to be noted, though, that many of the citizens we interviewed had had negative experiences and have a rather critical stance towards the institutions. One of the motivations for participation in the interview could have been to share their disappointment and frustration. Therefore, the sample might be somewhat skewed.

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# The Social protection system and Dimensions of Trust in Greece

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## 1. Introduction

### 1.1 The welfare state regime and the organisation of social assistance in Greece

Experts on the welfare state in Greece argue that in relation to the welfare state's regime typology, as identified by Cøsta Esping-Andersen (1990), the welfare state model in Southern Europe is characterised by a 'hybrid' structure that combines elements and policy 'mixes' of (some or all of) the three types of welfare regimes (Petmesidou & Guillén, 2015; Symeonidou, 1996): the conservative-corporatist, the social-democratic and the liberal. In Greece, the first formal welfare structures appeared before (the establishment of the Institute for Social Insurance/IKA) and after (the creation of the Agricultural Insurance Organisation/OGA) the 2<sup>nd</sup> World War. In the 1980s, after the fall of the dictatorship and the restoration of a democratic regime, social spending increased significantly, especially following the landslide victory of the Socialists (PASOK) in 1981. At that time, social spending increased from 12% of the GDP in 1980 to 22% in 1990 (The World Bank). Although the Greek welfare system was "expensive and wasteful" (Featherstone, 2008), it did not promote social inclusion of the weakest while expenditure mainly targeted the pension system.

The social system in Greece has proved to be unprepared to protect the weakest social groups (the long-term unemployed, households at risk of poverty, etc.) after the outbreak of the economic crisis (Pagoulatos, 2018). Pensions form the largest part and the 'backbone' of the Greek system of social protection, while other social transfers remain marginalised (Matsaganis, 2011). Experts agree that the social protection system in Greece needs to be rationalised by tackling inequalities in social groups' access to social protection and benefits. Unemployment benefits need to be strengthened, as well as social benefits addressed to precariously employed (part-time workers, workers with no permanent job, or with no contract). Family solidarity and informal familial involvement fill in the gaps in formal social protection, which is a main feature of welfare states in countries of Southern Europe, including Greece (Lyberaki & Tinios, 2014).

The social protection system in Greece has been reflecting the principal features of the Southern European welfare state model characterised among others by a meagre social safety net (*ibid.*) which was proved deficient in dealing with the implications of the deep financial crisis. Until the late 2000s, the structures of the Greek social assistance system could not eliminate the risk of poverty since a minimum income was not guaranteed, and the state's protection net was restricted to the assurance of pensions for uninsured elderly, provision of rent allowance for citizens – without children – aged over 65 years, and benefits for individuals with special needs (Symeonidou, 1996).

Amid the decennial debt crisis, the social safety net was -modestly- expanded to tackle the social emergency and severe social risks (high rate of unemployment and jobless households, extreme poverty, homelessness and housing exclusion) (Matsaganis, 2013). National governments proceeded to the implementation of a wide array of reforms associated with social assistance services and benefits for vulnerable social groups, such as the extension of benefits for the long-term unemployed and the provision of unemployment benefits for self-employed people, the restructuring of the allowance for every child that a low-income family supports, the institutionalisation of the Social Solidarity Income (now called Guaranteed Minimum Income) aimed at alleviating extreme poverty – including income support, access to social services and goods, as well as actions for integration and re-integration into the labour market and society. Moreover, the programme ‘Housing and Re-integration’ was associated with the provision of housing and social support aimed at the re-integration of the homeless into the job market, while the benefits of the Fund for European Aid to the Most Deprived were implemented locally throughout the country, providing food and basic material assistance to citizens in need, subject to eligibility criteria based on their income and property.<sup>58</sup>

Social welfare system reforms have been among the main structural reforms agreed on in the ‘Memoranda of Understandings’ Greece signed with Troika (EC-ECB-IMF). Welfare state reforms were mostly directed towards “the facilitation of access”, as well as “the improvement of management and delivery” of social welfare state benefits (ESPN Flash Report 2018/59). Another limitation of the social protection system in Greece, aiming to be improved by these reforms, was its high fragmentation; many of the above-mentioned benefits were distributed by different organisations and sources without a valid cross-checking, thus contributed to ineffective expenditure (Bodewig et al., 2016). Since 2018, with the implementation of the Law 4520/2018, the Organisation of Welfare Benefits and Social Solidarity (OPECA) was founded under the supervision of the Ministry of Labour and Social Affairs, and now all social benefits are distributed and controlled from one single source (OPECA) via the assistance of Community Centres that operate in every municipality. Apart from Community Centres, in every municipality a social protection service operates with responsibilities concerning non-financial aid like food and grocery distribution, psychological and medical support, counselling and similar services. These two types of institutions are now responsible for social protection with the assistance of Church Solidarity Institutions and NGOs<sup>59</sup>. However, despite the low institutional fragmentation achieved with the foundation of OPECA, the social welfare system still lacks institutional mechanisms for policy coherence based on policy monitoring and assessment (ibid.).

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<sup>58</sup> For an overview see here <https://www.missoc.org/missoc-database/comparative-tables/results/>

<sup>59</sup> The Greek Church has a very organised social protection programme offering help to immigrants and refugees, food distribution, clothing, medical help, childcare, hostels for homeless people, abused women and the elderly, help for drug addicts and people with disabilities, orphanages and summer camps. There are also several NGOs that offer psychological support and counselling, solidarity for immigrants and refugees, etc. Both the Greek Church and the NGOs collaborate with state social services to broaden the number of people that will receive help and comfort.

## 1.2 Organisation of research in Attiki-Greece

The interviews with frontline workers were conducted in three different municipalities of the Attica region. The interviews with citizens were also conducted in these areas but because of the additional recruitment via social media, we conducted interviews in three more municipalities. So apart from the metropolitan area, we included smaller municipalities in the region of Attica. Most vulnerabilities are located near the city centre with social problems such as drug abuse, prostitution, the presence of a large number of homeless people, etc., while in recent years social problems have intensified with the influx of large numbers of refugees and immigrants, and the effects of the economic crisis (Alexandri et al., 2017; Maloutas, 2014). In smaller municipalities vulnerabilities related to family related problems can be traced, economic- and deindustrialisation-related factors that have been intensified through the effects of the economic crisis over the last decade,

The interviews with frontline workers of social assistance started on May 8<sup>th</sup> 2020 and were completed on August 3<sup>rd</sup> 2020. All of the interviews were conducted at the frontline workers' work premises: eight interviews were conducted at the municipalities' social services' offices, and seven took place at community centres. The recruitment method was based on snowballing; we searched for contact information through personal acquaintances, that is, people who work in the same municipality with our target population. After speaking with the first contact, we asked them to help us recruit more employees and for that reason, we issued a call for participation with a brief description of the project. This snowballing sampling method resulted in 6 interviewees from the municipality in Location 1, 5 interviewees from the municipality in Location 2 and 4 interviewees from the municipality in Location 3.

Regarding their sociodemographic profile, there is homogeneity in terms of gender, education and professional category; we interviewed 12 women and 3 men, with the majority of them having a university degree in social work and two in psychology. Three of the interviewees were administrative staff with secondary education. The age of the interviewees varies from 30 to 60 years old with different levels of experience in the social services ranging from 1 to 35 years.

Another interesting aspect in the recruiting and interviewing processes is that most of the interviewees were notably willing to participate in the research. They explained to us that they are very familiar with field research since most of them had already participated in other research projects in the past; social welfare services and especially services and employees that are in close contact with citizens and beneficiaries are the research goal of many research projects. For that matter, the recruiting process of frontline workers was fast, despite the difficulties caused by the pandemic. All interviewees invited us into their workplace for the interview after gaining the consent of their supervisor for their participation. The length of the interviews was almost an hour, depending on the character of the interviewee and their ability to become more or less analytic over the procedures of welfare system and their relationship with the beneficiaries.

Interviews with citizens who use social assistance started on September 7<sup>th</sup> 2020 and ended on October 28<sup>th</sup> 2020. The majority of the interviewees were recruited via snowballing sampling through references from the frontline workers we interviewed. They gave us contact details from citizens that visited the social protection services where

they work, and we contacted them. We managed to interview 12 citizens through these references. In addition to snowballing, we used advertisements on social media. We posted our call for participation on two Facebook pages; the theme of these pages was related with our research goal and target population, that is social welfare and benefits in Greece. Several people contacted us after the call was posted not only from Attica, but from other cities in Greece as well. We contacted the first three people and arranged meetings.

In the recruitment process, another important and facilitating factor was the supermarket voucher, equal in amount to 30 euros, that was offered to the participants. All participants stated that the voucher mobilised them to contact us and participate in our research because they were in need, even of a small amount of food products. In terms of sampling, we managed to recruit only women from different age groups, with minors that have been in the social welfare system two years prior to the study. Although we encouraged the male participation as well, we did not find any willing participants.

The interviewer team consisted of four members that conducted thirty interviews as planned. The interviewers also conducted the coding of transcriptions and another team member joined the coding process in order to review coding in two interviews. Reliability and validity criteria were also applied during the writing process of the report by each author while reading the excerpts of codes, resulting in the coders writing 37 memos during the coding process. Finally, we thoroughly discussed the findings before and during the writing process of the report.

## **2. Interviews with social assistance frontline workers**

### **2.1 Frontline workers' professional background**

The majority of the interviewees are social workers; two are psychologists and three interviewees are administrative staff. The social workers' and psychologists' tasks are divided between social work, counselling and administrative work, but the duties of the administrative staff are exclusively concerned with administrative procedures and application entry. More specifically, in Community Centres, the main duties of frontline workers are primarily administrative; they receive applications for benefits and guide citizens towards social services offered. If citizens that visit Community Centres want or are eligible to receive other services as well, social workers and psychologists have counselling sessions with them in order to evaluate their needs and recommend the appropriate services. In municipalities' social services, the procedure is almost the same. Social workers that work there do not have the jurisdiction to grant state benefits, but their brief is to guide citizens throughout the procedure and refer them to Community Centres to apply for these benefits. Accordingly, after recording their 'social history', namely citizens' social background, they propose services that could help them.

All of the social workers we interviewed have studied at Higher Education Schools of Social Work in Greece. Some of them, especially younger employees, have also postgraduate degrees in Counselling or similar subjects. The two psychologists in our sample are also graduates of Schools of Psychology with postgraduate studies in Cultural Edu-

cation and Neuropsychology. The administrative staff mostly completed secondary education except for one case, a tertiary graduate and policy expert in immigrants' and refugees' social integration.

In terms of their position, most of them have temporary contracts with the municipality they work for in order to implement EU funded programmes for solidarity and welfare issues. This is the main responsibility of Community Centres and the respective departments of Social Services and Solidarity in each municipality. The employees in these services are responsible for the information of the citizens regarding the benefits and services they are eligible for, paperwork control, and verification and counselling whenever necessary.

The majority of them, especially the social workers and psychologists, have years of experience in this field since they have been working in social services since graduation. This employment scheme is very often in social work since part of their training is a studentship semester in social services in order to acquire professional experience. So, as many of the interviewees explained, they had the opportunity to start their career during their studies and through this experience, they were able to find a job in their field of studies. This was also what motivated them to keep working in the field. For the administrative staff, their pathway into social services was not so ordained. Oftentimes, they were working in other departments of the municipality and were transferred into social services to alleviate the workload. This is why they do not refer to a specific motivation to work in social services. They just deal with it as another administrative duty with a heavy workload because of their constant contact and communication with citizens that face difficulties in their life.

## **2.2 Granting benefits and services: overview of the system**

The implementation of social assistance is conducted by OPECA, the Organisation of Welfare Benefits and Social Solidarity. Applications for welfare benefits can be submitted via the Internet, but for the same purpose a citizen can visit social services in municipalities. In municipalities, there is a two-way system for welfare policy implementation; the Community Centres and the Social Policy and Solidarity services. Community Centres work as a one-stop shop for citizens' information and guidance regarding benefits and other services offered by the state, or by donations. In Community Centres, social workers evaluate the situation of each applicant and accordingly, guide them through the services or benefits they can obtain. Whenever necessary, the citizens will be referred to the Social Policy and Solidarity services of the municipality in order to include them in services provided by the municipality. If citizens reach the Social Policy and Solidarity services first, they will provide them with all the necessary information regarding their eligibility for their services, and then they will be referred to Community Centres for other benefits. The cooperation and contact of Community Centres with Social Policy and Solidarity services is direct and constant, mostly for referring citizens to the appropriate service, but also to follow cases facing extreme difficulties (drug addicts, child abuse, extreme poverty, etc.) during the whole process, with weekly meetings between the supervisor of social services and the social workers handling these cases.

For most of the benefits, like the Guaranteed Minimum Income, rent subsidy, child benefit etc., citizens can apply via the Internet; there is no need to visit Community Centres

if their eligibility is confirmed through the online platform. In the case of digital illiteracy, citizens can visit the social services to apply in person with the help of frontline workers. For benefits and services provided by the municipality, like obtaining free groceries, psychological and medical support, after-school educational support for children, family counselling and career advice from the municipality's job centre, apply for municipal tax reduction etc., citizens must visit the social services. Citizens interested in these benefits and services usually call first for the initial contact and information, and then they visit social services. Sometimes, especially for elderly people or children, neighbours or schools inform social services about their problems, but in most cases, a court order is necessary for social services to intervene. The vocabulary used by frontline workers in order to describe people who visit social services for help includes the terms: beneficiaries, citizens, cases or served citizens.

An interesting aspect regarding the **procedures and the contact with citizens** is that digitalisation has improved the validity control and they are not obliged to ask citizens for a variety of documents. The most important criterion for the eligibility of benefits is low income<sup>60</sup>, so in most cases the only documents that citizens have to provide are income declarations from the tax service, certification of their family status when they have minors, the bank account details, and a Greek residence permit in cases of immigrants from non-EU countries. The application procedure for a benefit has become relatively easy since computational systems and informatics in the public sector in Greece the recent years have cut back on paperwork. In the words of a social worker:

*Now the supporting documents are not as many as it used to be and we have the ability for an ex-officio request through the public service that has the responsibility to issue them (GR SLB7).*

Apart from the application for benefits stage, and depending on the severity of the problem each case faces, the social services employees can have additional meetings with the beneficiary in order to evaluate their situation, including **short interviews or sessions** with the client and their family and/or home visits; usually people do not open up in the first interview and in these cases, the role of social workers is significant since they must read the situation and seek complimentary approaches. As one frontline worker said:

*Because from a person you do not only see his supporting documents, you also see the person. You record his social history... there people unfold and talk about all the problems (GR SLB2).*

**The frequency of meetings** with clients depends on their situation and how open or conscious they are regarding their needs. An interviewee explained:

*When I see something, that the person has more needs than he realises, maybe I will have more frequent communication so I can give some instructions and mobilise him to do more things on his own (GR SLB5).*

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<sup>60</sup> Depending on the members of a household, the income threshold in order to receive the Minimum Income benefit starts from 1200€/6-month rising to 3000€/6-month for a 4-member household, see <https://opeka.gr/elachisto-engyimeno-eisodima-kea/plirofories/>

**Home visits** are also necessary in the case of court orders, notifications from neighbours or disabled people. After that, the social worker opens a case file including all necessary information about the client and each case and its treatment is discussed at weekly meetings with the staff of the Social Services of the municipality.

The main rationale of **contact with citizens** is to identify their needs. The citizen visits social services in order to apply for a benefit, but social services also evaluate their situation or needs and suggest additional measures accordingly. Their main concern is the appropriate method of help and not only validity or eligibility control.

The social protection scheme resides somewhere between financial aid and social services. Financial aid includes the Guaranteed Minimum Income, Rent Subsidy, Child Benefit and Disability Benefits, all funded by the state budget.<sup>61</sup> There is also some financial aid from church institutions and donations from private donors. The social services include the 'Social Grocery' that provides some basic groceries to the beneficiaries once a month, 'Social Pharmacy' that provides free medicine, sessions with psychologists, free medical examinations, legal and accounting help from volunteer lawyers and accountants, after-school help for children and several other services funded by private companies like the Social Laundry or vouchers for shopping from specific supermarkets. In some municipalities, like the ones in Location 1 and 3, there is also a Social School Service that concentrates on minors' psychological and social problems.

These benefits and services are recommended for the vignette's case, as well. The first recommendation is to check if the family is eligible for the Guaranteed Minimum Income and rent subsidy. Depending on the severity of a father's health issues, he can also apply for a disability benefit. Social workers also focus on a mother's psychological situation, and suggest sessions with a psychologist, both individually and as a family unit, as well.

Regarding **the goals of the system**, every frontline employee, especially social workers, stressed that social assistance policies can be discerned as two pillars: the first one of assistance through benefits and services, and the second pillar of rehabilitation and detachment from the need of social assistance. Following this strategy, Community Centres were created in order to provide high quality services in terms of their approach that will target each person individually and act as "case management" (GR SLB12). This goal was acknowledged and accepted by the scientific community and experts in the field in an effort to help citizens in need to stand on their own feet and overcome their difficulties. In the words of one interviewee:

*As a social worker, I can say that what we want is to mobilise the family and not take responsibility for it because if you take responsibility and provide everything 100%, then they are not mobilized (GR SLB12)*

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<sup>61</sup> The Guaranteed Minimum Income is defined at 200€ per month increased by 100€ for each adult member of the household and by 50€ for each minor in the household. The Rent Subsidy reaches a maximum of 210€ per month (70€ for the beneficiary increased by 35€ for every other member in the household). The Child Benefit starts at 70€ per month for the first child and is increased by 42€ or 28€ for every child depending on the household's income. Disability benefits start at 313€ per month and reach 697€ per month, depending on the disability.

However, the initial plan was diverted and Community Centres became administrative offices that receive applications for benefits. The burden of **caseload** does not allow social workers to work in depth with citizens and offer them guidance to overcome their problems and be independent of the system. As an interviewee explains:

*In the process, the central government, the central administration, began to add a series of responsibilities related to the granting of benefits and so on, and we have reached a point where there are more administrative duties for the staff of the Community Centre, that is, mainly the receipt of applications of the various categories of benefits (GR SLB12).*

Most of the interviewees, especially social workers and psychologists, stressed that both pillars of social assistance in Greece lack resources and strategic planning. On the one hand, there is limited funding for benefits and social services, while on the other hand there is not an organised and institutionalised policy that will guide citizens through, and help them to reconnect with the labour market and society in general. In other words, the system of granting benefits and services is limited to the role of giving aid, but without a specific plan for the reintegration of citizens into society, or a holistic approach that starts with citizens' inclusion in the system and ends with their exiting it.

### 2.3 Frontline workers' organisation of work, routines and values

The **organisation of work** for frontline workers depends on their specific tasks. The workload also depends on the time period since it usually increases during the last days of the month when some benefits expire, or need to be renewed. The renewal of benefits is carried out biannually, while for services, it is annual. In general, in municipalities with an increased population, the needs are much more intense and are expanded to different social groups that smaller municipalities might not face at all. For example, in the metropolitan area, there are Community Centres and social services specifically aimed at immigrants or homeless people. So the burden of work is much heavier than other municipalities. The interviewee in Location 3 gave us some characteristic examples supported by data:

*Indicatively, I will tell you that the Community Centres (in Location 2), because I give the data now for the report to the NSRF, in 2019, we served about 8,000 unique ones. When we say unique, we mean every person visiting us but depending on what transactions he makes with the social service, he may have to come five, six or seven times. So, we are talking about a traffic of around 50,000 citizens (GR SLB12).*

**The caseload** in community centres is much higher than in social services in each municipality because they work as the shopfront. Citizens usually visit community centres first, and if social workers think that their needs can be met by other services as well, they refer them to the main social services of the municipality. So, in community centres, a typical day is very busy with citizens making inquiry visits regarding their eligibility, or even to apply for benefits. A frontline worker usually meets from two to 30 people per day in Community Centres depending on the population of each region and the day of the month:

*The last two days of the month there is the whole accumulation of the public because they want to apply, to prevent losing next month (GR SLB4).*

Sessions with social workers are more time-consuming and their time is limited as a result:

*Five or six sessions a day is a lot, but it is not so much that it exceeds our limits. What I want to say is that it is not happening at all times of the year, and it has never been aggravating, in terms of putting a limit on sessions or anything (GR SLB9).*

Surprisingly, **the supporting documents** that citizens must give do not overburden the social services nowadays. The applications for benefits are all digitalised and a citizen can apply online. The cases that go to Community Centres to apply for benefits are asked to bring only three certificates. The bureaucratic burden intensifies due to the procedures an employee must follow for the registration and follow-up of each beneficiary; certificate checking, application submissions, printing the receipts of applications and creating a case file accompanied with an increased caseload. All these duties make interviewees' daily work monotonous:

*The intense bureaucracy makes it more difficult for me. Every day a lot of people pass by and we have to constantly make applications, print applications, make envelopes, write in a lot of registers. These are the things that make it difficult for me (GR SLB4).*

What interviewees point about their **workload** is not how stressful or tedious it can be, but the effect it has on their relationship with citizens and the fieldwork. There is not much time to devote to each citizen and this results in less time for counselling as well. They stress that although their primary duty should be counselling and guidance of citizens in need, they are restricted to administrative work that does not allow them to adopt a more qualitative approach with citizens. This is more common for the interviewees that work in Community Centres and are more engaged in granting benefits. Interviewees that work in municipalities' social services have more sessions with citizens and/or home visits:

*The truth is that the number of people living on benefits is huge ... that is very little, less time for a colleague to spend on one person and you have ten others standing in front of you, waiting. You cannot do social work at the same time (GR SLB5).*

*I will tell you how the procedure is and how it should be in my opinion. We should make an inquiry about the family, open a case file because other issues might arise (...) But nothing. We accept the applicant who comes to bring us the supporting documents, we open the application with their Social Security number, we submit it with the supporting documents, the application is approved, the decision is made and the applicant leaves (GR SLB5).*

**The consequences of the pandemic** had a direct impact on social services and the organisation of its everyday duties. Phone calls with beneficiaries increased and home visits became more frequent because of lockdown and circulation restrictions. The organisation of work also changed; food deliveries became the norm since indoor and outdoor gatherings were banned. Older people were more afraid to go out of the house, and more citizens reached out to Community Centres and the social services because of the economic impact of the pandemic:

*Especially in the middle of quarantine, it was a lot more natural. It increased a lot, yes. Because people felt more insecure about how we would deal with various welfare services, some lost their jobs (GR SLB10).*

Regarding **the procedures and granting of benefits** in general, there is a formality and follow-the-rules principle, especially in the case of state benefits like Guaranteed Minimum Income, etc. The procedure is highly standardised and eligibility criteria for state benefits like the Minimum Guaranteed Income is controlled through the online application platform without the intervention of employees. So, there is no room for maneuver for frontline workers when it comes to granting benefits. But they can be more flexible with the services provided by the municipality (e.g. social grocery), and/or NGOs. In cases where the income criterion is overpassed but social workers evaluate the situation of the family as very difficult, there is also a more holistic approach; the case is thoroughly discussed in the social workers' weekly meetings, and they try to find alternative ways of helping either by including them in social grocery and food distribution, or by referring them to NGOs or the Church for similar benefits:

*And we also have the laws. We cannot bypass all this. We understand that there is a concern and a problem, but we help as much as we can and we are allowed to (GR SLB10).*

*Because in case of an inspection, should someone ask me why he is included in a social protection program when he should not have been? But in these cases, although they are few, what we do is send them to someone who does not have such strict criteria. There are some NGOs or some other programmes that we do not have direct cooperation with, but which can be addressed by the clients (GR SLB10).*

**Formality in the procedures**, perhaps, is the reason why our interviewees did not mention any managerial pressures. Of course, there is always a typical top-down control, but with a limited impact on employees' work. There are also inspections from the authority that is funding their welfare programmes (especially EU-funded programmes), but they also perceive that as another formality.

They all refer to **teamwork and good relationships** with their colleagues and supervisor as a factor that contributes to their personal improvement, something which has an impact on the beneficiaries, as well. Whenever they have to deal with difficult cases, like taking children away from a drug addicted mother, or helping a family with psychological problems, there is always a type of consultation and deliberation in the social service and the decisions in these cases are collective. They have a close relationship with NGOs,

donors and other state services that could help citizens in a different way. As the interviewers stressed, the money for welfare policy is never enough and collaboration with other organisations is always welcome.

Regarding their **own goals and values**, they usually refer to being a good employee, that is, they follow the rules and the law, are professional and apply appropriate behaviour and solutions. All of the interviewees stressed that their job has certain obligations and they must always follow the rule of law. This is how they understand professionalism, doing their job well by helping people in need. They understand help not only as temporary relief, but also as the empowerment that will motivate people. And sometimes they are so passionate about this that they are willing to bend the rules or engage more with their clients:

*This child fell into the void of law. He was 19, his parents dead and had no income. I talked to the child and told him I will make this move, irregular of course, but I will certify you as homeless, so that you will be eligible for the Minimum Guaranteed Income... Until this child became a student, we continued to help him... first I told him that I would not like to see him out on the streets with drug addicts. There are people around you who will help you as much as we can. I was morally satisfied that I know that when the specific child comes to the office, he will come here, we will talk, he will tell me how he is doing with his courses, how he did, how his studies are going, to find other solutions. There is this relationship. That is, moral satisfaction, this satisfaction cannot be sacrificed (GR SLB2).*

*That is, there are cases that we have fought for years, to mobilise them, to find them jobs... I wanted to teach a woman how to visit her doctor alone. Initially, I drove her there in the car of the Municipality, then I told her I will take you by bus... (GR SLB13).*

In the end, this is what satisfies them; when they know that they have helped someone to get back on their feet, to be independent of the system... "But in general I try to be satisfied with myself, that is, to do the best I can, that is, at least if nothing else" (GR SLB4).

**The frequency of meetings** depends on each case they have to handle. Many citizens want to just apply for the benefit and leave. They are not interested in sessions with social workers or other services offered. Thus, for people that usually visit the Community Centres in order to apply for the Guaranteed Minimum Income or rent subsidy, the meetings are every six months, that is, every time they have to renew their application and the accompanied paperwork. But for cases that face several problems, and have difficulty even in finding food or medication, the meetings are more frequent. This is also the way to better understand the problem and evaluate the circumstances:

*Sometimes I have a more frequent communication so I can give some instructions and mobilise him to do more things on his own... For example, if there is need for psychiatric treatment and he focuses on something "who will shop for me", in this case I have a more regular communication so that I can enter*

*his home to help, to have a relationship so that I can also help more essentially, beyond the practical part that the Help at Home programme can offer (GR SLB5).*

Regarding their **relationships with citizens**, they refer to mostly good and some bad moments. Usually, people that visit social services must handle their ‘injury and insult’ (Schlozman & Verba, 1979); they must confide personal details to strangers and this may make them less willing to cooperate, or even hostile. The hostility increases in cases of cheaters that are asked to bring in additional documents to prove their precarity. The interviewees understand that citizens who visit the social services are people that face severe financial, psychological and medical problems, so they expect hostility and anger when they meet them and explain the procedures to them. In addition, they know that sometimes they are facing the rage or anger of citizens against the political system in general because they are on the frontline, the first contact point of the citizen with the state. This is why whenever citizens learn that they are not eligible for the benefits, outbursts of temper often ensue. Another factor that induces citizens’ disenchantment with the political system and causes these outbursts against frontline workers is the legal inconsistencies of social protection and the available resources. Many frontline workers stressed that there is no stability in the legal framework, and very often the eligibility criteria change. In the words of a frontline worker:

*In general, the problem with the lack of trust in public administration in Greece is that we are constantly faced with a very fluid environment of administrative practices, legislative changes and constant changes of responsibilities and frameworks that make the citizen fully skeptical about whether he did well following solution A or solution B, and whether he will be exposed in one or other case... So, I think that trust is built in a stable environment if we can shape it and move it forward; then it comes from the citizen as well if he sees that the work is really done, done as it should be and there is efficiency (GR SLB12).*

**The lack of resources** is very important, too. For example, Community Centres are funded by the EU, and that funding will end if the Greek state does not secure their funding from the national budget. Another budget-related problem that affects citizen-employee relationships is that most of the frontline workers have temporary contracts, and usually the beneficiaries have to speak with different frontline workers after short periods. This is difficult for both sides since they cannot build a relationship. Finally, there are also cases with mental issues that need different treatment.

**The communication style** is also adjustable and changes not only over time, but with each case. Of course, the general principle is that interviewees must be understanding of and sensitive to people’s problems. But there are also cases where they have to use their authority in order to protect other family members, or the system as a whole. This is the case with cheaters, people who are insincere or over-demanding, and frontline workers must set some limits:

*At the beginning I would say I was more suspicious. Now I try to understand them a little bit and understand why they are here. And see how I can help*

*more... I used to think that whoever comes here will tell me something that is not true. Of course, with all that we have experienced here, but also in cooperation with the colleagues and the interaction with everyone, you understand that you must treat them differently. Because if you are suspicious, the other will be closed too. So even if he has a substantial problem, he is not going to tell you and you have lost the person served and it is wrong. You will not be good at your job afterwards (GR SLB10).*

## 2.4 Trust understanding, sources and functions

**Definitions of trust** differ and expand in a range of understandings that depend on the types of relationships and/or the personality traits of each employee. The interviewees observe that when they manage to build a good relationship with the client and show them that they know what their problems are, then the client will trust them more. Trust depends on expectations, as well; it is not an issue related to the quality of social services offered by the social workers and the community centres, but a set of emotions closely connected to what the clients expect:

*Very often people ask for a psychologist and are very disappointed with what they get from them... I mean for example that parents believe that their children have an issue... and when it turns out that the problem is not with the child but in the family and the parents should come here and not the child, they leave, very angry because we did not help them (GR SLB9).*

There is also an understanding of **trust as a mutual relationship** of the employee with the client. They both have to trust each other; if the client trusts the employee, then they will open up and reveal all their problems, and if the employee trusts the client, they are less likely to be biased, and more likely to listen carefully and suggest the most appropriate solution for the client's problems. Usually, references to this include descriptions about bad relationships or quarrelsome behaviour on behalf of clients:

When dealing with people, you give and you take. All relationships are like this. Well, when the other person is kind, you will be too; when he is vindictive, you will find a way to approach him. Many times we succeed; other times we do not (GR SLB8)

Generally speaking, there is not a default setting for trust or distrust. Frontline workers believe that trust is an important feature for personal and professional relations and they usually say they trust clients; however, trust and distrust coexist in different levels and situations: "...there is trust. At least a minimum, a relevant amount of trust, until it is proven otherwise, when there should be no trust" (GR SLB4). Sometimes, they have doubts and suspicions concerning the veracity of citizens, indirect signs of distrust:

*Not biased, I'm more suspicious. That is, if I hear a lot of words, telling me excuses like: 'I just got out of the operating room or please meet me without an appointment or I'm leaving abroad, make the application now without an appointment or when they start crying, ok no (GR SLB3).*

“With some people, I am biased and sometimes I do not operate properly. This is why I delegate some cases to a colleague...” (GR SLB15). For frontline workers, important components of trust are truthfulness and reliability. If citizens are sincere and can prove their precarity, they will have help, support and sympathise: “Okay, I prefer them to tell me the truth so I can know how much they really need help”(GR SLB2).

*First of all, in the end, trust does not develop because there is not truth. This is a fairy tale. When the other person comes to apply for the minimum income benefit and tells you ‘I cannot do it tomorrow because I am working’ (GR SLB6).*

Trust and distrust are developing progressively through stages; in social workers we can recognise different levels of trust, as well as early stages of distrust expressed with suspicion and bias against citizens:

*Especially people with disabilities, I think it is obvious when they are not sincere. And when they pretend and when they talk seriously... It has to do with the person in front of me and his reactions... reaching the limits of trust is a great think. I have it in many times, but I don’t have it too many times (GR SLB11).*

**The role of experience** is important, as well. The more experienced frontline workers are, the more trustful they become. Experience gives them the necessary resources to better understand the person they are dealing with and the knowledge to investigate and handle a situation:

*Experience plays a very important role. You are more comfortable, you have experiences. That is, I will now go to the first visit and collect more things than my first years and I had to make more visits. Now from the first visit or meeting, I can understand something more. Experience has helped me to better understand some things, to better capture the other’s feelings because I can have more confidence in myself (GR SLB13).*

Also, **the role of time** proves important for the development of trust and it is usually reciprocal between frontline workers and citizens. Many frontline workers said that the more often they meet with citizens, the more trust they have in each other because they develop a relationship that requires honesty and reliability on both sides. The role of time is also important for the interviewees that are less trusting, or who do not trust by default. Social workers explain how trust develops. The role of time is important in trust building from the side of citizens towards the welfare system and the social services: “Over time, families themselves gain trust and learn to turn to us...” (GR SLB13).

**Distrust** may also appear as an outcome of xenophobia and/or racism; when the discussion concerned trust for beneficiaries and their reliability, interviewees primarily referred to their suspicions regarding immigrants. Many of them express opinions that citizens with a migratory background are welfare cheaters who try to exploit the social services by tricking the social workers and bypassing the legal criteria. The perception that foreign fraudsters abuse the welfare state and social services is widespread. Social workers who share this perception wish to exclude clients with migratory origins from

the welfare benefits in order to protect the trustworthy Greek native beneficiaries and the upright taxpayers:

*Let's say because I told you before that a large percentage are people from Albania, what do we find out? Here it has to do with a culture that 'I deceive you because I want to get the money'. Okay? So, it has nothing to do... while there is mental potential and autonomy, there is a culture that 'I deceive you because I want to get the bonus' (GR SLB6).*

**(Dis)Trust is based on personality traits**, as well. Within the area of interpersonal trust, there is a relationship between personality and trust: "In general, I could say that trust is... in general and I, as a person, do not trust easily. I want to know someone well first in order to trust them, I want to be able to shape an image of them" (GR SLB2). There is also a sort of distrust imposed by the system and its limitations; although frontline workers put effort into helping people, they do not have the resources to make real difference for beneficiaries. And this is something that citizens acknowledge, too. As a frontline worker said:

*You cannot build trust. Especially when it is in a very fluid environment and in very poor living conditions. There, I find it impossible to convince the other that what is happening is something that will end well at some point for him, right? It has to do with the living context, the services provided and what everyone faces and whether it helps them take it one step further (GR SLB12).*

These systemic limitations also affect trust. The way the social assistance scheme works, especially through Community Centres, is not properly designed and lacks resources and perspective for continuity. As frontline workers say:

*As long as there is something auditory between us, which will be, for example, the controls of the supporting documents they bring us, the other person cannot have absolute trust (GR SLB10).*

*So, we want suitable spaces, adequate staffing, appropriate division of work - each employee has duties according to their expertise - and training. 'Train us systematically' (GR SLB6).*

In the case of **client-oriented factors**, most of the interviewees express their suspicion towards citizens in terms of precarity and the need for help from the state. They discern between people that are not very cooperative, or who are highly suspicious themselves towards the state mechanism, and people that want to take advantage of the 'system', who apply for benefits and are eligible because they do not reveal the fact that they are working, etc. In this case, their main target is immigrants without excluding from this category their fellow Greeks, as well. The general factors of distrust are associated with specific obstacles they are facing, like low funding, understaffed services, difficult procedures, etc. Distrust is directed towards individuals, abstract systems and mechanisms.

Regarding **frontline workers-related factors**, there are societal factors that include general feelings of prejudice against people who exploit social assistance and different aspects of their profession that affect their relationship with clients. Frontline workers ex-

pressed distrust vis-à-vis clients, but mostly feelings of distrust are directed towards specific categories of clients, such as clients with a migratory background who “will try to exploit the market as we say...” (GR SLB12). Front-line workers differentiate between their feelings of sympathy for someone from their attitudes of (dis)trust. Low levels of sympathy for some clients are not an indicator of distrust: “There are people... who I dislike. Because they are rude, because they are bad-mannered, because there are thousands of reasons. But since they deserve it, they will get it” (GR SLB8). Frontline workers believe that sensitivity is an inherent component of their work duty. The fact that they are in personal contact with citizens creates conditions of mutual trust: “When you work with other people in-person, I think that a part of distrust stops” (GR SLB15). From the side of frontline workers, trust and distrust coexist; on the one hand because of their experience and expertise, and the fact that their job is based on a person-centred relationship. On the other hand, frontline workers feel confident about their feeling of (dis)trust vis-à-vis their clients. Among frontline workers, trust seems to be at a higher level than distrust. They do not place a strong emphasis on distrust and we did not recognise a fundamental distrust towards their clients.

**Distrust causes** tension and suspicion that, in the end, harms citizens. Trust, on the other hand, empowers citizen-employee relationships and this is in favour of the citizen. Trust in citizens is part of a humanistic perception of social work. People who choose social work as a profession are motivated by the attitude of helping others, something that remains a stable aspect of their professional identity (ibid). Trust minimises the limitations or barriers of bureaucracy, and makes decisions easier and more essential:

*They tell us literally: ‘I trust you, you know’... We really experience this every day, to know that they trusts you for the way you are going to behave, that you are not treating them bureaucratically and administratively... (GR SLB3).*

In other words, trust reduces the complexity of welfare systems and makes the decisions of social workers more acceptable for the beneficiaries of social care services.

### 3. Interviews with citizens using social assistance

#### 3.1 Social background of interviewees

Following the research design, we referred to interviewees that have minors to support. The marital status differs, but there is a balance between married and divorced or single women. Their poverty problems appeared after most of them lost their jobs, or closed down their business. Many of them told us that the economic crisis in Greece caused severe financial problems and had an immediate effect on the labour market that only increased during the pandemic. None of them had tertiary education and they all had precarious jobs. Many told us that they had changed jobs often because the wages were very low, and the jobs they could find at that time were equally low paid. Another problem of the labour market, and social policy in general, is the way they treat pregnancy and motherhood. Many of the younger women we interviewed had lost their jobs because of a pregnancy, or left their jobs because they did not have help with their children, thus commenting on another deficiency in the Greek social care system.

**Regarding their political attitudes**, most of the interviewees have little or no interest in

politics, and they are generally reluctant to identify with a political party. Some of them claim that they do not vote regularly, but even those who occasionally exercise that right, vote for the party that they voted for in the previous election. There are a couple of exceptions of interviewees that identify with a political party, driven more by early political socialisation than by ideological affinity:

*Look, everyone in my family was right-wing; this is an important determinant of what you will be later in life, don't you think? This is what I learned: everyone in my family always voted for New Democracy, so I vote New Democracy, as well (GR CIT11).*

But for the majority of interviewees, there is a **lack of interest in politics** coupled with a rejection of all political parties and a diffuse distrust in politicians and politics in general:

*No, I am not interested at all in politics. I do not believe in politicians at all. I believe that whoever is elected will do the same with minor differences; they are all the same [...] For me nothing changes. I honestly do not believe in any of this (GR CIT3).*

For a couple of respondents, rejection of mainstream politics is accompanied by **support and an expression of trust towards small, or even fringe, anti-establishment political personalities and parties**:

*(about Kyriakos Velopoulos)<sup>62</sup> Yes, from what I 've seen, through his speeches, etc., he is also interested in the common person, not for those above; I don't know--he is also interested in education, in matters of religion and generally in our homeland. He is interested and wants to help (GR CIT5).*

*Ok, when I was younger, I voted for a specific party because the family voted for it. I was not into politics to tell you the truth. No, the people that are now in power are worthless; I mean every time they are in power, they mess up [...] Now there is a new movement, that one, yes, I feel I can trust them [...] It is called T.O.L.M.A. [...] Kolyvas, a former journalist founded the movement; he is a patriot and I feel I can trust him. I hope he gets elected to parliament (GR CIT15).*

However, the most common response is the rejection of all parties and politicians, and an expression of **distrust towards them**. The most common factor that emerges as a driver of political distrust is the perception that corruption is endemic to national politics in Greece:

*All politicians are tempted by and succumb to corruption. No matter how righteous you are when you start out, at some point you will get corrupted. So, I do not believe in politicians; it is very hard (GR CIT2).*

In terms of **attitudes towards the European Union**, the interviewees are more divided.

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<sup>62</sup> Velopoulos is the founder and leader of the far-right wing party, Greek Solution. He is now an MP in Parliament, where his party holds 10 seats.

Most people acknowledge that the Greek government is constrained by its EU membership and cannot deviate a lot from signed agreements. However, on the question of whether Greece should be part of the EU, views are more divided. There are those that view membership in the EU as generally beneficial, or at least as a necessary evil, for both economic and foreign policy reasons. But EU membership, whether positive or negative, is evaluated across the board from a purely instrumental and national perspective. For example, some interviewees value EU membership in terms of the potential protection it offers against Turkish aggression:

*I would prefer it if Greece had never adopted the euro, if we had kept our own currency, because it did not do us much good. On the other hand, I think they can be helpful at times, like now against Turkey. That we have someone to back us a little [...] I don't know, I don't completely trust them, but they are better than nothing (GR CIT11).*

Others are more unambiguously Eurosceptic in stance:

*We should have never entered the EU, there was no reason to do so [...] Because we are fine on our own; we would have been one of the richest countries. We have so many good things here and we degraded everything, and for what? (GR CIT1)*

*I believe we would have been better off if we had exited the EU. It would've been hard at first, but as a country we've been used to hard times. So, I believe that later we would've been better off as a country, and we would have no one to boss us around. There was no need to sell off so many things that belonged to our country (GR CIT13).*

Overall, there was an absence of purely Europhile attitudes or expression of trust towards the institutions of the EU. Attitudes towards the EU more or less ranged from a grudging acceptance of dependence on and the necessity of EU membership to openly Eurosceptic attitudes.

## **3.2 Applying for benefits and services and opinions on the social assistance system**

### **The process of applying for social assistance**

Social assistance can help citizens to get long-term economic help such as Guaranteed Minimum Income or medical care. They can also provide spot benefits to pay housing rent, household utilities (such as food or school assistance). Social assistance frontline workers can provide help to fill out forms to get a job, or get weekly/ even daily food packages. In the case of mental diseases, social assistance provides psychological support for children and adults. The interviewed citizens report to have benefitted from the Guaranteed Minimum Income, the unemployment benefit, the family/child benefit, house-rent benefits but also other services provided by the municipality's social services such as the social grocery, social clinic/pharmacy and social coaching school for children needing support in their school lessons. Furthermore, some respondents profited from

working with the psychologists of the community centre (family advisory service) and were helped by the job advisors to find job opportunities.

Most of the respondents report that they receive the above benefits every two or three months. The housing benefit and the Guaranteed Minimum Income is provided on a monthly basis and is renewed every six months. The interviewees report that the **criteria** are mostly economic ones and that they provide documents to social assistance frontline workers when they first apply for social assistance. For benefits concerning financial aid, all **documentation** is usually verified electronically. Some of them report that they need to provide some documents every year in order to prove that their family situation has not changed. More specifically, the respondents need to provide 'tax certification', and a document proving the economic situation of the household every year. They also must provide a certificate proving marital status, the certificate of unemployment and their rental contract. For other benefits mostly connected with health problems, citizens need to provide documentation from doctors. The interviewees also report that they had to fill out and submit forms to access services such as job grants or housing. Most of the respondents have not had **regular meetings** with social assistance frontline workers, but several of them report referring to social assistance every time they need help. The respondents visit employees in social assistance offices, but in the case of social workers, it has been reported that the social assistance frontline worker goes to the citizens' home only if it is necessary. The purpose of these **home visits** is to examine situations of extreme precarity, reports from neighbours regarding sexual harassment, abuse or the neglect of young children. In case of psychological support, citizens do not need to provide documentation. Social workers suggest that several families need to be supported psychologically when they confirm family problems. Respondents have confirmed that they need benefits to be extended on time and to be more generous in order to recover from problems, and generally, that payments arrive on time.

Concerning the content of the interviews, respondents have admitted that the atmosphere of the interview was neutral (indifferent). Some interviewees have described the procedure as "terrifying" (GR CIT1) because of the queues and the number of citizens applying for benefits, while others that applied electronically found the procedure easier.

### **Interviewees' opinions on the procedures and the system**

Interviewees' opinions on **the passive aspect of the system**, namely procedures and the way the system treats them, are split into two parts, in positive and negative opinions. Concerning their overall **opinion on the system**, citizens' negative opinions started with the view that the system's procedures seem to be time consuming and stressful when the outcome is rejection:

*It is stressful because when you get nothing from what you expected, you say: 'How will I survive?' When the expenses run, when you do not have resources from elsewhere.... You say: 'What do I do now?' (GR CIT1).*

Furthermore, citizens are not satisfied with the general organisation of the social assistance system, specifically of the central social services; in particular, they refer to the bureaucracy and how time-consuming it is since in some cases, as they report, they have

to visit the community centres multiple times in order complete their application: “I don’t want to take leave ten times from my work to do procedural jobs” (GR CIT11). They also report problems concerning the discontinuity of assistance, continuous changes in legislation and the need for more benefits. The more intense negative sentiment is that of **injustice and the system’s failure to respond to citizens’ demands**. Citizens think that most of the benefits are provided in an unfair manner, especially in favour of the immigrants who are perceived to be more privileged. This sentiment is converted to a sentiment of anger towards ‘others’. Some examples here are indicative of this sentiment of anger. An interviewee suggests that foreigners take precedence over Greeks when receiving particular benefits:

*[I was rejected] from the benefit that all Albanians and foreigners receive. I have to share it with strangers, right? We all know that they get it, too. And there is another family, mum is Greek, too, she was deprived of the benefit so that others could take it. That yes, it's a little annoying. I'm not a racist, but they make me a racist, right? (GR CIT7)*

*I may be judged as a racist, but I don't care at all. All foreigners receive so many benefits while Greeks are excluded from them. I don't want to see the homeless Greek, the grandmother, the grandfather, to be on the bench and the immigrant, the illegal immigrant, whoever, keeping all the benefits (GR CIT4).*

Although there are no special privileges for immigrants and the eligibility criteria for social protection and benefits are the same for all citizens, there is this diffuse perception that immigrants are benefitted at the expense of Greek citizens. The argument that supports this perception is that immigrants work but do not declare their income so they are doubly benefitted by avoiding taxation *and* being eligible for benefits.

Conversely, several citizens have positive opinions about municipalities’ social services and they consider the procedures as well organised, appreciating in particular the support from social workers in the accomplishment of various procedures; they also perceived the new electronic procedures as positive since bureaucracy is reduced. Along the same line, they see frontline workers as part of a system that is helping them. Furthermore, several citizens see the ‘Covid 19 pandemic’ as an opportunity for the whole system to get modernised and become easier and more flexible in meeting citizens’ demands:

*For now, and during the Covid period, things are easier because everything is online, you don't have to go there, to the social service spot (GR CIT1).*

Concerning the **active aspect** of how citizens regard social assistance services, there is some differentiation between positive and negative opinions, as well. On this aspect, some of the citizens seem to feel better when they understand the problems of the process, or when they find what confuses them (e.g. online processes); others judge the system positively, and perceive that frontline workers are part of the social protection system when they have a closer relationship with an employee. It seems that close relationships with employees make citizens feel that the system is effective and helpful for them:

*When I had just divorced, I was alone with two very young children, one baby. I had some free and private sessions with a clinical psychiatrist. We also did parental advising for two and a half years. I would not exist without this woman. This woman gave me advice and managed to put us all together (GR CIT10).*

Among the **positive opinions**, we find that several citizens manage to be more active towards the system. They get informed in order to be more updated and more competent to face the system's needs on their own. In particular, one interviewee believes that the procedures are specifically designed to make citizens without IT skills and knowledge regarding social protection frustrated, but if someone thoroughly searches the eligibility criteria and the procedures, the application and renewals can be easily completed online. As he states:

*I don't remember when I started, but I got informed and educated and everything I do now, let's say, the renewals and all that staff, I do it by myself. People don't care for it. I've been searching and I can now do little things online and I can do them from home; this is comfortable (GR CIT7).*

On the opposite side, respondents often believe that they have to insist on getting an appointment. In these cases, citizens feel the procedures they have to follow to get help are complex and that they need some 'external help'. When that feeling comes up, they state that they need to violate the rules. An indicative experience is that of an interviewee who describes how she convinced a social services guard to allow her to enter the building without the necessary appointment in order to see the appointed employee to help her fill out the documentation. Less frequently, citizens seem to get angry and quarrel with frontline workers.

Finally, citizens have a twofold **attitude about the procedures and the system**; they state that the system needs to get seriously reformed organisation wise in order to ameliorate and be well targeted, but they also recognise the need for a reorientation of the social protection system. The former refers to wrongly targeted social protection that either benefits people who do not really need help (welfare cheats), or benefits immigrants who do not deserve help.

*They do not pay attention to the Greek, no, they do not take care of him as much as immigrants. And the illegal immigrants who step on their foot here cannot receive benefits and we cannot get anything from the state, neither divorced women nor widows (GR CIT12).*

*Yes, I want to have more, more control so that those who really need it get help (GR CIT12).*

The latter is more specific and important in the sense that it highlights the acknowledgement on behalf of citizens that **social care must have a specific goal**: to help beneficiaries stand up and be independent of social protection. Many interviewees of younger

cohorts expressed their will to find a job in order to stop living on benefits and to give the chance to other people as well to be included in social protection.<sup>63</sup>

*To help them for a while until they find a job, not to get the benefit and to sit because they also do that...I do not know how they will do it. To say from now until then, I give you this money, but you also have to do something in return: go find a job (GR CIT15).*

*They sit, do not work and they receive benefits that someone else who may really need them cannot get (GR CIT12).*

### 3.3 Relations with frontline workers

In general, citizens call social assistance frontline workers by their last name when there is a standard employee who is cooperating with them. Otherwise, they use the professional identity of the employee who is taking care of the problem. It seems, though, that there are cases, such as at the social grocery, where citizens have more intimate **relations with social workers**. The experience of an interviewee is indicative:

*Yes, we are at ease there. That is, I will say to her, 'How are you doing, N.? (first name)' 'Where are you, bro' she tells me. I mean, what a joy to go over there because we discuss some other things (GR CIT7)*

Last but not least, many interviewees refer to the employees using words describing their personality, and underscore how specific traits are appreciated (kindness, helpfulness).

**The frequency of meetings** with social assistance depends on the problems that citizens are facing. Respondents report that they contact social assistance frontline workers usually when they need to refresh the documentation concerning the benefits they are receiving. There are citizens who regularly visit social infrastructures to receive services, such as the social grocery in order to take food. Fewer citizens report that they visit social services independently when they need information, help or support. During the Covid-19 pandemic, most of the meetings were cancelled, or were conducted by phone. As already reported in the previous section, citizens from Location 2's smaller municipalities report that they can meet/call social assistance frontline workers any time they need them. Most of the interviewees have been attending social assistance services for several years, especially in cases of health/mental problems, chronic poverty or drug addiction, issues that require continuous care at different stages of life. Generally, citizens positively evaluate the level of discretion of social assistance frontline workers in

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<sup>63</sup> While writing this report, a new expansion of the law regarding the Minimum Guaranteed Income is implemented with the connection of benefits with actions for searching for employment. With this new provision, all beneficiaries aged from 20 to 60 receiving the Minimum Guaranteed Income for at least 12 months must visit their employment advisor for job hunting, otherwise their benefit will be reduced and eventually will be lost. Details in Greek here: <https://opeka.gr/elachisto-engyimeno-eisodimakea/plirofories/>

treating their cases, even if they understand that they belong to a system and they have to follow strict rules.

Citizens report different **experiences with social assistance frontline workers**: positive, neutral and negative. The majority of interviewees highlights that the importance of having a good relationship with social assistance frontline workers depends on the personality and behaviour of employees. Citizens seem to see the social worker as a person who wants to respond to citizens' demands. In fact, what they say is that the main point is the role that frontline workers play in solving citizens' problems. Professionalism is the characteristic that citizens acknowledge as an advantage for frontline workers and they refer to good professionals for the employees with whom they have developed good relationships. In particular, they refer to employees as being helpful, supportive and friendly:

*I went crying in the social service and I fainted. And this girl [the frontline worker] took me, locked me in a room without an appointment, without anything and I told her all about my life. Without her, I would have fallen down. We discussed everything and she told me: 'Whatever you want, I am here any time you want.' This is enough for me (GR CIT10).*

Another **positive aspect in the relationship between citizens and frontline workers** is the personal relations they develop. The personal character of the relationship creates an atmosphere of mutual comprehension and contributes to the identification of the problem/s and how to reach the best solution for citizens. In these situations, the relationship between citizens and frontline workers is characterised by a deep understanding of problems. It is indicative that interviewees describe this kind of personal relationship with some humour.

Fewer citizens report a **neutral/distant or indifferent relationship** based on the fact that they have formal relations with their social assistance frontline worker. This relationship does not seem to be negative but rather formal, yet is still responsive to their needs. One respondent reports a very pragmatic and distant relationship with social assistance frontline workers, saying: "I contact them only if it is strictly necessary and as little as possible" (GR CIT11).

Finally, a few citizens experience a **conflictual relationship with social assistance workers** when they do not manage to contact them, usually by phone. During the pandemic, the appointment with social services became a necessary step in order to avoid gatherings in public services. In fact, usually citizens report that they have not been able to obtain what they wanted and they believe this is due to the frontline workers '*who don't do their job properly*'. In this type of relationship, citizens consider that frontline workers underestimate them and this is perceived as an obstacle to accessing what they believe is their right. One interviewee described her experience in a very negative way. What she reports is the sentiment of underestimation by the frontline worker:

*So, I give her the paper, and she looks at me with a certain style meaning that I am everything and you are nothing. And she comes back and tells me to go upstairs and bring her the photocopies. When you look at the other and you show no respect for their work, it is like you say that you are nothing, go and bring me the paper (GR CIT7).*

In general, the perceptions of front-line workers are very positive according to the majority of citizens. Interviewees consider them as helpful, professional, kind and willing.

Regarding **communication with frontline workers**, the most appreciated feeling concerns their **professionalisation** and the **willingness** to help citizens, provide the documentation needed and to explain the procedures to be followed. Many interviewees want to personally thank social workers by name because they appreciate their friendly and helpful approach, due to the fact that they feel understood.

### 3.4 Trust understanding, sources and functions

Interviewees' **definitions of trust** employed centred mostly around understandings of trust as truthfulness, reliability and help giving. Here are some representative quotes that correspond to definitions and understandings of trust:

*Trust means that I will go there and that person will tell me something that is valid. That person will not try to fool me but will try to guide me and help me to accomplish my goal because this is what it means to be a public servant (GR CIT1).*

*Ok, trust for me is to have a person sitting across the table that you can accept anything they tell you without reading into it, or needing to "filter it" somehow. You just accept it the way that person tells it to you (GR CIT3).*

*Trust? Trust is when you tell someone the truth (GR CIT5).*

A couple of interviewees used the word 'respect' when giving their definition of trust, implying that trust is a mutual relationship that is built on reciprocity and confidentiality:

*Trust is respect, that is where it all comes from. When you know that the other person respects you, whatever condition you might be in. This allows you to trust the other person (GR CIT10).*

*Trust is, I believe, probably something related to respect. To respect that the other person trusts you enough to tell you something and that you keep it inside. This is what I believe, I cannot define it in a different way (GR CIT9).*

*Well, trust means that there is respect, honesty, that there is a belief in the abilities and virtues of the other person. This is what I think, and when there is no trust, the vacuum is filled by power or war (GR CIT11).*

For one interviewee, trust is equated with safety: "[Trust is] to feel secure. To be able to feel secure. I don't think I can feel secure" (GR CIT6).

One of the most common themes that kept coming up in the interviews concerned the locus or **subject of trust**. For most interviewees, trust is not something that can be easily experienced, or even expected, outside the family environment where family members are automatically trusted:

*The only person that will never betray me is my mother. For that I am a hundred per cent certain. As for everyone else, well, you know... (GR CIT15).*

*Well, ok, trust exists only within the family, you trust your husband, your children, that's it. If someone says that there is trust outside the family, well they are probably lying a bit. You always worry about tomorrow (GR CIT13).*

Others share the pessimistic belief of generalised distrust where trust becomes something unattainable, even within the family, or it requires a lot of time to be built:

*Trust is a word that should be removed from the dictionary because [...] it doesn't exist and I don't think I could feel trust in any domain of life anymore, not even among friends, not even in the family, nowhere [...] Trust has been lost even within families, so it's lost everywhere (GR CIT8).*

*Trust is a great thing. You cannot even trust your own mother, so to speak. Trust is something that is built slowly, not after five meetings (GR CIT7).*

Another common thread throughout the interviews is that **generalised distrust** or distrust towards politicians and the state is repeatedly contrasted with expressions of trust and generally positive evaluations of street-level bureaucrats in welfare agencies. In other words, when talking about society in general, and more distant and abstract governance structures, distrust is generalised and becomes the default setting. However, experiences with front-line workers are generally positive and seem to facilitate the building of trust, even begrudgingly, at least on a the personal level:

*Ok, I wouldn't exactly use the word 'trust' because it is a bit high-sounding, perhaps I would say that there is some effort on their part to help because after all, that is their job and what they're paid for (GR CIT8).*

*Certainly, I go there feeling less stressful. I have no stress about what kind of people I'll meet, whether they will be pleasant or look at you with suspicion. It matters a lot that they know me and I know them. I mean they have become familiar faces. It is like I step into my home; I do not feel bad or anxious going there (GR CIT11).*

However, trust in frontline workers is disputed whenever they are faced as public sector employees. In Greece, there is a generalised feeling of distrust towards public sector employees because they are thought to be more privileged in terms of wages, working conditions and social security. In that sense, there is a distrust function towards frontline workers that is not merely based on specific events or behaviours, but as an outcome of this perception, which might conceal resentment and citizens' anger towards frontline workers. As one citizen puts it:

*And not all of them understand that we pay them. They should do their job much better because in fact they are also employees and they are our employees... They try, and again I say that some do their job well, as much as they are allowed; others treat you very indifferently because they think they have their position and no one can control them... (GR CIT6).*

The main source of focused **distrust towards the welfare system** for most interviewees, irrespective of the amount of social assistance they receive, relates to a perceived prioritisation of foreign recipients of welfare. The majority of the interviewees felt wronged by the treatment of foreigners and their inclusion in social protection, who are generally not considered as equally legitimate recipients of welfare:

*We are full, I mean you go to the Social Grocery Store or some other social service and it's full. First you have to generously help Greeks and if there is something left, then sure, let's give it to some other people (GR CIT6).*

*We all know that foreigners receive welfare. I know a Greek mother who was refused help so that foreigners can get it. This is a bit disturbing. I am not racist, but they are making me into a racist, are they not? (GR CIT7).*

Interviewees mostly place the blame on politicians and the European Union for this state of affairs. A common interpretative frame among the interviewees sees the European Union channelling money through the Greek state primarily to immigrants and refugees at the expense of native Greeks:

*[Q: Does the EU contribute to create a better standard of living] A: For the Greek citizen, no; for the refugees, yes. I know very well that refugees stay in my apartment building, who are Muslims as well, and the state pays their rent and gives them money to live [...] they probably get funds from the EU for this (GR CIT9).*

Another common grievance has to do with the low level of financial aid they receive. Most argue that benefits are not enough to cover their basic needs, but also that they cannot cope without it. Most interviewees seem to acknowledge that frontline workers are trying to do their best to help them with limited means and within the confines of a bureaucratically rigid system. However, connection with frontline workers on a personal level seems to be unrelated to the high levels of political distrust towards the political system and the Greek state at large.

It is also important to notice that the abovementioned generalised distrust towards the political system, although it does not affect citizens' trust in frontline workers, functions or results in distrust towards fundamental aspects of the political system, like legislative power. In some cases, citizens question the validity or even fairness of the implemented laws, showing that trust and distrust coexist at different levels, and the existence of trust at a lower/personalised level does not affect rising feelings of distrust at a higher/systemic level:

*Yes. Look, I do not know why I should associate this (meaning the trust relationship with frontline workers) with trust, but yes. Let's say when I came here to make my applications, he explained to me exactly what to do, where to go, what to watch out for. That is, here yes, I can say that I trust the Community Centre, let's say absolutely ... But you do not know a law, it is not always fair. It serves other interests, so how can we talk about trust? (GR CIT2)*

Finally, although there is diffuse distrust in the political system, political parties and politicians, citizens still trust the state - to a certain extent identified with their personal experiences of public services - and its ability to help those in need. The state in this case is perceived as the mechanism that, despite its deficiencies and the way political parties are manipulating it, can provide the essentials, or a basic income, for precarious citizens:

*But okay, we trust. We will trust the state at some point; we trust that it helps us - because for us it is help. This A21 (child benefit) is a lot of money, not 50 and 100 euros, a lot of money is 560 euros. It is a help, a breath for us... If you do not see them doing things, you cannot have trust. There is no trust in them... (referring to political parties and politicians) (GR CIT13).*

#### 4. Summary and conclusions

- The social protection system is limited to an aiding role without a specific plan about the integration of citizens, or a holistic approach that starts with inclusion in the system and finishes with citizens exiting it (although a new law is now implemented in Greece that connects eligibility for the Guaranteed Minimum Income with actively searching for a job). The burden of administrative work does not allow social workers to work in depth with each citizen, offering them guidance to overcome their problems and be independent of the system. Regarding the procedures, there is a formality and follow-the-rules principle, especially in the case of state benefits like Guaranteed Minimum Income, etc. In cases where the income criterion is not valid, but social workers evaluate the situation of the family as very difficult, there is also a more holistic approach.
- Building a good relationship with the client, as well as having empathy towards them are fundamental for trust. There is also an understanding of trust as a mutual or reciprocal relationship of the employee with the client. They both have to trust each other in order to have a fruitful relationship to the benefit of people in need. Distrust appears in many cases as an outcome of xenophobia and/or racism; feelings of xenophobia and prejudice against migrants enhance distrust vis-à-vis foreign workers and beneficiaries of social services. Citizens with a migratory background are perceived as welfare cheats who try to exploit the social services by tricking the social workers and bypassing the legal criteria.
- The general factors of distrust acknowledged by front-line workers are associated with specific obstacles they are facing, like low funding, understaffed services, difficult procedures, etc. Distrust is directed less towards individuals, but more in abstract systems and mechanisms.
- For the majority of citizens interviewed, there is a lack of interest in politics coupled with a rejection of political parties and diffuse distrust towards politicians and politics in general. For some respondents, rejection of mainstream politics is accompanied by support and expression of trust towards small, or ever fringe,

anti-establishment political personalities and parties. In terms of attitudes towards the European Union, the interviewees are more divided. Most people acknowledge that Greek governments are constrained by membership in the EU and cannot deviate a lot from signed agreements. However, on the question of whether Greece should be part of the EU, views are more divided. There are those that view membership in the EU as generally beneficial, or at least as a necessary evil, for both economic and foreign policy reasons. But EU membership, whether positive or negative, is evaluated across the board from a purely instrumental and national perspective.

- Concerning their overall opinion about the system, citizens' negative opinions start from the perception that the system's procedures seem to be time-consuming and stressful, especially for those who do not have IT/computer skills. Furthermore, citizens are not satisfied about the general organisation of the social assistance system. They also report problems concerning discontinuity of assistance, continuous changes in legislation and the need for increased financial aid. The most intense negative sentiment is that of injustice and the system's failure to respond to citizens' demands. Citizens think that most of the benefits are provided in an unfair manner, especially favouring immigrants who are seen as being more privileged.
- Concerning the active aspect of citizens regarding social assistance services, there is a twofold attitude: they state that the system needs to be seriously reformed organisationally wise in order to ameliorate, and they also recognise the need for a reorientation of social protection. The latter is more specific and important in the sense that it highlights the acknowledgement on behalf of citizens that the inclusion in social care must be limited and have a specific aim: standing on one's and being independent of social protection are the ultimate goals.
- The definitions of trust employed by the interviewees centred mostly around understandings of trust as truthfulness, reliability and help giving. There is a shared belief that trust is primarily located within the family, but this is accompanied by a default setting of generalised distrust where trust becomes something unattainable, even within the family, or that building trust requires a great deal of time. In other words, when talking about society in general, and more distant and abstract governance structures, distrust is generalised and becomes the default setting. The main source of focused distrust towards the welfare system for most interviewees relate to a perceived prioritisation of foreign recipients of welfare. Another common grievance has to do with the low level of transfer and benefits. Connection with front-line workers at the personal level seems to be unrelated to the high levels of political distrust towards the political system and the Greek state at large.

Overall, although citizens and frontline workers recognise the reforms implemented in social protection in Greece during the past years, especially regarding the digitalisation of services, there is a common feeling of disappointment. Frontline workers believe that

they do not have the necessary resources to efficiently stand by those suffering, and acknowledge the need for a more active social policy that will motivate citizens to overcome their problems. On the other hand, citizens understand the overburdening of social services; they acknowledge the lack of counselling sessions and stress the importance of control in order to avoid unfair and unjust targeting. So, what emerges is a rooted mistrusting attitude from both agents – frontline workers and citizens – despite the decrease of fragmentation and the simplification of processes. Although it appears as a paradox, research on political trust and public policy change in Greece (Exadaktylos & Zahariadis, 2013) concludes that, among others, the lack of information and limited interaction with citizens disrupt trust and thus acceptance of policy implementation. Another important factor that is connected with trust, common in the narratives of both frontline workers and citizens, is blame attribution for the malfunction of social protection policies. When it comes to responsibilities and blame, there is a profound agreement on how politics failed to structure or manage social protection. On behalf of frontline workers, the critique is more coherent and concerns specific policies and measures implemented. But citizens are more cynical and blame politicians for everything that is troubling them. There is diffuse frustration and disenchantment with politics, and simultaneously specific support of state politics and the foundation of its welfare commitments. There is also a reciprocal perception of distrust imposed by the system, that was more obvious in frontline workers' attitudes; citizens do not trust social services employees because they represent the unfair public policy mechanism, and front-line workers do not trust citizens because of a rooted belief that they want to take advantage of the system. Finally, profound anti-immigrant attitudes prevail in both groups; these attitudes mostly target immigrants from neighbouring countries (especially Albania) that are integrated into Greek society, although there are referrals to special funding or privileges of immigrants and refugees in general. Perhaps we could attribute this generic xenophobia to the prevalence of the refugee crisis over the past four years in Greece, but there is also evidence of this desired welfare chauvinism and the "claim for what is rightfully Greek" (Drymioti & Gerasopoulos, 2018).

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# A “Tale” of an Asymmetrical Relationship: Trust and Distrust building in the Social assistance frontline workers/citizens interactions in Italy (The Tuscany Case)

Francesca Gagliardi, Francesco Marangoni and Andrea Bilotti

## 1. Introduction

### 1.2 Welfare state regime and the organisation of social assistance in Italy

With the advent of modern societies, support for the development of activities necessary to face daily life has been institutionalised in a process that has radically transformed individual interventions in favour of the family, health, etc. Also in Italy, in the second post-war period in particular, a territorial model offering public welfare services has been consolidated. Compared to the rest of Europe, a so-called "traditional" model has been developed, characterised by a low supply of public services, whose development has been strongly marked by the presence of Catholic culture. In this model, assistance and care have mostly been delegated to family responsibility, flanked by a significant presence of social workers from the private sphere. This is also why the national welfare system is still heavily biased towards monetary benefits to the detriment of services. The development and organisation of Italy's welfare system is closely linked to the functioning of the state, which is divided into three territorial levels: central, regional and local. From the point of view of institutional responsibility, the current Italian welfare system is organised on three delivery systems: health services whose responsibility lies with the Regions; social security benefits of national public bodies; social services planned and managed by municipalities in connection with local third sector bodies and other private entities.

The birth of the national social services system lies in three cultural models that gave rise to explicit and implicit patterns of functioning of welfare organisations: 1) the welfare model that derives from the historical tradition for which a service can be provided in favour of a specific need situation; 2) the bureaucratic model that refers to the evolution of modern states for which a service can be provided with reference to a legitimate right through standardised procedures; 3) the professional model for which service is a result-oriented service that can be validated through technical competence. These three systems coexist with each other and influence work processes, organisational styles and behaviours, and the ways in which entities operate. Among public bodies, the main role in the organisation and the delivery of services belongs to the Municipalities (Presidential Decree 616/1977 confirmed by Law 328/2000 which regulates the

integrated system of interventions and social services). On the other hand, the organisation of services -- services and interventions for the protection of health -- depends on the local health authorities (ASL), including health services of social importance and social services of health importance if delegated by the Municipalities (Legislative Decree 229/1999).

The operating engine of the system are professionals able to intervene with specific skills and abilities to reduce social inequalities and help individuals, families and communities to reach better living conditions. This complex professionalism gave rise to the figure of the social worker, in Italy 'Assistenti sociali' in the first decades of the last century. Historically placed within the social professions, the role of the social worker is a particularly delicate one as it is placed in situations of hardship, alongside people in difficulty, in all ages of life and in all its social contexts, and relational to allowing the re-appropriation of life opportunities that prevent its full realisation (Dal Pra Ponticelli, 2010).

With the progressive development of social policies, social work as profession in the public domain became work became an increasingly broad employment opportunity and a professional profile of interest among many young people. In 2001, the First Report on Social Services recorded 27,174 professional social workers showing a growth rate of 600% compared with the 1970s (Sgroi, 2001). A new national survey in 2009 revealed the existence of 35,000 social workers representing a further increase on the previous decade (Facchini, 2010).

Local authorities were still the main source of employment for the profession. Most social workers were employed in frontline positions with fewer than 10% in positions of service management or coordination. Unlike early stages in the development of the profession, the tasks of community building and advocacy are not very widespread, while social planning also involves a smaller number of professionals because of the first local authority expenditure cuts. Bureaucratisation has a widespread influence on professional practice. Responsibility for the assessment of social needs remains in the hands of social workers, but it is often undertaken within agencies that operate with targets, procedures and resources that have a considerable effect on the discretionary powers of operators (Sajid et al., 2021).

The Italian state has recently regulated on the strengthening of the basic professional social service that must deal with the citizenship income measure, stating that every social territorial context (referred to in Art.8 co. 3, letter a) of the law 8 November 2000, 328) must reach a parameter of 1:5000 (meaning, 1 social worker for every 5,000 inhabitants). Moreover, additional loans (Legislative Decree of February 4, 2021 MLPS) must reach the level of 1: 4000. Unfortunately, within the country there are enormous inequalities. The realisation of the essential level alone would bring, based on the population currently residing in Italy, the total number of structured and full-time social workers in Local Authorities to 12,049 units and, if the objective is achieved, service to 15,061 units.

In Italy, the professional relationship between social assistance frontline workers and clients is based on trust. Also, in the new code of ethics (2020), relationships with people, even in the presence of asymmetry of information, are based on trust (Art. 26, 29, 53).

## 1.2 Organisation of research in Tuscany

The interviews with users of social assistance system and social assistance frontline workers were conducted in the Tuscany region.

It should be noted that in Italy, there is a wide regional legislative competence on social and health matters that determines a lack of homogeneity between regions in the organisation of related services, even with respect to the territorial extension of the same; this happens because there is a territorial regional competence. In Tuscany, depending on the social assistance service of reference, the territorial competence varies depending on whether it is municipal, provincial or large / medium-large area scale, thus guaranteeing in each territory a system of services responding to the entire basin of social-socio-health problems of the citizenship. Even the same ministerial offices of social service have provincial or wide area competence. This is the reason that guided us in choosing to sample in more than one municipality, two of the south-east part of Tuscany, one of north and two of north-west part of Tuscany.

Interviews with frontline workers of social assistance started on June 12th, 2020, and were completed on July 30<sup>th</sup>, 2020. Social assistance employees were recruited thanks to the cooperation of the Siena University with the social assistance system. We received a contact list of social assistance employees and we sent them an official letter from the Siena University to present the survey. Then we contacted them by phone to check their willingness to participate in the survey and to arrange appointments. We finally got 15 interviews. Our sample is composed of 13 women and 2 men equally divided into three class age group (30-40, 40-50, 50+). The length of social assistance employees' work experience is strictly related with their age; in fact, all of them began to work during/just after their degree. The length of work experience is equally divided between the three classes: less than 10 years of experience, between 10 and 20, and over 20 years. They all belong to the public regional system of social assistance. Their function concerning the kind of assistance provided covers different topics: families with children, mental diseases, elderly people, health problems, problems with justice, drugs. Frontline workers that work in large municipalities usually cover only one of the above areas; conversely, frontline workers from small municipalities cover all areas. All the respondents were keen and involved in the interview; in fact, the mean length of the interviews was more than an hour, with some interviews lasting 1.5 hours. Due to Covid restrictions in Italy during the fieldwork period, the interviews were conducted virtually through Google Meet.

Interviews with citizens who use social assistance started in November 2020 and they were completed in January 2021. Citizens were recruited thanks to the cooperation of social assistance frontline workers previously interviewed and some NGOs operating in Tuscany.

Firstly, we contacted them by phone to present the research theme and aim and investigate their interest in participating, and then we arranged an interview appointment. We finally got 15 interviews. Our sample is composed of 8 women and 7 men of working age (25-60), using social assistance for several years, proportional to the length of their social and health problems. Respondents are using different services of social assistance, namely the municipality, sanitary system, Justice Ministry and non-governmental organisations.

Most of the respondents were forthcoming in the interview, believing that a chance to share their personal experience is an opportunity to make their voice heard. The average length of interviews was 45 minutes and, due to the Covid sanitary emergency, most of the interviews were conducted via virtual meetings through Google Meet and WhatsApp.

The WP2 teamwork is composed of five components. Two of them have been involved in the interviews and in coding processes. Coding of the first interviews was conducted by those who standardised them. In the interviews with social assistance frontline workers, a minimum of two memos per interview were written up to a maximum of six. In the citizens' interviews, a minimum of one memo per interview has been written up to a maximum of five.

## 2. Interviews with social assistance frontline workers

### 2.1 Frontline workers' professional background

Some of the interviewees work within the health/social-health services of the Local Health Unit (AUSL) such as Addiction Service (SERD) and Adult Mental Health Service (SMA), others work for Municipalities or 'Società della Salute', cooperative organisations with municipalities and AUSL; finally, one interviewee works for the local office of the Ministry of Justice (UEPE - External Criminal Enforcement Office), one for the Ministry of the Interior (Prefecture). All the interviewed social assistance frontline workers have a strong background in social work and they are deeply engaged with citizens.

As stated by most of the interviewees, the **position** and **function** held by social assistance frontline workers depend on two aspects, namely the length of work experience and the geographical location of the office. The position is related to the amount of work experience, to training courses taken (most of the respondents report frequent training activity), career advancements, institutions where they have worked. All the respondents confirm that they work directly with citizens, but social assistance frontline workers

with greater work experience report that usually have additional assignments as supervisors, coordinators of teams or project developers.

From the description of their work collected in the interviews, we understand that the function of social assistance frontline workers is connected to and depends on the geographical location of the office. If the respondent works in a large municipality or in a large geographical area, they always report being in charge of covering only one specific function, such as work with one of the following areas: families with children, mental diseases, elderly people, health problems, problems with justice, drugs. Conversely, if the social assistance frontline worker works in a small municipality or in a small geographical area, they typically report being in charge of covering all areas and all kinds of citizens that need social assistance. All our respondents confirmed that the social assistance service of the territory usually provides a division by sectors in the larger territorial areas, while in the smaller ones it includes all categories of users, in particular with reference to areas such as poverty, minors and family, disabilities and non self-sufficiency. In the areas of socio-health expertise, social assistance frontline workers underline that their function integrates with the multidisciplinary team of the team offering specialist services. The function of social assistance frontline workers within the ministries, as reported by one such worker, is closely related to the mandate of the referring body and the type of user to which it is addressed. While highlighting a distinction of tasks/functions with respect to the social assistance frontline worker's place of work, a commonality emerges with respect to the principles, methodology and working tools that aim at a holistic understanding of the person/family and a planning - often interorganisational - that it is not limited to the provision of services / benefits, but consists of accompanying citizens along aid pathways aimed at promoting the satisfaction of a need, overcoming difficult conditions, the attainment of a better quality of life.

All the social assistance frontline workers interviewed have a similar formal education with a degree in social services and most of them report additional professional development courses. All of them follow specific training annually to update their knowledge and their qualifications. The social assistant frontline worker profession in Italy is an ordinaristic profession, i.e. all of them have to belong to the official association CNOAS (Consiglio nazionale dell'ordine degli assistenti sociali) and to do an exam to be officially recognized in the profession; for this reason, the completion of upgrading courses and continuous training is required with possible disciplinary sanctions if not carried out.

None of the interviewees **randomly chose** their career as social assistance frontline workers, but rather their choice came from a drive and passion to help people, and a personal interest in working with those in need. Several respondents reported that since the first grades of secondary school, they had cooperated with voluntary groups related with the Catholic church, or with NGOs. Most of them have continued this kind of voluntary cooperation to date.

As described in Section I, the length of professional experience of the social assistance frontline worker interviewed is equally divided between the three classes: fewer than 10 years of experience, between 10 and 20, and over 20 years. All of them, before their current working position, have been working in other institutions or in other sectors of the same institutions, or on other topics. Very frequently, they report that they began to work in social assistance private cooperative companies or with NGOs during their university studies. All of them had to take part in a public competition to get a position inside the public social assistance system and very frequently they won a position in a place very far from their home town. After a specific number of years, most of them were able to get a position closer to home.

## 2.2 Granting benefits and services: an overview of the system

If a citizen needs help from the social assistance system, the easiest **way to get it** is to refer to local territorial offices of social assistance frontline workers. All respondents agreed and reported that the majority of citizens seek help of their own accord. A second way for a citizen to get in touch with the social assistance system is reported by third parties. Respondents offered several examples on this:

*...schools can flag problems with some children, family doctors can alert us to citizens with mental health issues, drug problems or old age problems, magistrates can help identify citizens with justice system problems (IT SLB 4).*

Several social assistance frontline workers described that also common citizens can report to social assistance systems problems of other citizens. Several social assistance frontline workers say that this is a more debated and critical way to report citizens with problems. Social assistance frontline workers can consider this kind of reporting only if citizens that highlight the problem can be completely identified, they report specific and detailed situation that can be checked. One respondent easily clarified the point, saying:

*We cannot enter a citizen's house and tell them that their neighbour can hear them—a husband and wife-- screaming at each other every evening...We have to be very careful with reports made by other citizens (IT SLB 10).*

For those with addiction or mental health problems, respondents that work with them report that engagement with the social assistance service often takes place in the context of identifying the most relevant social and health service (SERD and SMA) pathway. In some cases, however, citizens are obliged to keep in touch with the social assistance frontline workers, mostly referring to the prefecture, the UEPE and the area of child protection.

Social assistance frontline workers usually refer to their clients as “citizens” (as mentioned several times by Interviewee 1, Interviewee 5, Interviewee 7) or “users” (as men-

tioned several times by most interviewees, and in particular by Interviewee 2, Interviewee 3, Interviewee 6, Interviewee 12), some respondents refer to them as “patients” (as mentioned several times by Interviewee 14, Interviewee 15, Interviewee 4), especially when they deal with health/mental problems.

As far as the **organisation** of social assistance is concerned, the interviewees report some local specificity: some respondents emphasise that in Tuscany, the system of granting help is similar because it is based on regional legislation.

There is, as has been already mentioned, some local specificity where some respondents reported that in the Tuscany area, the local social assistance has been externalised to private social assistance cooperatives (Interviewees 4 and 5). It is commonly acknowledged by the interviewees that this is a bad feature because there is no control and no continuity of assistance. Besides this aspect, several social assistance frontline workers reported that in recent years (the last 3-4 years) there have been changes that have improved the system. One of these positive changes (as reported by several respondents) consists of granting the continuity of assistance among different areas, thanks to organisational formulas of "unification" (i.e. SDSS and AUSL wide area) which also guarantee greater homogeneity in the offer of and access to local services; before this change, if a citizen moved to a different municipality, they were not guaranteed access to the same kind of assistance, because, as aforementioned, social assistance is organised at the local level, with different funding and projects.

A second change concerns new operating methods also connected to a change in the methods of financing the welfare system; specifically, how the region shares its monetary budget with local social assistance. The budget is currently shared on the basis of specific projects and topics, and this has been reported by most respondents; before, it was just given to the local office that could decide on how to use it.

Alongside the structural funds dedicated to social assistance by the various institutions for traditional social assistance services, funding for social projects has increased at all levels (local, regional, EU, national). This has triggered the development of innovative practices, new synergies and skills in the perspective of generative welfare. Several respondents stressed that an increasing part of their work time is devoted to project development and most of the projects are in cooperation with local entities. On the other hand, project work risks increasing the targeting of recipients of services and benefits and also does not always manage to ensure continuity of interventions over the long term.

The third reported change refers to teamwork and networking: in recent years, the need for an integrated, multidisciplinary and networked approach to the complex problems of the territory and citizens has emerged within the heterogeneous personal service system. Indeed, all respondents reported that now they constantly have to work with colleagues, supervisors, professionals from various bodies, non-profit organisations, social group parties, and this is reported as important:

*For me, cooperation with colleagues, professionals and NGOs is about fundamental sharing and increased knowledge, resources, and responsibilities about helpful pathways for citizens, families and communities (IT SLB 6).*

The main rationale of early contact with citizens is similar, as described by all social assistance frontline workers. The first goal is to **identify citizens' problems and issues**. This is probably the most complex and tricky step because citizens' issues are often multi-problematic. This means that, even if a citizen arrives at the social assistance office only for economic help, the social assistance frontline worker may come to understand why and how this situation arose and whether there are other problems underlying it. Once the problem is clear (reconstructed), the social assistance frontline worker has to identify the real **needs** of the citizen, bearing in mind what the social assistance system can offer. Several interviewees report that they do not just provide generic help:

*I prefer to construct a specific project on citizens that covers several steps of help and cooperation between the two parties, intercepting and activating synergies with other services or informal subjects in the area (IT SLB 2).*

In early meetings, social assistance frontline workers also have to **verify the eligibility** of citizens to get a grant, and cross-check the provided information. This part is not necessary if citizens get in touch with the social assistance system because they are reported by third parties (doctors, schools, magistrates, etc.) because the third parties do the first 'screening'. Irrespective, the social assistance frontline worker is required to verify information for professional evaluation purposes. This is commonly reported by all the respondents:

*Users must provide ISEE with all the required documentation through which we can verify eligibility for specific grants. For monetary help, we also try to understand if they are telling the truth about their situation by asking specific questions (IT SLB 10).*

The **procedures followed to grant help** are standardised among all the social assistance frontline workers interviewed. They always have personal meetings with citizens in their offices during which they are interviewed to understand problems and needs, and to agree on the kind of feasible help. In initial meetings, citizens usually have to provide all the required information and documentation to clarify their situation. The first (and most common) required document for any kind of economic help is the Italian "ISEE", an indicator of the equivalent economic situation (i.e. total household income divided by the equivalised household size) that contains all information pertaining to income and an entire description of the financial situation of a citizen's household. Most social assistance frontline workers reported that they frequently confronted problems with this kind of documentation because it refers to the financial situation of the preceding year, and the economic situation of the family could have changed. Therefore, in special situations, they can also decide whether to make an exception and relinquish it as part

of the criterion of eligibility. It is important to underline that the youngest social assistance frontline workers did not report this kind of exception; this is probably due to their lack of experience that makes them more prone to strictly following the rules. After early meetings in social assistance offices, social assistance frontline workers can decide whether to organise a meeting at a citizen's home.

There is a double purpose to the home visit; on the one hand, to become more 'familiar' with the citizen, while on the other hand, it is a way to cross-check the citizen's real situation. One respondent says:

*If the citizen requires economic help and when I visit the home I find a new TV with a very large screen, I obviously ask them: Why did you make this costly purchase if you are in economic trouble? (IT SLB 1).*

Another respondent added:

*I also know that before a home visit, some people remove all the main furniture from the house in order to underscore their poor economic status (IT SLB 11).*

Any kind of help, grant, benefit held by citizens is tied to by citizens' commitments and positive behaviours. This is particularly required when citizens are inserted into a project and into the social assistance system that in Italian is called 'presa in carico'. In fact, in the Italian social assistance service, the term "presa in carico" is used to indicate a path of accompaniment in overcoming difficulties and in satisfying a need, and which aims to promote self-determination and empowerment of the person as well as the improvement of quality of life; this process lasts some time, the need for ongoing checks and re-evaluations, and is therefore not limited to the provision of a service.

The system provides the required help, but it is formally required that the citizen has to achieve precise steps, for example, finding a job with the help of the social assistance frontline workers, taking part in training courses, doing specific therapy, etc. This is also a way to check the behaviours of citizens; if they do not achieve the pre-requisite steps, as formally agreed, they can lose benefits or services. This can happen for any kind of service, but most frequently is reported for justice, addiction and economic problems. One respondent reported an example of negative behaviour connected with a citizen with drug problems:

*This person had to stay in rehab for a certain period, to demonstrate positive behaviour, otherwise they would go to prison. They did so the entire period in a very positive manner, but at midnight on the very last day (when the project had ended), they escaped from rehab and returned to their previous bad life! (IT SLB 6).*

Concerning what citizens are granted, with specific reference to the **presented vignette**, all respondents first identify the needs of the respective family, defined by them all as a

multi-problematic one. Several of the social assistance frontline workers underline that the case of the vignette is quite a frequent case in their daily work. Most of the respondents focus on each component of the assisted family and propose benefits/services for each of them. When a family enters the social assistance system for the first time, all social assistance frontline workers initially provide full information about the system, the benefits and services that it can grant.

The first provided benefit is an economic one, to enable them to make house rental payments, together with a job-seeker service for the father. Some of the respondents suggest trying to verify whether the father gets an allowance, or is entitled to receive one due to an injury sustained at work. Secondly, respondents identify issues connected with the mother; here the provided services/benefits are not uniform among respondents. Some respondents ask the father to provide documentation from the family's GP about the psychological situation of the mother; other respondent asks for permission to speak directly with the family doctor; some others suggest providing some childcare help for the mother. Then, social assistance frontline workers focus on children who are 16+. They try, on the one hand, to understand where his problems arise from, and on the other hand, how they can help with school or enrolment on professional training courses. Finally, several respondents suggest finding childcare structures for the youngest children, so that the mother can find a job. One respondent suggests:

*Maybe we would try to see, based on what the resources of our territory are, if we are able to provide, for example, a summer camp for the children so that they can stay there for about 15-20 days (IT SLB 7).*

Besides these services, several respondents suggest activating NGOs such as Caritas that can provide them with immediate help with food, or paying bills (electricity, etc.).

### 2.3 Frontline workers' organisation of work, routines and values

Most of the social assistance frontline workers agree that an appropriate and 'ideal' daily **workload** would include no more than four citizens per day. This is because each meeting lasts about one hour, then the social assistance frontline worker has to meditate and elaborate about the meeting, write a report on it and manage the related documentation. This kind of organisation is more respected in large municipalities/areas than in smaller ones. Social assistance frontline workers from small municipalities report that several citizens arrive at their offices without any appointment and they accept them (in contrast to large municipalities), so it could happen that at the end of the working day, they would have met about ten citizens. Also, the working time is mostly not respected; frequently reported examples are: meetings with families in the office or at their home outside of working hours due to a specific family's availability, meetings with magistrates, timetabled by the latter, and often outside the social assistance frontline workers' working hours. Most of the respondents report their full availability for work.

The general idea or the general feeling we get from the interviews is clearly reported here:

*Our working day never ends; even when I'm at home, I think about daily citizens' cases, I cannot just 'close the office door' and with it, problems with cases (IT SLB 9).*

This is but one source of the frequently reported problem of '**burn-out**' among social assistance frontline workers:

*Several of my colleagues suffer from burn-out, especially the younger ones (IT SLB 4).*

Concerning the **balance between fieldwork, paperwork and bureaucracy issues**, generally respondents report that, under normal circumstances, the balance is equally spread, 50:50 most of the time. This is because the case reporting and the project development are quite time consuming. Several social assistance frontline workers report that they would like to have more time to meet citizens, but throughout the years, the bureaucracy part of the job has increased exponentially. This is due to the fact that the social services of the territory are also asked to deal with bureaucratic overload deriving, for example, from the reporting of EU economic funds, all without prior adequate academic and professional training. The bureaucracy work slows down their back-office work; in particular, several respondents lack proper IT services and software. They report wasting vital time compiling formats on citizens. They also lack an online database with all the necessary information on citizens, thanks to which they could avoid phoning several different offices to get the necessary information. One respondent reported that:

*Our software works like a slow animal. Today, I needed to insert a benefit; it should have been something quick, but the online software, for some mysterious reason, did not work properly. And I wasted one hour inserting it... (IT SLB 12).*

Social assistance frontline workers with longer work experience maintain that over the years, the bureaucracy part of their work has increased tenfold. The back-office most interesting and important part of their job for several respondents is project development, during which they have to construct from the very beginning specific pathways for citizens.

Our respondents commonly stressed that the **Covid-19 pandemic** made the social assistance frontline workers' job much more complex because suddenly, they could not meet citizens anymore, and this during a time when more and more citizens were in trouble for various reasons. They all were provided with by a mobile phone where citizens could call at any time during the day. This expanded their office time; they always had to be available, but all the respondents reported that speaking by phone with a citizen is not the same as having meetings with them:

*Several citizens do not just have economic problems, but also physical or mental health ones, and during the pandemic, I could not meet them. I could only speak with them by phone but this is not the same. I lost direct contact with them. There are aspects of them that I can understand by looking them in the face... (IT SLB 1).*

**Discretion and flexibility** are central points in social assistance frontline workers' jobs. They all recognise that they have to follow protocols, norms, constraints of feasibility and availability that are part of their professional mandate. But despite these, they feel to have a strong degree of independence and autonomy; they try to adapt specific solutions for each citizen. They also can arrange their daily work as they wish (only one of the respondents reported not having a strong degree of autonomy). One of them reported that they do not accept a supervisor turning down their work:

*When I propose a specific pathway for a citizen with benefits and services, I do not accept my supervisor turning proposal down. They can justify their denial on budget/availability constraints, but they cannot judge the specific pathway I've developed (IT SLB 15).*

The theme of **control and supervision** on social assistance frontline workers got very heterogeneous answers. In fact, there are social assistance frontline workers that report not having any kind of supervision or control on their work. In particular, one of them says:

*We have been assigned a supervisor, but more than a year ago, she retired, and no one replaced her (IT SLB 8).*

Then there are social assistance frontline workers that report having only a sort of self-evaluation questionnaire that they have to fill in at a certain point, nothing more. Conversely, there are social assistance frontline workers that report having a strong hierarchy at work, with a supervisor, and regular (monthly) meetings with all colleagues, to share knowledge on cases, problems, analyse solutions, etc.

Concerning **teamwork**, all respondents agree that it is an aspect constantly present in their work. Nowadays, each case is treated by a team: it could be a team of colleagues or a team of different specialists. Again, there was not uniformity in the answers concerning the impact of teamwork. A number of the social assistance frontline workers report that teamwork is the future of their work, enabling them to share experiences, knowledge, different points of view; they feel to offer a better service to citizens and they feel more protected against recriminations when sharing decisions with the entire team. Other social assistance frontline workers frequently perceive teamwork as a problem, even if they agree that in theory, it should improve their work. Most reported problems concerned: lack of communication between team's staff, colleagues or specialists that take decisions that are not shared; specialists (in particular doctors) that treat the social assistance frontline workers as secretaries, showing different points of view in

front of citizens. Finally, but probably no less important, several social assistance front-line workers raised the problem of distrust among the teamwork party members; for several of them, the problem of trust arose not only with citizens, but also with colleagues and/or specialists.

In addition, **relations with third parties** are frequently reported as not easy. Generally, there is the feeling that the social assistance system is not well-seen by them. This is because in past years, there had been cases of bad behaviour in the system that were widely reported on the news, in newspapers, and on TV talk-shows, such as the Bibbiano Municipality case<sup>64</sup>. Therefore, social assistance frontline workers feel that schools or teachers are afraid or reluctant to contact them if they have problems to report. Problems arise also when third parties, such as municipalities and politicians give misleading information to citizens on their perceptions of the social assistance system.

Each social assistance frontline worker has their **own goals and values**: some are held in common with the other social assistance frontline workers interviewed; others are not. Generally, they try to be professional and respect all rules. Some of the respondents reported that they printed all the norms and regulations or magistrate's acts and put them on the table in front of citizens so that, in the event of divergences, social assistance frontline workers can always refer to them.

The most reported value is **being transparent**. Almost all the respondents indicated it as fundamental in their work. If they explain to citizens all the steps to be followed, what can be granted or not, all the rules and relationships are easier. One respondent says:

*When I type on the PC something connected with a citizen and the citizen is in front of me, I turn the screen of the PC to the citizen so that they can see what I'm writing, so that there are no misunderstandings and everything is clear (IT SLB 12).*

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<sup>64</sup> In June 2019, the 'Angels and Demons' investigation was made public. The case concerns the unlawful placing of children into foster care by the municipality of Bibbiano, province of Reggio Emilia. The social services network of Val D'Enza, in the province of Reggio Emilia, is accused of having drawn up, for years, fake reports in order to remove children from their families and place them in paid foster care. The extremely grave abuse and violence allegations include the administration of electrical impulses to children to alter the state of their memory prior to court interviews, in order to induce fake memories of sexual abuse. Those under investigation include the mayor of the Municipality of Bibbiano, politicians, doctors, social workers, self-employed professionals, psychologists and psychotherapists from a non-profit organisation in Turin. Foster care is not a system for permanently separating family units, but is a temporary aid measure for children in difficult situations and is supposed to ensure that relations are maintained with their real families. The Italian Government has taken prompt action to shed light on the events which took place in Bibbiano. [https://www.europarl.europa.eu/doceo/document/E-9-2019-002542\\_EN.html](https://www.europarl.europa.eu/doceo/document/E-9-2019-002542_EN.html)

All social assistance frontline workers are also very **passionate and engaged** in their work, probably because all of them have chosen it for their individual motivation, passion and interest in people. One of them reports:

*Commitment, a smile and assistance, always and in every case. I come from a family of miners, so I never leave my job if I have not ended what I have to do and I answer my work mobile phone also on Saturday even if I'm not paid on that day (IT SLB 9).*

For several of them, it is important to **show respect and understanding** to clients, to be in some manner empathetic; two of them report:

*You have to put yourself in the other's shoes and show that you understand their point of view (IT SLB 13).*

*Not only to console, but also to sustain and make them feel welcome, to understand them and build together (IT SLB 14).*

Connected with this value, **being helpful and giving empowerment** are also frequently mentioned; several social assistance frontline workers said that they believe in the ability of people to recover; they plan projects with them and they assign them little tasks to proceed on their pathway to recovery. This is particularly felt important versus citizens with justice problems for which reintegration into the workplace and society has to be constructed.

Some interviewees referred to community work that looks at the development of a local community (community development), awareness, competence, supportiveness through which social capital is created, and social mobility.

Social assistance frontline workers, regarding their style of work, also reported the importance of **being alert** and using strict control if necessary; they meet different citizens, several of whom suffer from mental illness or problems with violence. It can happen that social assistance frontline workers have to conduct a meeting with the assistance of the police, or that they conduct a home meeting with other colleagues.

For all the respondents, the **approach to the work has changed over time** based on past good or bad experiences, but their values remain unchanged.

Discussing the style of work of social assistance frontline workers in face-to-face relations with citizens, a first point to analyse is the **frequency of the meetings** in order to understand if there is enough time to build a relationship. Social assistance frontline workers report that generally, the frequency of meetings with citizens depends on the kind of problem the citizens are experiencing. Economic problems might require just one meeting; for a mental health problem of someone already under medical care, meetings could happen once a month; for all the other more serious or complex problems, the frequency of meetings is every two weeks or once a week. The difference in the frequency of meetings is also connected with the dimension of the municipality. In

large municipalities with large numbers of citizens who contact the social assistance system, meetings are less frequent than in small municipalities.

All social assistance frontline workers report **to knowing their clients well** or quite well, in particular, in the most complex cases, citizens are followed step by step; they are mothered to a degree. One of the respondents reports:

*Knowing a person starting from a bad point in their life or a bad thing they have done, enables us to construct a relationship from the very foundation, with an in-depth knowledge of the problem (IT SLB 6).*

The choice about the kind of relationship of social assistance frontline workers with citizens is up to them, but generally, it is strictly connected with the motivation of the choice of their work. The relationship with people is at the basis of the choice of their work, so it is normal for them, if possible, to have a close relationship with citizens. They need to be **empathetic** but **not too emotionally involved**; they approach clients by trying to understand how the person in front of them is. Only once was it reported that it is better to establish a distant relationship, and that came from a young respondent.

The most reported **factor regarding improving relationships** with citizens is the necessity to **speak and act coherently** in front of the citizen, because when the citizen talks to a specialist or to a social assistance frontline worker, they should find the same kind of answers; there should be no ambiguity. A second factor is not dealing with a multi-problematic person; of course, citizens with fewer problems are easier to relate to. Finally, social assistance frontline workers have to work on themselves and learn to listen to citizens real needs.

Conversely, the **obstacles to establishing good relationships** with citizens are, from the social assistance system side, mostly concerned with: an ever-increasing workload, continuous changes among the social assistance frontline workers who are moved to different areas, when teamwork does not work properly, or when the information provided is unclear. From the citizens' point of view, the main obstacles to establishing good relationships are related to being over-demanding:

*Citizens with a high socio-economic level who do not get what they want, make lots of noise with press and lawyers (IT SLB 9).*

*Foreign citizens who do not want a woman as their social assistance frontline worker, and consequently disrespect me (IT SLB 13).*

Another obstacle are mental issues and violent behaviour; (social assistance frontline workers also follow specific training to deal with violence, and they are also trained in how to lay out the office furniture so as to be able to escape quickly).

All respondents report to **having adopted their own solutions** to make the relationship with a client work well. The best solution, as already mentioned above, is **being transparent**, providing full information, clarifying what exactly a social assistance frontline

worker can do or can provide, and what is out of their domain. They also agree to **be very understanding**, to speak clearly and openly so that citizens can understand problems that could occur, and also to be sensitive so that citizens feel accepted and welcome. In the event of a client's bad behaviour, social assistance frontline workers have to use their power and authority-based approach, and they also have to **deal with aggression and violence**, which are quite frequent. Several respondents report to have been very afraid about this last aspect at the beginning of their work, then thanks to specific training, such as anti-violence courses, they learnt to deal with and manage it.

## 2.4 Trust understanding, sources and functions

Concerning the trust concept, we should first divide the social assistance frontline workers interviewed into two groups: the largest, the respondents for whom **trust is a central aspect of their work**; and, the second, respondents **for whom trust is not a matter of core importance**. To clarify the position of the second group, one of them reported:

*I do not ask myself how much trust I have in citizens, but for me it is more important to make evaluations of opportunities, of resilience, of ability to achieve a goal. I figure out what can be asked at that stage, if I can ask for more at a different stage...I ask myself these kinds of questions. Surely I have the perception that when a person is in front of me, there are those who trust immediately, or even if they are not conscious of it, I can feel it. I feel the attitude of openness to confrontation, to accept some evaluation or request from my side. In other cases, I feel more closure, just the need to receive a benefit, and that's all. So for me, trust is not the right word; for me the right one is empathy, I'm a professional and I cannot invest in something that is not professional (IT SLB 3).*

Returning to the first group, trust is surely a wide and multidimensional concept because it can be read from several different viewpoints. **Trust** can be defined as **empathy**, closeness with citizens, and it involves feelings; social assistance frontline workers report that they have to have access to an in depth 'history' of citizens; they have to be connected with each other; citizens have to be aware of that "they can rely on social assistance frontline workers 360°" (IT SLB 5).

Trust is also seen as a **mutual relationship** because a connection arises between social assistance frontline workers and citizens through exchanges of kindness, building something together to achieve a goal, a sort of "co-responsibility agreement" (IT SLB 8). Trust is also seen as **reaching the confidential sphere** of parties because citizens can feel free to confide in social assistance frontline worker and together, they can break down prejudices. To break down prejudices is seen as very difficult because citizens enter the social assistance system with many misconceptions and prejudices, common in society. Connected with the confidential sphere of parties, trust is also seen as a possibility to

reveal things without fear; for example, a citizen could reveal problems inside the family without fear of the children being kept by the social services. Trust is also **truthfulness**, telling the truth, demonstrating loyalty and party reliability. There should be **constructive cooperation** between parties; social assistance frontline workers assign tasks to be met to citizens to test their involvement. But trust is also just providing support, giving help, letting citizens know that in difficult moments, the social assistance frontline workers are there for them, and in these cases, citizens are grateful, even if they do not get what they want.

**Trust of social assistance frontline workers for citizens is not a binary concept, fully trusting or fully distrusting; it is a fuzzy concept where different degrees of trust are feasible.** On the highest scale of trust, most of the social assistance frontline workers are rather trusting by default; they say that if there is no trust, the relationship with citizens remains superficial and fails to thrive and deepen; social assistance frontline workers try to search for and highlight positive aspects of citizens, and they also believe that it is important to communicate to citizens that they trust them. On the opposite side of the scale, several social assistance frontline workers reported that there are specific situations with citizens where it is necessary to distrust them; but even if trust is not present, social assistance frontline workers always have to act on behalf of the citizens. In the middle of the scale, between being fully trusting or fully distrusting, there are all the situations for which social assistance frontline workers report to be conditionally trusting. One of them says:

*I always start from a place of giving trust because trust means a potential relationship, in the sense that a relationship cannot begin when there is no openness towards the other... Surely there must also be a certain prudence because the other is an individual different from me, a bearer of his own world, his needs, his knowledge, his values certainly different, but trust is fundamental (IT SLB 2).*

For several of them, trust cannot be unconditional:

*My relationship of trust with some people has been conditioned by other work activities but if I don't know the citizen, I always start from the basis of an absence of prejudice (IT SLB 5).*

Trust can be measured and constructed on the basis of commitment. Social assistance frontline workers reported that they always try to be very cautious before saying a person is trustworthy or not; they both measure the credibility of the social assistance frontline worker and of the citizen on the mutual commitments given to each other. Hence, they always try to end an interview/meeting on things to be done by both: the social assistance frontline worker can do this for the citizen, the citizen undertakes to do that. Then, when they meet again after a while, they can check if the social assistance frontline worker has done what they said they could do for the family and if the citizen was activated on their given task.

**Time** has a fundamental role to play in trust building; one respondent compared it with a stage of life:

*Trust is like the stages of life when you move from idealism to disenchantment. But I'm an optimist by nature, so I always see the positive side and always the glass half full. Let's say also that the aspect of the realism is important, because, in any case, experience leads you to maturity, also being able to put yourself on an increasingly higher professional level of collaboration; certainly, the increase in professionalism helps in a constructive relationship. I think I have grown professionally, and therefore perhaps am able to offer more sometimes (IT SLB 14).*

All respondents agreed that their concept of trust was modified with time, but given that their work is a mission for most of them, a lack of trust would lead to their quitting their job; there would be no reason to go on. Several respondents, in particular ones with more years of work, report to having the same enthusiasm as when they started, but to have become a little shrewder over time:

*I understand more quickly if the citizens have tried to use social services to achieve their own goals. But no, I haven't lost my trust. If I have lost it, it is not on citizens, but on the organisational system, more precisely on who actually organises the service (IT SLB 11).*

This last sentence is very important because other respondents raised the problem of **trust not on citizens but on the social assistance system**.

Generally, if the social assistance frontline worker has to quantify if trust increases or decreases across time, the answer is that it decreases. The general feeling is that they are not happy saying this, and they try to justify it as: they have reduced their expectations, they are more realistic and take into account that cooperation with citizens could also not end well:

*I have become much more tolerant over time, as a person, but I think I'm also more mentally rigid; so maybe I have lost trust over time. I dream a little less. I do not say anymore: I will save you! as I said in the 90s (IT SLB 14).*

On the same line:

*Across time, maybe I can lose a bit of trust. Colleagues, maybe older ones, repeat this like a mantra; it is clear that maybe the enthusiasm of the first decade of work decreases over time because we have limited tools, so the perspective of 'let's save everyone', so strong at the beginning, decreases (IT SLB 3).*

Only one respondent says that their trust for citizens has increased across time.

**Individual factors** (backgrounds, attitude, past experiences, etc.) that affect trust are heterogeneous. Surely, **past experiences** enable social assistance frontline worker to better understand who they are in front of. There are also **institutional aspects** that strongly influence trust. Several respondents reported that the relationship of trust clearly depends on how they position themselves as professionals because it often happens that people feel investigated or worse. Several respondents reported knowing citizens who did not refer to the social assistance system due to the image they had of it; for example, they think that if there is poverty in their home, their child may be taken away:

*It happened to me with a lady who really should have asked for help a long time ago, and she told me: "I was afraid". It happens that in general people speak inappropriately about our profession, our role. This raises unexpected problems because citizens do not dare to come to the social services. This relates to the image that is given of us, for example, in the Bibbiano case (IT SLB 3).*

**Difficulty in interpersonal relationships** among social workers has a negative impact on trust in the system. Another factor that influences trust is **relationships with colleagues and other professionals**. Trust between operators in the social assistance system are almost more difficult than with citizens; they report talking among colleagues about different opinions in front of citizens and this is a big problem because the citizen is in front of them, and if there is no collaboration and trust between the operators that work for them, triangulations could arise:

*Speaking of trust, I always try to be fair towards other professionals when I talk to citizens; if I have any doubts about the issues, I may discuss it elsewhere and not in front of the person. For me, this should be obvious; for example, what a mother and father should do with their son. Unfortunately, this does not always happen. But here we need to think about it a lot because in the end, the credibility of the whole service is invalidated (IT SLB 2).*

**Client-related factors** that make them untrustworthy are mostly related to their **being overdemanding**. This happens in particular with more wealthy citizens who try to use their knowledge and their position to influence the relationship with social assistance frontline workers. Frontline worker-related factors which fail to promote trust in citizens are most likely connected, as reported above, to fear of the system because of **power asymmetry** and also, in the case of immigrants, **cultural problems** that may arise, such as disrespecting female social assistance frontline workers.

Client-related factors that promote trust in frontline workers could be related to the **verbal and non-verbal language** of citizens, i.e., during a meeting, citizens may turn their eyes to a left high position in the room while speaking; citizens that do not honour requests to provide the required documentation; citizens that do not follow the steps of a project. An example:

*A family with a disabled child requested help to place their child in a day-care centre; however, the interaction made me think that the family had only come to me because they needed help with accessing a resource they could not reach alone. The family that comes to social services only to have an economic contribution or to have the exclusive custody of a child (in case of divorce); they use a lawyer's letter or recordings leading the child to say certain things against the other parent. This makes me understand that the person is someone with whom I cannot interact in a professional manner. I must always be careful with what I say and above all, what I do both from the point of view of speaking and from the point of view of sentences. Because these are the kinds of people who request access to the documents, who want to see all the documentation provided, who go to court with the lawyers and read the reports (IT SLB 11).*

### **3. Interviews with social assistance users**

#### **3.1 Social background of interviewees**

Some of the interviewed citizens live alone, while others live with their family and a few of them cohabit with other people. Citizens that live in a family stay with a husband/wife, children or parents. Several of them report living with parents because of economic or health-related problems, or after a divorce. They all live in Tuscany, some of them in small villages, some others in larger municipalities. Most of them have lived in the same area since their birth or for a long period. Two respondents are foreigners from non-EU countries. The interviewed citizens make use of social assistance for several different reasons. The most reported problems are economic/labour problems, health problems such as a disability, mental health issues or conditions of non-self-sufficiency. Many respondents have housing problems - difficulties in paying rental costs; some of them have been evicted, some others have been hosted in emergency facilities or in houses made available by associations of the Catholic Church.

Most of them are unemployed, and the Covid-19 pandemic has made their situation worse. There are also cases of problems with drugs, criminal issues and domestic violence. Some of them reported that their social problems arose inside the family; they had bad experiences with parents or partners, and in several cases, other members of the family are being followed by social services. For others, the family often represents a lifeline that varies from economic, emotional and/or caregiving support. In general, several interviewees showed multifaceted and interconnected needs: for example, poverty and difficulties in accessing the world of work are often linked in a cause-and-effect relationship with problems of health, family, social marginalisation (as in the case of drugs and crime). Most of the interviewed citizens reported a general feeling of distrust

in politics: “Politicians look to their own interests and not those of the people” (Interviewee 3). This feeling has a uniform consensus. Most of them have not voted in several years and they also have not followed political debates. They mostly believe that politicians are not helping them in the proper manner and mostly; they view politicians as very distant from their real life and problems so they have given up caring about politics.

Those that vote, mostly vote for right-wing parties (central or extreme ones) and they reported being influenced by related people or by televised debates. The minority of respondents who believe that some politicians care about the most fragile people viewed the Italian government’s handling of the Covid-19 sanitary emergency positively.

Concerning EU policies, the opinion of respondents is divided into two parts: ones that are pro-EU and who think that being a member is an added value for Italy, and the opposite side that believes that it would be better to leave the EU and focus only on Italian problems. Only a few of them, however, seemed to have well-founded arguments in support of their views on the EU.

### 3.2 Applying for benefits and services and opinions on the social assistance system

Most of interviewed citizens are in contact with the social services of the municipality where they live, and refer to their local offices. For specific problems with drugs, citizens refer to the regional health services: the ‘SERD’, that is the office that provides help for addiction problems; for mental diseases they refer to the Adults Mental Health Services (SMA). Most of them have been followed by social assistance systems for more than 10 years. Some respondents fall under the auspices of ‘UEPE’, the social assistance service office of the Ministry of Justice - aimed at re-education and social reintegration of people who have committed crimes.

The interviewed citizens reported having **provided documents** to social assistance front-line workers at the beginning of their experience with social assistance. They provided the ‘ISEE’, a document pertaining to the economic situation of their household, and they compiled several forms depending on the pathway they had to follow. For economic help, all documentation is sent to a commission that decides if the benefit can be provided or not. For all other problematics (mostly connected with health), documentation from doctors/specialists is required. The interviewees also reported that they had to fill in and submit forms to access services such as job grants or emergency housing.

Most of the respondents have had specific **regular meetings** with social assistance front-line workers, but several of them reported referring to the social services every time they needed help. They mostly had meetings in social assistance offices, but in cases of disability, it was reported that the social assistance frontline worker went to the citizens’ house. The **content of those meetings** generally referred to setting up a plan of action,

checking to see if citizens are following the pathway agreed with social assistance front-line workers, checking to see if they are taking specific actions. As described in the previous section, social assistance frontline workers try to construct a project for each user that consists of several steps to be reached across time. During meetings, the **respondents are checked** to see if their prescribed tasks have been achieved. For citizens with drug and/or criminal problems, the content of the meeting made them feel as though they were being forced to accept solutions; for example, people followed by SERD have to provide weekly urine tests. In case of mental diseases, the meetings are also with a psychiatrist.

The benefits obtained by citizens from the social services depend on specific situations, mostly related to citizens' needs. The most frequently reported **benefit** is of an **economic nature**. Social assistance can help citizens in getting long-term economic help, such as a basic income ('reddito di cittadinanza'), or a disability pension from government. They can also provide spot benefits to pay housing rent, household utilities (but also travel passes or school books). Social assistance frontline workers can provide help in filling in forms to get a house from the municipality. They also help citizens to get a job (also for therapeutic purposes), or get weekly food packages, frequently through the help of NGOs (such as Caritas, Misericordia, Pubblica Assistenza). In the case of mental diseases, social assistance provides continuous **psychological support** and appropriate medicines; they also invite citizens to join support groups. One respondent reported:

*I have been driven to a music-therapy group thanks to my social assistance frontline worker and I enjoy it a lot. It is very important for me! (IT CIT 5).*

Generally, the psychological/educational support can be transversally activated by the different services.

For those citizens who have problems of a social health nature (mental health, disability, non self-sufficiency, dependence, etc.), there is also the possibility of accessing home-care services or specialised day/residential centres. For families with minors, there is also a housing education service - participation in after-school activities.

**All benefits last for the time necessary** for citizens to recover from their own problems. Most of the interviewed citizens have been followed by social assistance for more than ten years, and their problems will not end in the future, especially for mental diseases, disabilities. Citizens are mostly appreciative of the received benefits, but, when they were asked to add something about the received benefits, their perceptions were split into two parts. Citizens with mental diseases were generally satisfied about the provided help and they found support when they asked for additional help. Citizens with economic/labour problems or aid needs in daily tasks said that they would like to have additional help, the received one is not enough. In this respect, some of the citizens feel that:

*...economical help is given to too many people; frequently, some of them do not really need it and people that really need help do not get enough (IT CIT 10).*

Concerning citizens' **opinions on the office's organisation**, again they are split into two groups. Some of them, belonging to the central/south area of Tuscany, are **very satisfied** with the social assistance system and its general organisation. On the opposite side, citizens, mostly belonging to the coastal Tuscany region, are **not satisfied** with the general organisation of the social assistance system; in particular, they refer to the outsourcing territorial social assistance to private social cooperatives. They report several problems concerning the discontinuity of assistance, continual changes among social assistance frontline workers, scarce supply of services and benefits; they told us that this is due to political failure in the territorial organisational formulas.

Several citizens have **positive opinions about the system** and they consider the procedures as fair, appreciating in particular the support from social workers in providing help; social assistance frontline workers are perceived as making up part of a system that actually helps and cares for them:

*My social assistant has always accompanied me to various places, to the employment centres, because initially I am very reserved, closed, shy, so she has always come with me; she has always been by my side to encourage me (IT CIT 7).*

Once again:

*They have been very helpful in getting me a job and helping me to start all over again (IT CIT 2).*

Conversely, citizens that live in large municipalities feel the **system as overcrowded**, social assistance frontline worker can meet them only by appointment and only for 10 minutes. Frequently, citizens have to insist on getting an appointment, experiencing some **frustration**. In these cases, respondents often believe that the ineffectiveness of the system depends on insufficient staff. Citizens that have made use of social assistance for a long time also report a general decrease across time in the level of qualifications social assistance frontline workers must have, or that the quality of services varies from office to office. Citizens often feel the **procedures** they have to follow to get help are **too long and complex**. In particular, one interviewed citizen believes that the procedures are specifically designed to make citizens desist from getting help:

*If you don't get here with your documents and papers in hand, it becomes a rebound; the services become a rubber wall. Precisely, also considering all the procedures I had to obtain certifications for, exemptions, forensic medicine, this whole part of the system is built to make people desist. I guarantee*

*you that it is fully planned, because otherwise certain indecencies cannot be understood (IT CIT 11).*

The worst opinion on systems and procedures is again reported by citizens that need economic help. All citizens with strong economic problems are mostly dissatisfied; the help they receive is never enough to make ends meet. But most of all, they feel that **the system is wrongly targeted**; there is poor organisation because a large number of people that receive economic help do not really need it; because of this, the help for people in really precarious economic situations is never enough:

*My friend is a cook, has a mortgage, owns three houses and she has been given the citizenship basic income. My ISEE is 700 euros (per year); we are two disabled people with a rent of 550 euros per month; all the bills arrive regularly. They give us 20 euros to pay ENEL, then there is the heating. We eat very little, and we always live on very little money. My mum cuts my hair; I don't go to the hairdresser's (IT CIT 13).*

Again:

*About the meal vouchers, you know there is little money left... I don't care, they give all these vouchers for shopping to everyone; you have to leave them for those in real need like me ... they give to people that I see every day at the bar, drinking (IT CIT 2).*

### 3.3 Relations with frontline workers

Citizens refer to the social assistance frontline workers as “**assistenti sociali**”, doctors (even if they are not) or, especially in small municipalities, by their name (as a very well-known person, a sort of friend). The frequency of meetings with social assistance workers depends on each citizen's specific problem.

Citizens with criminal and drug records have more frequent meetings that are mandatory for access to services or benefits. For other subcategories of client, meetings are less frequent, once a month on average. However, respondents report that they contact social assistance frontline workers independently when they need information, help or support. During the **Covid-19 pandemic**, most of the meetings were cancelled or were conducted by phone. As has already been reported in a previous section, citizens from small municipalities report that they can meet/call social assistance frontline workers every time they need them; in large municipalities, this is not possible. And again, citizens from Tuscany's coastal area refer to several problems to properly meet social assistance frontline workers. Most of the interviewees have been followed by social assistance services for several years, especially in cases of health/mental problems, chronic poverty or drug addiction, all of which require continuous care in the different stages of life.

Generally, citizens positively evaluated the **level of discretion** of social assistance frontline workers in treating their cases, even if they understand that they belong to a system and have to adhere to strict rules. The **decision-making autonomy** of social assistance frontline workers is perceived less well in cases where care also involves health professionals or third-party authorities, such as the magistrature.

They report different experiences with social assistance frontline workers, most positive but others less so. They underline the importance of having good social assistance frontline workers because this is the main link/bridge between citizens and the social assistance system; they are the people that can help citizens to solve their problems. In fact, changing social assistance frontline workers is seen as a real problem, both with respect to the continuity of the help action and the fact of having to build a trusting relationship again, from the beginning. Citizens of the coastal regions experience this quite frequently. In general, the **change of social assistance frontline worker** sometimes brings about better relationships, some in other cases, worse; it depends on the professional who replaces the previous one. Most of the interviewed citizens refer to having had a **very close and warm relationship** with their social assistance frontline worker. After cooperating together for several years, they refer to their social assistance frontline worker as a **guide or a tutor** who helps them face difficulties, gives support, identifies the best steps to follow and act to reach the best solution for them, a sort of friend for some of them:

*I consider [XXX] as a friend, I can call her about any problem and she always tries to help me (IT CIT 3).*

*For me, my frontline worker is a sort of guide; she helped me with my husband, trying to make me understand that the problem lay with him, not me (IT CIT 12).*

In these situations, the **relationship** between citizens and social assistance frontline workers is **open**, characterised by deep dialogue and even contrasts are seen as an integral part of building a positive relationship. This is in line with the concept of advocacy, therefore of a professional who plays the role of protecting the interests of the person, the idea of a system that is helping and caring for people.

Few citizens report a **distant relationship** based on the fact that they have serious difficulty in contacting their social assistance frontline worker and they feel they are disinterested. One respondent reported a very pragmatic and distant relationship with social assistance frontline workers, and says:

*I contact them only if it is strictly necessary and as little as possible (IT CIT 5).*

Finally, some citizens often have a **very conflicted relationship** with social assistance frontline workers because they have not been able to obtain what they wanted and they believe this is up to the social assistance frontline worker. In this type of relationship,

citizens sometimes perceive the relationship with assistance frontline workers as asymmetrical, or in any case, as an obstacle in accessing what they believe is their need/right.

Generally, the opinion on social assistance frontline workers' **experiences and knowledge** is very positive: citizens consider them very competent, professional and informed:

*I must say, she is a person that I like. I find her competent, efficient and frankly she has always tried to mediate in my favour between what are the needs of the Municipality and mine (IT CIT 9).*

*At any time, they are always available. If I do not find him, I find someone else and they have never made me repeat myself; they are always available for everything (IT CIT 14).*

Concerning the **engagement and communication** of social assistance frontline workers, the most widespread and appreciated feeling concerns the **availability, transparency, honesty, clarity** of social assistance frontline workers. Citizens report that social assistance frontline workers generally state very clearly what they do, what they can offer, the procedures to be followed, in the easiest possible manner. Most citizens thank social assistance frontline workers for this aspect. They also appreciate their friendly, sensitive and empathetic approach because citizens find someone (frequently for the first time) that cares about them, and that helps them to feel understood:

*I can give you an example: When I left my husband, really that is I pulled up the shack, I was drowning with him too, g but they said, look you have done well. You did not do anything wrong, do not have feelings of guilt--absolutely not. They gave me a lot of support (IT CIT 6).*

*They have always been available, they have always had time; if they say "yes, you can", they do; if you can't, they tell me directly and explain to me so that I understand (IT CIT 8).*

Only one interviewed citizen had a very negative perception on social assistance frontline workers because they considered them unhelpful.

### **3.4 Trust, understanding, sources and functions**

Trust is important, central for the interviewed citizens:

*It is not easy because when you are in situations of fragility, you clearly and immediately place your trust in the people you are in front of in a medical centre. However, I was very lucky because I found smart people who took care of me and therefore it is a well-placed trust. Clearly, at the beginning, I too was a bit hesitant because indeed, you are in a critical situation, so you don't know if you are understood or accepted (IT CIT 10).*

*I give myself over completely and put my life in their hands; if I didn't trust, I wouldn't do it (IT CIT 1).*

For most of them, **trust is support, help, giving, loyalty**, but also it is a **mutual relationship, reciprocity**:

*Firstly, trust is when we are in the presence of a fairly detailed dialogue, deep enough so that there is an openness on both sides. Sometimes, there is even the continuous search for the social assistance frontline worker, so in any case there is this trust in the other (IT CIT 8).*

*I discussed this point a few days ago during a meeting in my support group. In the relationship of trust there should be faith in what the other is doing, that is, being able to completely trust the other and expect the other to do what you need for your best (IT CIT 15).*

But trust is also **bond, closeness, empathy and it involves feelings**. For several respondents, social assistance frontline workers give them the opportunity, listen to them, understand them, manage to understand them, make themselves understood, empathise with them, and because of these, they can be open and trust the person in front of them. For several respondents, trust is also feeling safe.

The **level of trust/distrust** as a default setting from both sides of the relationship can be seen as a **scale** where on the bottom, there is **complete distrust** on both sides, and on the top the opposite, namely **complete trust** on both sides. The top of the scale was reported by citizens more frequently than the bottom one. Citizens on the top of the scale of trust feel social assistance frontline workers akin to **'friends', someone to rely on**; they have never been betrayed by them. Two strong examples of trust from both sides refer to the concept of mutuality of trust:

*When I came out of prison, both the social assistance frontline worker, the magistrate and the private cooperative did not know me. I had a telephone interview as I am doing now with you. They put their trust in me to secure work for me and to give me responsibilities without knowing me...we always return to trust because in any case, I feel I was given too much trust by both the treatment area, the magistrate and also the cooperative because I initially escaped from prison on the basis of the magistrate's decision, so if I do something bad, he is responsible. Let's say the trust he had in me has been well rewarded; both he and the cooperative, I think they are satisfied with the trust they have in me (IT CIT 12).*

And another strong example of full trust:

*I say what is fundamental to understanding the level of trust the social assistance frontline worker had in me. Our last meeting in the courtroom where*

*they had to decide if we would win back custody of our child, the social assistance frontline worker asked for it repeatedly. Then unfortunately, the judge changed and ruled against us, but the social assistance frontline worker told us: "Guys, do what you want. I raise my hands in despair. If you want to get a lawyer, do it. I cannot do more than tell the judge that the child, in my opinion, must go back to the family. I trust you (IT CIT 3).*

On the opposite side of the scale of trust, completely distrust, there are citizens that are **very disenchanting**, that do not have a great deal of trust in social assistance services anymore:

*Despite coming from a centre-left area politically, culturally and socially, I don't have this hope anymore. I am quite disillusioned because of personal difficulties; they were such that at some point, I really understood that it was more important to safeguard myself from an emotional point of view and therefore abandoning expectations was certainly healthy for me (IT CIT 12).*

In these cases, citizens do not create expectations on the issue of trust/distrust with the social assistance frontline worker because they consider them professionals of a system that is **unable to respond to their express needs**.

Citizens with drugs or crime problems frequently feel that social assistance frontline workers cannot trust them; these are situations in which alongside the help, the control mandate from the social assistance service also emerges. There are citizens that understand that social assistance frontline workers sometimes have not fully trusted them, for example with drug problems:

*In this context, after I relapsed, I found a job and I told them: I'll stop doing urine tests now; but they told me: No, it's too early, we cannot stop (IT CIT 11).*

The **role of time** in trust building is crucial for citizens. They believe that during the initial meetings, it is not so easy to fully trust and be completely open opposite social assistance frontline workers; they need time, on both sides. This is why they feel that continuity of social assistance, with the same reference people, is very important.

The competence of social assistance frontline workers is an important factor in trust building:

*We have a close relationship; many times she tells me: I look like your friend because she managed to enter my life, and I have a lot trust because I've been able to talk with her many times. Once, I had a discussion with my husband, and she managed to make us meet; for me these are important things, that's where trust is created. She was able to calm us and to make us understand each other's points of view. She downsized things. I've been able to talk about it with her because without trust, I would not talk to her, and she*

*managed to win my trust and I opened-up, both me and my husband (IT CIT 2).*

Other important factors are **the honesty and transparency** of social assistance frontline workers and the **capacity of granting the right help**. Social assistance frontline workers must **not make promises** that they cannot guarantee because this will badly affect their relationship with citizens. Citizens that are not satisfied with the received grants, do not usually trust the social assistance system, therefore they do not impute direct responsibility on the social assistance frontline workers. Other situations that can compromise citizens' trust in social assistance frontline workers are when social assistance frontline workers do not keep promises made, or when citizens do **not feel understood**.

Some citizens that belong to families with children are **afraid of the fact that social assistance could take them away**; they have difficulty accepting this intrusion into their family life and this limits trust construction: It is necessary to specify that these are multi-problematic families (drug/justice problems) that are obliged to maintain relationships with social assistance frontline workers who are called in to evaluate parental skills by virtue of the superior interest of minors.

#### **4. Summary and conclusions**

Below are the key summarised findings of the present chapter:

- The system of social assistance services is heterogeneous: the entities differ in organisational methods, territorial competences and target recipients. The system is integrated in order to respond together to the multidimensional needs of the population. Alongside effective and virtuous organisations, there is excessive bureaucracy, a lack of social assistance for frontline workers with respect to their workload, absence of an integrated information system, a lack of a culture of supervision, as well as heterogeneity in the offer of services between territories. In some cases, there is difficulty in coordination between services and professionals, and excessive sectorisation of the target of beneficiaries, especially if related with projects.
- Citizens manifest complex and transversal needs in different spheres of life (work, health, home, family, social relationships, etc.). Their requests mainly concern economic aid and services such as access to homes, home assistance, social and rehabilitation services. Many citizens have been followed by the social services for several years as bearers of needs that require continuous responses in the various stages of life and / or difficulties in escaping from the state of need.
- The profession of social assistance frontline worker is constantly changing. Needs are constantly changing, as are organisational methods and methodological approaches; in particular, the importance of teamwork, networking, commu-

nity and project work has emerged; this refers to the functional need for flexibility and continuous training. However, the founding principles of the profession remain unchanged.

- The relationship between social assistance frontline workers and citizens is constructed as a taking charge, or as a pathway of accompaniment in overcoming difficulties and in satisfying a need that aims, through the activation of resources for the person, the territory and the community, to promote citizen self-determination and empowerment, as well as improving their quality of life. The participatory and individualised approach
- of social assistance frontline workers - understood as sharing the aid project and the personalisation of interventions - allows them to go beyond the welfare paradigm. Alongside situations in which the aid dimension prevails, others emerge in which a control mandate is also given to social assistance frontline workers, and that exacerbates the unbalance of roles within the relationship.
- Social assistance frontline workers emphasise the centrality of professional evaluation, the need to continually investigate themselves about their own practices, referred to as a reflective operation. Equally crucial is technical-professional autonomy. The relationship with citizens must be based on the absence of judgement, on the clarity of roles and mandates, on the return to the user, as well as on respect for professional secrecy. The importance of the empathic approach, of active listening, of emotional intelligence emerges, even in the separation of the professional sphere from the personal one. The major obstacles to the relationship can be traced back to: lack of resources, user failure to adhere to the aid project, management of aggression and opposing attitudes of citizens; this can lead to social assistance frontline workers feeling helpless and frustrated, with the risk of burnout.
- Citizens consider social assistance frontline workers as a bridge to accessing services/benefits, guides in solving problems, professionals required to protect their needs. Citizens generally appreciate the transparency, clarity, availability, competence, and loyalty (also understood as the ability to keep promises) of social assistance frontline workers; it is important for them to feel understood and to know that they can count on the support of the social assistance frontline workers. Generally, more informal relationships emerge between citizens and social assistance frontline workers in small municipalities than those in large urban centres, presumably related to greater discretion of social assistance frontline workers in organising work within less structured organisational contexts.
- Trust is expressed in different ways with semantically similar terms such as: closeness, support, transparency, reliability, reciprocity and loyalty. Transversely, trust is the foundation of the helping relationship that is built together and that needs to be continually confirmed, emphasising the importance of the time variable. Trust manifests itself in the said and the unspoken, that is, it needs concrete feedback, but is also perceived in the attitudes and emotions within the

relationship. For users, the replacement of the referring social assistance frontline workers are viewed negatively because they involve having to rebuild the citizen-social assistance frontline workers relationship from the beginning. For the social assistance frontline workers, it is essential to have confidence in the change of the person, even aiming for small results; trust in the skills of the various professionals involved in the helping relationship is equally central. For a minority of the interviewees, the question of trust does not arise: for users, this is attributable to a lack of expectations in the relationship with professionals; for social assistance frontline workers this is due to the fact that the issue of trust/distrust does not exempt them from professional evaluation and the help mandate to which they are bound.

- The distrust of social assistance frontline workers towards users is manifested above all in the field of child protection, mental health, addiction and problems with justice, or in cases of overdemanding, in which it is sometimes necessary to distrust citizens and verify information. The distrust of citizens towards social assistance frontline workers is due to widespread prejudices about the profession, to situations in which social assistance frontline workers demonstrate a lack of availability, disinterest and/or deny a service. Some citizens have a more general distrust in the system of social assistance services due to the lack of social assistance frontline workers, the complexity of the procedures, the lack of services offered, the malfunctioning of institutions; moreover, citizens do not always agree with the criteria for access to services, considering them excessive or wrong in terms of target. Citizens dissatisfied with the social welfare system find themselves having to insist on help, and in some cases, giving up because of perceived frustration. A generalised distrust, at times contempt, towards politics and politicians is echoed.

All the narrations of the interviewees, albeit narrated from different perspectives, converge on the social and socio-health problems presented to the social assistance services and on the types of services and benefits provided. There is also consistency in the narration with respect to the dysfunctionality of the system, referred to in the first bullet point; however, if the social assistance frontline workers demonstrate that they are familiar with the legal/administrative issues behind the provision of benefits, citizens often do not fully understand them.

Even with respect to the variations and importance of the concept of trust, there is some similarity between what was declared by the social assistance frontline workers and by the citizens, as well as the need for confirmation of the helping relationship over time which emerged in all the stories.

The greatest dissonance found between the two groups of interviewees concerned the understanding of each other's roles and responsibilities in the process of taking charge. In fact, the social assistance frontline workers often emphasise that the user must be self-determined, be an active protagonist of the aid project and that ongoing checks are

planned on the consistency and effectiveness of the same, also in terms of user adhesion and compliance; on the other hand, most citizens seem to rely completely on the social assistance frontline workers, demonstrating that they have a low awareness of having to play their part, and ignore the evaluation processes behind the decisions/actions of the social assistance frontline workers.

The professional social assistance service in Italy recognises trust as a founding value of the helping relationship between the social assistance frontline workers and the citizen. The professional, technician of the relationship, directs the dimension of knowledge, knowing what to do and how, and knowing how to be professional towards the construction of a relationship in which the person is placed at the centre and feels accepted, respected and understood. The helping relationship aims to accompany the citizen in the use of their own resources and the context, enhancing autonomy, subjectivity and the ability to take responsibility in order to prevent and deal with situations of need or hardship, and to encourage inclusion processes (Art. 11 of the Italian code of ethics). The complementary, promotional and collaborative nature of the helping relationship is connected to the advocacy role of the social assistance frontline worker as a bearer of requests, a professional who commits their skills and institutional power to protecting the rights and interests of the person and the community (Art. 7 of the Italian code of ethics). In fact, it should be pointed out that the trust dimension also concerns the relationships between social assistance services, formal and informal subjects in the territory, or those collaborative practices aimed at developing a more aware, competent and responsible community. Social assistance frontline workers are an integral part of policy making under a double profile: on the one hand, they always give a political response to the needs of citizens, while on the other, given their frontline position in social services, they are directly involved in what is defined as a finalised street-level experience, to inform bottom-up policy-making processes. In this sense, the trifocal approach that characterises the professional social services in Italy emerges, aimed at being an operational hinge between individuals, communities and institutions.

The relationship between social assistance frontline workers and citizens is characterised at the same time by its asymmetrical nature: the professional is in fact invested with an institutional power, related to their role within the institution in which they operate, with a legal power to which they must refer, and a professional power related to the knowledge and skills of social work. To bridge this gap, the professional is required to be transparent and clear regarding the sharing, restitution and motivation of the evaluation and decision-making processes operated in science and conscience. In cases of non-spontaneous access to the social services, the imbalance of power is more evident and the social assistance frontline worker, in order not to undermine the fiduciary dimension of the relationship, is required to make a further methodological effort: In fact, it is necessary to work even harder on consensus in the relationship and on understanding for the expansion of the person's spaces of self-determination; operating with a view to reconciling rights and duties, placing the achievement of desirable objectives at the

centre of reflection within a temporally defined pathway. In this sense, the purpose of the professional mandate becomes the pivot around which to reconcile the dual function of help and control.

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# The Bifurcated System of Social assistance in Poland: Personal Relations of (Dis)Trust and Impersonal Bureaucratic Institutions

Sebastian Sosnowski, Wojciech Gędek, Dorota Szelewa and Maria Theiss

## 1. Introduction

### 1.1 Polish welfare state regime and social assistance system

Poland belongs to the *Central-European welfare states* (Fenger, 2007; Zgliczyński, 2017). Its welfare regime is described as a hybrid of universalist, an insurance-based and a residual regime (Cerami, 2006; Księżopolski, 2011). Scholars also characterise it as a *conservative familialistic welfare regime* in which some welfare responsibilities are privatised (Glass & Fodor, 2007; Javornik, 2014), *clientelistic conservative* regime (Golinowska, 2018) or an *emergency welfare state* (Inglot, 2009).

The Polish social assistance system is decentralised according to the principle of subsidiarity which is enshrined in the Constitution of Poland (Regulska, 2018). Hence, the 1990 Local Self-government Act (Dz.U. z 1990 r. no 16, item 95) stipulates that a large part of social assistance provision is the responsibility of municipalities. The Social Assistance Centre (*Ośrodek Pomocy Społecznej*) (hereinafter: SAC) is the municipal primary social assistance institution in Poland. SACs employ frontline workers, such as reception desk workers, social workers or family assistants. The Ministry of Family and Social Policy and regional representatives of the central government (voivodeship offices) coordinate joint efforts of the social assistance institutions in the region, and control financial transfers to cover the costs of those national welfare tasks which are implemented by the SACs. Local and regional governments finance their own tasks enumerated in the law. The level of fragmentation is not high, although provision of benefits and services is split between local, regional and central institutions, and providing services is often outsourced to non-governmental organisations. Apart from social-assistance benefits, some benefits for families are also granted at municipal level, such as universal family benefit 500+. In this case, though, frontline-workers' autonomy in decision-making about benefit granting is so low that municipality frontline workers have not been included in this study.

Social assistance benefits in Poland are non-contributory and means-tested. The provision includes both in-cash and in-kind benefits. The main in-cash benefits are: the permanent allowance; the periodic allowance; the earmarked allowance and the special needs allowance; benefits and loans for economic independence; assistance for becoming independent and continuing education; the supplementary parental benefit. In-kind

benefits and services include: social work, specialist advice, contributions for health and welfare insurance; payment for a funeral; provision of shelter, food and necessary clothing in hardship; care services; board and service in social assistance (nursing) homes; education, family counselling and family therapy; credited tickets.

Although the official eligibility criteria for receiving social assistance is fixed by governmental (and local) regulations, Trochymiak (2018) argues that the discretionary powers of street-level social workers remain an important feature of the system, mainly through 'juggling' of documents and 'creaming' clients. The former refers to withholding documents (or asking for additional ones) needed in the eligibility verification process, to help or punish 'undeserving' clients in the means-testing process. The latter relates to serving only a small group of promising clients at the expense of others deemed to be 'unreformable'.

In the last two decades, the social assistance system has undergone numerous reforms. Among them were the introduction of the activation paradigm in social assistance (Rymsza, 2014), increasing specialisation and the separation of administrative work of granting services and benefits from social work that in practice means the establishment of separate units in SACs' structures, either dealing with formal procedures, or running casework with clients (Chaczko, 2016).

## **1.2 Organisation of the research in Warsaw**

Interviews which are analysed in this report have been conducted with frontline workers and clients of SACs in Warsaw. According to official reports, the most frequent problems for families living in Warsaw are: long-term or severe illness, disabilities, poverty, parental and pedagogical problems and unemployment (Urząd Miasta Warszawa, 2019).

When recruiting frontline worker interviewees, we followed a two-step procedure. First, we contacted directors of SACs in five different city districts. All of them gave us permission to conduct research in their institutions and distributed requests for participation among their employees. Thus, we received the consent for participation from between two and five frontline workers in each SAC. Accordingly, 18 face-to-face, semi-structured interviews were conducted with 16 women and 2 men, each lasting approximately 1.5 hours. They took place on SACs' premises. Fifteen interviewees worked as social workers and three were family assistants. Their length of working experience varied from two to thirty years. Their functions were diverse and included handling administrative procedures of granting help, as well as social work with families only. All interviews were conducted between March and October, 2020.

Recruitment of citizens who have children under the age of 18 and who are beneficiaries of SACs in Warsaw was done through printed advertisements in public places, online advertisements in local social media groups and a snowball sampling. Overall, 18 people responded to our advertisements and were included in our sample. This group consisted

of twelve women and six men from seven different districts of Warsaw. Most of them were in their thirties and forties. Almost all of them had at least one child under their care at the time of the interview. Two of the interviewees were obliged to pay alimonies and had the right to see their children. Interviews were conducted from February to March, 2020, and then from July to August 2020 in different locations (parks, playgrounds, cafes, interviewees' flats). Each beneficiary of social assistance we talked to received financial remuneration equal to 50 PLN (approx. 12 euros), financed by the University of Warsaw.

Three people were involved in conducting interviews. Coding of transcribed interviews was done by four team members. At the preliminary stage of the coding, the differences in coding were discussed among team members to develop a common team approach to the coding procedure. Preliminary findings were discussed among Polish team members in order to collectively reflect on conclusions.

## 2. Interviews with social assistance frontline workers

### 2.1 Frontline workers' professional background

Interviewees' position and function within the social assistance system differed. As noted, the majority were social workers and three of them were family assistants. Most of the researched frontline workers explained that in the Warsaw's SACs, where they work, the tasks are indeed divided between caseworkers and frontline workers who handle administrative procedures of granting benefits and services. Although only the former provide specialised assistance to families, those interviewees who are responsible for administrative issues still only **perceive themselves as social workers**, as reflected in the quote below:

*Nowadays, I am a part of the administrative proceedings department, but I just do not exactly feel like an administrative employee (...) I still fulfil the social worker's role (...). I primarily work on social issues with a client. I try not to be a bureaucrat, but a social worker (PL SLB9).*

Most of interviewed professionals reported to have completed MA-level education, mostly in social work or related fields. Generally, older social workers most often had only vocational education in social work, illustrating the change in requirements for recruitment processes in past years and now. Family assistants remained a notable exception, as one of our interviewees explained:

*When I started as an assistant (...) there was a course for [potential] assistant workers, but the preparation and experience I had [previously] was enough to get the position. Assistants who start their career now, have similar courses, too (PL SLB8).*

Frontline workers expressed a wide range of motivations to work. Professionals that fulfilled their planned career path used expressions like: ‘helping others’, ‘being curious’, ‘enjoying working with people’, ‘being fascinated with family as such’. Others, especially family assistants, emphasised randomness of their choice of a profession, notably saying: *“I even ruled out social assistance [work] at the beginning (...)”* (PL SLB2). At the same time, interviewees were quite experienced; the duration of their employment in the field ranged between two and thirty years, often in one institution. Social workers who had worked in different fields before choosing their current position, held positions mostly in the non-governmental sector and public institutions, such as schools.

## 2.2 Granting benefits and services: overview of the system

When speaking of their clients, interviewees used words like: ‘*podopieczny*’, ‘stakeholder’, ‘person’ or ‘a family (member)’, but ‘a client’ was the most common term, used in diverse contexts. *Podopieczny* is a more old-fashioned term which could be described as ‘someone who is taken care of’.

Social workers, when asked about values and main goals of the entire social assistance system, focused on three main points. First, they underlined that social assistance is only one part of a multidimensional institutional setup aimed at assisting vulnerable people. This was expressed by one interviewee in the following way: *“I always say that social assistance is the very last part of the support-chain”* (PL SLB6). This assumption is connected to the aforementioned opinion held by professionals, that **they are not ‘bureaucrats’ because they run highly specialised practical tasks and are directly involved in people’s lives**. Second, interviewees maintained that the main aim of the system is to motivate<sup>65</sup> beneficiaries to be as **self-sufficient and as active as possible**, as expressed in these quotations:

*It is the approach, first and foremost, that has been evolving into trying to make clients more aware because they also have the belief that we should care for them (...) the way their life looks like, in the majority of cases, depends solely on them (...) The help should be short, if it is possible* (PL SLB6).

*We sit down and ask how they see their own situation and possible solutions to improve it (...) how would they do it. To somehow guide these people to be active* (PL SLB5).

Third, it was emphasised that social assistance ought to have a **voluntary character**, with no coercion involved. Instead, it should be a form of aiding clients to realise their potential: *“Anyone has the right to refuse [the assistance] at any moment”* (PL SLB13). As one of our interviewees pointed out, educational activities play a significant role in creating

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<sup>65</sup> The need ‘to motivate [them]’ was an expression frequently used by interviewees when discussing their relationship with clients.

clients' potential for self-help, in particular in such spheres as childcare competencies and family budget discipline. This suggests that the aforementioned potential of clients' self-help should be, according to some of our interviewees, developed in a somewhat top-down approach.

In practice, contrary to the declared goals of the system, interviewees seemed to **focus their attention on means-testing**. Our discussion partners were saying that questioning clients about their financial means was one of the first steps in the process of granting help: *"I ask about the income, financial means of the family because (...) we have those eligibility requirements in the social assistance"* (PL SLB4). Professionals also mentioned that users must meet requirements for assistance provision:

*Clients have to meet certain criteria* (PL SLB9),

*We must have proof in the documentation that prerequisites are met (...)* (PL SLB1),

*First of all - we have to precisely determine an income* (PL SLB6).

The topics of means-testing and truth-testing were the most prominent in interviewees' narratives concerning the procedures granting in-cash assistance. One of them described the other important part of the picture - **identifying clients' needs**:

*For us, the workers, sometimes the biggest problem a family faces (...) is not the same as the one pointed out by the family. That is why we (...) set goals and a plan of action so precisely, [trying] not to be imposing or discouraging towards clients* (PL SLB15).

We asked our discussion partners about how clients typically enter the social assistance system. Frontline workers explained that clients initiating the contact themselves is the most typical situation: *"The majority come by themselves"* (PL SLB1). Nevertheless, professionals emphasised that third parties - such as schools, the police, family members also report a family in crisis to the SAC, which is able, in turn, to contact the family. According to interviewees, only in specific cases (especially these involving children) clients could be forced by the court to cooperate with caseworkers:

*Sometimes, the court notices there is a need and reports it back to the social assistance institution. Then it becomes harder because such families usually have little motivation and do it [all] out of obligation, as they are forced [to do it], so the relationship is far worse, especially at the beginning* (PL SLB8).

Our interviewees' descriptions of the procedures for granting help indicate that they are **precisely defined by the law**, and are described in the following way: *"...a social worker has 14 working days to interview you [a client]"* (PL SLB16). Other social workers added: *"(...) the basis for issuing a decision is conducting an interview at the place of residence. This is the formal requirement (...)"* (PL, SLB1); *"(...) a big part of an interview is usually about providing official declarations [by a client]"* (PL, SLB9). Thus, although the initial

part of the proceedings can take place in the social assistance institution and may involve informal initial talk with potential beneficiaries, no later than two weeks later, a formal interview (*rodzinny wywiad środowiskowy* - interview with the family) must be conducted, and it is almost always carried out in the clients' home. The interviews in the citizens' households were described as more relaxed and fruitful:

*But when I go there (...) persons behave differently than in the institution. One would think that we are more at danger during an interview because we are in someone's home, but often I have this feeling, while we are at the interview, that the family is more open, confides more of its problems, reacts differently to all the information about (...) documentation (...) (PL SLB4).*

According to our discussion partners, the interviewing process was aimed at learning more about clients' problems, needs, and formulating possible solutions (setting an action plan). However, one of interviewees referred to a severe drawback of the process - the **requirement to repeat an interview** in cases when a caseworker assigned to a given family is replaced by a new employee: "*(...) clients complain they have to talk to other workers about things (...) they are ashamed of (...)*" (PL SLB4).

As reflected in the quotes above, because of the formal nature of the procedures, our interviewees highlighted handling the documentation is an important aspect of benefits' granting procedure. At the same time, an interviewee pointed out that social workers have **some limited discretion regarding documents**:

*When it comes to the required documents, one person will hammer requests to bring them into the client (...), the other (...) wants to help and one phrase in a statement is sufficient (PL SLB10).*

When asked about the required documentation, interviewees expressed an opinion that they did not have sufficient tools to learn about the actual situation of clients, e.g. they were saying: "*I will never [be able to] verify that*" (PL SLB9), even though the system is heavily **means-testing-oriented**: "*First of all - verifying documents. Without documents, nowadays a family will not get help*" (PL SLB2). The language used by our interviewees when discussing the vignette, also indicated that the **focus on legal steps and procedures** is an important feature of the system – they point out that meeting income criteria is a first prerequisite for granting family financial help: "*When it comes to financial help, the income criteria for sure, [currently] PLN 528<sup>66</sup> per person in a family*" (PL SLB12).

From the social workers' point of view, beneficiaries' behaviour could be controlled through social contracts (*kontrakt socjalny*); the agreement between the parties (a social worker and a client), a plan of action which was reported to contain:

*General rules of partnership, in a way obliging both a client and an assistant to certain [responsibilities]. The assistant, you know, to 'work' for the family,*

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<sup>66</sup> This amount is equal to 116 € per person, per month.

*and the family to take responsibility for itself, to cooperate with the assistant, to adhere to the rules; (...) punctuality, notifying the assistant (...)* (PL SLB8).

Professionals described that the **contract could be used punitively** when clients did not fulfil their obligations: *“It can be a reason for refusing aid (...) the periodic allowance too. (...) also, the permanent allowance”* (PL SLB4), but, as our interviewees reported, it **was used mainly with certain groups of clients** - such as persons facing unemployment or homelessness, and others unmotivated or unwilling to cooperate with social workers. Social workers have full discretion regarding whether and when to use this method of work with clients. One of the interviewees enumerated the typical expected behaviours included in social contracts: *“...meeting with a career counsellor (...) meeting a psychologist (...) applying for certain benefits”* (PL SLB18). It was not, however, referred to as only as a means of control:

*For me, it is a nice tool that makes things easier [for us], but also for a client. (...) he also sees that we, as [social] workers, make commitments. (...) So, for him it appears that we are [in fact] equal partners, cooperating with each other. It is not like I am only looking down on him, controlling the client* (PL SLB15).

Our interviewees, **when asked about the procedure of granting help to a hypothetical family described in the vignette<sup>67</sup>**, highlighted the role of financial benefits in stabilising the situation of the family in question, going as far as saying that **granting in-cash assistance should be the first step** (*“first and foremost”* PL SLB4) to *“contain the fire”* (PL SLB6) of the family crisis. According to interviewees, it was crucial for the family to **apply for all the other possible (non-social assistance related) benefits, because of means-testing is prevalent** in the social assistance system<sup>68</sup>: *“The family needs to do everything it can, to use all the opportunities”* (PL SLB4). Social workers mentioned instruments such as the permanent allowance, the periodic allowance and the earmarked allowance.

One of the social workers' tasks, highlighted by professionals, was the need to assist clients in navigating the whole institutional welfare system, not only the social assistance system. Frequent contacts with other institutions were thus needed. Social workers often expressed that helping clients in various application processes was crucial, e.g.:

*For sure [such a family] would receive advice on how to apply for the housing allowance because they experience hardships; they cannot pay their rent, so*

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<sup>67</sup> For a full description of a hypothetical case, please see the introduction or the appendix with interview guidelines.

<sup>68</sup> Opportunities include, for example, the 500+ universal child allowance, and certain types of municipal benefits.

*we would surely advise them [how] to spread their debt into instalments and apply for housing allowance (PL SLB3).*

*A worker from the specialised social work unit would go to a doctor with a client, arrange [needed] applications; they will go [through the process] together. He will look after and assist (...) (PL SLB10).*

When it comes to possible social assistance services, professionals focused on non-means-tested **psychological and specialised consultations** available at the institution. Such consultations were the basis of further referrals to more specialised therapists: “...here we provide a more temporary psychological care; it is not psychotherapy” (PL SLB13). Unfortunately, social workers claimed to face financial obstacles curbing their ability to grant benefits and services: “You know, everything depends on the financial resources we have.” (PL SLB18).

### 2.3 Frontline workers' organisation of work, routines and values

The organisation of interviewees' work depends significantly on the social assistance centres they work in, as the centres decide on their own **organisational structure**. In some of them, division of tasks was almost exclusively based on geographical factors – frontline workers were thus responsible for work with all needy inhabitants in a given neighbourhood. The second type of centres' organisation entails a stronger division of tasks and, apart from neighbourhood issues, being under responsibility of a given social worker involves the action of units such as: first-contact help desk; the unit of frontline workers responsible for administrative procedures; the unit of in-depth social work, units addressing support to specific sociodemographic groups, etc. In these cases, frontline workers' tasks were much more focused, and their general workload was smaller.

Overall, interviewees reported that the **number of persons or families they work with** was: around 40-50 persons a day in the case of 'first contact help desk' officers; between 30 and 50 (but in some cases it was between 10 and 70) families in a given neighbourhood which social assistants works with; and about 10 families in the case of family assistants. However, interviewees emphasised that translating their **workload** into the number of 'cases' makes little sense, as families differ greatly: with some of them, a constant contact to solve major and complex issues is needed, whereas with others (e.g. people receiving disability benefits granted by social assistance), only a sporadic contact of an administrative character is needed. Accordingly, being a social worker responsible for a neighbourhood inhabited by families with children at risk of abuse is perceived by interviewees as much more challenging than taking care of a neighbourhood of predominantly elderly people. Moreover, the workload differs significantly in various months of the year, partly due to changes in the money allocated to centres.

Most of our interviewees reported that they feel **overburdened with tasks**, and said this had three major reasons. Firstly, from their perspective, the social assistance system in

Poland serves as a 'big bag' into which all kind of social problems and issues are thrown. A variety of issues and new tasks at national and municipal level are frequently added to their responsibilities. Secondly, centres face serious understaffing problems. Thirdly, overburdening with bureaucratic procedures is growing: the length, complexity and formal prerequisites about how documents should be handled have increased dramatically. Interviewees are unanimous in their viewpoint that filling forms, writing internal reports, collecting documentation take up a significant proportion of their working time, and in many instances these procedures could be avoided if regulations were different (e.g. interviewees claim that if someone receives a long-term disability benefit, there should be no need for frequent updating information, etc). This is how a social worker describes this situation:

*There are very many problems and their number increases. Because we get new tasks all the time (...). I think the number of people working in social assistance centres in relation to all tasks imposed on us by the city is too few. We are too overburdened. We can't handle all this. And this is the reason for many very stressful situations for us. Many people leave this job. We have vacancies. Constantly someone is sick (...). I don't know why they [policy makers] want to make bureaus out of social assistance centres (...). I feel we lose the purpose of social assistance. They want to make institutions out of us, where people work behind a conveyor belt in a factory (...). But our client is a human being to whom we need to devote time. And we don't have enough time for that (PL PS 9).*

Most of our interviewees have their **working time divided** in, half the time for meeting and interviewing clients in their homes, and half the time office hours. The first group of tasks includes: interviewing clients and their family members for the sake of checking: eligibility for receiving benefits, problem identification, discussions on possible solutions, assisting clients during office visits, doctors, schools, cooperation with NGOs and other institutions, etc. Work in the office includes seeing clients, but also: re-writing interview forms from paper versions (paper documents need to be collected as official documents) into electronic systems, writing memos, reports and formal letters to other institutions. Frontline workers reported that overall, collecting piles of documents is a large part of their job. They revealed that their 'files swell' or they have to deal with enormous amounts of 'paperwork' or 'bureaucratic issues' constantly. Thus, their evaluation of changes caused by the Covid-19 pandemic was ambiguous. On the one hand, they pointed to its negative impact on contact with clients and some new tasks (such as checking the needs of people in quarantine); on the other hand, they found solving some issues by phone more efficient.

When asked about their **autonomy and scope of discretion**, most of our interviewees said that their independence is relatively broad, in particular in regard to decisions about timing and organising their own tasks, forms of help granted to beneficiaries and plan-

ning of the cooperation schemes with families, although they have to follow strict administrative procedures when granting all forms of help. Some social assistants with extensive experience underlined that their autonomy grew significantly as a result of acquiring more professional knowledge, so nowadays it is easier for them to make well-informed choices and to find their own space for manoeuvre.

What entrenches interviewees' autonomy is, from their perspective, the administrative aspect of their work. Many frontline workers we talked to used the expression that 'they are responsible for **spending public money**', so they cannot act voluntarily in this regard. This idea was expressed in a following manner:

*When spending public money, we are under control, so it doesn't work like this, that I'll grant some money as I wish. This all needs to be documented. We need to prove in the documents that all prerequisites have been fulfilled and that this very family qualifies to be covered with social assistance (PL PS 1).*

In a similar fashion, interviewees pointed to the following factors which have an impact on their autonomy: the changing and ever-more detailed and time-consuming administrative procedures they have to follow for their clients (e.g. related to a client's moving to an assisted living facility, applying for social insurance for homeless people, etc.), and the ever-more restrictive policy on personal data protection. In regard to the latter issue, interviewees argued that in the past, it had been easier for them to ask various local institutions (such as schools or clinics) about clients' situations, whereas now – official requests need to be placed.

The formal aspect of 'spending public money' is linked by interviewees with their work being **verified and evaluated by supervisors**. The number of supervisors that interviewees are subordinate to depends on the internal centre's structure and the position of the interviewee, but most of the frontline workers have: a team coordinator, a unit or division manager and the director of the centre over them. The subject of evaluation is i.e.: the number of clients, interviews and decisions, appropriate and timely fashion of 'handling documentation' and the qualitative content of work mirrored in internal memos and reports. Every two years, a major evaluation of interviewees' work is conducted. Thus, the managerial pressures which frontline workers experience are based on: the need to follow demanding procedures in a timely fashion and the high number of clients, and the complexity of issues, all of them being evaluated in quantitative and qualitative terms. One of social workers reports:

*So, the manager checks how many cases we have, how many of these interviews we do on a daily basis. So, this is checked and this is the basis of a monthly bonus for us (PL PS 3).*

The other explains how these pressures affect the quality of their work in the following manner:

*I think we should have fewer environments [families] per worker (...) Often, I feel I would be able to help someone more if I had more time, but I know that there is this Code on Administrative Procedure, so I need to hurry to be on time and there are more and more of these tasks (PL PS 11).*

Although our interviewees say they have a high level of autonomy in their work, they also claim that there are no major differences between their and their colleagues' style of work. One reason for this might be mentioned pressures and time constraints which give social workers little freedom for developing an individual approach. The other reason seems to be **the strong influence of teamwork** and working procedures which are typical for the given social assistance centre and its unit. Centres and units have, for instance, their own forms which clients fill out when applying for help, as well as their own practices about which documents to demand from clients<sup>69</sup>. Moreover, social workers explained that they learn the practical issues of their work from colleagues they 'sit in the same room with'. They also have team meetings on a regular basis about solving clients' problems. Teamwork is focused on making decisions about what kind of help to grant to a given client, and involves exchanging and cross-checking information on clients, discussing the interpretations of clients' situations and asking for the advice of colleagues specialised in dealing with specific issues. Thus, teamwork seems to be an important context of frontline workers' trust and distrust building, which is present in this quotation from the interview:

*[At the beginning], I was not aware that many people can cheat, so one needs to rely on the experience and help of other workers. Colleagues from my room were telling me about certain families. Because when you are new (...) the clients cheat and they say: 'That lady gave me this and that', so they try to take advantage of you, so we have to cross-check between us (laugh) (PL PS4).*

A broader teamwork takes place at the level of 'neighbourhood'. Our interviewees say that (in some instances, obligatory by law) **cooperation with third parties** such as the police, school teachers, doctors, family court representatives is aimed at exchanging information and helping certain families, an important aspect of their work in neighbourhoods. They emphasised that being trusted and trust among members of such local taskforces is a major prerequisite of their modus operandi. Other institutions they frequently cooperate with are: labour offices and employers, the social insurance office, courts and other social assistance offices. One of the goals of this cooperation is verifying clients' eligibility to receive benefits. Moreover, frequent contact with local NGOs is

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<sup>69</sup> There are legal regulations stating what kind of information/documents people should provide when applying for social assistance. Mentioned differences, however, refer to local implementation of these rules and include e.g. accepting copies of documents or original documents, as well as operational definitions--which set of documents suffices to receive help.

aimed at 'tailoring' the appropriate support to clients, such as specific courses on parental skills, etc.

Finally, frontline workers emphasised that **scientific knowledge**, mostly in the form of courses they attend, is invaluable in their work. A social worker gave us an example; when she first realised some children from families she worked with are involved in sending naked photos of their school classmates by phone, she did not even know what to name such a problem. Only after referring to new scientific literature and attending courses for social workers about cyberbullying, did she become aware of the nature of this issue and possible solutions.

When asked about their **individual values, goals** and how they actually use their autonomy, interviewees gave the following responses. In the first group of answers, a clear focus on **clients' dignity, respect, understanding and empathy** was present. Here, frontline workers were often saying that they try to work so that 'the client is treated as they would like to be treated themselves'. Opposition between client-focused and documents or procedures-focused work was drawn here very often. The need to avoid being susceptible, judgemental, controlling or overdemanding was emphasised here. A social worker who talked about such goals in her work explained she tries to even 'fight' with her supervisors for the clients she takes care of, so that they receive higher benefits, or are not required<sup>70</sup> to provide the documents she thinks are unnecessary to issue the decision about granting a specific benefit. The second group of answers referred to clients being **taught how to become independent, being shown how to access their own resources, feeling empowered and activated**, and mobilising for change. The interviewees who expressed such goals underlined that clients should be using social assistance for as short a period as possible and they – social workers – are not meant to take over clients' responsibilities. For example, one of the social workers explained that what she does differently than her colleagues is to follow her own rule regarding not calling clients when they do not contact her, which comes from her assumption that clients should not learn to rely on her more than is needed. The third group of answers focused on issues of **good administration** and involved the mentioned idea of 'taking care of public money being spent properly' and cases proceeding in a timely fashion. Finally, all interviewees underlined that, irrespective of their general professional goals, encountering the situation in which children are at risk forces them to take immediate action to protect them.

In most cases, frontline workers underlined that the **frequency of meetings with clients differs** depending on the client, and varies between having meetings every two days to every two months, but allows them to know clients well. However, some interviewees underlined that they are very close with clients who would call and text them frequently and reveal their secrets, while others repeated the expression that 'they are not their

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<sup>70</sup> This is because it is the director of the centre who formally issues the decision about granting benefits. Social workers need to prepare the documentation and decision, but the director decides whether to endorse it.

clients' friends' and never allow themselves to be addressed in a direct way ('you'), or to be touched, as they find it important to keep the relationship 'professional'.

When talking about relations with individual clients, our interviewees were explicitly making divisions between the following features of their clients. Firstly, there are clients who are **'truly needy', relatively new to the system, who 'want to cooperate', 'want to change their situation' and 'don't cheat'**. Secondly, there are clients who **'just want to get some benefits', who cheat, who are overdemanding** and are never satisfied with what they get. Thirdly, they mentioned **passive clients** who often 'inherit' being a social assistance recipient from their parents. Fourthly, there are people who have **mental illnesses**, intellectual disabilities, suffer from addictions, etc. which results in i.e. their violent behaviour. All our discussion partners underlined that 'each client is different and needs an appropriate approach', and that flexibility is essential. Although mentioned features do not translate into clear divisions of clients, social workers expressed the need to recognise which of the above groups a client is close to, and adjusting communication means and cooperation strategies, as expressed in this reflection by a social worker:

*Yes, very high flexibility [is needed] because there are demanding people who really need very simple, rigid rules and then you cannot deviate from it because then they want more and more from us ...and it ends up having a negative effect on [their] psyche (PL PS 11).*

The above quoted opinion shows that, although most of interviewees emphasised the need to be sincere, understanding and sensitive in communication with clients, their approach and use of discretion is, to a great extent, based on using appropriate approaches to clients' 'specificity'. In the above quotation – these are the rigid rules applied to 'overdemanding' clients. Other examples of such adjustments were given by a frontline worker who said he accepts copies of documents from clients unless he realises they have cheated on him. In such cases, he requests that original documents (e.g. from employers) be delivered to him, underscoring that such a demand makes the application procedure more difficult for the clients.

## **2.4 Trust understanding, sources and functions**

In most of our interviews, the issue of trust was addressed spontaneously by our discussion partners and was highlighted as a very important aspect of their work with clients. Answers to our specific questions about how our interviewees understand trust showed several intertwined aspects of trust understandings. Overall, they can be grouped into five major themes. Firstly, trust was associated with **revealing secrets, opening up and a confidential sphere** or a bond between two persons. Such an understanding of trust was based on the assumption that trusting someone is founded on a specific attitude of

the person who trusts –their ability to open up. This attitude was also described as entrusting secrets to someone. Interviewees who shared this understanding of trust gave some examples of its manifestations, such as: telling secrets, private stories or details about their past (client to a social worker), for instance, about a client’s criminal record. Secondly, in a few interviews, trust was associated with an attitude of trusting a person based on the **assumption that the client or any other people have good intentions** and they do not want to take advantage of us. This very notion of trust made some of our interviewees reveal that they trust clients ‘against all the odds’ – even if they have cheated. In some cases, those frontline workers who experienced clients lying to them were still holding onto the assumption that this had happened because of specific situational incentives rather than a clients being malicious, as explained in this passage:

*Trust with my clients is more about relationships than actions. I would say so. That is, despite the fact that, for example, he is lying to me, I trust that he wants this relationship to be beneficial for him. I would put it this way. So, it’s more about kind of good will than about some action (PL SA7).*

Three further notions of trust are focused on traits of the person being trusted: their level of trustworthiness or trusting when there is either a justified assumption or a knowledge that they have certain virtues. Thus, thirdly, trust was understood as **keeping secrets** – it was about trusting a person’s confidence that the relation’s counterpart will not reveal confidential information to a third party. Fourthly, according to some interviewees, it is trustworthiness which is central to trust. It is mirrored in truthfulness and more specifically in: **being honest, sincere, telling the truth**, informing the social worker about all the important issues in their life, not hiding anything, letting the social worker into their home when they come with no prior notice, being authentic and not pretending to be someone else, as shown in this passage:

*Often, the person presents completely contradictory information. Once he says, at the first meeting, that he is this and that type of husband, and at the second meeting, he says something completely different (...). And this is often the case in families with domestic violence. And then I’m confused and don’t know which information to believe. (...) If someone changes information like that all the time, then he is no longer trustworthy to me (PL PS 3).*

Finally, being trustworthy was associated by some interviewees not only with telling the truth, but also with a specific action: **doing what one has promised and keeping one’s word**. Such an understanding referred to clients’ actions: they were described by our interviewees as trustworthy when they do what has been agreed upon. In some cases, a client’s not keeping their word was presented as a failure of frontline workers’ work and as a major breach of trust, such as in this case:

*Probably the most painful for us, giving such a sense of failure at work is when we go to court if there’s a children’s case and we ask the court to make the children stay at home, and we say that this lady will cooperate, that she*

*will be looking after the children properly. We sort of guarantee that. And then it comes out that the lady is out, drinking somewhere and the children are wandering in the night alone through the city. Well, then the trust is the most damaged (...) it turns out that all this work we did has been in vain (PL PS 5).*

However, this actions-based notion of trust also relates to frontline workers' own behaviour: they emphasised that they "treat clients seriously" to gain their trust. In practical terms, it meant them fulfilling what they had promised, or trying to do even more to help clients. The three notions of trust based on trustworthiness are mirrored in keeping secrets, telling the truth and keeping one's word, things which rely on constant fact checking, and that have a strong impact on frontline workers' cooperation with clients. For instance, one of our interviewees told us a story about her work with a father whose child was taken into foster care as a result of an intervention. After collaborating with the father on a plan of action which aimed to reinstate his parental rights, the social worker realised he had lied to her about major facts in his life. Consequently, she decided to stop working with him officially, arguing that he was not trustworthy.

During the interviews, we were trying to assess whether in general, frontline workers are rather trusting or rather not trusting of clients. Overall, in most cases our interviewees were saying that at the beginning of cooperation, they give a client the 'credit of trust' and they assume that even if exaggerating or not revealing something, clients do not have a goal to cheat or take advantage of frontline workers. This is how this idea was unveiled in our conversation with a social worker:

*Q: "What in your opinion are the signs that a person or a family is trustworthy or not trustworthy?"*

*A: "Trustworthy?(...) I don't understand this question because I assume everyone is trustworthy" (PL PS 15).*

To our question about how frontline workers react when it turns out that clients have cheated on something, typical answers were: 'I still trust, but I check things' or 'I'm more alert, but I'm not overly suspicious.' These answers are consistent with some interviewees' responses to questions on whether they are more or less trusting now than when they started work. Many of them answered that they are pretty much as trusting as at the beginning, but more aware of how relationships with clients might develop. The following explanation by a social worker is representative of such an approach:

*[Earlier] I used to believe that what people were saying was true. Now I take it all with a pinch of salt and uncertainty, which means that things need to be verified. But overall, I think (...) you can't really have this job if you don't like people (PL PS 5).*

Contrary to ‘trusting against all odds’, many interviewees were saying that they do trust clients less than at the beginning of their work. They also emphasised, as explained earlier, that clients’ cheating, hiding information about undocumented work, or constantly not keeping their word are detrimental to trust.

Thus, overall, it seems that **interviewees were generally speaking about two intertwined but different aspects of trust** which they were able to decouple in many instances. Firstly, it was a trust based on the assumption that a client has the potential to change, cooperate and has some good will. Secondly, it was much a more conditional type of trust (and consequently, often mistrust) in what clients say or actually do. This is the example of how our interviewee referred to both of these aspects:

*If a person comes to you and says something, I always assume that it is true, but I leave a few percent to myself that it can still be verified. I mean, I give everyone a chance to come and tell the truth. If later it turns out (...) that she lied, I am trying to find out what the reason was. What caused this person to cheat me or to break some resolutions (PL PS 5).*

In this passage, we can see that the interviewee explains that even after the breach of agreement by the client, she tries to understand her motivations and avoids simply rejecting further cooperation. To sum up, taking into account both mentioned aspects of trust, most of our interviewees **leaned towards a trusting or carefully trusting attitude** towards clients.

A significant part of the interview with our discussion partners was about the factors which contribute to a/an (dis)trusting relationship between frontline workers and clients. The following issues were pointed out in this regard.

**Clients’ past experiences**, such as domestic violence, personal troubles and in particular – being alone, betrayed and left by loved ones have, according to frontline workers, a negative impact on a client’s ability to trust. Also, negative experiences with public institutions contribute to untrusting attitudes.

**Clients’ attitudes** based on openness, willingness to cooperate and improve their own life were seen as beneficial for building a trusting relationship with a frontline worker. In contrast, ‘overdemanding’ clients who ‘come only to get the benefits’ and who are not interested in having a personal relationship with a frontline worker, and moreover, often have the wrong ideas about what frontline workers are capable of or entitled to, were found unlikely to be trusting and/or trusted.

**Clients’ cheating**, in particular – hiding the fact of having undocumented work, and thus having secret income, as well as not keeping promises were underlined as trust-detrimental.

**Frontline workers being ‘not too young’** and being rather experienced, as well as the situation of not ‘too big an age difference’ between a client and a worker were found beneficial for trusting relations.

Frontline workers’ **open communication** – both patient listening and thorough explaining of procedures, and of what the client might expect in certain situations, was presented as contributing to trust development. In a similar fashion, frontline workers emphasised that not relying on what other workers or third parties say about the client helps to establish a trusting relationship with a client.

In more general terms, our interviewees argued that **time is necessary** to establish a trusting relationship with a client. It was often emphasised that trust is something which needs to be learned, achieved and worked on by both sides. Common experiences of clients and workers, including the difficult ones, such as overcoming client’s personal difficulties are also trust beneficial.

**Expressing trust** – be that in action or verbally, was seen by our interviewees as a factor which contributes to a positive spiral of trust and its mutuality. Frontline workers often said: ‘I trust those people most who trust me’.

A few factors related to how the social assistance system treats clients were presented by our discussion partners as trust detrimental. These were: the need to check, **verify and comment** on clients’ actions and behaviours. Social workers argued that, in particular, commenting on parents’ methods of raising children and parents’ disagreements on frontline workers’ opinions are sources of mistrust and conflict. Secondly, submitting or the threat of **submitting information about a client to a third party** is, according to frontline workers, what clients fear. In particular, clients are fearful that details of their private conversations with frontline workers will be filed to family court in cases against parents, making clients not trusting. Thirdly, **clients’ fear of children ‘being taken away’** from the family results in clients’ difficulty in trusting the social assistance system. In contrast to mentioned obstacles in building trust, the situation where a family asks for support from social workers out of free will (and not as a result of an intervention to protect children) is perceived as a good foundation to trust development.

Interviewees pointed out several issues **why trust is beneficial in their work**, and what the consequences of trusting relationship with clients are. Firstly, they argued that overall, **trust is the basis of social work** and thus cooperation with a client is in general not possible without some degree of trust. They have highlighted that work on trust relationships is the core difference between their job and the work of, for example, municipal officers who just grant some benefits after receiving completed forms from citizens.

Secondly, frontline workers argued that trust helps them **obtain valuable information in an efficient manner**. A client’s opening up as a result of trust leads to frontline workers’ ability to recognise and define important problems, needs and resources to provide

help. In cases of third parties, trust translates into interviewees' quick access to informal information in the local neighbourhood about family problems.

Thirdly, frontline workers showed **how trust might function as a replacement for documents or specific information**. For instance, in some cases, if clients do not have access to specific documents, their own written declaration, e.g. about their income, might suffice which in turn makes the procedure of applying for help easier. In a similar fashion, interviewees emphasised that if they trust clients, their work is much easier because they do not have to check every detail the client offers.

Fourthly, most of our discussion partners emphasised that **trust in a social worker is a prerequisite to overcome clients' fears and doubts about decisions which may be life-changing**. This is partly about relying on a social worker and following their advice, as this report details:

*If they see that they can trust us and only want what's best for them, that we want to direct their lives, they are somehow able to get out of the hole they were in (...) they feel that there is someone who stands there for them and supports - this is very important for them (PL PS 11).*

But this function of trust also motivates clients to change their own lives for the better because they feel they have a say and some autonomy in deciding which action to take. This has been differentiated by our interviewees from the situation in which a client is forced to take some action to comply with prerequisites. Finally, our discussion partners argued that trust is also a **means to avoid conflict** with clients and with colleagues, and it makes the contacts smoother and easier.

### 3. Interviews with citizens using social assistance

#### 3.1 Social background of interviewees

Our sample in this part of the research consists of 18 interviewees who were people living in Warsaw with experience of using social assistance. They used seven different Social Assistance Centres from the period of a few months to over 10 years. Most of them were in their thirties and forties. Their family situation was diverse and included: single parenting, parents paying alimonies and families with one or more children. The majority of social assistance users lived with children. Some of them had to share a household with relatives or even non-relatives, due to no housing or to reduce rent expenditure. Others lived in social housing flats.

Interviewees pointed out various reasons for using social assistance. In all cases, these were multiple and intertwined. Everyone **mentioned economic problems in their households, such as unemployment or a low income**. Changes in their financial situation often related to changes in their family (new child, divorce etc.):

*With giving birth to my daughter, my work contract expired. Next, I was on maternity leave, but that ended, as well. Because my daughter is still very little, I have no possibility of going back to work. And my partner turned out to be irresponsible, so he does not pay for the maintenance of the child (PL CIT 06).*

The other common reason for applying for social assistance was health problems, generally, one person in the family (a parent or a child). The majority of citizens experienced their own or other family member's physical or mental disability. They also pointed out that health problems stopped them from working:

*It's not that I don't work because I don't want to. I have chores to do or our family wouldn't function. Currently, my partner washes two plates and then collapses in pain. So, I must do everything – cooking, shopping, washing dishes, making beds, cleaning, going out with the children. (...) I don't say I'm so miserable because I have to do everything. But I want someone to understand me. Not telling me: 'Sir, you're a 46-year-old, healthy man and it is not abnormal for you to work an 8-hour shift (PL CIT 10).*

These are the main categories intertwined with others that have happened to interviewees' families, such as low housing standards, experience of domestic violence, homelessness, or imprisonment of a family member.

Respondents rarely commented on their interest in politics. When they did, they stated **no interest or even hatred for politics**. Many compared politics to a game played between two sides, in which politicians do not care about citizens:

*Q: "Is there any political groups that you trust more than others?"*

*A: "No. For me – nothing about politics. I'm not interested in politics. For me, it's simply game-playing between them" (PL CIT 18).*

Political sympathies shown in interviews were heterogeneous. When citizens were asked which party they voted for, they mentioned all the political parties or coalitions present in the Polish parliament except the Polish People's Party (PSL). They rarely stated what media they followed. Only the Polish state media corporation, TVP, was associated with certain political views - supporting the ruling party, Prawo i Sprawiedliwość (hereinafter, PiS). Some interviewees showed a specific approach to politics – choosing between the ruling PiS and the biggest opposition party, Platforma Obywatelska (hereinafter, PO), which they called "...the lesser of two evils" (PL CIT 16). Such division was also strong among their families and friends.

When asked about trust in politicians, the majority of respondents **expressed no trust in political parties**. Some raised the argument that politicians are detached from reality:

*Q: "In your opinion, is there any group, political party which care more about helping people than others?"*

A: *“Honestly? I haven’t noticed. Before elections – then they care. After that they don’t give a shit about us. You know, I’ve never voted. I’m 50 and I’ve never voted because I have had no one to vote for. For me, there is no ‘the lesser of two evils’. I don’t accept that. The evil is the evil. Smaller, bigger, it will always suck either way, less or more”* (PL CIT 13).

Citizens were also asked a question about Poland leaving or staying in the EU, with supporting arguments. To support staying in the EU, respondents often stated that subsidies from the EU help build infrastructure. Those who took part in workshops argued that such initiatives are financed partly by the EU. Single respondents mentioned that it enables Poles to work abroad, guarantees respect for the rule of law in the country, and helps create multiculturalism.

The EU opponents said that in this organisation, Poland is treated as a country of *“inferior status”* (PL CIT 04), and adopting the euro would lead to economic deterioration. A few people agreed that the EU’s economical existence is rational, but political aims and values are different for every country, therefore as a political project, they maintain it does not work.

The third group of interviewees said they had no knowledge of the EU helping the disadvantaged; hence, they could not form an opinion.

### 3.2 Applying for benefits and services, and opinions on the social assistance system

All interviewees had experience of using social assistance at the time of interview. They were related to SACs, but mentioned that in doing so, they also had to contact other institutions, namely the labour office (in the case of unemployment) and the Social Insurance Institution (in the case of disability). Using social assistance from these centres also meant that they had already obtained benefits from their local municipality. Centres served as the *“last resort”* place.

Moreover, some of the benefit receivers pointed out that **they had to prove that their relatives were unable to help them:**

*I mean not trusting in terms of verifying whether help is not exaggerated. (...) For instance, if I can’t get help from my family, if my family can’t help me. I have a large family. They checked my mum, my dad (...). But it was like that: some letter was sent, and they had to answer they couldn’t help me* (PL CIT 14).

Social assistance users could apply for both financial benefits and services. All interviewees received benefits. The type of financial support depends on problems in the family. **People with a disability obtained permanent or temporary benefits.** Others received a **‘targeted benefit’ which they needed to apply for monthly.** Families could also apply

for **lunches at school** for their children. In the case of services, interviewees used various types of workshops, psychological and legal consultations, and family assistants. Interviewees often stated negative opinions on benefits, generosity and the quality of services (e.g., having to wait for consultations, ineffective workshops).

To apply for social assistance benefits, interviewees had to **visit their district's centre, fill out an application and sign it**. Then the centre's workers contacted them and appointed an **interview in their home**. During that interview, workers investigated their life situation, described it, and collected necessary documents to prove it.

Respondents mentioned two main groups of documents which are related with reasons for using social assistance: economic situations were proved by **registration at the labour office**; written income statements and documents from the local municipality to prove the use of benefits they were entitled to; in the case of single parents, decisions on alimonies paid to children were necessary. Those documents underwent verification and means testing. Some benefits, despite not legally being considered as income, were also mentioned in the decision issued by Centres.

Other type of documents which interviewees need to submit relate to the health situations of family members. These documents include: formal medical confirmation of disability (level), or medical records. Apart from those documents, some respondents had to show invoices or receipts for items bought with benefits. Such control depended on a social worker:

*[reporting what a worker said] 'Madam, I am going to teach you how to spend money. You buy two kilos of potatoes, sugar, this and that. You get a receipt and put it into a notebook'. (...) Am I dumb? Why do I have to show her my receipts? (PL CIT 02).*

Our interviewees reported that social workers sometimes tried to **verify those documents with external information sources**. Some of them stated that workers reacted to neighbours' complaint reports. One interviewee was a SAC's client as a result of a police intervention. Some also experienced their children's school achievements being checked by social workers:

*A school counsellor called me and told me the office asked about my children, how they did at school, if they had complained about their parents. And this was not fair, because everything was done without telling us about that (PL CIT 07).*

Interviewees' opinions on the social assistance system were strongly **dependent on their specific experiences with social workers, mostly during visits to respondents' homes**. Our interviewees emphasised that overall, the **procedures of applying for help were time-consuming both for them and for social workers**. One of the reasons was a need to provide similar information **repeatedly by answering the same questions**, or to

provide the same document every month. Some of the questions asked during interviews were of a personal nature. Interviewees often stated that telling the same story repeatedly is emotionally tiring and embarrassing:

*I think they have too many papers to fill out, those people from the Centre. They just beat about the bush, 300 times asking for the same. And it's not their fault; they have to put everything on paper, so they just do it. I get pissed off hearing the same questions for the fifth time: 'I've already told you. You have it in the papers. Why the hell do you ask me that?'- 'I have to.' So, if she has to ask, I have to answer (PL CIT 13).*

Other unpleasant situations which resulted in negative opinions on the system were those in which workers controlled the household in a manner which interviewees perceived as a violation of personal borders. A frequent example of that was a social worker **opening the fridge without permission when visiting a client**, to check what was inside.

Respondents also expressed **negative opinions about generosity of benefits** and explained how it changes throughout the year:

*For instance, if I go there before the end of the year, they need to get rid of money, as such a one said: 'We need to get rid of money, so tell me what you need'. So, I told her: a duvet, bedding, this and that. (...) And she comes in January and: 'First I have to tell you we have no money'. So, I told her: 'OK, you know what, write down that I need for food, gas bills...' – 'But I warn you, it will be refused (PL CIT 02).*

Social assistance users also pointed out that the **system is wrongly targeted**. To support that argument, they provided two types of stories: about people using social assistance and working without registering it, and about people addicted to alcohol. The first type was less common, as some of the interviewees worked while using the system and, in some cases, it was not perceived as negative. The second type occurred in almost every interview. Respondents stated that addicted people get higher benefits, are not required to do anything, and probably spend all the money on alcohol:

*I think they should help people who spend that money for good. I can't understand why people who have alcohol problems, they can go and get help, but people who are really in need, like us, who exceed the limit by 10 złotych [app. 2.50 euros], such people can't get decent help. Because the needs of, let's be blunt, a drunkard and the needs of a five-person family, they're incomparable, right? (PL CIT 07).*

When speaking about their own attitudes towards the system, the majority of interviewees **expressed disappointment in either the received help or being denied help**. When asked for the reasons for such decisions, workers often stated that it depended on the centres' material situation, or the personal decisions of their supervisors.

Some people decided to get out of the system, like one of the interviewees. Despite being unable to pay for her child's therapy, the middle-aged, divorced woman with a disabled child took up low-paid care work because she was denied help at the centre (PL CIT 08).

Others **decided to cheat the system and work in the grey zone**, or borrow money from whoever they can, which led to financial stalemate. One of the respondents in such a situation decided to beg for money on the street:

*Sometimes, I go out and beg, what can I say? I won't go stealing, I ended up with that, I'm not interested in scams or stealing, but I go and ask for money (PL CIT 15).*

### 3.3 Relations with frontline workers

The benefit recipients were using **various types of labels** in relation to the caseworkers, ranging from more official and formal ways of addressing them, i.e. 'a social case-worker'/'a welfare officer' (*opiekun/opiekun socjalny*), to less formal or even colloquial labels, such as 'the lady' (*pani*), 'the gentleman' (*pan*), 'the social lady' (*pani socjalna*). The term 'social worker' (*pracownik socjalny*) was less often in use by the citizens. Interviewees also used an abbreviated form of referring to the welfare office, i.e. 'welfare' (*opieka*), which was also used in connection with a concrete case worker as a lady/gentlemen 'from welfare' (*pan /pani z opieki*). Some referred to their caseworkers' gender, using the label 'a woman' (*kobieta*), 'a guy' (*facet*), and 'a fellow' (*gość*). These references were usually neutral – one interviewee referred to 'women that [s/he] cooperated with' (PL CIT 16), but they were also used to a critical manner, for example, when one benefit recipient mentioned 'a stranger woman' (*obca kobieta*) doing the home visits (PL CIT 07), or in a positive sense as 'a dear woman' (*kochana kobieta*) (PL CIT 14). Three interviewees expressed their preference for female caseworker: one of them was arguing that the female caseworkers had similar experiences:

*These were women who (...) knew life. One of them had a disabled child herself, the other was a probation officer before, so they had enormous life and professional experience. And honestly, it's easier with a woman. (PL CIT 16)*

Similar, experience-related arguments, were raised by another benefit recipient, who worked with a male caseworker, although (s)he did not express any preference for the caseworker's gender:

*Some people, like this guy, seem like a normal fellow who knows life. The guy is much younger than me, and I can see that he has seen a lot in his job and behaves normally. I mean normal. It may be strange for someone (...) [that the caseworker] comes and lends him money. It was so human for me. Normal. (PL CIT 13)*

The interviewees' views on the organisational and individual aspects of their relations with frontline workers were quite diverse and most often varied **on the basis of individual characteristics, hierarchical position and the level of engagement of a given social worker**. The aforementioned variety of ways how the citizens called their case workers reflected, to a large extent, the **character of their relations** with the welfare offices. Hence, citizens, who knew the caseworkers' first names, had a more informal relation and knew them better. One interviewee, when mentioning the caseworker's first name immediately added that (s)he was 'in a good contact' with this person (PL CIT 14).

Further, several **interviewees had the impression that their caseworkers were cautious in making their own decisions and had less power** in the system. In one case, the interviewee noted that the caseworker could never confirm 100% whether the benefit will be granted (PL CIT 12), while another one experienced the situation, in which it was the social worker higher in the organizational hierarchy (therefore - other than the caseworker assigned), who was able to provide some additional assistance (PL CIT 03). As far as the frequency of contacts are concerned, a great majority of the interviewees reported that the meetings take place on average once per month, which was mainly attached to the schedule of monthly benefit payments, although three persons mentioned that the meetings took place 'whenever necessary' (PL CIT 09) or as a form of home visits that took place without prior scheduling, i.e. in the form of house checks, with no prior announcement.

**The importance to have the 'right' social worker** clearly came as a crucial factor influencing the citizens' relations with the welfare office and their opinions about how the system functions, especially when the caseworkers changed several times. A bad experience with the caseworker was the reason for one of the interviewees to resign from even applying for social welfare for some period of time. The same person also mentioned her/his neighbour having a similar experience that eventually led to the neighbour's refusing the contacts with the welfare office after having an unpleasant experience with the new caseworkers, leading to the neighbour's not receiving food supplies, which eventually contributed to his/her death, in the interviewees' interpretation (PL CIT 03).

One of the most important characteristics of the caseworkers perceived as 'bad' was that their formal, **cold and not engaged mode**. As commented by several interviewees, these caseworkers often made the impression of not being interested in the case, 'as if they as if they had a grudge that they had to do it' (PL CIT 09), or appeared 'outraged that they had to approach [the clients] and not the other way around' (PL CIT 13), often neglecting and not processing the case on time (PL CIT 10) or, to the contrary, dealing with the case in details, but being 'nosy' and controlling, emphasising hierarchical relations and power asymmetry.

Sometimes the difficult situations escalated into conflicts with the social workers, especially, when the benefit recipients had a different view on the solutions being offered.

One interviewee recalled the situation, when the social worker suggested that the interviewee's mother takes care of her granddaughter so that the interviewee in question could go to work and the situation resulted in an open conflict (PL CIT 06).

On the other hand, **there were also caseworkers characterised as 'empathetic'** and friendly. While six interviewed citizens highlighted 'empathy' as an essential characteristic of the social workers they either met or seek to work with, one of them stressed this throughout the whole interview referring to one social worker in particular:

*[Social Worker A] can do anything (...) [but] also this empathy that she wants to work with a human being, no matter if you have HIV or have taken heroin for 15 years, but she sees that you want to get out of this homelessness (...). When [Social Worker A] first saw me after leaving the empty building: shabby, thin, seventy kilos (...), she (...) did not write me out, on the contrary.*  
(PL CIT 11)

Another important characteristic of the 'good' caseworker **was the workers' readiness to offer explanation and advice**. The latter would include assistance with filling in the forms, even after 'taking the insults' from of the caseworker's supervisor' (PL CIT 17), being responsive, but also proactive in contacting the clients and able to anticipate any difficulties that may arise, as well as speeding up the process of granting benefits.

In sum, as stemming from the interviews with citizens, the relationship between the frontline workers and the benefit recipients relies very much on the individual worker's characteristics, willingness to engage in the case, empathetic approach to the clients, their knowledge about and willingness to speed up the administrative processes, as well as a proactive and pragmatic approach towards the client.

### **3.4 Trust understanding, sources and functions**

A diverse set of views on the clients' relations with the social workers is reflected in how the interviewees' approach the issue of trust. Among various possible interpretations of trust, the interviewees most often referred to trust as the possibility of revealing/opening up, support, help-giving and loyalty, followed by understanding trust as a 'confidential sphere' of parties.

As far as **the possibility of opening up is concerned**, trusting clients felt free to 'tell them [caseworkers] everything'. Clients declared that they revealed certain facts even if they could potentially lead to a critique from the side of caseworkers, or contribute to being rejected in the application for benefits process. An interviewee gave the example that they could tell their caseworker that they smoked, but felt it was enough to explain that they do not smoke in their child's presence (PL CIT 06); another one revealed that they have a job with no formal contract (PL CIT 11). This was often connected with **linking trust to the sphere of confidentiality**, as the interviewees felt safe revealing these facts

and were certain that the knowledge about these issues ‘will not go any further’, i.e. beyond the relationship between the client and the caseworker (PL CIT 14; PL CIT 15). Some caseworkers also guaranteed confidentiality through ensuring the office where the conversation took place was private (PL CIT 17). In contrast, when talking about distrust, our discussion partners referred to the lack of possibility to open up, lack of intimacy and the presence of third parties during the interview (PL CIT 08), or being treated in a very formal, bureaucratic way, summarised by one of the interviewees as “...[here is the] paper, the signature, fill it in, thank you [and that is it]” (PL CIT 15).

When it comes to treating trust in the context of **support, giving help and loyalty**, the interviewees perceived the issue of trust as manifesting itself through being offered the benefit almost immediately, or when the caseworkers had a kind of pre-emptive strategy to grant the benefits, even when not all the documents required had been collected, lending money when benefits were delayed or taking steps to offer help when the client does not meet all the conditions and hence – risking consequences at the workplace. The latter interpretation of trust is also linked to understanding trust in the context of **generosity and doing more than required**, which often included giving help even after formal relations had ended due to a change of caseworker or the interviewees’ place of residence. Consequently, distrust appears in the context of the *lack* of engagement and neglecting the cases on the part of social workers. As reflected by one of the clients – two of the social workers (s)he met in the office “...are sitting and drinking coffee, and when someone enters, they stay seated and ask: ‘Please, wait’” (PL CIT 05).

Clients declare much more often **that they are distrustful towards the institutions and/or the welfare office workers by default**. One interviewee mentioned that the welfare offices ‘have always had a bad reputation’ (PL CIT 07), another one perceived the lack of trust (and hence, no possibility of opening up and revealing certain facts) as natural, arguing that ‘it is clear that you simply do not talk about certain issues [with the social worker]’ (PL CIT 06). A similar view was shared by the interviewee, according to whom a default option, at least during the first meeting with a caseworker, is ‘the principle of ... limited trust...’ (PL CIT 06). Further, the clients also noted **the social workers’ lack of trust as a default option**, although this is often justified by some benefit recipients:

*They enter people’s apartments and [hear the people saying] that everything is borrowed (...) And they can’t do anything about it. [if] A good car is standing there [clients would say that] – ‘it is a friend’s or an uncle’s’, and they [social workers] cannot verify it (PL CIT 1).*

*It’s not that I am saying something and they are taking it for granted. They have to form their own opinions on everything, especially the more experienced ones. I respect this (PL CIT 16).*

Others expressed their discontent about not being trusted by default, especially when social workers were asking the same questions and requesting to confirm the set of information already collected by previous caseworkers. There were also cases where clients' distrust in social workers evolved into trust with time: for example, after the first meeting that left a rather bad impression, the caseworkers "*showed up from a completely different side*" (PL CIT 06); others gained their trust after appearing to be competent, engaged and providing the clients with information and advice, although sometimes this process took more time than initially expected (PL CIT 18).

Among the most important **factors influencing trust** our interviewees often mentioned **truthfulness and transparency in relations**, and being treated as individuals. At the same time, the **caseworkers' suspicious approach and not believing the clients was perceived as the single most important source of distrust**, followed by the clients feeling they are not being treated as individuals. For a few persons, trust or distrust were the consequence of receiving or being denied offers of help.

When it comes to the importance **of honesty, truthfulness and transparency of relations** and their effect on trust levels, the clients mentioned the social workers' transparent way of dealing with their cases, and being clear about the conditions that need to be met to receive the assistance:

*There are clear rules with [a Social Worker B]. If I don't follow these rules, you know there may be a problem with further help. But (...) these are the simplest rules, which means that you do not spend money on alcohol, children do not go dirty and hungry when you get money from us (PL CIT 6).*

*[a Social Worker C] is a really cool guy. He openly said what I can and cannot do. Where can I try, and when it doesn't even make sense for me to try because it's a waste of my time and so on. And I liked that, this approach. (...) But [in relation to] another issue, he said 'You know what, I know that it will definitely not work out, and you don't even have to try. Because I have no idea, really. I can only ask'. (PL CIT 13).*

In other cases, trust was strengthened by the caseworkers' openness about not being able to make decisions, delays caused by the paperwork getting stuck in the welfare office, or not being able to effectively intervene in the clients' case at a higher level in the office hierarchy.

Furthermore, the clients confirmed that **being granted assistance** was an important factor that helped them to develop relations with the welfare officers based on trust. This includes both: assistance with the preparation of documents and filling in forms, and receiving the benefits, often resulting from a smoother application process. At the same time, being disregarded by a social worker, feeling disappointed by the mistargeted way of assistance granted, or not being offered help at all were major reasons for developing distrust in the case of at least three interviewees. Often, distrust appeared

after **the experience with social workers who did not keep their promises and hence appeared unreliable**. One interviewee mentioned that the social worker neglected their case leading to serious delays and then explained that they were taking leave without prior warning including forwarding the documents to their colleague (PL CIT 09). Another interviewee complained about how the change of the social worker's position within the office negatively affected the flow of information within the institution, which contributed to the clients' distrust in the system (PL CIT 18).

As noted above, **the most important factor influencing the development of distrust was the attitude of the social worker not believing the client, being suspicious and disregarding the client's opinions**. Interviewees reported feeling interrogated on the one hand and disregarded on the other, which made them feel insecure and not sure how to adjust their behaviour during the interview, as if the social workers applied techniques to verify information collected elsewhere. This is an example of how our interviewee describes her conversations with a social worker, suggesting a need to be on the alert and adjusting the way of talking to children to a caseworker's ideas of good parenting. The client had made an independent decision on whether to send a child to kindergarten; there was no suspicion of negligence:

*[The Social Worker D] comes and conducts counterintelligence [meaning; investigation], and, God forbid, I'm telling my son: 'Sit down! Stand up!', [interviewee mocks the way she thinks that social worker would like her to talk to a child]: 'Do you wish to sit down, sit down, if you do not want to, then do not' (...). They ask: how is [name of a child – anonymised] doing in kindergarten? I say [that s/he] went to the kindergarten for two days, s/he got such a spasm that s/he did not go again (...). And they do nothing (...) only (...) to find something, such counter-intelligence (PL CIT 2).*

Another interviewee mentioned that she felt completely thrown after the first interview and has the impression that the social worker appeared from the start to have a 'kind of blockage' (PL CIT 16). Further, clients often felt that **social workers did not treat them as individuals**, often appearing as 'a cold bureaucrat' (PL CIT 15), not finding time to have an engaged conversation, but limiting their activities to home visits, 'doing interviews, preparing survey reports, collecting necessary documents' (PL CIT 10). Again, the issue of the empathy as potentially increasing the levels of trust was raised as important in individual approaches to clients:

*I think that such a case worker should understand problems of an individual family, not looking through rigid formulas (...), because maybe more people could help if they were more empathetic (...), if they actually talked to these people, like with a human being, if you have a problem, ok, let's sit down (...), we are not here to judge you (PL CIT 7).*

Finally, the **functions of trust** included, firstly, interviewees showing that trusting front-line workers helps them continue their cooperation with the welfare offices and **increases their engagement in the process**, which often leads to receiving assistance. As already mentioned, several interviewees emphasised that trusting their caseworkers and revealing various problematic facts from their life actually helped to **speed up the process and they felt that it contributed to their receiving assistance rather than being denied it**. Consequently, distrust sometimes led to clients being refused specific services: when one of our interviewees was offered to work with an individual family assistant (a consultant coming from a welfare office), (s)he refused because of her fear that this worker would collect information against them, which in turn would lead to their children being taken away. An assumption that family assistants in general mean to take children away from families was based on interviewee family members' and friends' experiences (PL CIT 02). Further, the presence of trust results in the clients **allowing the caseworkers to deal with their private issues**. One interviewee trusted their caseworker to the extent that they were willing to let the caseworker take care of their children (PL CIT 16); another client allowed the caseworker to contact the client's physician, as well as access their medical documentation (PL CIT 15). What was also stressed by some of the interviewees was how the presence of trust enhances their self-esteem and empowers them:

*Q: "And in your experience with the welfare office employees, was the issue of trust present?"*

*A: "Yes. It was present. I have the feeling that thanks to them I believed in myself, and in such people, that in fact when you go, you will receive help, [they are] not showing you the door because you are not entitled to it." (PL CIT 14).*

To sum up, citizens most often perceive the issue of **trust through the lens of social workers' individual dispositions rather than trusting or distrusting the institution**, although some interviewees admitted that they distrust the welfare offices by default. In the citizens' perception, trust is most often understood in terms of transparency in their relations with the social worker. Social workers who were empathetic and engaged in facilitating the process of granting assistance, positively contributed to the process of trust building, while being suspicious, controlling and disregarding the clients' opinions increases distrust. Finally, perhaps the most important function of trust is interviewed citizens' enhanced feeling of personal empowerment.

#### **4. Summary and conclusions**

The analysis of conducted interviews with frontline workers and clients of social assistance in Warsaw allows us to highlight the following features of the system which seem crucial as the context of (dis) trust building:

- The social assistance system in Poland **adheres strongly to principles of social work** and individualised case work with families (Rymsza, 2016; Szarfenberg, Trawkowska 2020). Frontline workers foremostly have an educational background in social work or in similar disciplines. When speaking of their professional identity, they often point to the differences between themselves and ‘typical’ municipal officers, and underline that their work involves personal trust relations with clients. Although in recent years a reform has been implemented which demands social work and **administrative procedures of granting help** be performed by different employees in social assistance centres, both types of action remain **highly intertwined**, at least from the clients’ perspective. This seems to be a confusing mix for clients, as both features of the social assistance system – social work and benefits granting **follow a different policy logic**. This confusion seems to be an obstacle for the processes of trust upscaling: even if a client develops a trusting relation with a caseworker, it is perceived by a client as a relation created ‘against the odds’ of an unfriendly system of social assistance.
- Families with dependent children who are in need typically **obtain such social assistance benefits and services** as: temporary or ‘targeted’ in-cash benefits, social work, help of family assistants, psychological help and free school meals for children. The process of granting help usually includes: formal application for help, interview at claimant’s home, **means-testing** which entails i.e. submitting documents about remuneration and other incomes, providing documents which confirm claimant’s status in the labour market, **interviews with relatives** to prove whether they can help claimants themselves, agreement on an action plan. Obtaining ‘targeted benefits’ in subsequent months entails providing documentation on expenditures. Both groups of interviewees find financial benefits low. Most clients we talked **to express disappointment in the level of benefits** what in turn affects their perception of the system in general.
- Both frontline workers and clients perceive the procedures of granting help as **time-consuming, overburdening them, involving pointless actions**, such as re-writing forms from paper to electronic version, delivering the same documents and answering the same questions repetitively. Interviewees from both groups would like to have more time for personal contact and talk instead. Understaffing and personnel rotation contributes to clients’ experience of ‘their carers’ frequent changes.
- Teamwork and close relations with third parties in the local community, as well as the relative autonomy of social assistance centres and their units in deciding how practically to organise the process of granting help (Trochymiak, 2018) contribute to **local (dis)trust settings** between social workers and clients. Caseworkers exchange information on clients and teach new employees about what to focus on and whom to be cautious of.

- Both frontline workers and clients recognise the **variety of 'types' and attitudes of relation counterparts** in the social assistance system. The former speak of differences between 'cooperative' clients and overdemanding or cheating ones. The latter underline the differences between 'cold bureaucrats' and 'friendly people'. Both groups share the opinion that luck plays a part regarding who you are assigned to work with, since the key to a beneficial relationship appears to be good and effective communication. Recognition of the 'type of person' one's counterpart should be offers a motive for frontline workers and clients to establish a trusting relationship. Being assigned a 'good' social worker is seen as invaluable to clients.
- Both groups of interviewees have some **shared notions of trust** which include: an assumption that the counterpart of the relation does not want to harm us; the idea that trust means opening up; the idea that trust is based on verified trustworthiness which refers mostly to keeping secrets, telling the truth and doing what one has promised. There are some shared concepts about sources of trust. They include: open communication, enough time and working experience of frontline workers. What hampers trust-building is i.e.: revealing information to a third party and the risk of children 'being taken away' by frontline workers.

As noted, frontline workers and clients of social assistance agree mainly on evaluating the social assistance system as a highly bureaucratic one, involving time-consuming procedures and pointless repetitive actions. They also seem to share the assumption that counterparts of the relations between frontline workers and clients are very diverse, and thus the trust-building process refers to a specific relation with a specific person, rather than one's attitude towards clients or workers in general.

Main divergences in experiences and opinions of frontline workers and welfare beneficiaries referred firstly to the **evaluation of frontline workers' autonomy**. Although frontline workers tend to perceive their autonomy as relatively high, clients find this autonomy very low, and emphasised that frontline workers need to do what the supervisors and the system in general requires them to do. Such an opinion of clients on frontline workers' autonomy might be yet another cause why apparently **positive opinion and trust does not 'scale up' from the interpersonal level to the institutional level**. In other words, perceiving an assigned social worker as a 'good person' does not mean perceiving the whole system as good and reliable.

The second difference relates to (dis)trust as a default setting and some trust-building mechanisms. Overall, frontline workers argued that they tend to trust clients and from the beginning, they 'give a credit of trust' to them. Simultaneously, the main **indicators of clients' being trustworthy was, according to workers: clients' openness, revealing all-important facts**, readiness to 'let caseworker in' if they come without prior notice. However, clients were saying they would rather not trust or be trusted at the beginning of the cooperation with frontline workers. Moreover, they recognised the necessity to be open, to let caseworkers in and to tell them about private issues, as **frontline workers**

**tend to be oversuspicious and intrusive, highlighting to what degree this very fact is strongly trust-detrimental in their opinion.**

Finally, apart from the aforementioned bifurcation of the system which is based both on the relevance of social work and lengthy bureaucratic procedures, the social assistance system in Poland seems to be also incoherent in a broader sense. Namely, clients emphasise that on the one hand, the benefits are low and do not allow them to make ends meet. On the other hand, clients' income undergoes a strict scrutiny due to means-testing. Thus, **for many clients, hiding some income sources while receiving benefit seems rational**. Simultaneously, both clients and some frontline workers seem to be aware of this situation, and caseworkers have to accept it unless they have formal proof that clients are cheating. Such a situation resembling a game of 'hide and seek' rather contributes to distrust than trust at the general institutional level of the social assistance system in Poland.

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### **Legal acts**

Konstytucja Rzeczypospolitej Polskiej z dnia 2 kwietnia 1997 roku, Dz.U. 1997, nr 78, poz. 483, z późn. zm.

Rozporządzenie Rady Ministrów z dnia 11 lipca 2018 r. w sprawie zweryfikowanych kryteriów dochodowych oraz kwot świadczeń pieniężnych z pomocy społecznej, Dz. U. 2018 poz. 1358.

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# Informality of Trust relations in Serbian Bureaucratised Social assistance system

Jelena Čeriman and Jelena Vasiljević<sup>71</sup>

## 1. Introduction

### 1.1 Welfare state regime and the organisation of social assistance in Serbia

The Serbian model of social assistance is hybrid and inconsistent, based on the “interaction of the socialist and continental heritage of welfare state with the changes inspired by neoliberal ideas, in the circumstances characterised by inconsistent political and economic reforms, weak institutions and strong professional and business lobby groups” (Vuković, 2017, p. 303; Tanner, 2004). Serbia can, therefore, be classified in a group of incongruent social regimes (Lendvai, 2009). Serbian position is characterised by a combination of elements from the continental and liberal systems (Taylor-Gooby, 2001), as well as a predominant reliance on family as the main actor of social care. Also, since the responsibility for well-being of all family actors has been transferred to family, social policies are just the following answer of the state to the question of the well-being of its citizens (Esping-Andersen, 1990).

The latest reform of social assistance in Serbia was introduced in 2011 by the Law on Social Protection. This law introduced the principle of pluralism and defined the legal base for the participation of multiple providers in the provision of services that aim to satisfy people’s needs. Another main legal novelty is the principle of empowerment and participation of final beneficiaries, who are therefore promoted to partners instead of objects of protection. However, this neoliberal concept implies that in order for individuals to qualify for state assistance, they must prove eligibility (Čeriman, Pavić Zentner, 2015). It marked a clear reorientation from the state/public responsibility for an individual’s welfare to individual responsibility – formally named in Serbia as *active inclusion* or *user*<sup>72</sup> *activation*.

Interviews with frontline workers in Serbia were conducted with representatives of two organisations: the City Centre for Social Work in Belgrade (henceforth CCSW) and SOS Children’s Villages. The CCSW is one of the institutions from the social protection system whose role is to provide help and support (legal, social, material, psychological-counseling, mediation and psychotherapy) to families and individuals in overcoming and solving

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<sup>71</sup> The interviews have been conducted by Jelena Čeriman, Ana Đorđević and Sara Nikolić. The coding has been conducted by Irena Fiket, Ana Đorđević and Sara Nikolić.

<sup>72</sup> The term “user” is a country specific term, and it comes from the Serbian legislative and means a person in need of additional social support, i.e., a user of social assistance. This term therefore emphasises the concept of social assistance that is not based on the rights, but on the needs of citizens.

everyday problems. The structure of the CCSW includes 17 municipal departments for social work, which are responsible for the implementation of direct protection of citizens (the majority of interviews with frontline workers were conducted with their employees). All municipal departments are under the jurisdiction of the CCSW, and they have equal powers and responsibilities. In the exercise of public authority regarding help to poor families with children, Centres for Social Work (henceforth CSW) decide on: exercising the right to material security; exercising the right to accommodation in a social protection institution; exercising the right to accommodate an adult in another family; foster care; adoption; guardianship; determining measures of preventive supervision over the exercise of parental rights; and measures of corrective supervision over the exercise of parental rights.

SOS Children's Villages is a non-governmental, humanitarian and non-profit organisation. Since 2004, they have been working on strengthening families at risk, but also to improve the life quality of children and young people without parental care, giving young people from vulnerable groups an opportunity to achieve economic independence, and also helping the local population and refugees in urgent situations. SOS Children's Villages is a member of the International organisation SOS Children's Villages.

SOS Children's Villages has complete autonomy in decision-making concerning local activities, while municipal CSW are responsible for the management of the CCSW Belgrade.

## **1.2 Organisation of research in Serbia**

All interviews in Serbia were conducted in different municipalities of the capital city – Belgrade. As a result of social and economic changes in Serbia since the beginning of 2000 (Lazić, 2011), there has been a constant rise in the number of poor and socially vulnerable people among members of the lower class and those working in precarious occupations in Belgrade. Many of them are facing existential problems, trying to meet their basic needs, especially Romani families with children. Over 70% of a total of 137 Romani settlements in Belgrade are illegal, and almost 50% are substandard, i.e., without water, electricity and sewage (Jakšić & Bašić, 2005). Next to this, about 11,500 inhabitants of Belgrade eat in the soup kitchen every day.

The recruitment of frontline workers was conducted through snowballing, with the help of the Institute for Philosophy and Social Theory (IFDT) team member, Jelena Čeriman, and a social worker from the CCSW, who helped us gain access to their colleagues. All interviews were recorded and interviewees gave written (informed) consent. Eight interviews with frontline workers were conducted via Cisco Webex Meetings application. That did not affect the collected data so much, since no non-verbal communication markers were indicative for understanding the (dis)trust processes. Seven online interviews were conducted after working hours, with our interviewees sitting comfortably in

their living rooms; only one social worker was interviewed in her office. Seven interviews were conducted face-to-face, and on interviewees' request, three of them took place on the premises of the CSWs, three frontline workers were interviewed in a cafeteria, and one on the premises of the IFDT. Everything went as planned, and interviews lasted longer than expected, on average 1.5h. The first interview was conducted on May 25, 2020 and the last one was conducted on August 5, 2020. We had only female interviewees in the sample, ranging from about 5 years of working experience (aged between 25 and 30) to 25 years of working experience in the system of social protection (two frontline workers will retire during 2021, so they are 60+). Most of them are social workers by vocation, several are psychologists and special are pedagogues who work with families with disabled children. The minority of our interviewees are interns who work in reception offices where first interview with potential users of social services is performed.

When it comes to the recruitment of citizens, the research team mostly relied on the help of a gatekeeper. Next to this, several interviews were secured through researchers' personal connections and other interviewees using the snowball technique. Citizens living in informal settlements and in great poverty were very eager to help researchers find new informants, and thus provide incentives for their relatives and neighbours. All interviews were recorded and interviewees gave written (informed) consent. All interviews with citizens were carried out face-to-face. In total, ten interviews with citizens took place in their homes or their backyards, one in the home of a gatekeeper, and four in a cafeteria. The average duration of each interview was 1h. The first interview was conducted on June 24, 2020 and the last one was conducted on July 10, 2020. There were both male and female interviewees, several of whom have been in the system of social assistance for couple of years and receive services for children with developmental difficulties or behavioural problems, while the majority of interviewees have been receiving material assistance for families with children for quite some time.

All interviews were conducted by three IFDT researchers. Together they wrote 52 memos. The same number was involved in the coding process. In order to standardise coding, two researchers coded two interviews simultaneously and tested them through the Intercoder Agreement tool in the MAXQDA programme. All the codes that were interpreted differently were discussed until a common understanding was found and a more precise instruction on the use of problematic codes was defined.

## **2. Interviews with social assistance frontline workers**

### **2.1 Frontline workers' professional background**

In our sample, all interviewees are engaged in direct work with users - poor families with children. None of our interviewees is in a position to grant benefits or services to citizens. However, interviewees are divided into three groups regarding their functions and

positions. The first group involves social workers who work in the Reception Office at the CSW and perform 'triage', i.e., informing potential users about their rights and procedures for applying for services, referring them to an appropriate specialist at the CSW, and keeping documentation on the case. The second group involves specialists who also work at the CSWs in three sectors as "case managers". These sectors are: child and youth protection services, the service for protection of adults and the elderly, and the service for financial-administrative and technical affairs. Case managers are experts in charge of a specific case which works on how best to identify and use necessary professional and other resources within the CSW, or other institutions and organisations in the local community, in order to provide appropriate services to users. The third group involves specialists who are working in civil society organisations as counsellors within certain projects aimed at provision of psychosocial and educational support to users. These activities include assistance in filling out documentation necessary for users to exercise some of their rights, informal education of users on how to improve parental skills, and support in finding employment, etc. The majority of our interviewees have educational backgrounds in the field of social work, while others have a university degree in psychology, pedagogy or special education. Almost all of them express their long-term interest and passion in working with people from marginalised groups. They point out that very early on, some of them, as early as primary school, felt a strong desire to help people and families in need, and some even identified with them as members of minorities themselves. Only a few interviewees describe their career path as rather accidental, but they also tend to work in the sphere of social assistance with different categories of users, such as persons with substance use disorders. The majority of our interviewees have extensive professional knowledge. Most of them have been in the field for six years or longer.

## **2.2 Granting benefits and services: overview of the system**

Users of social services, as most of our interviewees call citizens (rarely client or party or a case), are poor families with children or single mothers who are often exposed to domestic violence. According to the experience of our interviewees, (potential) users usually come to an institution on their own to ask for help following recommendations of their relatives, friends or neighbours, who cooperate with frontline workers and receive social assistance. Rarely, (potential) users are fully informed about their rights, and know exactly which services they need and how to apply for them. Still, the most common situation is of users who come to learn more about their rights and the possibilities of exercising those rights within institutions of social assistance. The second method of getting in touch with potential users is when frontline workers in the CSWs receive a request from another institution to perform an assessment, for example in the case of domestic violence or divorce (regarding guardianship of minors), or juvenile delinquency, etc., and for that purpose, they organise a meeting with citizens in the CSW's office, or visit them at home.

*Young people with behavioural problems, that is, as we say delinquent... in such situations the procedure is clear. We work with them at the request of the Higher Court and (...) our role is an assessment of the capacity of the family in that process, but in a way also a support to that family (RS, FW10).*

Also, reports and requests to perform an assessment can come from citizens and they can be anonymous, but in all cases these reports are obligatory for frontline workers:

*Every document that enters the CSW obliges us to act upon it, even that anonymous report (RS, FW2).*

Apart from this, interviewees from civil society organisations describe situations where their institution targets potential users within certain project activities aimed at improving living conditions or users' positions within communities in which they live:

*When we go in the field to families we work with, it happens from time to time that someone new appears and wants to get more information about our activities. (...) Our criteria are not too extensive, and they are all members of the Romani ethnic community, so in that sense we already have somehow covered the basic conditions for them to be included in the service, and everything else is something that we certainly do and intend to implement in our project. (...) Generally, it is enough for now to simply map users who would eventually be involved with our project (RS, FW1).*

The main rationale of the early contact of frontline workers with citizens, according to our interviewees, is to identify needs of potential users and/or to collect the necessary data in order to identify the main problems/issues, i.e., to determine whether citizens are eligible for a particular service. Frontline workers say that in almost all cases, first contact takes place on the premises of social protection institutions. Field visits, they say, serve the purpose of collecting data on family relations and living conditions in households:

*We always check with them how many family members live in that household, whether children go to school or kindergarten or not and why, whether a house or a flat in which they live is their property (...) whether they have all the important documents, etc. (RS, FW1).*

Sometimes, first contact with citizens also involves **cross-checking of the information** and situation of which frontline workers have been informed by relevant institutions (for example, police or court in cases of domestic violence). In other cases, according to the experience of frontline workers, field visits take place after the first contact with citizens is made in the social institution's offices. After these visits, frontline workers are obliged to submit a report on the situation they have noticed in the field. For example, in the case of recipients of financial assistance, frontline workers say that the report should show the predominant financial situation of the household in order to verify whether users have told them the truth about their living conditions, equipment and

infrastructure or not; however, in the situation of monitoring foster families or dysfunctional families, the focus of the visit should be on those living conditions that may affect a child's growth and development:

*We'll certainly go to see living conditions in the household (...) Do they take good care of children, are children clean and healthy, how do they function as a family... We'll probably talk separately with their father and mother about difficulties in their everyday life, how they overcome those issues, and anything else that could be identified in that conversation, but users did not state that as a problem initially (RS, FW7) .*

Although our interviewees say that they do not have any formal power to decide whether benefits will be granted to citizens or not, their reports, however, may affect future receipt of social assistance, or even its cancellation:

*Well, look, if we save our budget, we will have more money for those who really need it. (...) We receive a report from school (here, children are obliged to regularly go to school), and we receive a report that two or three children from that family have been absent from school for a very long time, so it is already a signal to us that something unusual is happening... Then we go in the field, they are not at home, and then I give those names to our Ministry resulting in suspension of our services for that family (RS, FW8).*

In general, our interviewees are dissatisfied with the current state of the social protection system in Serbia:

*From 2009/2010, started the reform of the social protection system in Serbia, and we stopped working in teams and started working as case managers and that drastically changed our work in the CSW, but I have to say, changed it for the worse. Completely (RS, FW10).*

Frontline workers think that managerial structures do not appreciate their expertise and that is the reason, in their opinion, why frontline workers are not consulted regarding potential reforms or organisational changes within the system:

*I'm honestly looking for another job, at this very turning point in my 50s. I am looking for something else and for a way to get out of this, because I have ethical problems regarding work in such a context (...) where no one respects me, neither my knowledge nor experience nor anything. People are the greatest resource, experts, and when I hear 'we listen to the professionals', I get mad because no one listens to any professionals, no one. Of course, I don't want to generalise, that's completely wrong, but that's the case here. I think if they really listen to the professionals and especially employees in the social assistance system, if anyone ever accepts our feedback on what really needs to be done [everything would be better] (RS, FW9).*

The social assistance system in Serbia has strict **formalisation of procedures** and all our interviewees say that they follow the rules, but at the same time they admit that the number of necessary documents for application to a specific service is extensive, and the system as a whole is unfair in a way. Since the only way to apply for services is exclusively through submission of necessary documentation, frontline workers point out that low-educated or illiterate citizens, whose mother tongue is not Serbian (refugees or Romani people, for example), have difficulties filling out and providing all the necessary documents within the prescribed time. Also, some frontline workers say that the Law on Social Protection from 2011 stipulates that in order for someone who is incapable of work to be entitled to social allowance must submit proof that they initiated proceedings against the closest relatives (parents/grandparents or children/grandchildren), who are obliged by law to give them support in the first place. Only if they have a document confirming that family members cannot take care of them, can they apply for the social assistance:

*INTERVIEWEE: If they have a parent or grandparents who are still alive, they have to sue them in order for them to support minors in the family. That is the next step they have to take.*

*INTERVIEWER: To sue them?*

*INTERVIEWEE: They have to sue them because grandparents are obliged to support their grandchildren. They have to initiate that procedure on court. I mean, I have to admit that until recently, until a few years ago, it was not the case, but now it has been introduced with the new Law on social protection (RS, FW2).*

Since the system is strictly bureaucratic and everyone must go through the same procedure when applying for services, our interviewees have to lead citizens through three crucial steps: the first step includes a meeting between frontline workers and potential users, and the former interviewing the latter with an aim to collect data necessary for the first assessment of needs and eligibility of citizens for a specific service; second – handling of necessary documents proving eligibility of citizens for a specific service, and the third one – monitoring of users' activation (depending on the service, users' activation requires realisation of certain activities or changes in users' behaviour, which was set up in the contract between the CSW and a user, in the so-called individual activation plan). By behaviour changes, our interviewees mean, for example, starting psychotherapy for people with substance use disorder and/or providing adequate hygienic conditions in their household.

Regarding granted services, all interviewees highlight various types of financial benefits, and psychological support and empowerment of families, especially women who have suffered domestic violence, as well as the monitoring of foster families, single parents or provision of corrective monitoring to families with limited parental capacities. Inter-

viewees from civil society organisations highlight social counselling i.e., process of informing potential users about benefits and their rights, and giving them support while preparing proper documents for application processes, as well as educating citizens and supporting them through the process of job searching or performing parental duties. However, our interviewees feel that the system is unfair to citizens (as well as to professionals), although its overriding role should be inclusive and represent an effort to improve the position of marginalised people:

*In fact, I am not sure that the political structure of the country is generally open to that type of change and for promotion of the right people in the right place in order to provide support for the social protection system itself to develop into something more productive, better, more accessible to users in the first place (RS, FW4).*

The frontline workers believe that the main obstacles for this goal are a high rate of corruption and nepotism, i.e., employment and promotion of party-connected people, as well as a lack of financial and human resources, given the percentages of vulnerable categories of people in need of additional support:

*Some people who are obedient have been promoted, as well as those who have connections. That is the part that is pretty frustrating and demoralising, you know. I mean, you're working for years and then some girl comes to be your boss, and she has no legal basis to be there. So, no knowledge, no experience... (RS, FW9).*

### 2.3 Frontline workers' organisation of work, routines and values

When it comes to the **frontline workers' organisation of work**, all our interviewees think that the system is bureaucratised and that greater amounts of time go to administrative tasks in comparison with the time intended for direct work with users. Almost all interviewees point out that they experience job burnout, due to daily workload. Because of that, their capacities for tasks which include support to vulnerable people are weakened in the long run:

*I think employees definitely have too many cases, which makes it impossible for all of us to be dedicated in our work, because we just don't have time for it. And we always jump from one case to the other, on the third one, etc. It prevents us from specialising in something, from reading more about something, because we don't have the capacity for that and during the day, there is really not enough time because there are always a thousand other things waiting for too long, etc. (RS, FW4).*

Employees in CSWs point out that it is necessary to strengthen processes of supervision

within institutions in terms of psychological support for employees, and make organisational changes such as such as creating new jobs in order to reduce the number of cases/users per employee. CSW employees point out that their special difficulty is a lack of specialisation of work positions, and that it would be beneficial for both frontline workers and users if each employee would work exclusively with cases from one area of support (for example, only cases of domestic violence, or material support or custody issues, etc.). At this moment, the organisation of work is such that “...everyone does everything” (RS, FW9).

Some interviewees point out that burnout at work is expressed as a constant feeling of stress for which employees try to find solutions on their own, since the system of social protection does not recognise these difficulties, and therefore does not provide support for its employees. According to our interviewees, the **workload** demands a constant crossing of personal boundaries and spending of personal resources in order to provide support to users:

*During that pause of 4 years out-of-work I recovered, but it's probably a prolonged stress. I came back very quickly again to the stage when I become overwhelmed quickly, so our bags are full of benzidine [anxiety medication]. Every woman who works for a long time in the CSW has benzidine in their bag. During working hours, it often happens that we are under so much stress that we take it immediately, we have to, in order to function properly, and that's the only way (RS, FW11).*

Our interviewees state that the largest part of their daily work consists of administrative activities, which leave little time for direct work with users (both in the field and in the office), especially bearing in mind that, according to the interviewees' evidence, the number of users per one employee in the CSWs is approximately 250 in one year and in the civil society organisations, 30 families per one employee. Organising direct work with users and home visits were even more difficult during the state of emergency in Serbia due to the Covid-19 pandemic, in comparison to regular circumstances, according to our interviewees. Transition to the online methods of work has multiplied the usual number of administrative activities and made it even more difficult for citizens from marginalised groups to access institutions.

Some respondents state that before the reform of the social protection system connected with a new law on social protection from 2011, they had more autonomy and discretion in their work than is the case today. Greater **autonomy and discretion in work** today can be seen in the interviews with professionals who have longer working experience:

*I'm trying for them [citizens] to somehow exercise some of their rights, even if it is to the detriment of the state, but of course not to a great extent because I will be punished. But, simply, not to see something that is visible, you know. And I tell them that, so that they know that things are that way. I have*

*so much credibility so I can do it. I can't compare myself with my colleagues because they are all my children's age, and they have learned everything from me, so we can't be compared (RS, FW14).*

Our interviewees see autonomy and independence in their work primarily through the amount of time they dedicate to an individual user, as well as through the quality of services they provide. For example, those who have extensive knowledge and networks in some topic areas are using them to offer greater help to a specific category of users:

*Especially when it comes to these situations of violence, let me say, a person who has knowledge about it can give as much possible as help. I mean, I don't know if everyone would do that. We really have space for something like that, at least, for those who want to do it. Nobody controls us from that side, so we can always give the maximum of system's support when it comes to violence (RS, FW6).*

Next to women who have survived violence, such help is often provided for Romani people who sometimes cannot meet the criteria for financial assistance:

*Often Romani people report different addresses where they live, and also, for example, they tell us that they work illegally, and, for example, when we have information that that person works for a small salary and because of that salary they cannot be entitled to financial assistance, we simply do not write it down and pretend not to have that information in order for that person to get some help from the state (RS, FW6).*

This type of **informal discretion in work** is mostly manifested during first contact with potential users, in the reception office of the CSWs: “*We have space to turn a blind eye to something*” (RS, FW6).

When it comes to **institutional influences**, all frontline workers from the CSWs think that the control process lacks psychological support for workers who have direct contact with users. Frontline workers, actually, experience this lack of support as a constant pressure from managerial structures. They say that this pressure manifests itself in their workload, and through a lack of support and understanding for their personal capacities and the challenges of the working process itself, especially when it comes to the responsibilities in cases involving children:

*I think it is a mistake that the supervisor is reduced to that supervisory function, that there is no person in that position who would be a real supervisor, i.e., to have that support function, not so much educational but supportive, so that everyone can address that person and get in any time, for example, support regarding the cases or coping with stress in work connected with specific cases or with direct contact with the parties, etc. (RS, FW6).*

Frontline workers say that pressure from managerial structures and a lack of support is especially visible in situations where parties are dissatisfied with the work of professionals and report them to their superiors. Our interviewees point out that they often feel responsible for everything in the working process, although there are no clearly defined employee responsibilities in the CSWs, not even for the cases they are assigned to. Control processes are completely different in the civil society organisation, where all activities take place on a project basis, and are performed according to clear standards and obligations, and where a Project Coordinator, in addition to monitoring the overall realisation of activities, also provides support to frontline workers and discusses possible solutions and actions together with them:

*She [Project Coordinator] has a little more responsibility in the project and therefore more power, but that is not reflected in our communication, and I think it's even better that way because it somehow really gives more space for both of us to progress and to learn from each other without any pressure (RS, FW1).*

When it comes to **teamwork**, the interviewees emphasise the importance of cooperation within the very institution that, according to our interviewees, brings the most to younger employees and employees in the early stages of their professional career. They say that teamwork helps the young experts to develop self-confidence and skills necessary for direct work with users. Frontline workers use teamwork within institutions in complex cases (such as domestic violence, divorce and displacement of children from a family), and when they expect users to be distrustful:

*Mostly when there is aggression, mistrust and resistance, I tend to involve colleagues and work with them as a team. It seems to me that maybe just one person from the team can succeed in building trust with users, connects with them, has a good approach... Then I leave more space to that person, I rely on the person from the team when I recognise in verbal and non-verbal communication that that party approves of what that expert from the team says, then cooperation can be successful (RS, FW1).*

Next to this, our interviewees point out that their career path (i.e., employment or volunteering in different social institutions, such as non-for-profit women organisations, but also state homes for children without parental care, etc.), as well as informal seminars and therapeutic work helped them to improve their professional skills.

Regarding **relations with third parties**, frontline workers point out that they use personal formal and informal networks from local communities when working on certain topics, such as services that are not included in the offer of state services, supported by earmarked budget funds. For example, frontline workers connect users with other organisations that provide psychological support to women with depression, or use their own cooperation with schools to support children with behavioural disorders, etc.

Frontline workers point out that their value system has a great influence on relations with users. They think that workers in social assistance are passionate about what they do despite the challenges of the workplace. They also think that frontline workers are mostly empathic by nature and follow the principles of solidarity and manifest altruism in everyday life:

*That's why I chose social work. Because of the idea of social justice and equality, and support of the poor (RS, FW2).*

Therefore, when it comes to the **style of work**, our interviewees tend to be helpful and give empowerment to users, as well as show respect and understanding toward every single user, and in the case of children, to be a protector of their rights:

*Empathy, then openness, openness in conversation, then readiness to listen, not butting in, and giving answers to unasked questions. Then, maybe openness for communication even after that meeting, in the sense that that person gets the impression that they can call and ask something that is unrelated, for example, to the current situation or that they can simply call without any hesitation (RS, FW6).*

However, in every work-related situation, they strive to be professional and apply appropriate means and give the best possible solutions in given circumstances. In that way, according to the opinion of our interviewees, they contribute to certain aspects of social change within a society:

*Because when you have a young person who is a juvenile delinquent, or a person without adequate parental care, and who, if you give them the maximum of your support can develop into a useful citizen, a member of a society. If you don't work with them properly, they will always be at the employment office on a state budget, they will commit various crimes. (...) I think that people need to be aware that prevention is the key (RS, FW7).*

They also try to be transparent in their work and to respect the rules and legal framework. All interviewees point out that they tend to develop a strictly professional relationship with users, and that in this profession, everyone is especially careful not to disturb the expert-user relation in that sense, and strives to follow ethical principles in work with users. Sometimes, as they say, it is difficult for them to maintain such relations because of the users who feel it necessary to express gratitude for the services they receive, usually through gifts or a tendency to establish a close relationship with professionals:

*They want to give us something, to buy a gift, to do something for us; these are, for example, situations when they cross the boundary (RS, FW6).*

Frontline workers also point out that their style of work has changed over time, and that over the years, they have perfected methods of influencing users' behaviour, as well as maintaining greater control over the process itself:

*I wasn't like this in the beginning, I wasn't like this. Simply, over time you gain experience that allows you to have a more casual approach, although even today, before parties come into my office, I thoroughly read everything about their case (RS, FW6).*

**The frequency of meetings with users** is largely determined by the type of social services they use. In the case of one-time financial assistance, the frontline workers will meet only once with such users. If it is a family that needs to be followed for some time in terms of supporting children with disabilities, or monitoring a foster family, meetings will take place several times a year, about which a clear agreement is made between family members and professionals. Meetings happen most often with users who are seeing children "under controlled conditions"<sup>73</sup> on the CSW's premises. In these cases, the meetings take place according to a pre-arranged action plan and usually last approximately one hour every week for a 2- or 3-month duration. When it comes to other types of services, our interviewees say that they have just over 2 hours of direct work with an individual user per year. Between meetings, frontline workers often call their users to check on them. In that sense, the type of social assistance also determines the level of closeness to a specific family, as well as individual users:

*I think that we have the opportunity to get to know the users well because we have enough, to say, power and opportunities to collect information about users in terms of conversations and entering the personal space of that user by going to their household, obtaining information from other institutions, etc., we have the opportunity to get to know the users quite well (RS, FW8).*

All professionals state that they adapt their approach to the users, whether it is about communication, or the time they dedicate to the problems they confront. Some professionals point out that over time, they have become closer to the users, especially with some difficult cases, such as women who have suffered violence, or children without parental care. Still, almost all of them always keep in mind that it is necessary to maintain a professional relationship for the sake of everyone involved in the process. According to our interviewees, the main factor that contributes to the improvement of the relationship with users is when both parties adhere to the agreed goal and implement activities that lead to it, while relationship disruptive factors are those situations in which users are overly demanding, violent, or have difficulties (such as mental illness)

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<sup>73</sup> Meaning when there is documented violence towards children and women, then the parent/a violator sees them under controlled conditions in the company of professionals.

due to which they do not abide by the agreement and are unable to implement the plan of users' activation.

Regarding the **communication style**, frontline workers primarily strive to provide users with all the necessary information about the service for which they need to apply, and about the type of support they can get from frontline workers, as well as the main responsibilities of professionals in that process. In addition to necessary documentation, they need to prepare, they are also informed about “*what documents we can prepare, and what they have to collect and bring to us*” (RS, FW7), as well as how long the decision-making process will take, and what that specific service includes as a support. Important information shared with users is also about the principles of work, among which the issue of confidentiality of information is highly valued:

*Information we share remains confidential. However, we also have to inform our users about situations in which we have to react and in which it is our duty to pass on information to relevant institutions. Those are situations where someone from the family is at risk* (RS, FW1).

When giving information, frontline workers try to adapt the language, especially when they speak with children, so that their messages are clearly understood. Also, all frontline workers try to express warmth and sensitivity and to be open in communication with users, especially children, in order to set a basis for a positive atmosphere in which it will be possible to build functional cooperation and trust. However, frontline workers also do not run away from confrontation with users in situations where they notice “*that users say one thing and do the other*” (RS, FW1), or when they notice any other type of undesired behaviour:

*Confront them because it is for their own good. In fact, I think that they learn to face certain situations that way. But, confrontation with users should be limited* (RS, FW1).

Frontline workers point out that they have the hardest time with users that they perceive as manipulative. Frontline workers think that it is necessary to confront users with the facts, especially when they notice them lying, but that there is also a need to empower professionals not to take it personally. However, aggressive users are much harder to handle. Frontline workers emphasise that in those situations, they resort to a harder communication style demanding respect for the institution and its employees. One interviewee even states that on one occasion, she had to press the panic button (which was introduced in the CSWs in 2017).

## 2.4 Trust understanding, sources and functions

The issue of trust was introduced by the interviewees themselves before the question was asked. They emphasise that building trust is the key to good cooperation and performance of professional tasks.

Most of our interviewees define **trust** as support and help given to a person in need. All interviewees who see trust in this way strive to achieve an honest relationship with the user in which there is reciprocity, i.e., mutual respect of opinions and points of view, and that there is an awareness that they are "together" in a given situation:

*I think it depends a lot on how you treat them (users) during first contact, but in principle if you are authentic and they really recognise it, then trust is not an issue (RS, FW1).*

Mutual honesty or truthfulness is the key element that frontline workers highly value in trust relations with users. This element provides the opportunity to enter into a relationship openly and the possibility of revealing/opening up:

*Well, it happens that they are very open, that they even say 'Maybe I shouldn't have told you this, maybe now this will be held against me in some way, but here I told you'. It just happens to me and then, of course, I explain that it will not be held against them, that it is good that they recognise the problem, that it is good that they told me that, that I can actually help them better when I have a complete picture (RS, FW8).*

Several interviewees point out that an important element of this relationship is the experts' responsibility for their own actions and decisions, which in turn establishes bases for mutual trust in the professional-user relationship. In such situations, trust is complemented with responsibility and reliability on the part of a user, as well. For example, one interviewee states that a user surprised her positively and gained her trust after he quickly completed activities they agreed upon. Therefore, interpretation of trust from the standpoint of the frontline worker is that reliability and responsibility are reached through mutual respect of the terms of the agreement.

A minority of interviewees thinks that trust includes emotional connection, which is expressed through empathy and closeness. However, they are quite aware that such trust relations include a violation of professional boundaries:

*They invite us to celebrations, birthdays, which we are not allowed to attend; they give us gifts (RS, FW6).*

Some of them give us examples of such violations, which started with the generosity of frontline workers and their intention to help users with whom they have built a relationship of trust:

*You have workers here who stay at work longer for some families, or come earlier, go with them to various institutions, begging for help, etc. You see, it's all above the norm of what you basically have to do according to some protocols, etc. (RS, FW15).*

When it comes to (dis)trust as a default setting, almost all our interviewees tend to **trust by default** the users of social assistance. Almost all interviewees highlight the role of trust as something that determines the success of the very institution they work for in providing the necessary services and support. Only a few of them have a tendency not trust users by default because they have often been in situations where users provided false information about their living situation:

*When I have a brand new case and someone appears in the office for the first time, I tend to go into the field and visit them. I visit them at least to check information because parties often like to lie, to cheat (RS, FW14).*

However, all our interviewees completely agree that basic trust established at the beginning of expert-user cooperation increases with time and not the other way round. There are several **factors that affect (dis)trust**: general factors, users-related factors which make them distrustful, frontline worker-related factors which make users non-trusting, and user-related factors which make frontline workers (non)trusting. In all this, formal documents create a **context of distrust**. The **general factors** include the highly expressed distrust of citizens in institutions due to the complexity and duration of procedures, as well as the high rates of corruption in Serbia:

*Interviewer: How significant is it to distinguish whether it is distrust in you personally as an expert, or distrust in an institution?*

*Interviewee: It is always the institution. (...) Always, clear as the blue sky.*

*Interviewer: How do you recognise it?*

*Interviewee: Well, when it is directed toward the institution, they come with distrust, that's right there, right away. They immediately say to you that they do not believe us and that we know nothing, that we are corrupt, why are we interfering in their lives... They insult us immediately (RS, FW11).*

**User-related factors which make frontline workers (non)trusting** are, for example, police reports of domestic violence. Trained social workers are aware of the mechanisms of manipulation from such users and "*take their statements with a grain of salt*" (RS, FW4).

Distrust in such situations may go both directions:

*Usually, men, if they are bullies, which is often the case in our country, unfortunately feel distrust because of the situation in which the professional*

*worker or case manager is a woman, so they believe that she is more inclined to a woman than to a man (RS, FW6).*

In addition to gender, the younger professionals, or any other type of stereotypical points of view of users regarding frontline workers' expertise are also the factors which affect (dis)trust in the expert-user relationship.

When it comes to the **functions of (dis)trust**, according to our interviewees, distrust is particularly valuable in situations where the best interest of the child is assessed. In an effort to protect the child's best interest, for example in a custodial process, all procedures must be fulfilled, and trust in the user is gained only after fulfilment of goals which are set in the individual plan of action as it is known.

### 3. Interviews with social assistance users

#### 3.1 Social background of interviewees

In terms of **the household structure**, most of our interviewees live in nuclear families without extended family members. **Single-parent families** and families with one or two children dominate the sample. Our sample also includes several foster families, and families who have adopted children of relatives.

Most of our interviewees **were not born in the municipalities they inhabit today** (and most of them live in rented homes/apartments). Some of them are war refugees from Kosovo<sup>74</sup> or Bosnia and Herzegovina who had to leave their hometowns during the war (or after the 1999 bombing, in the case of Kosovo). Many of our interlocutors have changed their place of residence several times, and refugees lived in different cities before settling in the capital city of Belgrade.

The principal reason our interviewees seek social assistance is **poverty**, often coupled with unemployment and **health issues**, resulting in the financial inabilities of parents to support their children. Other reasons given relate to child custody procedures, or **foster family programmes**; in some cases, a struggle for **child custody** is coupled with **domestic violence**, child abuse and addiction problems. Overall, domestic violence is often present in their narratives, even when not featuring as a principal reason for seeking social assistance. All our interviewees turned to social assistance themselves. The types of services used are (in order of frequency): child benefits, often coupled with other forms of social assistance (due to financial difficulties and poor living conditions), foster care assistance, assistance for children with special needs.

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<sup>74</sup> They have a peculiar status in Serbia as they were never granted status as refugees. Instead, they have a status of internally displaced people due to the fact that Kosovo is officially considered part of Serbia.

Some of our interviewees state that they have **friends or family members who also use social assistance services**, and that they were very helpful in providing advice – whom to contact, what the procedures are like, how to obtain the relevant paperwork, etc. Those pieces of advice are seen as especially helpful by interviewees belonging to the Romani population, for whom a language barrier often exists (as some of them are not proficient in Serbian, but only in their native Romani language).

When it comes to political attitudes and behaviour, our interviewees display several observable traits: 1) **support for president Vučić**<sup>75</sup> (roughly one half of interviewees explicitly praise him); 2) **distrust in all political parties** (including the one led by President Vučić); 3) **low interest in politics** (mostly, they do not follow the news or read papers, or follow political/current events in any other way); 4) **moderate support for the idea of joining the EU**; 5) general dissatisfaction with the ways governmental and non-government bodies are taking care of citizens in need.

Most interviewees state that they are not interested in politics and that **they do not vote**, that they mostly think about their own survival, and that they very rarely discuss politics with friends or family. No particular media outlet stood out throughout the interviews. The majority of interviewees state they do not support any political party, including the one led by the current president, Vučić; this was claimed even by those who support him as a political figure (they trust *him*, but not his party; they do not trust politicians, but have faith in him: “*He is our second Tito*” (RS, CIT3)).<sup>76</sup> Many express the attitude that politicians talk about the disadvantaged and citizens in need only when they need votes; but once they are in power, the perception is that they do nothing or very little to improve the lives of those people. However, some express satisfaction with the way the current government is moving, mostly **praising President Vučić, and stating explicitly that they trust him**. However, the majority of respondents, when asked about the work of the state institutions, have negative reactions: that they do not take care about people properly, that the professionals are not competent or interested enough in doing a good job. The general assessment of the situation in the country is pessimistic. Some talk about exceptions: some smaller NGOs, or the Red Cross are mentioned as providing much needed help, but only by a few interviewees. Opinions about how the Covid crisis has been handled are divided: around half of the interviewees state that not enough has been done, especially for people like themselves. Others praise Vučić’s actions and the decision of the government to pay 100 EUR to each citizen over 18 years of age. Opinions about the EU are generally positive. Most interviewees are in favour of joining the EU, but the reasons they state are largely general (“*They have better laws*

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<sup>75</sup> During the 1990s, Aleksandar Vučić was one of the most prominent, ultra-right-wing figures. He now declares himself a pro-European moderate politician, but his party is largely still perceived as a right-wing party.

<sup>76</sup> This is consistent with political attitudes of the general population in Serbia: President Vučić enjoys significant popularity which does not extend to the popularity of his political party.

there” RS, CIT4, “The organisation is better” RS, CIT10, “Social help is more substantial” RS, CIT8, “I’ve heard you can buy a house on social help” RS, CIT2). There were no strong or elaborate arguments against the EU.

### 3.2 Applying for benefits and services, and opinions on the social assistance system

Our interviewees say that they apply for social assistance **at municipal branches of the national centre for social work, based on their place of residence**. Foster and adoptive families apply at the local centre for foster care and adoption (also the national institution, with local branches), but this institution works in close cooperation with the CSW. Child benefits are regulated by the Secretary for Social Protection (not the CSW), but our interviewees state the two types of benefits (social assistance and child benefits) together, and do not distinguish between the two institutions. **The length of the social assistance provisions for our interviewees is between 1 and 14 years (from their claims), with the greatest number of them having received assistance between 4 and 7 years**, mostly in continuity (with pauses when changing their place of residence because they have to reapply at the local branch). When applying for financial social assistance of any kind, they report that they **must provide documents about their income**, confirmation that they do not own any property or pension, or any other type of external financial support; they also have to obtain confirmation about school attendance for their children. Periodically, as they claim, they have to resubmit these papers – to track potential changes in status. **Upon the initial request for social assistance, social workers come to the applicant’s place of residency to check their address and assess their living conditions**. Families applying for foster care or custody have to submit confirmation about their physical and mental health, and again, social workers pay them a visit to check their living conditions. The majority of interviewees claim that the initial procedure was not too demanding (in terms of paperwork) – although many had worries when applying for the first time (some claim the workers did not explain the procedures well enough, for example, what types of documents are needed). Usually, as our interviewees report, it takes three months between the initial application and the first benefits being issued. Some citizens perceive this as reasonable, while for others, this seems like too long a period to wait for the much-needed help. When reapplying for assistance, the procedure is usually relatively swift, as they claim. Many interviewees are not fully aware of the types of mutual rights and obligations; most of them do not possess any signed papers, and claim that apart from the initial request for social assistance, they did not have to sign any additional papers following the approval of assistance. The paperwork of these citizens is kept in their social workers’ offices, as our interviewees claim (officially, this should not be the practice).

As our respondents claim, **first contact and first interviews in all cases take place in institutions’ premises and offices**. According to our interviewees, applicants need to

come and make official requests, and then talk directly to social workers and/or other specialists, depending on the type of assistance needed. **They usually go alone or with their spouses, and are met by a few social care workers.** Interviewees have different impressions about the atmosphere during these initial contacts. Some are very satisfied and claim that personnel are professional and kind. This narrative is noticeable in the accounts of foster care/adoptive families: they are usually well received, provided with necessary information, and are told about the necessary procedures (which courses they need to attend, which certificates they need to obtain, etc.). Others claim that they felt very uncomfortable, as if under suspicion, not treated with dignity. This is especially the case with Romani families. Some explicitly claim that they faced **racism**, that social workers “...do not like our nation...and said to me: ‘Why do you had to have so many children?’” (RS, CIT10), others were angrily told to find a job. What is also observable is that many interviewees assess the quality of these contacts depending on a flesh and blood person/social worker they came in contact with. The content of the first interviews is reported to be very formal: assessing the validity of the claims for social assistance.

Most of the interviewees claim that they are **very rarely visited at home**, despite promises that they would be. The exception is with foster care/adoptive families – they are visited several times during the procedure as they undergo evaluation. Sometimes, the interviewees have the impression that it is the discretionary power of social workers, not the procedures, that shape the outcome of the decision, and that face-to-face, and a visit at home can play a decisive role. This can be observed in the following answer:

*Yes, the first conversation was at her office; she didn't want to take me, no way, and I said 'Come and see where I live and how'... then some 10-15 days passed and she happened to be here on the street and I went and said: 'Please come and see where I live, so so I can be considered for social assistance'... and she somehow came in, just took a look at the house and told me: 'Come to me tomorrow'. And when I came, she immediately gave me emergency help and told me: 'Come in 10-15 days and I will take you for the social'. And it really happened so (RS, CIT4).*

All the interviewees seeking some sort of financial assistance were asked by the social assistance workers **whether they have any income or property**, how much on average they earn per month, whether they have family members who can financially support them, etc. The amount of financial assistance is decided upon in this way, the interviewees claim (and other family-related circumstances, like number of children, health issues, etc.). **Interviewees with no formal education were asked to take up elementary school lessons.** Questions for foster care/adoptive families were different: social workers inquired, apart from living conditions and affective relationships, whether there might be a financial interest involved. Overall, **interviewees are not aware of the types of agreements they have** – what the conditions are, and whether there is an action plan related to their case.

**External information sources are mostly expert opinions by doctors, psychologists or other specialists** who need to verify and confirm the state of physical or mental health when this is relevant for granting/denying assistance (also, in cases of foster/adoptive families, psychological assessment opinions are also sought from schoolteachers).

**The types of benefits obtained include child benefits, social assistance benefits, special care benefits (for children with special needs), short-term emergency aid, the right to use social kitchen services, additional monthly allowances for school children (as well as free school textbooks).** The amount of child benefits and general social benefits depend on the number of family members and the number of children. Most of the interviewees declare that they do not understand the rules determining the amount of help they will receive. Short-term emergency aid is reported to usually be **between 200 and 250 EUR** (interviewees told us that they have to write what they need help with; it is usually for heating, buying wood, for example; it is possible to apply a couple of times per year, depending on the situation – as our interviewees explain). **Benefits come regularly**, usually without delay. Some citizens had to wait a bit longer for the emergency aid at the beginning of the Corona pandemic. Some citizens experienced a discontinuation of social assistance for failing to submit the necessary documents on time (for the renewal process), mostly due to a misunderstanding of what needs to be (re)submitted, when and by whom.

Our interviewees have a **perception that social workers are overburdened** with bureaucracy and that this sometimes leads to the mismanagement of cases (paying too much attention to paperwork and forms, having too little time to talk and listen to users). This sometimes overlaps with a perception that designated social workers actually have to listen to their bosses and to do what their superiors tell them to (an **idea that decisions are taken in other places, that some higher-up personnel actually decide on everything**). Additionally, many interviewees share the opinion that institutions of social protection are **understaffed**, and that this can be the reason why social workers are overwhelmed with paperwork, and consequently do not have time to be more in the field, and to have longer face-to-face interactions. On top of that, many have observed **poor working conditions**. As one citizen argues: *“I mean, when I went there, they had a power cut; the fuse box was in poor condition, the heating was terrible...”* (RS, CIT12).

When assessing the system positively, citizens usually use very general statements, like: *“They give you, they help you”*; *“This means that you have hope because every month you know where you can collect the money, and nowadays it’s hard to earn some money”* (RS, CIT2). When being critical in their assessment of the system, which is more often, they reproach the workers for **not having enough understanding** of peculiar situations, for not being sensitive and kind enough, and for not showing genuine interest in the applicants’ situations. Most of our interviewees claim that **they do not understand all the procedures**; they do not see the process of granting and distributing assistance as transparent. Sometimes, it is after they have already applied for a specific kind of benefit that they learn they are entitled to additional benefits as well – and they usually learn

that outside of the social assistance institutions (through friends, for example). Many informants complain that they do not understand the entire procedure, and **that social workers do not make enough effort to provide all the information**, nor do they give them relevant feedback and exchange of information. Due to this, some **perceive the system as unfair**: they do not understand why some families receive this amount of help, and others that amount, especially because, as they claim, social workers rarely visit them at home, hence do not have a 360-degree picture of the applicants' situations. It could be said that our informants would like the system to have better mechanisms to assess different needs based on individual situations.

Our interviewees frequently express feelings of frustration and helplessness as they do not receive enough information and sufficient understanding; in some foster care families, applicants were complaining about not receiving adequate expert support and a much-needed individual approach. The Corona pandemic just worsened these feelings as many perceived **the amount of help as too little** and complained about the absence of interest on the part of the social workers (they did not call or come to see how people are doing). Some have shown great determination by insisting on their rights, coming in several times to insist on something, **consulting other sources of information**, for example, the foster family rule book, or legal advice. One interviewee said:

*From the moment I said: 'Look, I complain about this child's father, but I just want you to know that I consulted a lawyer and now I know very well what my rights and my child's rights are', I noticed something different on their faces (RS, CIT7).*

### 3.3 Relations with frontline workers

Our interviewees refer to the frontline workers with whom they work as: **'social worker' (socijalna radnica), 'a woman who took us/who is running our case/' (žena koja vodi naš slučaj), 'a worker' (radnica), by their first names, or 'this one/her/she'** (in the majority of cases, social workers are women). **Visits/face-to-face contact is seen as irregular and infrequent**, and the perception is that social workers do not call frequently enough, and do not insist on regular meetings. These meetings take place only when papers have to be resubmitted (usually every three months), so their frequency depends on formal paperwork that needs to be periodically submitted. Many interviewees stress that they would like to have more feedback and direct calls from the frontline workers they work with. Exceptions to this exist (workers who make an effort to regularly call citizens they work with) and they seem to be the result of **concrete personality** of the worker, not the usual procedure. Some interviewees believe that workers have a considerable discretionary power, but most are convinced that they **have to follow strict procedures and that they all have 'bosses'**. When describing the type of the relationship they have with frontline workers – especially **when this relationship is assessed in positive terms – social assistance users tend to ascribe it to a concrete personality of this**

**or that social worker.** Interviewees often refer to workers by their first names and always mention changes in personal relationships when they change the person they work with (many have experienced a change in social worker running their case). Explanations like: *“I do not trust others in the system, but I trust her”* (RS, CIT4), or, *“They are usually slow, not interested enough, but this one, this woman, she is wonderful”* (RS, CIT11) are frequent, and they usually serve to highlight the exception.

Those interviewees who describe their relations with frontline workers as close and warm value that: *“She is interested in our lives, wants to know how we’re doing in detail, and does not approaching us strictly through paperwork”* (RS, CIT14). Also, such frontline workers are depicted as: **well informed, competent, and patient** with the citizens they work with.

Most interviewees say that at the beginning, they felt as if frontline workers were **reserved and distanced**, and did not trust them entirely, in addition to offering the interviewees very little help to guide them through initial paperwork. Additionally, they are described as **not kind enough, not providing enough opportunity for applicants to tell their stories in detail** (sometimes this is accompanied with an observation that social workers are overburdened with work and paperwork). For some, this was only the initial experience, and things somewhat improved over time. Interviewees of Romani nationality emphasise **the feeling of being looked down on**. When referring to the frontline worker’s attitude, one of the interviewees mentioned: *“She started scorning me; she doesn’t really like our nation and said to me: ‘Why do you give birth to so many children?’”* (RS, CIT10).

The majority of our interviewees do not perceive frontline workers as skilful or dedicated enough, but only as persons following some rules. But this perception is mixed with a complaint that they are not interested enough (and vice versa; those social workers who are described as interested and empathetic are also described as competent and knowledgeable).

Most of the interviewees especially appreciate it when workers offer them advice and thorough explanations because many procedures and social rights are not entirely clear to users. In such cases, interviewees tend to perceive workers as **warm, helpful, respectful, professional and competent**. These two categories of positive evaluation (human conduct and professional conduct) almost always overlap. Also, those workers who are depicted as insensitive or distant are also depicted as incompetent and unable to provide all the necessary information (which then, users of social assistance search for in other places). **Frontline workers are depicted as insensitive and lacking empathy, especially in cases where they refuse to take more interest in particular situations and treat the interviewees as though they are anonymous and insignificant.**

### 3.4 Trust understanding, sources and functions

Our interviewees define trust most commonly as **truthfulness, openness, mutuality and cooperation**. They report that the feeling of trust is developed when they have an **open and transparent conversation** with their social workers, also when they feel that the **promises have been delivered**. They place high value on **being treated with decency**, and relate it to trust (*“When they invite me to have coffee with them’... ‘trust is really in first place, then respect”* (RS, CIT8) and when they are willing to assume that **equality of positions and cooperation** are modes of functioning: *“When I don’t know what to do, I call for help and ask to solve it together”* (RS, CIT1). Along this line, trust is often defined as **mutuality**: *“We trust them, they trust us”* (RS, CIT 10). The great majority of interviewees have noticed the absence of this mutuality when workers do not come to visit them, when they deny themselves the opportunity of seeing for themselves how their clients are living. Trust is also reportedly enhanced when frontline workers show **faith in clients’ abilities and personal capacities** (to be a good parent or to recover from alcoholism, for example). Also, trust is reported when frontline workers express **genuine interest**, when they are **generous** and offer more than is expected (for instance, when they help the clients finish the initial paperwork, go searching for papers themselves, or extend social assistance even though the applicants could not find all the papers on time – trusting the applicants will bring the necessary papers soon).

The impression is that interviewees predominantly perceive social workers and institutions providing social assistance as not trusting citizens who ask for their services. In this respect it could be said that **distrust is the default setting** when interviewees assess how the system relates to them. This is especially highlighted in descriptions of first contacts – they get **the impression they are not trusted by default**, that workers do not believe their stories (about their level of poverty, or the types of abuse they suffer, etc.). Likewise, interviewees themselves, when asked about general assessments, predominantly distrust frontline workers and the system for social assistance (the institutions they deal with). Sometimes, this is described in very general terms like: *“Today you can trust no one”* (RS, CIT3), *“Here in this state, it’s hard to trust any institution”* (RS, CIT12), etc. On a more concrete level, **the distrust comes as a consequence of the fact that they themselves do not feel trusted**, and are ‘always on trial’ – they have the impression that the social workers are trying to assess whether they are trustworthy (even by the logic of paperwork: they have to periodically resubmit documents proving their entitlement to benefits). Sometimes, they perceive this as a huge injustice: They live in such miserable conditions, and yet they have to constantly prove that it is true.

**Time is assessed as very important** in mutual trust building. Within foster families, this is especially valued because for them, the relationship between frontline workers and children is also important, and the quality of this relationship can only be evaluated in the course of time. Also, since many interviewees complain that in the beginning – during initial contact – they had the impression that frontline workers did not trust them,

**time was important to many since it offered them the chance to prove their trustworthiness.**

In the interviews with citizens, we could identify several factors affecting trust and distrust, most prominent among which seem to be: face-to-face interaction, trusting/being suspicious about clients, (not) treating clients with respect and dignity. A factor that enhances trust most effectively, according to our interviewees, is **face-to-face interaction, when social workers conduct home visits**. According to our interviewees, such visits usually change the trust relations, as they can observe how social workers start to trust them. Another trust-enhancing factor is **when frontline workers show trust in their clients' abilities and affirm their agency** – for instance, when a foster family was given the right to take a child abroad on holiday, or when a mother who used to struggle with alcohol problems, was given full custody of her child as a result of frontline workers accepting and realising that she had resolved her problem. Our interviewees trust frontline workers who complement them on their efficacy, obedience and the ability to follow rules and advice given. For example, one user says:

*We built a new small room for the kids, and since I declared having only one big room and a bathroom, I thought I have to tell her about this change... that now our space is a bit bigger... and she said 'I can't believe you came only for that... it wasn't necessary' (RS, CIT8).*

The trust in frontline workers increases if they provide detailed information, when they take time to be with their clients and show patience when explaining steps to be taken, how the procedure goes, what the rules are, etc. All of this is highly appreciated as the majority of our interviewees are not acquainted with procedures, with their own rights and duties, and in general, with how the system functions. Also, **trust grows when frontline workers seem to appreciate and encourage their clients' openness and truthfulness, and when they honour the promises made.**

On the other hand, **what incites distrust is when frontline workers fail to provide the necessary information** (for instance, about expiry date of licences for foster families, or whether one parent has breached the terms of seeing the child, etc.), and users of their services have to look for them elsewhere. What is also noticeable is that **distrust comes as a result of frontline workers not believing their clients**. Almost all of our interviewees have faced, at least in the initial phase of applying for assistance, what they most often term 'suspicion' on the part of frontline workers. They report that they need to provide all sorts of evidence about their material and familial status, or evidence that they are suitable parents, capable of taking care of their children; they perceive this as humiliating, especially if they have already gone through traumatic events like domestic violence. Contrary to this, as has already been noted above, **the interviewees would always say they were trustful when they are treated with dignity and respect; when they are treated on equal terms**, when frontline workers show kindness and a genuine interest in their stories.

What the interviewers have noticed is that in many cases, especially with users of social assistance of Romani descent, **all the files are kept with frontline workers. Most of the users do not know that this is malpractice**, that they should possess some documents and copies of the contracts signed, but still, some have said that this bothers them and prevents them from fully trusting social workers.

#### 4. Summary and conclusions

The main impression was that social workers spoke without hesitation and embellishment about the problems, shortcomings and obstacles they face daily. Also, there is a noticeable difference in vocabulary between the respondents employed in the CSO SOS Children's Villages and the respondents employed in a state institution (CCSWs for Social Work). The difference is first reflected in the description of work tasks, where the language used by the respondent from the CSO SOS Children's Villages originates from the project register and abounds in anglicisms, while the language spoken by the respondents from the CSWs is old-fashioned bureaucratic. Confidentiality was of much bigger importance for frontline workers than expected, especially for those with less working experience.

The following points best capture the main narrative points from the interviews with frontline workers:

- Frontline workers are greatly **dissatisfied with the current state** of the social protection system in Serbia.
- The social assistance system is **bureaucratised** and greater amounts of time go to administrative tasks in comparison with time intended for direct work with users.
- The social assistance system is characterised by a **high rate of corruption and nepotism**, meaning employment and promotion of party-connected people, as well as a lack of financial and human resources, especially given the percentage of vulnerable categories of people (adults and children) in Serbia.
- **Burnout** at work is extremely common among frontline workers.
- The issue of trust was introduced in interviews by the interviewees themselves before the question was asked. They emphasised that **trust building is the key to good cooperation and performance** of their professional tasks. Therefore, **trust is a default setting**.
- Most of our interviewees-front line workers define **trust as support** and giving help to a person in need.
- **Mutual honesty or truthfulness** is the key element that frontline workers highly value in trust relations with users.

- All our interviewees-front line workers completely agree that basic trust established at the beginning of cooperation expert-user increases with time, and not the other way round.
- Formal documents create a context of distrust.
- **Distrust is particularly valuable in situations where the best interest of child is assessed.**

According to the annual report on the work of the centres for social work for 2019, the largest number of users, minors and adults are from groups of materially endangered, indicating the process of economic impoverishment of citizens, especially families with children (Republički zavod za socijalnu zaštitu, 2019). The report also points out that, compared to 2018, the number of actions in cases of domestic violence and violence in partner relationships has increased. Therefore, it is necessary to understand the structural role that poverty and family violence plays in the lives of the majority of social assistance users in Serbia. Our interviewees-citizens appreciated the opportunity to share their stories with someone, which in some cases was disturbing (cases of domestic violence, divorce, war and refugee experiences, and even incest). A few of the interviewed women displayed anger, frustration and cried. Interviews with men (two) were shorter, more to the point, less elaborate. A notable challenge in the field was the language barrier when in communication with poor Romani families. They often live in informal settlements and are not only illiterate, but also native Romani or Albanian. Although the translated interview guidelines had been simplified, and researchers were experienced in conducting interviews independently, the quality of the interviews varied greatly depending on the native language of the interviewees, as well as other variables such as their education, personal characteristics, environment, etc. However, despite the less descriptive responses obtained through these interviews, they bring valuable insights into the experiences of one of the most discriminated and poorest categories of people in exercising their rights to social assistance in Serbia. The main points summarising this part of the report are the following:

- **Distrust is a default setting;** users of social assistance by default do not trust the system which, in their experience, does not trust them; **they do not feel treated as equals**, and often express that their dignity and agency are not recognised, supported or valued enough;
- **Likewise, when they experience relationships with frontline workers who treat them with dignity and support their agency, their attitude is likely to change immediately;**
- Trust is rarely singled out as a value or relation in itself; its meaning overlaps with **kindness, helpfulness and professionalism.**
- Due to their general dependence on social assistance, the system seems much more powerful and in greater control over the users' lives. This is best seen by the fact that many respondents say that they did not sign any form or service plan, or that other people filled them out for them, or that 'these papers' were

not even in their possession, but were kept in their frontline workers' offices instead. On the other hand, the front-line workers claimed in their interviews that the service plans, as the main reference documents, were defined jointly. **The asymmetry in power relation** is especially noticeable in the case of the Romani population, a problem that needs to be addressed against the background of a widespread yet almost completely ignored **racism towards Romani people** in Serbia (Janevic et al., 2011).

**The lack of frequent face-to-face contact** and direct communication is what frustrates the users most. They often have the impression that they have not been given enough time and dedication to tell their life stories. By the same token, when showing personal interest and a readiness to listen to their clients, frontline workers are described as trustworthy. Personal relationships seem to be most important when assessing the work of the social system. **Quality of service, trustworthiness included, is judged by the relationship with a flesh and blood social worker**: warmth and cordiality, professionalism and efficacy depend on concrete people; **knowing the right person** and receiving the right information (usually through third parties) is what is understood to secure good outcome. This is in line with the general prevailing culture of informality and widespread mistrust in institutions, somewhat typical for the parts of East and Southeast Europe (Giordano & Hayoz, 2013; Pudar Draško et al., 2020), where it is not the institutions that can or should be trusted, but flesh and blood people.

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# Summary and Conclusions

Maria Theiss and Dorota Szelewa

As underlined in the introduction, in this summary report chapter our focus is not on comparing whole country-systems, but on interviewees' understanding of (dis)trust, specific institutional settings of (dis)trust building, as well as on forms of (dis)trust building which are more or less strongly present in all researched countries. Since within every researched country there are substantial differences between various social assistance institutions and procedures, our unit of analysis is not the country as a whole, but a repetitive practice or processes we recognise as thematic in our interviews. Whenever a country is referred to in a particular part of the report, it is meant to show where specific practice or issues were observed, not to claim that such a feature characterises the whole country-system. We think such an analytical approach provides a fine-grained picture of trust-building and trust-deteriorating practices and would be useful for developing policy-relevant suggestions.

## 1. Interviewees' understanding of trust and distrust; trust in direct relations between frontline workers and citizens

### 1.1 Understanding of (dis)trust

Both the citizens and social workers understand trust/distrust primarily in **relational terms** and in a dynamic perspective, as evolving with time (for countries' summary: see Table 3 in the Appendix).

The citizens and social workers most often point to the understanding of trust as a **mutual relation, truthfulness, the possibility of revealing and opening up, and confidence in a specific person**. In the context of trust/distrust, interviews in all countries centre on the importance of **individual relations between the caseworkers and their clients**, also understood in terms of the process of trust building. Social workers emphasise that trustworthiness means that they should not have any "hidden agenda", while demonstrating a trusting approach involves a high level of openness, honesty and a sincere attitude towards the client. They also stress that trust demonstrates itself through a **transparent and honest attitude** from the side of the clients, who are not hiding important facts during the interview. **The possibility of opening up** is especially important for the citizens, who are not afraid to reveal various intimate and potentially compromising facts about their life if the confidentiality of the conversations with the case-worker is guaranteed.

Citizens express concern about the perceived distrust from the side of caseworkers, often as a default setting – **distrust demonstrates itself**, according to citizens, **when they are forced to repeat the same information** to the same (or a new) caseworker, or are constantly made to present the same documents. This is confirmed by caseworkers in some countries. Distrust is a default option when information about citizens is verified, especially when it comes to child-related social assistance (Italy, Serbia). Sometimes, distrust is declared as a default option as caseworkers feel they need to regard clients' points of view as highly subjective (Greece, Poland). In contrast, other caseworkers mention that trust rather than distrust by default is a feature of a professional attitude towards clients in social-work relations (Germany), or they declare that **trust is an assumption that the other party has good intentions** (Poland).

Interviewees often emphasise **reliability, transparency, loyalty** and **honesty** when referring to trust. **Reliability** is sometimes used as a term *characterising* trust (Germany, Italy), while in other cases, it is also mentioned as a *factor affecting* trust, also linked to honesty and transparency in this particular context (Czech Republic).

Citizens often contrast the relations of trust with individual caseworkers with distrust towards the **system**, often perceived as **overcomplicated, bureaucratic** and **fragmented** (more detailed overview of this relation is presented in point 2.1 of this chapter). A trusting relation or bond, as well as a confidential sphere with a mentor/caseworker, is perceived as a means **to balance and counteract the system** of social assistance, often perceived as hostile. Hence, citizens report that they often tend not to trust the system and its workers in general though may simultaneously have a trusting relationship with a mentor/caseworker. Sometimes the citizens contrast the trust within the family (and between family members) with the (lack of) trust towards politicians and the public sphere (Greece).

When characterising their relations with caseworkers in the context of trust/distrust, citizens often mention trust as demonstrated through **help-giving** (again, help-giving was mentioned both when characterising trust and as a factor affecting trust), often in the context of doing “more than required”.

According to a great number of interviewees, trust often involves emotions: **warmth, closeness** and **empathy**. Sometimes, trust is not singled out, but rather its meaning overlaps with **kindness, helpfulness** and **professionalism** (Serbia); in other cases, the interviewees emphasise non-verbal signs of trust (Italy). Respondents also mention that in face-to-face relations, it is somewhat difficult to disentangle trust from more general features of the relationship, such as: **good communication, feelings of security, personal bond, sense of understanding**. It is also difficult to tell if trust is a result or the source of these features.

Table 2 presents the collection of expressions used by the interviewees in relations to the issues of trust and distrust.

Table 2: Expressions and labels that the interviewees used in relation to trust and distrust

Explicitly used words related to interviewees' understanding of TRUST	Categories present in interviews related to factors affecting TRUST or functions of TRUST
<p>truthfulness  mutual relation  possibility to reveal and open up  confidence in person  confidentiality  reliability  reciprocity  transparency  loyalty  honesty  feeling secure  warmth  closeness  empathy  kindness  helpfulness  openness  professionalism  being together  understanding  good intentions</p>	<p>help-giving  good communication  personal bond  sense of understanding  “keeping promises”  fairness  individual/personal treatment  care  support  respect  appreciation  efficiency in getting information  doing more than minimum  dignity  equality</p>
Explicitly used words related to interviewees' understanding of DISTRUST	Categories present in interviews related to factors affecting DISTRUST or functions of DISTRUST
<p>suspicion  dishonesty  unreliability  lack of confidentiality  unfairness  carelessness  disappointment</p>	<p>subjective information  formalism  corruption  nepotism  fragile relations  system fragmentation  system complexity  prejudice  cheating  controlling practices</p>

Source: Authors' own compilation on the basis of the country reports.

## 1.2 Interviewees' reflections on factors affecting (dis)trust

The vast majority of the citizens stress that trust/distrust depend first of all on the relation with the individual caseworker on the one hand, as well as the citizens' experiences with the system, on the other.

The individual relation with the caseworker rather than the attitude towards the system seems to play a major role in the process of trust/distrust building. The citizens often understand **reliability** as linked to the perception of a case worker as helpful and “**keeping promises**”. The frontline worker can be trusted when showing readiness to help and is effective in providing necessary and additional assistance to the client. In contrast, caseworkers were perceived as unreliable and untrustworthy when they failed to keep promises, were irresponsive or suspicious. Whenever the citizens observed the caseworkers **not keeping to professional standards** (breaching confidentiality, not being responsive, delaying access to benefits), they also declared such circumstances as contributing to lack of trust.

Similarly, the caseworkers perceive **honesty** and **transparency** in the relations as crucial for trust-building. Sometimes they also face a very specific dilemma – whether to further reveal information they received from their clients that may be used against them (Denmark).

Additional factors increasing trust, as reported by the citizens, focus on being **treated as an individual** and guaranteeing a high level of the citizens' autonomy. Consequently, lack of respect and a hierarchical character of relations, together with very formal and distant relations with the frontline workers, could potentially be detrimental to the development of trust in mutual relations. Both citizens and caseworkers emphasise that **mutuality** of the relations is a crucial factor affecting trust.

The already mentioned **formality** and **fragmentation of the system**, according to the interviewees, often results in a distrustful attitude from the citizens' perspective (Czech Republic, Serbia, Poland, partly in Germany). They also evaluate the system as **unfair** and relate the perceived unfairness of the system to distrust. Other features of the system contribute to lack of trust, such as **a low level of benefits, strict means-testing and controlling practices**. In some cases, as admitted by the citizens, such a strict approach makes it rational for them “to cheat” (Poland). Frequent changes, the lack of stability, as well as ad-hoc adjustment were all perceived as factors contributing to distrust, especially by the social assistance clients. Even when the system is trusted, in general, there are certain characteristics or rules that are potentially trust-detrimental, such as the fear of children being taken away and placed in care (Denmark, Germany).

As already mentioned, trust is not understood as a static concept; on the contrary, the majority of interviewees emphasise **the evolution of trust/distrust with time**. All the aforementioned factors influencing trust/distrust, such as reliability, autonomy, individual treatment (or lack thereof) cement the nature of the relationship over time. What

should be added is that the citizens report that their trust towards the caseworkers gets enhanced after they receive assistance (Germany, Poland). Some caseworkers mention the application of solutions to improve communication as an important source contributing to trust building (Denmark).

Some citizens report they are (dis)trusted on the basis of their **ethnicity**. According to this group of respondents, caseworkers differentiate between clients more and less trust deserving on the basis of their ethnicity, citizenship and migration status. This is also confirmed in conversations with some of the caseworkers. Some frontline workers report they apply a differentiated approach to **“obedient”** and **“disobedient”** clients.

### 1.3 Functions of (dis)trust

Trust is perceived as a very positive factor facilitating both **the cooperation between the caseworkers and the citizens, and the efficiency and quality of services delivered by the service providers**. For case workers, trust is reportedly helpful, as it enables to run the cases smoothly as the clients tend to open up and talk about their needs, problems and fears. This allows for collecting more and better-quality information and for better targeting the assistance. Trust is perceived as useful for overcoming the bureaucratic burden. For citizens, trust helps to deal with the complexity of institutions and procedures, and to reduce stress when applying for help. Some interviewees explicitly state that from their perspective trust means **“feeling secure”**. Whenever the relationship between the caseworker and the client was characterised by trust, this led to clients being more accepting of the conditions of help. Trust in the relation with the client was also perceived as facilitating the motivation for change (Germany).

### 1.4 (Dis)trust towards (domestic) politicians and the EU

Trust towards politics, politicians and the public sphere was the topic of conversation with the citizens. The most general conclusion that can be drawn on the basis of these interviews is that **citizens have little or no interest in politics, sometimes express anti-political sentiments and mostly remain focused on “everyday life”**. The overwhelming distrust in politicians among the respondents in the majority of countries studied is often described as resulting from “unfulfilled promises” and the impression that “politicians don’t care” about the regular citizens. In a way, the experience of disappointment and unfulfilled promises could have influenced overly negative attitudes towards politicians. In some countries, trust in politicians depends to some extent on the political parties’ ideological affiliations – some citizens expressed their trust in left-wing politicians, more specifically Denmark and Germany. Other respondents also admit that the lack of trust in politics resulted in their unwillingness to participate in elections (Poland, Serbia).

As far as attitudes and trust towards the EU are concerned, **the citizens most often declare their trust towards the EU as a whole, and describe their EU membership in positive terms and as beneficial.** The remaining, slightly Eurosceptic group of respondents give various reasons for their less than enthusiastic approach towards the EU. An interviewee from Denmark pointed to the example of the UK, and how the country is “doing better” after Brexit. A German respondent expressed the opinion that sometimes the EU serves the interests of big companies and not regular people. A respondent from Poland stresses that on the one hand the EU is supporting the rule of law, while on the other – fear exists that if Poland joins the Eurozone, it will lead to a price increase.

## 2. Welfare systems and policy design as the context of (dis)trust-building

The analysis of interviewees’ experiences with granting and applying for help points to the following institutional features of the systems of support to vulnerable families. These features make a context of building a (non)trusting relationship between citizens and frontline workers.

### 2.1 The level of institutional fragmentation in the field of social assistance

As presented in Table 3 in the Appendix, the level of institutional fragmentation of social assistance varies strongly within the group of researched countries. It is relatively low in Greece, Poland and Serbia, moderate in Czech Republic and high in Denmark, Germany and Italy. However, a clear-cut distinction in countries with a high/low level of institutional fragmentation in the field of social assistance is not possible, due to wide variation at the local level. For instance, interviews conducted in Italy showed significant organisational differences in social assistance depending on the size of the municipality.

In countries of low fragmentation in social assistance, there is one leading institution at the local level which grants or coordinates granting welfare benefits and social services to vulnerable families. In this case, even though services and benefits are overall provided by numerous institutions, one of them serves as a “contact point” for citizens and offers guidance when applying for help elsewhere. In the case of highly fragmented systems, there are numerous social assistance institutions, usually with very diverse *modi operandi*.

Institutional fragmentation has i.a. following meaning for building trust-based relationships between citizens and frontline workers:

a) In the case of highly fragmented systems of social assistance (Germany, Denmark) **frontline workers in helping institutions were found to be engaged in procedures of client selection** - prior to granting benefits or services, they need to verify if a given

institution is the “right place” for a citizen to apply for help, a process of preliminary checking a client’s eligibility criteria, apart from a thorough verification performed at a further stage. Our interviews showed that this may result in institutions looking for clients whose situation is a “typical case” in terms of help granted by this institution. Thus, those citizens who hardly fit into such a scheme are often referred to other institutions, which is consistent with past findings at street-level bureaucracy (Lipsky, 2010). Such a practice of looking for an institutional “right place” to enter the social welfare system has negative consequences for citizens’ perception of this system and possibly for establishing trust relations with frontline workers and trust in institutions. This is because, as our interviewees emphasised, the very construction of the welfare system is perceived as unclear, not transparent and highly complicated (this was reported i.a. in Germany and Denmark). Referrals from one institution to another create citizens’ perceptions of the social welfare system as being hardly accessible, or even hostile.

b) However, it needs to be noted that the very fragmentation of the system does not need to be a problem per se. Rather it is a matter of **coordination in the context of high fragmentation** which is needed. Our interviewees provided numerous examples of good work coordination between helping institutions, and providing citizens with support in applying for benefits elsewhere was highly beneficial for them. This is contrasted with “dismissive referrals” and citizens’ lack of information regarding where exactly they should apply for help.

c) Yet, low levels of institutional fragmentation might have negative consequences for relations between caseworkers and citizens, too. The frontline workers we talked to pointed to negative aspects of a very low level of fragmentation and tasks’ specialisation. In Greece, Poland and Serbia, in **some local contexts, social assistance workers reported overburdening with very complex tasks leading to high levels of staff rotation**. They were emphasising that the situation in which municipal social assistance institutions serve as a “big bag” meant by policy-makers to solve diverse and complex social problems is neither efficient nor allows them to focus on establishing closer relations with clients.

## **2.2 The level of task specialisation: institutional divisions in client reception desks, administrative units which grant benefits, individual case work, etc.**

In most of the researched countries, both frontline workers and citizens we talked to discuss internal specialisation of helping institutions. For instance, in Denmark, Poland and Serbia interviewees reported the presence of a “reception desk” or “recipient team” in social assistance centres, separated from units or departments in which social workers cooperate with families in a regular manner. Moreover, in Germany, Greece, Poland, Italy and Serbia, interviewees also emphasised institutional decoupling of administrative

procedures of granting means-tested welfare benefits from performing social work with families or provision of social services. Yet, as in the case of institutional fragmentation, institutional specialisation varies not only between countries, but also between localities in one country (e.g. inter-institutional detachment of administrative procedures and social work does not take place in all researched localities in Italy and Poland).

Overall, the mentioned specialisation turned out to be a relevant context for building trust-based relations in social assistance, as it organises a “double logic” of social welfare systems. This **“double logic” refers to formal and rigid administrative procedures of benefits granting being intertwined with highly individualised, context-specific case work**. More specifically, we have found that the organisation of this tension has, among others, the following meaning for trust-building:

a) First, whenever institutions’ units or whole local institutions specialised in means-testing and administrative procedures are discernible from those which are focused on **individual casework, interviewed citizens overall report that they are more likely to develop trusting relations in the latter cases**. They often argue that this is due to higher autonomy of frontline workers who are engaged in individualised social work, but also due to an overall more user-friendly approach in institutions or their units, or that they specialise in casework. For instance, interviews with citizens in Czech Republic and Germany showed that social assistance centres are a more favourable context in which to build trust between citizens and frontline workers than labour offices, so is, in the case of institutions our interviewees spoke about, granting services is more trust-promoting than granting benefits in Greece.

b) Second, the fact of both mentioned logics being intertwined in the social assistance system leads to citizens’ confusion and **perception of the system as not being transparent**. In many instances citizens say they have poor knowledge about possible solutions, frontline workers’ room for manoeuvre and feel uncertain about how cooperation with social workers may affect decisions about being granted or denied social benefit. This confusion, in particular, when not clarified by frontline workers is detrimental to the context of trust between citizens and institutions’ representatives, consistent with mentioned findings of i.a. van Ryzin (2011), Behnia (2008) and Fersch (2016).

c) Third, the fact that **both mentioned logics are being entangled in helping institutions is in some contexts challenging also for frontline workers**. For instance, in Denmark and Poland, frontline workers responsible for granting benefits emphasise they are also trained social workers. Although they are required to follow strict administrative procedures, they have the identity of social workers. In our interviews, they often underline that the manner in which they work differs from the way other bureaucrats grant benefits, and that they combine the use of professional knowledge about clients’ needs with the necessity to follow strict procedures. They often seek legal ways to adjust these procedures to clients’ cases.

d) Fourth, division between “reception desk” and caseworkers who are assigned to families and work with them on a regular basis was perceived by our interviewees as an effective and highly welcome measure to ensure **stability of relations between clients and caseworkers**.

### 2.3 Citizens’ voluntary versus non-voluntary entering the social assistance system

Our interviewees pointed out that in terms of trust-building, there is a significant difference between citizens who contacted social assistance institutions themselves and those who were contacted as a result of intervention. The latter case applies i.a. to issues of pedagogical problems in the family, children being neglected, or domestic violence. In some countries, the frontline workers we talked to emphasised that a high share of clients contacted through intervention is specific for a given institution (e.g. in Denmark), whereas in others (e.g. in Poland) it was rather related to neighbourhood specificity.

Frontline workers in Poland argued that work with families who were **contacted as a result of intervention** (notice from school, neighbours, police, etc.) is in some cases easier than with families who apply for financial benefits mainly due to poverty, but on the other hand these clients tend to be **less trusting of social assistance institutions**. Similar issues were addressed in Denmark and Germany. In those instances, frontline workers seemed very aware of fragile relationships with clients, and sometimes developed specific measures aimed at trust building. For instance, in Poland, an example of a solution was given that the very social worker who assists police during the intervention in cases of domestic violence is never the one who works with a given family later on. This measure is meant to help families trust social assistance more and not to recall the past incident.

Relations with frontline workers and citizens’ perceptions of how the system works seem to depend, i.a. on whether citizens are obliged to contact certain institutions or not. E.g.: obligatory contacts with institutions which provide **mandatory counselling is in general trust-detrimental, due to i.a. clients’ fear** of children being taken into foster care.

### 2.4 Frontline workers’ high workload, understaffing, staff rotation and occupational burnout

In all researched countries, frontline workers in social assistance systems report the problem of overburdening with tasks - either too high a caseload or too complex and demanding tasks, as well as the problem of high bureaucracy and an imbalance between

“paperwork” and time for contact with clients. Mentioned issues are also visible for clients and they were often discussed as a negative context of building trust-based relations. Contrary to what has been suggested in current literature on street level bureaucracy (Møller & Stensöta, 2019; Newman, 2007; Pollitt & Bouckaert, 2011), we have found little support for managerial pressures typical for new public management schemes. The problem of the high workload of caseworkers turned out to have various negative consequences for trust relations:

a) Both citizens and caseworkers emphasise that **time is needed to establish mutual relations based on trust**. This refers both to the amount of time devoted weekly or monthly to the work with a given person, as well as to the length of cooperation. Caseworkers’ scarce time for meetings with clients results in relatively poor communication, the necessity to act in a relatively schematic way, as well as their stress and eventual burnout. Superficial and schematic contacts with caseworkers were described as trust-detrimental in most of the researched countries and in particular in the Czech Republic and Denmark. For instance, a caseworker in Poland maintains that the best situation to establish trust with clients is assisting them on trips to institutions. Talking to clients while travelling together offers a genuine occasion to get to know them better. However, recently, time for such contacts has been limited.

b) Overburdening and understaffing problems often result in **lengthy waits for clients to meet with caseworkers or to be placed on waiting lists** in order to discuss specific issues in person. The necessity to wait in long queues, often in vain, at premises of social assistance institutions was found trust-detrimental by interviewed citizens e.g. in Czech Republic.

c) Understaffing and workers’ burnout resulting in high staff rotation (reported especially in Serbia, Italy and Greece) was discussed by citizens in all the researched countries. Citizens emphasised that **frequent changes of assigned caseworkers is both very stressful and decreases citizens’ trust in helping institutions**. In particular, the necessity to reveal and repeatedly provide the same embarrassing information about one's own situation to new caseworkers, as well as the necessity to adjust to new caseworkers’ specific requirements was found stressful or even humiliating. An interviewee in Denmark explained that caseworkers assigned to her case had changed so many times and so frequently in recent years that she thought of them in terms of numbers. This shows that the **clients’ choices not to establish closer relations with caseworkers may be a rational strategy in the context of high staff rotation**.

## 2.5 The strain of applying for welfare

One of the major themes present in our interviews, an issue strongly related to interviewees’ distrust in social assistance institutions, is the strain on citizens when applying for welfare benefits. The methodology of our study does not allow for its quantitative

comparison, but interviews suggest that its level differs in researched countries and in countries' various institutions. Our interviewees in Czech Republic, Denmark, Germany and Poland underscored stress and difficulties somewhat stronger than interviewees in Italy, Serbia or Greece. However, citizens' strain was discussed by a significant share of our interviewees, both by citizens and frontline workers. Its sources differed among countries and specific institutions described and entailed i.a. following, not mutually exclusive issues:

a) **Complicated and time-consuming procedures** of applying for help, including uncertainty regarding which institutions to apply to and what for, difficulties in navigating websites with on-line forms, necessity to fill in difficult forms with highly specific questions, necessity to provide numerous documents to prove given situations (such as statements from employers, doctors, school teachers, relatives), or for repeat visits to fill in gaps in information, as well as the necessity to continuously expand or update provided documents. One of interviewees in Denmark coined the term "municipality stress" to describe her experience with applying for help in municipal institutions. The issues which increase such stress are jumbled information and somewhat diverse practices of different frontline workers who handle applications for help in given institutions.

b) Claimants' necessity to **reveal personal, sensitive information** about their own situation. Overall, interviewees tended to accept this prerequisite as a part of applying for welfare benefits. However, what they evaluated negatively and pointed to, i.a. in Poland and Germany, was the obligation to **frequently repeat** answers to the same questions to various staff. Both citizens and frontline workers underscored the strenuous nature or even futility of such practices, since all past answers are carefully filed, but they claimed it is imposed on them, e.g., by institutional differentiation and data protection considerations limiting the exchange of information between institutions. Many citizens found this practice both humiliating and ultimately a sign of control.

c) **Activation measures**, such as necessity to report active job seeking, participation in workshops or on-the-job trainings, present in all researched countries, but particularly salient in Germany and Czech Republic, were generally accepted by our interviewees. However, some of the respondents emphasised these measures are difficult to be combined with specific needs of their children, or their family or health-related situations. Some interviewees found these measures unfair when applied to parents who would prefer to stay at home with babies or devote more time to children.

d) **Means-testing procedures** were rather accepted by interviewees. However, in some instances, their organisation was found unjust. This referred e.g. to the risk of losing the right to benefit after unexpectedly exceeding the income eligibility threshold by 1€. Interviewed citizens in Poland found the prerequisite of interviewing family members not living in the claimant's household very unjust. The goal of these interviews is to assess whether other family members (e.g. parents or brothers or sisters) are able to help a client before the state does. Interviewees evaluated this solution as highly frustrating,

and frontline workers gave examples of people withdrawing their applications for help in order to hide their own poverty from relatives.

There are several ways in which we think the above sketched strain in applying for welfare is related to trust:

a) As said, interviewed citizens overall accept the necessity of going through certain procedures when applying for benefits, so they accept some level of eligibility testing and activation measures. However, experiencing these procedures as **very time consuming, stressful and futile, and as citizens explicitly pointed out, decreases their trust** in helping institutions.

b) In a similar fashion, potentially trust-detrimental are those practices in procedures of applying for welfare which **citizens find unjust, cruel** (such as benefit denial due to marginally exceeding the eligibility threshold, involving distant relatives in resources assessments, threats of children being taken into foster care for not complying with prerequisites, etc.), or **wrongly targeted** (according to some users, social assistance is easily accessible to people who are “work-shy”, who cheat, have addictions or are migrants (Greece, Serbia) which they find unjust).

c) Analogously, a negative impact on citizens’ ability to trust helping institutions is their experiences of **procedures being very difficult to understand, frequently changing, vague, not transparent, highly discretionary**. Our interviewees often compared frontline workers by pointing to the differences in the way they handled their applications, and found a shadowy room of manoeuvre is accessible to frontline workers in this regard. As discussed in the next part of this report, such situations may contribute to the perception of frontline workers being trustworthy, if they handle applications in a “friendly way”, but they do not contribute to trust in helping institutions.

d) As noted, some degree of requirements when applying for help is accepted by clients and so is the complexity of social assistance systems. Thus, a practice which alleviates the mentioned citizens’ strain and **contributes to trust in helping institutions is the accessible and detailed information about citizens’ rights, accessible measures, requirements, institutions’ goals and procedures**. Both general information and personal guidance is of utmost relevance in this regard.

## **2.6 Cooperation and communication in direct relations between caseworkers and clients**

In all researched countries, citizens reported mixed experiences of contact with frontline workers, with some general leaning towards a positive assessment. Interviewed citizens in all countries were unanimous when describing positive characteristics of caseworkers. Ideal features included: caseworkers not too young in age, their being experienced, having knowledge about procedures, being open, “nice”, empathetic, handling issues in

a transparent fashion, yet being ready to do “more than the minimum”, being helpful and providing detailed information about procedures and possible solutions. As noted in the previous section of the report summary, citizens shared an assumption that having the “**right carer**” or “**right caseworker**” is essential for obtaining help from the social assistance system in an efficient fashion. In most cases, citizens regarded having the “right carer” as a matter of luck, whereas numerous interviewees reported they successfully changed their assigned frontline worker due to communication problems.

Citizens’ **perception that frontline workers have some autonomy in their work turned out to be, in general, trust-beneficial**. As noted with regard to citizens’ different experiences at various institutions in one country, social assistance users agreed that whenever frontline workers are strongly bound by formal rules and have to follow the institution manager’s decision or follow a very certain professional conduct, there is little space for trust to be developed. In those cases, citizens emphasised they neither trust nor distrust caseworkers and argued: “They [caseworkers] helped me but doing this is just a part of their job”. In such circumstances, citizens were not inciting frontline workers to bend professional rules, but rather withdrew from building individual relationships.

However, this general link of trust and discretion is not contradictory with the presence **of two different (ideal types of) styles of frontline workers’ practice (as perceived both by them and the clients), which were positively related to clients’ trust in social assistance**. The first one is based rather on extensive and understandable information provided to clients, a thorough explanation of rules and procedures, workers’ transparency in following procedures and an unbiased or unprejudiced stance. Among the interviewees in Germany and Denmark, this understanding of frontline workers’ professionalism was particularly salient. The second style of work is focused more on caseworkers’ looking for spaces to manoeuvre in order to solve clients’ problems, applying innovative measures, “doing more than the minimum”, and caseworkers’ visible readiness to have arguments with institution managers in order to pursue client-beneficial solutions. Some interviewed citizens very much appreciated that there are frontline workers who are ready to receive their phone calls any time, who lend them private money or overlook some gaps in the clients’ documentation to solve an issue quickly. Citizens in Poland and Denmark often mentioned the positive sides of these professional styles by outlining styles of work that share similarities with “**rule-oriented**” and “**care-oriented**” styles **among frontline workers** (Møller & Stensöta, 2019).

Interviews with frontline workers revealed that the same case worker may apply a somewhat different approach to different clients. Professional knowledge about how to work and how to develop trust in relations with clients who have foreign cultural background, have experiences of domestic abuse, violence or trauma, who are addicted or have mental health troubles was emphasised by our interviewees in most countries. Moreover, in some countries (Germany, Poland) caseworkers explained they tend to adhere to the rules in cases of very demanding clients who do not keep promises or who deliberately

hide facts. On the contrary, if caseworkers find out that a client is willing to cooperate and is reliable, they are more willing to relax formal procedures wherever possible. For instance, a frontline worker in one of the countries said he always demands original documents (e.g. from employers or tax offices) from clients from the more demanding first group and accepts copies of documents from the more cooperative second group of clients.

## 2.7 Country-specific contextual factors: distrust in politics, familialism and resentment

Our interviews suggest that the broader, country-specific context may be supportive or detrimental for building trusting relationships between clients and workers of social assistance. The following features turned out to be relevant in this regard:

a) Citizens' **low trust in the public sphere and in politics in general** seem detrimental to building trust in the helping institutions. As described in the previous section of this report summary, in most of the researched countries, our interviewees who are users of social assistance generally express a high distrust in politics, politicians, and often – in the public sphere as a whole (the latter was salient in interviews conducted in Greece, Serbia and to some extent also in Italy and Poland). In those countries, whenever social assistance frontline workers were regarded by users as state representatives, they were approached by clients as distrust “by default”. This often results in a distrust spiral, as described in the Greek report: case workers do not feel trusted and are prone to being duped by citizens, thus they are in turn suspicious towards their clients, further hindering trust development in the relationship.

b) **Strong familialism** of a country's culture and trust being related in particular to family relations turned out to be relevant to trust-building. Yet, the impact of familialism seems ambiguous. On the one hand, it resonates with the aforementioned distrust in the public sphere and hinders trust in relations with caseworkers who, by definition, are not family members. On the other hand, in some contexts (for instance in Serbia and Greece), it urges clients to establish a family-like relation with a frontline worker that differs strongly from typical “cold and formal” relations with state officials. The latter process, as specified further, is one of the reasons why in some contexts individual trust between caseworker and client does not translate into clients' trust in the social assistance system.

c) **Anti-immigrant sentiments, negative public image of minority groups**, resentment towards welfare users, strong (un)deservingness notions attributed to some groups were revealed by our interviewees in a few researched countries. Both citizens and frontline workers expressed opinions that the social welfare system is prone to being misused by some groups, e.g. “work-shy people” (in Czech Republic), people with addictions, “vodka drinkers”, as well as those who work on the black market and who hide

their real income (Poland) and immigrants (Greece, Italy) or Roma people (Serbia, Czech Republic). Perception of the system as unfair and wrongly targeted and of some groups as making advantage of welfare contributed to interviewees' opinions that the welfare system cannot be trusted.

d) **Negative media image of social assistance** was reported i.a. in Denmark, Germany and Poland. Frontline workers gave examples of media releases linking social assistance both to children being taken away from their families, as well as domestic abuse problems often going unsolved and disregarded by caseworkers. They underscored that the image based on such associations decreases citizens' trust in social welfare institutions.

### 3. Entangled relations of trust and distrust in social welfare institutions

The analysis of interviews with caseworkers and beneficiaries of social assistance showed us the complexity of trust and distrust relations. We found out that trust and distrust may coexist in particular settings in various functional ways. In our study, we have found the following major manifestations of trust and distrust being functionally intertwined:

a) Despite significant individual differences, **personal relations between citizens and frontline workers of social assistance are in general rather based on some trust, whereas simultaneously users' attitudes towards the social assistance institutional system is rather based on distrust.** As stated, we did not observe major country differences in this regard, but significant differences among trust and distrust towards various types of institutions (e.g. less trust towards labour offices than towards municipal service providers, and less trust in offices granting benefits than those granting services).

Social assistance clients' simultaneous trust in frontline workers and distrust in institutions is based on the perception that the social assistance system is not transparent, has too much power, uses surveillance to target and monitor and is unjust, while a "good carer" is seen as a person who helps clients to navigate such an unfriendly system. As described, a sign that a frontline worker is a "good carer" is, according to some citizens, the fact that s/he is ready to "do more than the minimum", explains how the system works, proactively looks for possible solutions or stands by the client against institution managers, if needed. This functional relation between not trusting the institutional system and trusting the ("good") caseworker was particularly salient in contexts shaped by a strong familialism (Italy, Greece, Poland, Serbia), where our interviewees' low levels of trust in the state and politics ran parallel to recognising private, individual and close relations as the baseline of trust. In those cases, social assistance users seemed to prefer or actively looked for family-like relations with caseworkers.

b) Accordingly, we have found that more trust or gradual development of trusting relationships between a client and a frontline worker do not automatically result in clients feeling greater trust in social assistance institutions. In particular, **whenever individual trust is placed in a frontline worker who is recognised as a “citizen agent”** (in contrast to a “state agent”) (Maynard-Moody & Muscheno, 2000) **or “care-oriented”** (Møller & Stensöta, 2019) **caseworker working in an unfair or not transparent system, the process of upscaling trust from the individual level to the institutional level is absent – more trust in a caseworker does not translate into more trust in a social assistance system.**

c) The above sketched mechanism seems to work mainly in the clients’ cognitive sphere – they know that caseworkers can be trusted and they know that, given the complexity and tensions in the social welfare system, the system cannot be trusted. However, interviews with social assistance users showed that in some cases, a **process of distrust upscaling, based on clients’ emotions**, might be at stake. Namely, although more trust in caseworkers does not automatically result in more trust in the social assistance system, feelings of being disregarded, disappointed due to benefit denial or humiliation in face-to-face relations with caseworkers often result in a negative perception of the system and distrust towards social assistance institutions in general.

d) Paradoxical as it may seem, interviews with **frontline workers showed that they often simultaneously have some trust and distrust in a client.** Frontline workers’ attitudes and a practice described as **“professional trust”** (in the German report) or **“trusting, but”** (in the Polish report) were present throughout our sample. The general assumption here is that clients need to be trusted and respected, as well as having their willingness to cooperate with caseworkers acknowledged. An important basis of such an assumption resulted from caseworkers’ professional identity of social workers and their acknowledgement of trust-building as an important goal and prerequisite in social work. This assumption does not mean caseworkers have naïve expectations that that clients are honest by default. Distrust – which means not “less general trust” – is based on a knowledge that clients’ perspectives might differ from those of caseworkers, as well as that clients’ experiences, socialisation, rationale, circumstances, etc. make a context in which their agency might be limited. This coexistence of trust and distrust is a fragile relationship in which both parties prove themselves to be (un)trustworthy.

e) **Trust and distrust are dynamic relations, heavily dependent on parties’ experiences.** Thus, in regard to individual-level relations in social assistance institutions, it is often more accurate not to talk about the (dis)trust level, but of the direction of change and the specific circumstances in which trust or distrust are enacted. A significant share of our interviewees emphasised that trust increases in relations with time, and time is needed to create trust. Simultaneously though, citizens often said that the long-term use of social assistance taught them to be as controlling and distrustful in regard to institutions as the institutions are controlling and distrustful towards them. Many interviewees explained that eligibility-testing, means-testing and controlling procedures

used in social assistance encouraged them to act in the same fashion towards frontline workers: to demand their written statements, to evidence their visits and run Excel files with received benefits to make sure that institutions do not take advantage of them.

#### 4. Building trust on a street-level: towards practical recommendations

1. In highly fragmented systems of social assistance and also in cases of high (internal) specialisation of institutions' tasks, policy makers and institutions' managers **should pay attention to effective coordination** which is needed to promote citizens' trust in institutions. A lack thereof results in clients being referred from one institution to another and reinforces their feelings of "being lost" in a complex system.

2. Policy makers, institutions' managers and frontline workers **should strive to provide detailed information about the general goals of the system, citizens' rights and possibilities to obtain help**, both in general (which institution to apply to) and in specific cases (what to apply for in a given institution). Prior and complex information is as important as individual help when assisting citizens trying to navigate a complex system.

3. Policy makers, institutions' managers and frontline workers should strive to **guarantee the highest transparency of the process of benefit and services-granting**. Citizens' knowledge and understanding of the process of application, and clear and stable rules about the reasons for denying benefits are of utmost importance in this regard. **Services' or benefits' denial should not depend on different interpretations of administrative prerequisites and different practices in various units of one institution.**

4. Policy makers, institutions' managers and frontline workers should do their best to **reduce the practices of clients' frequent repetitive inquiries about past, sensitive issues.**

5. Policy makers and institutions' managers should contribute to **frontline workers' having the necessary time to contact clients and to reduce frontline workers being overburdened with bureaucratic issues** (such as the busywork of re-writing interviews from longhand into the computer system).

6. Whenever there is a need for repetitive contact of a citizen with a public institution, it is recommended that there is **the same public officer who works with a given person/family**. Specific measures should be implemented in the case of a carer's change. This may include, prior to a frontline-worker change-over, a three-party meeting of client with the "old" and "new" caseworkers.

7. Social assistance users should have the **freedom to change assigned frontline workers** with no negative consequences to their own case.

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**Appendix: Table 3. Interviews' summary table**

INTERVIEWS WITH FRONTLINE WORKERS							
	Czech Republic	Denmark	Germany	Greece	Italy	Poland	Serbia
<p><b>Institutions where interviews have been conducted: their names and the scope of work</b></p>	<p><b>Municipality office:</b> social workers performing casework and engaged in work with other institutions.</p> <p><b>Labour office:</b> specialists in need assessment and granting benefits and other employees.</p>	<p><b>Family Department (a unit of municipal Family, Youth, and Children Centre):</b> workers responsible for child-centered social work, families' case management, counselling, out-of-placement issues, allowed to grant some benefits if it is important to the child's development.</p>	<p><b>Youth Welfare Offices:</b> employees responsible e.g, for social work/case management, steering support measures, counselling, foster care issues, maintenance issues</p> <p><b>Social Welfare Offices:</b> employees responsible for provision of social assistance and housing benefits.</p> <p><b>Jobcentres:</b> employees responsible for granting financial benefits and the provision of activation-related services.</p>	<p><b>Community centres:</b> employees responsible for receiving applications for benefits, referring citizens to "Social Policy and Solidarity Services", performing social work.</p> <p><b>"Social Policy and Solidarity services"</b> ("social services"): employees responsible for granting municipal services.</p>	<p><b>Health and social-health services of the Local Health Unit (AUSL):</b> Addiction Service (SERD) and Adult Mental Health Service (SMA).</p> <p>The local office of <b>Ministry of Justice</b> (UEPE - External Criminal Enforcement Office) and <b>Ministry of the Interior</b> (Prefecture).</p> <p><b>"Società della Salute"</b> - cooperative organisations.</p> <p>All employees responsible for casework, granting services and benefits.</p>	<p><b>Municipal Social Assistance Centres:</b> employees responsible for eligibility- and means-testing, provision of means-tested benefits, provision of services and coordination of services granted, social work.</p>	<p><b>Municipal City Centre for Social Work (CSW):</b> employees responsible for help and support (legal, social, material, psychological-counselling, mediation and psychotherapy) to families and individuals.</p> <p><b>Foundation SOS Children's Villages Serbia:</b> frontline workers of a humanitarian NGO, help families at risk, also refugees.</p>

<p><b>Fragmentation level in the field of social assistance</b></p> <p><b>Other institutions in the field</b></p>	<p>Relatively high level of field fragmentation.</p> <p>Other relevant institutions: the Office for Social and Legal Protection of Children (OSPOD) and Social Services Centre (when referring to housing).</p>	<p>Very high level of fragmentation.</p> <p>Other important institutions: borger.dk, jobcentre, elderly care, psychiatry, health, disability, udbetaling.dk, “prevention initiative to ensure the best opportunities for children to thrive”, ombudspersons to secure a better dialogue between municipality and the citizens.</p>	<p>Very high level of fragmentation.</p> <p>Other important institutions: Federal Employment Agency, incl. Family Benefits Office, health insurance funds, pensions funds.</p>	<p>Relatively low level of fragmentation.</p> <p>Other important institutions: church-related organisations and other NGOs, private donors.</p>	<p>Very high level of fragmentation.</p> <p>Other important institutions: NGOs (such as Misericordia, Pubblica Assistenza, Croce Rossa), NGOs church-related (Caritas), local municipality offices.</p>	<p>Moderate/ relatively low level of fragmentation.</p> <p>Other important institutions: municipal/ town hall offices where other benefits are granted (granting family benefits, housing subsidy, pupils subsidy), Jobcentres (responsible for activation measures), NGOs.</p>	<p>Moderate/ relatively low level of fragmentation.</p> <p>Other important institutions: schools, NGOs, and specialists working in civil society organizations and involved in specific projects: counsellors and educators.</p>
<p><b>Interviewees’ main tasks and the profile of interviewed frontline workers</b></p>	<p>Tasks of interviewees in labour office: verifying applicants’ eligibility, means-testing and cross-checking information with other institutions. Frontline workers in other institutions: decision making which benefits should be granted.</p>	<p>Tasks of interviewees in “recipient team” and “psycho-social team: need assessment, social work with families, social work at schools, network cooperation with other institutions, running prevention initiatives.</p>	<p>Tasks of interviewees in YWO: eligibility testing, case management, own services’ provision such as counselling and steering of external service provision, means-testing and financial benefits granting.</p>	<p>Tasks of interviewees: social work and psychological counselling.</p> <p>Interviewees’ educational profile: The majority of the interviewees have educational background in social work or in psychology. Subgroup of</p>	<p>Tasks of interviewees: varied, depending on geographical location of the office: high level of frontline workers’ tasks specialization in larger municipalities and complex issues solving in smaller locations.</p>	<p>Tasks of interviewees: varied, depending on geographical location of the office: high level of frontline workers’ tasks specialization in most of locations (division of work between practical caseworkers and social workers responsible for administrative</p>	<p>Tasks of interviewees: in reception office: informing potential users about their rights and procedures for applying for services, referring to an appropriate specialist at the CSW and keeping documentation on the case.</p>

	Interviewees' educational profile: the majority of the interviewees have an educational background in the field of social work, but at the level of vocational training.	Interviewees' educational profile: background in the field of social work, different level of social work experiences, half of the interviewees have only a few years-long experience.	Tasks of interviewees in Job Centre: work-placement.  Note: Important division between financial benefit departments and social service departments; in financial benefit departments, bureaucratic logics prevail. In social service departments the combination of administrative and social work is present; outsourcing of social services. Frontline workers' (e.g. ASD-staff) double-function: employed as civil servants but social workers by training.	frontline workers with no tertiary education who are responsible for administrative work.	Interviewees' educational profile: all social assistance frontline workers have a strong background of social work and additional training.	procedures - means/eligibility testing, granting benefits and family assistants) but in some locations complex issues solving by social workers.	The second group: specialists, "case managers", i.e. experts in charge of a specific case.  The third group: specialists from civil society organizations filling in documentation, providing informal education on parental skills, finding employment, etc.  Interviewees' educational profile: majority have educational background in the field of social work, others have a university degree in psychology, pedagogy or special education.
<b>The main values and goals of the system as perceived by interviewees</b>	Helping clients to improve own situation and to become independent of public help, - motivating clients	Securing children's welfare: - reacting to third parties' or anonymous reports from citizens, - notifications about children's	In ASD (general social service of YWO): - focus on identification of the problem, - the assessment of	Identifying clients' needs, provision of tailored help; social work, finding appropriate means of support.	Overcoming difficulties in satisfying needs, - activation of resources of the person, the territory and the community,	Focus on needs identification, clients' independence, professionalism and following legal procedures.	Focus on solidarity with those who are disadvantaged, Altruism and improving the situation of those who are the most

	<p>to change, - long-term cooperation with clients, - “being helpful.”</p> <p>Emphasis on honesty, and reliability in the relationship.</p> <p>Some contradictions emphasised in enhancing clients’ autonomy and providing support, e.g. in contacts with other institutions.</p>	<p>deprivation in a family, - guarantee of equal opportunities to all children.</p> <p>In relations with clients: a strong emphasis on transparency, workers’ commitment and availability and the mutuality of relationships.</p>	<p>resources available to client, - self-help or empowering families to help themselves, - subsidiarity, - safeguarding of the family, - identifying basic material needs.</p> <p>Emphasis on professionalism, being transparent, showing respect and understanding, being helpful or giving empowerment.</p> <p>In Jobcentre: a strong focus on activation (“promoting and demanding”), important role of cooperation, requirements and clients’ sanctioning.</p>		<p>- promoting citizen’s self-determination and empowerment as well as improving the quality of life.</p> <p>Emphasis on empathetic approach and active listening. Reflexive action: frontline workers continuously analyse and reflect on their own practice.</p>		vulnerable.
<b>Most frequently granted benefits and services and eligibility</b>	<p>Benefits:</p> <ul style="list-style-type: none"> <li>- housing allowance,</li> <li>- child allowance,</li> <li>- parental allowance,</li> <li>- assistance with material needs,</li> </ul>	<p>Benefits:</p> <p>individual benefits if deemed necessary for the child’s well-being and development.</p>	<p>Benefits:</p> <ul style="list-style-type: none"> <li>- unemployment benefit I,</li> <li>- unemployment benefit II (means-tested),</li> </ul>	<p>Benefits:</p> <ul style="list-style-type: none"> <li>- guaranteed minimum income,</li> <li>- rent subsidy,</li> <li>- child benefit,</li> <li>- disability benefit.</li> </ul>	<p>Benefits:</p> <p>- priority of financial assistance: paying the rent, but also addressing other financial needs.</p>	<p>Benefits:</p> <ul style="list-style-type: none"> <li>- periodic benefit,</li> <li>- targeted benefit,</li> <li>- permanent benefit (if not able to work).</li> </ul>	<p>Benefits:</p> <ul style="list-style-type: none"> <li>- child benefits,</li> <li>- social assistance benefits,</li> <li>- special care benefits (for children</li> </ul>

<p><b>criteria</b></p>	<p>- an allowance for living, - and extraordinary immediate assistance.</p> <p>Services: social counselling: mapping clients' social and financial situation, resolving clients' housing issues, helping clients communicate with third parties, financial advising, or professional retraining, helping with documents handling.</p> <p>Criteria: income below threshold proven in documents within a very strict procedure.</p>	<p>Services: - family casework, - trainings for parents and children focused at children's development and well-being, - pedagogical support at home, - an investigation of the parent competence, - a relief family or placing the child in custody care,</p> <p>Criteria: - preparation of notification and individual action plan.</p>	<p>- top-up benefits for the working poor (means-tested), - child benefit, - federal child support for needy families (child supplement), - sickness benefits, - accident insurance benefits, - housing benefits (means-tested).</p> <p>Services: - educational guidance, - family assistance, - parenting counsellor.</p> <p>Criteria: - income below threshold/means-testing, - participation in activation measures, - other benefit-specific criteria.</p>	<p>Services: - social grocery, social pharmacy, - sessions with psychologists, - free examinations by doctors, - legal and accounting help, - after school help for children.</p> <p>Criteria: - poverty (means testing based on income and tax declarations) + - family status (having dependent children).</p>	<p>Services: - job placement, - childcare, - home assistance, - social and rehabilitation services.</p> <p>Criteria: - need identification on the basis of "ISEE", an indicator of the equivalent economic situation that contains all incomes and the entire description of the financial situation of the citizens' households.</p>	<p>Services: - school meals, - trainings, - psychological consultations, - legal counselling, verifying if benefits and services from other sources obtained, - support of family assistant.</p> <p>Criteria: - means testing for all benefits ( no means testing for social work), - verifying if support from family members is obtained, - provision of thorough information about own status (income sources, work, health etc).</p>	<p>with special needs), - short-time emergency aid, - additional monthly allowances for school children (incl. free school textbooks).</p> <p>Services: - psychological help, - counselling and psychological support (e.g. for women experiencing domestic violence), - social kitchen services.</p> <p>Criteria: - poverty (means testing based on income and tax declarations) + - family status (having dependent children).</p>
<p><b>Main system's problems raised by frontline workers including the lack of re</b></p>	<p>System perceived as highly formalised, rigid and complicated for clients who have to deal with excessive paperwork.</p>	<p>High caseload: 28-33 cases per social worker.</p> <p>Experiences of clients' high expectations.</p>	<p>Perceived imbalance between paperwork and actual encounters with citizens.</p> <p>Very high caseload,</p>	<p>The increasing number of administrative tasks out of the scope of social work perceived as a problem.</p>	<p>Excessive bureaucracy and high workload perceived as main problems.</p> <p>The absence of an</p>	<p>High workload emphasised: even 50-70 cases per social worker, understaffing, high staff rotation perceived as main</p>	<p>Frontline workers overall greatly dissatisfied with the current system.</p> <p>The system perceived as</p>

<p><b>sources, heavy caseload etc.</b></p>	<p>System perceived as unfair and wrongly targeted - some “truly needy” don’t receive help due to means-testing.</p> <p>System perceived as prone to be misused by clients described as “cheating” and poorly motivating to improve clients’ situation.</p> <p>High caseload and workload, especially in the labour office and not enough time for individual casework.</p> <p>Third parties’, including NGOs’es help to clients resulting in boosting clients’ expectations of help.</p>	<p>The lack of sufficient time for meetings with families.</p> <p>Feelings of high pressure from the system of control.</p>	<p>lack of personnel resources, not enough time to meet families.</p> <p>Bureaucratic procedures emphasised but not always perceived as a problem.</p> <p>Divided opinions of interviewees on control measures: Some see them as a means of security and space for manoeuvre, some underline the conflict with professional criteria of social work.</p> <p>In some departments: high staff turnover emphasised.</p>	<p>High caseload and too little time for individual work with family, understaffing, bureaucracy and the shortages of financial resources perceived as problems.</p>	<p>integrated information system, the lack of a culture of supervision, as well as the regional differentiation between various levels and kinds of support in the offer of services emphasised.</p>	<p>problems.</p> <p>Overburdening with tasks and tasks complexity, new tasks randomly added to social assistance and legal changes emphasised.</p>	<p>bureaucratized providing not enough possibilities for direct work with users.</p> <p>The system characterized by a high rate of corruption and nepotism, as well as lack of financial and human resources.</p> <p>Burnout at work frequently addressed as a problem.</p>
<p><b>Frontline workers’ autonomy and its use against managerial pressures</b></p>	<p>Autonomy perceived as generally low, but different practices of means-testing and autonomous decisions about the type of benefit</p>	<p>According to interviewees very high level of social workers’ autonomy is present.</p> <p>Emphasis on strong</p>	<p>According to interviewees with regard to social service provision, in social work-oriented departments the</p>	<p>According to interviewees low level of autonomy when providing state funded benefits, high level of</p>	<p>According to interviewees no “culture of supervision” although at the same time frontline workers emphasize</p>	<p>According to interviewees relatively small autonomy in case of benefits granting and relatively high autonomy in case of</p>	<p>According to interviewees a constant pressure from managerial structures that manifests itself in high workload and</p>

	<p>granted are possible - a diverse approach to different clients emphasised (distinction between responsible/motivated clients and irresponsible/unmotivated).</p> <p>Different "levels of being helpful/ likely to provide extra information" are well present.</p> <p>Managerial pressures not mentioned.</p>	<p>teamwork, workers' perception of control and evaluation measures as helpful.</p>	<p>autonomy is relatively high.</p> <p>Emphasis on strong teamwork</p> <p>According to interviewees with regard to financial benefits lower autonomy and higher managerial pressures.</p>	<p>autonomy when providing municipal services.</p>	<p>the centrality of professional evaluation, the need to continually investigate themselves in regard to own practice and to be reflexive.</p>	<p>services provision/social work.</p> <p>Autonomy highly dependent on supervisor - cases reported of necessity to "fight" with managers to grant benefit in given amount.</p> <p>Autonomy of managers social workers' units: managers have say about practices</p>	<p>the lack of support challenges of the working process.</p> <p>"Everybody does everything" formula, hence unclear supervision discussed.</p> <p>The importance of teamwork and networks within the civil society institutions highlighted.</p>
<p><b>The main types of (dis)trust under-standing</b></p>	<p>Trust understood in terms of the possibility to reveal and open up, support and help giving.</p> <p>Common factors affecting distrust are dishonesty and unreliability within the cooperation.</p> <p>Honesty and transparency in relationships are perceived as crucial</p>	<p>Trust as a mutual relation, - trust as trustworthiness which means that social workers don't have a hidden agenda, being open, honest, frank.</p> <p>A trust dilemma (avoidance): information revealed by trusting clients could be used against them.</p>	<p>Trust as a mutual relation that slowly evolves over time and is dependent on the behaviour of both parties involved.</p> <p>Trust is associated with feelings of warmth and security, - reliability and truthfulness, - mutual respect and appreciation.</p>	<p>Trust as a mutual relationship, possibility to reveal and open up.</p> <p>Workers say they are rather trusting at the beginning but distrust towards migrants revealed.</p> <p>A tendency to differentiate between clients more and less trust deserving, distrust resulting</p>	<p>Trust as the founding value of the helping relationship between the social assistance frontline workers and the citizen discussed.</p> <p>Trust as a closeness, support, transparency, reliability, reciprocity and loyalty.</p> <p>The importance of emotions and non-</p>	<p>Trust as revealing secrets, opening up and a confidential sphere.</p> <p>The assumption that counterpart of the relation (or more generally: client or other people) has good intentions.</p> <p>Trust when clients are trustworthy what needs to be checked.</p>	<p>Trust as support and help giving to a person in need, mutual respect of opinions and points of view and understanding that there is awareness that they (experts and users) are "together" in a given situation.</p> <p>Trust is rarely singled out as a value or relation in itself; its meaning</p>

	trust-building factors.	Some parents found untrustworthy which is explained by their experiences.	A figure of “professionally trusting by default” discussed.	from racism/xenophobia (migrants perceived as prone to welfare fraud) visible.	verbal signs of trust highlighted.  Distrust as a default option whenever information about citizens is verified (child protection, mental health, addictions and problems with justice).		overlaps with kindness, helpfulness, and professionalism.  Trust is a default setting, basic trust established at the beginning of an expert-user cooperation increases with time and not contrary.  Formal documents make context of distrust, distrust as a default option whenever information about children needs to be verified.
<b>Highlighted (dis)trust functions</b>	Trust as a factor which makes cooperation easier and faster.	Trust improves cooperation between family and social worker which is beneficial for children.	Trust as important or even necessary requirement for establishing rapport with clients and for doing good work.  Trust contributes to clients’ motivation to change.  The more information caseworkers get,	Thanks to trust decisions are easier to be made.  Trust reduces feelings of social assistance system’s complexity.  Thanks to trust burdens of bureaucracy are easier to overcome and decisions easier	Trust helps to build relationship with the client.  Trust towards the client is a crucial for the effectiveness of even small tasks (“confidence in the person”).	Trust helps in obtaining information in an efficient manner.  Trust can work as a “replacement” for some documents and is a means to avoid conflicts.	Because of high level of informality and nepotism in the system if distrust is a default setting, then it is better to have the “trusted” person in the system.

			from trusting clients, the more efficient they can be in casework.	accepted by clients.			
<b>(Other) important issues related to (dis)trust building</b>	The (perceived) unfairness of the system plays a role in distrust towards the system.	<p>A digital tool is used after each meeting for all parties engaged in social work to evaluate child's wellbeing and parties' performance.</p> <p>Many examples of (communication) solutions to improve trust between clients and social workers.</p> <p>The specific feature of the system: the most of clients are not voluntarily in the system - social workers are aware of fragile relationships with these clients.</p>	Due to a high fragmentation specific aspect of policy logic in the field is the assessment to which institution the client "belongs" to and which benefit is the core of offered help.	<p>Ad hoc changes to social welfare system (new random tasks for local institutions) emphasised as a problem.</p> <p>Ethnic divisions/ethnic prejudices are present in social welfare system.</p>	<p>The importance of time in trust building and reinforcing the relation with the client emphasised.</p> <p>Citizens dissatisfied with the social welfare system find themselves having to insist on help and in some cases give up because of perceived frustration.</p>	<p>Very strong focus on means-testing/ eligibility verification: highlighted necessity to frequently ask clients the same questions, numerous documents need to be delivered by clients, system constructed as "suspicious" and highly controlling.</p> <p>Reported workers' different approach to "obedient" and "not obedient" clients.</p>	<p>Formal documents create a context of distrust as well as the complexity and duration of procedures.</p> <p>High rate of corruption in the system emphasised.</p>

**INTERVIEWS WITH SOCIAL ASSISTANCE USERS**

	<b>Czech Republic</b>	<b>Denmark</b>	<b>Germany</b>	<b>Greece</b>	<b>Italy</b>	<b>Poland</b>	<b>Serbia</b>
<b>Citizens' interest in politics, political attitudes, trust in politics</b>	<p>The lack of interest and distrust in politics often expressed with regard to elections.</p> <p>Majority of the interviewees do not have trust in politics.</p> <p>Some interviewees mention unfulfilled promises of politicians, frustration and feelings of helplessness, distrust in fair elections, inequality between politicians and citizens (issues of salary and work conditions), manipulation with people, increasing power and wealth of the current prime minister, etc.</p> <p>A few interviewees express hate towards politics.</p>	<p>Little or no interest in politics reported, but some interest in specific policies, i.a. immigration policy and more interest before election.</p> <p>Interviewees find left-wing parties most trustworthy.</p> <p>Politicians found as not having capacity to help citizens in a more effective way because of legal and political constraints.</p> <p>Focus on individual politicians; their assessment can be a basis for some trust in politics.</p> <p>The support for staying in the EU with some arguments about UK doing well after Brexit.</p>	<p>No or very little interest in politics, preoccupation with own problems reported.</p> <p>Focus on individual politicians and their assessment as a basis for some trust building in politics.</p> <p>Left-wing political leaning of most interviewees.</p> <p>Diverse opinions on staying in the EU: pro-stay arguments: peace, solidarity, comfort, pro-leave arguments: too far away from people's lives, serves interests of big companies.</p>	<p>Little or no interest in politics, reluctant to identify with a political party, expressed distrust in politics and politicians, arguments of corruption among political elites.</p> <p>Some trust expressed towards certain politicians.</p> <p>Divided attitudes towards the EU: pro-stay arguments: protection against international conflicts, pro-leave: Euro contributing to high prices, limits of independence.</p>	<p>No interest in politics, most have not voted in recent elections, instead preoccupied with everyday life.</p> <p>Politicians perceived as no having interest in "ordinary people" those that vote mostly support right-wing politicians.</p> <p>Citizens divided on the value of EU membership.</p>	<p>No interest or even hate of politics, often non-voting.</p> <p>Strong division in political sympathies (all parties named as supported ones), distrust to political parties: expressed political elites' detachment from reality.</p> <p>Poland in the UE: pro-stay arguments: investments in infrastructure, educational activities subsidised, rule of law supported; pro-leave arguments: Poland as inferior member, euro will lead to high prices.</p>	<p>Citizens not interested in politics, that they mostly think about their own survival, and that they very rarely discuss politics with friends or family.</p> <p>Majority of interviewees state they do not support any political party, including the one led by the current president Vučić.</p> <p>Opinions about the EU are generally positive.</p>

<p><b>Experiences with applying for benefits</b></p>	<p>Need to have a permanent residence to apply for benefits.</p> <p>Most benefits paid timely on a monthly basis.</p> <p>System perceived as complicated – need to provide many documents, procedures differ for each benefit.</p> <p>Many citizens do not understand procedures, find it difficult to fill the forms correctly, don't understand decisions about benefits.</p> <p>Home visits perceived by some interviewees as unpleasant and sassy.</p> <p>In some units of labour office long waiting queues, often reported waiting in vain.</p> <p>Benefits often</p>	<p>In regard to “Borgerservice” (social services, benefits, such as housing benefit, “lost income” replacement benefit):</p> <p>Some citizens report difficulties in navigating the website (all applications and appointments online only) scarce information, experiences of “getting lost”.</p> <p>Other reported experiences: unpleasant atmosphere during meetings, sense of powerlessness, uncertainty, rigidity, humiliation.</p> <p>The use of expression “municipality stress” but also: gratitude, finding support helpful.</p> <p>The experiences with</p>	<p>In case of some benefits (e.g. in Jobcentre) applying procedure perceived as very time-consuming and exhausting, extensive number of documents needed.</p> <p>In case of some institutions (youth office) application procedures found easy.</p> <p>Mixed messages from institutions as perceived by citizens: detailed knowledge of citizens but need to repeatedly submit (the same) documents, annoying necessity to constantly repeat providing the same information reported.</p> <p>Frontline workers’ case overload and lack of personnel perceived as obstacle to apply for benefits.</p>	<p>Citizens’ different opinions on the procedures.</p> <p>Negative opinions focused on applying for benefits perceived as time-consuming and stressful, bureaucracy (need to visit the offices too often), constant legal changes and discontinuities.</p> <p>Positive opinions focused on good organisation, help of social workers, covid-19 pandemic as a trigger of electronic modernisation and changes towards more flexibility.</p> <p>Strong sentiments expressed that the system is unfair, as it favours immigrants or inactive persons.</p>	<p>Most citizens have regular meetings with the social workers.</p> <p>During the meeting either a plan is agreed or the citizens are checked whether they fulfilled the plan already in place.</p> <p>The most appreciated benefit is of economic nature, psychological support of secondary importance.</p> <p>Regional disparities in citizens’ satisfaction with the offices unveiled (in this case: satisfaction is bigger in central/southern Tuscany, and smaller in coastal part).</p> <p>In big cities citizens perceive the offices as overcrowded and procedures are taking too much time and are too complex.</p>	<p>The need to prove that relatives can't help beneficiaries as a prerequisite to obtain help perceived as highly unfair solution.</p> <p>The need to visit social assistance centre in person and the then need to be visited by a social worker in own home emphasised.</p> <p>Plenitude of documents needed for applying for benefits: registration in labour office, alimonies, income statements, often: bills to report expenditures; information often double-checked with neighbours and third parties.</p> <p>Procedures found time-consuming both for clients and social workers.</p> <p>In some cases: sympathy for</p>	<p>Interviewees mostly apply for welfare in Centres for Social Welfare.</p> <p>Citizens’ need to provide documents about their income, confirmation that they do not own any property, or pension or any other type of external financial support, the need to provide confirmation about children’s school attendance.</p> <p>The majority of interviewees claim that the initial procedure was not too demanding (in terms of paperwork).</p> <p>Assistance procedures described as usually very swift.</p> <p>Most interviewees very rarely visited at home, despite the promises. The exception is with foster care/adoptive families.</p>
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	<p>delayed, some benefits withheld if person's income increases due to block payment of other delayed benefits.</p>	<p>Family Department (obligatory contacts for social services and counselling): being treated as "non-humans", humiliation, the lack of transparency, oppression but also gratitude, finding support helpful.</p>	<p>The problem of no information given in advance about which benefits/services citizens could apply for (feelings that "secret knowledge" is needed).</p> <p>Mixed/various experiences: lack of transparency, having to fight for benefits, oppression but also gratitude, finding support helpful.</p>		<p>The system perceived as wrongly targeted - those who need it most, don't receive it, according to the citizens.</p>	<p>caseworkers expressed for their need to follow absurd rules.</p> <p>The necessity to repeatedly answer the same questions, provide the same information emphasised.</p> <p>Social workers coming to beneficiaries' homes for the sake of control (fridge opening, etc) perceived as intrusive.</p> <p>Perceptions of the system wrongly targeted (too much money for those who work on a black market and for alcohol addicted people).</p>	<p>Interviewees' impression that it is discretionary power of social workers and not procedures that shape the outcome of the decision and that face-to-face meetings have a decisive role.</p>
<p><b>Relations with frontline workers</b></p>	<p>A high level of formalization and paperwork make citizens feel treated in a depersonalized way. The role of many frontline</p>	<p>Diverse frequency of contacts with caseworkers reported: from every two weeks to twice a year.</p>	<p>Diverse frequency of contacts reported: from once a month to twice a year.</p> <p>Relations strongly dependant on</p>	<p>Different types of relations with frontline workers reported: majority described as personal, close and warm relations,</p>	<p>The level of discretion is perceived positively, although if third parties and other institutions are involved there is</p>	<p>In most cases meeting once a month reported, due to monthly benefits' payments.</p> <p>Diverse experiences</p>	<p>The lack of frequent face to face contact and lack of direct communication found frustrating.</p> <p>Citizens often have</p>

	<p>workers perceived as verifying eligibility and means-testing.</p> <p>Difference between the labour office and the municipality office: Labour Office's frontline workers perceived as unpleasant, unhelpful, unfair, having double standards, and caring only about the forms, not the clients.</p> <p>Interviewees have different opinions on whether frontline workers have power in the system and whether they can affect important decisions concerning benefits, but the importance of having the "right case worker" who has power is emphasised.</p>	<p>The problem of constant changes of an assigned caseworker ("giving them numbers") highlighted.</p> <p>Opinions on workers depending on the fact if a citizen knows them personally: mixed and diverse opinions and experiences with different frontline workers by the same person.</p> <p>Assumption that "having a good carer" is essential and is a matter of luck.</p> <p>Different types of relations reported: from pragmatic and distant to close and warm.</p> <p>Following features of workers found important: being open, helpful, providing explanations, empathetic, not patronising, experienced ("not too young").</p>	<p>whether the contacts with institutions are mandatory (e.g. family/pedagogical counselling).</p> <p>Voluntary relations differ in case of contacts with reception desk officers and assigned case workers.</p> <p>Caseworkers assigned to families at the basis of technical issues (name, street, etc) but possibility of changing the carer upon request.</p> <p>Mixed and diverse opinions and experiences with frontline workers: relations friendly, pragmatic but also formal and distant.</p> <p>Following features of workers found important: experience ("not too young"), knowledge, commitment, good communication</p>	<p>where a caseworker is friendly but also reported feelings of being disregarded or deprived of access to benefits due to caseworkers being reluctant and not engaged or showing power asymmetry.</p>	<p>some level of fear.</p> <p>Most citizens report warm and close relationship with their social workers.</p> <p>Sometimes social workers are treated as guides and the relationship is very open.</p> <p>There is a positive opinion on the social workers' experience and knowledge.</p> <p>The most widespread and appreciated feeling concerns the availability, transparency, honesty, clarity of social assistance frontline workers.</p>	<p>with frontline workers depending on i.e. perception of their autonomy.</p> <p>Having a "good caseworker" perceived as crucial in social assistance system; examples of resigning from applying for help due to bad experiences with frontline workers.</p> <p>The figure of a bad frontline worker who is either cold, not engaged or intrusive and nosy contrasted to a good caseworker who is empathetic, friendly, giving advice presented.</p> <p>The level of autonomy of caseworkers perceived as low ("they have to act according to these rules").</p>	<p>an impression that they have not been given enough time and dedication to tell their life stories.</p> <p>The importance of personal, often informal contacts emphasised.</p> <p>Quality of service and caseworker trustworthiness' judgements depend on relationship with concrete social worker.</p> <p>According to interviewees warmth, cordiality, professionalism and efficacy depend on concrete persons, hence the importance of having "the right social worker", but also "knowing the right person" and "receiving the right information" (usually through third parties) is what is perceived to secure the good outcome</p>
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			skills, and acting in a transparent way.				when applying for welfare.
<b>Trust understandings and functions</b>	<p>Some interviewees define trust as help giving, others as truthfulness.</p> <p>Speaking of distrust, a few of the interviewees associate it with carefulness.</p> <p>A few interviewees talk about distrust towards the system in relation to the unfairness of the system.</p> <p>Interviewees are usually disappointed and distrustful of frontline workers or did not keep their promise and turned out to be unreliable.</p> <p>Honesty and transparency in relationships as crucial factors affecting trust.</p>	<p>Trust understood as: trustworthiness, reciprocal obligation, confidential sphere.</p> <p>Trust needed to disclose personal information.</p> <p>Citizens tend not to trust the system and its workers in general while simultaneously having a trusting relation with a mentor/caseworker.</p> <p>Trust beneficial: time, long term relation with a caseworker, individual approach to a client.</p> <p>Trust detrimental: fear of children's out of home placement, experiences the system does not trust citizens, is suspicious, financial benefit limits/thresholds.</p>	<p>Trust understood as a confidential sphere and a bond, closeness based on counterparts.</p> <p>Features which contribute to trust: sympathy, reliability (keeping promises), truthfulness, loyalty.</p> <p>Most salient attitude reported both by citizens and perceived by in frontline workers' attitudes towards citizens: conditional trust - trusting mostly dependant on perception of the counterpart.</p> <p>Reported trust beneficial factors: being granted help, transparency of the process, responsiveness, keeping promises, face to face contacts, positive attitudes of frontline workers,</p>	<p>Trust understood as truthfulness, reliability and help giving - e.g. a frontline worker can be trusted if s/he wants to help and does her best to help, links to respect.</p> <p>Trusting those frontline workers who show clients respect.</p> <p>The emphasis on trust within family on the contrary to public sphere.</p> <p>The emphasis on distrust towards politics/politicians on the contrary to face-to-face relations with frontline workers.</p>	<p>Trust understood as support, help, giving, loyalty, but also it is a mutual relationship, reciprocity.</p> <p>Trust is also bond, closeness, empathy and it involves feelings.</p> <p>Citizens rather trusting caseworkers by default.</p> <p>When there is an issue with trust in the relations with the social worker, citizens consider the system unable to respond to their express needs.</p> <p>The role of time in trust building is crucial for citizens to develop the relation of trust.</p> <p>Some citizens are afraid of the fact that social assistance</p>	<p>Trust as a possibility to open up, a sphere of confidentiality.</p> <p>Those frontline workers can be trusted who do more than the minimum, who are engaged.</p> <p>Perceptions of default settings: caseworkers don't trust clients and clients report they don't trust/mistrust social welfare institutions and frontline workers in general.</p> <p>Receiving a benefit perceived as trust-beneficial.</p> <p>Being treated in individual way, open and straightforward communication perceived as trust-beneficial by citizens.</p> <p>Not believing client, disregarding client's</p>	<p>Trust most commonly understood as truthfulness, openness, mutuality and cooperation.</p> <p>Trust is developed when citizens have an open and transparent conversation with their social workers and when they feel that the promises have been delivered, when there is the equality of positions and cooperation as a mode of functioning.</p> <p>Citizens feel that distrust is a default option on the side of social workers.</p> <p>Time is assessed as very important in mutual trust building.</p> <p>Other factors include face-to-face interaction,</p>

			<p>sufficient time for interaction.</p> <p>Distrust functions: found as “cementing” the relation between frontline worker and a citizen, irrelevant if workers’ autonomy perceived as very low.</p>		<p>could take children away; they have difficulty accepting this intrusion into their family life and this limits trust construction.</p>	<p>opinions and frontline workers’ being suspicious perceived as highly trust-detrimental.</p> <p>Trust to caseworkers perceived as resulting in better access to benefits.</p>	<p>trusting/being suspicious about clients, (not) treating clients with respect and dignity.</p>
<p><b>Other general issues</b></p>	<p>The role of trust as a factor which makes cooperation easier and faster.</p> <p>System perceived as overcomplicated, bureaucratic and too complex.</p>	<p>Trusting relation and confidential sphere with a caseworker is perceived as a means to balance or counteract the hostile system of social security.</p> <p>The system highly fragmented and bureaucratic; hurdles to entry function as obstacles to build trust in institutions.</p>	<p>Significant convergence of case workers and citizens’ points of view in regard to trust understanding and meaning and the shared values (respect, telling truth, keeping promises ), however often citizens’ feelings that caseworkers violate these standards.</p>	<p>Blame attribution of the political system and assumptions that politics failed to structure or manage social protection.</p> <p>Reciprocal perception of distrust imposed by the system: citizens do not trust social services’ employees because they represent the unfair public policy mechanism and front-line workers do not trust citizens because of a rooted belief that they want to take advantage of the system.</p>	<p>Interviewees from both groups converge on the social and socio-health problems presented to the social assistance services and on the types of services and benefits provided.</p> <p>Disparity concerned the understanding of each other’s roles: the social assistance frontline workers emphasise that the user must be self-determined and active while citizens are less engaged with the evaluation system</p>	<p>A highly bifurcated system of social assistance: very formal procedures of applying for benefits, means testing, high control together with close relations with social workers, individual casework.</p> <p>According to interviewees, very low benefits together with strict means-testing make it rational “to cheat”..</p>	<p>Distrust is a default setting in the system; users of social assistance services by default do not trust system which, in their experience, does not trust them.</p> <p>Citizens often express that their dignity and agency are not recognized, supported or valued enough.</p> <p>Trust is rarely singled out as a value or relation in itself; its meaning overlaps with kindness, helpfulness, and</p>

				<p>Profound anti-immigrant attitudes are prevailing in both groups.</p>	<p>and rely more on the action on the side of social workers.</p> <p>The system of social assistance services is heterogeneous: the entities differ in organisational methods, territorial competences and target recipients.</p>		<p>professionalism.</p>
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