34th International Labour Process Conference (ILPC)
Radical practice as democratic professionalism - learning from the past

Abstract

Issue being investigated
For professionals working within Welfare States as ‘social services professionals’, changes in the forms of service delivery have called for new models of professionalism (Noordegraaf 2007). The concept of ‘democratic professionalism’ has been identified as a way in which professions such as teachers, nurses and social workers can redefine their own professionalism, during a period when conventional roles are under attack (Whitty 2000, Sachs 2001, Groundwater-Smith & Sachs 2005). Yet, there is a long tradition of ‘social services professionals’ questioning ways of working within the state and developing radical practices to improve the practice and delivery of public services (Weekend Return Group, 1980). In order to further develop strategies of democratic professionalism, the learning from these earlier radical practices needs to be better understood and compared to the theories of democratic professionalism developed more recently.

Contribution to knowledge in field
This research contributes to a) a growing focus on the role of professionals within organisations and corporations and b) places democratic professionalism within a tradition of radical/democratic practice.

How it is being investigated?
The research draws on a range of sources: project evaluations, mapping of projects, surveys and accounts of innovative and radical practice as seen through biography and other historical sources. This will complement more formal academic research into radical practice.

Findings
The research found that there were four main types of radical/democratic practice in education, health care and social services as seen during the period 1960-2000. They were:
1. Person/client centred;
2. Progressive forms of management;
3. Community-based;
4. Improvements in access to services.
Some approaches were specific to settings, e.g. community projects, or used new techniques to improve service access. They were not necessarily mutually exclusive and often overlapped. A comparison of types of radical practice with the four main components of democratic professionalism (competence, integrity, respect and responsibility) shows that there are shared elements that can form a useful framework to inform the development of future democratic professionalism.

References
Radical practice as democratic professionalism – learning from the past

For professionals working within Welfare States as ‘social services professionals’, changes in the forms of service delivery have called for new models of professionalism (Noordegraaf 2007). The concept of ‘democratic professionalism’ has been identified as a way in which professions such as teachers, nurses and social workers, ‘social services professionals’, can redefine their own professionalism, during a period when conventional roles are under attack (Whitty 2000, Sachs 2001, Groundwater-Smith & Sachs 2005). In the last decade, professionals from other European countries and the United States have started to explore ways in which the professional-client relationship can be made more democratic, even though they operate in different welfare systems. This paper starts with a review of current literature before exploring how radical practice in the past can inform contemporary democratic professionalism.

Dzur (2004, 2008) examined democratic professionalism in terms of how specialist knowledge can be used in a deliberative way to solve social problems, avoiding the often technical and bureaucratic decision-making that mainly excludes citizens. He proposed ‘democratic professionalism’ as a way of building bridges between specialists, for example in medicine or law. Professionals may only operate a form of technocratic professionalism, which is concerned with the continued maintenance of professional power, or they may play a role in civic professionalism, analysing the “problems of democratic engagement, authenticity and integrity” (Maharg, 2009:1), which is seen as a form of democratic professionalism.

Dzur (2004) argued that professionals have democratic responsibilities to facilitate the participation of citizens in a particular sphere which are the result of particular professional practices. This related to “commercial- or technocratic-minded professionals...vulnerable to problems of legitimacy stemming from its remoteness from the publics served” (Dzur, 2004:3). Rather than operating as part of commercial and technocratic systems, professionals should start to work in a more collaborative and cooperative way with their clients.

The way in which professionals should start to take on this new role was outlined by Maharg (2009). Writing as a member of the legal profession, Maharg (2009) defined democratic professionalism as “a form of re-professionalization built around models of active and collaborative democratic change.” For lawyers, the problems of democratic professionalism highlighted the dual role that legal professionals play because they are involved in “both the creation and maintenance of rights, and in the dialogue concerning the nature of freedom in a democracy”. Maharg suggested that concepts such as Dewey’s education praxis and “associate life” were important in helping professionals to work in a different, more facilitating way with citizens. Dewey saw learning as experience and explored how learning, experience, participation and communication interacted. He wrote that “all those who are affected by social institutions must have a share in producing and managing them” (Dewey, 1987: 218). This is an important concept to inform the development of democratic professionalism.

Sullivan (2004) presented an alternative to the “market model of work and social organisation” which was a form of “social partnerships between the public and functional groups which organize to advance social values in the interest of those they serve” (Sullivan 2004:15-20). This is particularly relevant for professionals operating with the Welfare State, who are responsible for the creation and maintenance of public goods rather than their own profits. These professionals need to be accountable and able to participate in civic life, making their professionalism a form of civic professionalism (Sullivan, 2004).

Whitty (2000) presented democratic professionalism as a third model of accountability for teachers, separate and different from state control and self-regulation. A form of ‘democratic’
professionalism would aim to demystify the nature of professional work by building alliances with students, parents and other stakeholders. This would enable the values of idealism and trust to be redefined. 'Democratic professionalism' could challenge managerialism and would be based on collaboration between teachers, parents, students and other educational stakeholders. It would lead to new work practices and more flexible ways of thinking about practice (Sachs, 2001: 159). This was a more specific reaction to the impact of managerialism on teachers and the education sector.

This was taken further, in relation to the teaching profession, by Whitty and Wisby (2006) who argued that democratic professionalism would require teachers to take responsibility for more than just their actions in the classroom. Teachers would have to be involved in the running of the school, play a role in the wider educational system, support and show solidarity with other teachers. However, teachers would also have to recognise that the solution to social problems and wider social agendas may have to involve the subordination of professional interests, perhaps one of the most important elements of democratic professionalism.

A relatively new profession, Early Years practitioners, has used the concept of democratic professionalism to develop a model of professionalism appropriate for working with young children. This is a different approach from that taken by teachers, nurses and social workers who are exploring democratic professionalism in the context of attacks from government on their profession as well as reforms to welfare state institutions. A new profession using democratic professionalism as a way of developing a profession allows for a more holistic view to be established from the beginning. Oberhuemer (2005) defined democratic professionalism as a concept based on participatory relationships and alliances. It emphasises collaborative and co-operative action between colleagues and other stakeholders as well as engaging and networking in the local community. Oberhuemer (2005) identified four levels of activity related to the practice of ‘democratic professionalism’ for early years’ practitioners:

• Interacting with children;
• The professional knowledge base;
• Partnership with parents and;
• Centre management and leadership.

These reflect some of the elements that have been identified in other professional settings.

Hugman (2012), writing about social work, highlighted the re-building of the service ethic, with a focus on the lives of service users rather than the skills and knowledge of professionals. He recommended that, just as service users can be more effective is working collectively, so professionals will have to work in partnership with services users and develop alliances with other professionals. Democratic professionalism will require new policy making structures at local level to involve service users.

Groundwater-Smith and Sachs (2002) and Sachs (2003) developed the concept of an “activist identity” for teachers, which can support them in the development of democratic professionalism. Activist identify is based on trust, generative politics and the politics of transformation (Sachs, 2003). Communities of practice play an important role in the development of activists by establishing trust between professionals and establishing a new professional identity. However communities of practice are only one dimension of democratic professionalism (Lave & Wenger, 1991).

Taubman (2013) further developed the “activist identity”, building on some of the principles identified by Sachs (2003). He defined the core of democratic professionalism as an emphasis on collaborative, cooperative action between teachers and other educational stakeholders, which facilitates decision making between teachers and others involved in education. In order to create an “activist identity”, which could engage with stakeholders, professionals need to:
• Facilitate access to ideas and information and critical reflection and evaluation;
• Believe in the capacity of people (individual and collective);
• Have a concern for others, "the common good", for their dignity and rights (Taubman, 2011:3).

Taubman (2013) stressed the importance of promoting democratic processes, including within institutions, although he acknowledged that this would involve an extensive process of transformation. This reflects Dewey’s view of the importance of co-production and co-management of institutions (Dewey, 1987). Four elements recur in the different accounts of democratic professionalism (Oberheumer, 2005; Spours, 2013; Stevenson and Gilliland, 2015). They are outlined by Taubman (2013) as:

1. Competence;
2. Respect;
3. Integrity;

They also reflect the key components for building trust, which include ability, benevolence and integrity (Mayer et al, 1995).

**Democratic professionalism in the past**

There is a long tradition of challenging professional power. Contemporary debates about democratic professionalism have been influenced by writers earlier in the twentieth century. The concept of civic professionalism provided a way of linking 'social services professionals' to social rights of citizenship, which were central to the establishment of new systems of social welfare after the Second World War. Marshall (1950) emphasised altruism or the 'service' orientation of professionalism. He identified civil, political and social rights as three components of citizenship. Social rights covered access to health, education and welfare and complemented civil and political rights. ‘Social services professionals’ played an integral role in ensuring that these rights were recognised. There has been some questioning of Marshall’s concept of citizenship rights, because the state may work in the interest of more than one group but to the exclusion of others. This is particularly relevant to the development of the Welfare State where the goal of universality may lead to a denial of difference and diversity (Lawy and Biesta, 2006). It has implications for the roles that ‘social services professionals’ play in public service delivery and the extent to which they challenged discrimination and oppression.

Forty years ago, a critique of how professionals use their training and knowledge in maintaining their own power concluded that professionals operated as agents of social control (Illich, 1975; Navarro, 1976). The development of democratic professionalism can be seen as part of a process of challenging the traditional notion of a professional and the exercise of professional power, which was often undertaken by the professionals themselves. In England, there is a long tradition of ‘social services professionals’ questioning ways of working within the state and developing radical practices to improve the practice and delivery of public services (Weekend Return Group, 1980). In order to further develop strategies of democratic professionalism, the learning from these earlier radical practices needs to be better understood and compared to the theories of democratic professionalism developed more recently.

The publication of ‘In and Against the State’ (1979) was one of the most important contributions to the process of professionals questioning the ways of working within the state and how they could change and improve the way in which public services were delivered. It articulated some of the contradictions in working for the state.

“As workers in those occupations that are termed ‘professional’, such as social work, or teaching, we are often given impossible problems to solve arising from poverty or from the
powerlessness of our 'clients'." (London Edinburgh Weekend Return Group, 1980: Chapter 1)

Its first publication in 1979 was an indication of how the 1970s had generated a growing interest in developing ways of improving the practice and delivery of public services, particularly in relation to more democratic relations with service users. Another perspective, which the book provided, can be related to compromises involved in working within a bureaucracy which made professionals want to improve their practice whilst trying to address some of the structural issues facing their clients. The publication of 'In and Against the State' was an attempt to make some recommendations about how to act within such a conflicting environment.

This paper will now analyse different forms of radical practice in teaching, nursing and social work in England since the 1960s using the four elements of democratic professionalism as an analytical framework: competence; respect; integrity and; responsibility (Taubman, 2013).

**Competence/ knowledge**

Competence in the context of ‘democratic professionalism’ accepts the provisional and contested nature of competence. Stevenson & Gilliland (2015) argued that teaching is a technically complex process and teachers have to draw on professional knowledge, pedagogic theory and personal experience in order to exercise professional judgement, which depends on “agency which teachers are able to make, based on assessments of context” (Stevenson & Gilliland, 2015: 6). Mayer et al (1995) argue that “ability is that group of skills, competencies, and characteristics that enable a party to have influence within some specific domain” (Mayer et al, 1995: 717). Both definitions highlight the importance of context and domain rather than a universal form of knowledge. This is approached by ‘social services professionals’ in different ways, influenced by the setting and nature of the professional relationship with services users.

In a practical sense, teachers have the responsibility to see that their knowledge, skills and expertise are up to date. This involves continuous professional learning and a constant commitment to improve (Spours, 2013). This has implications for initial teacher training and continuous professional development. In the 1970s, one way that teachers built their competence/ knowledge to inform radical practice was through publications produced by teachers. Radical approaches to teachers challenging racism were distributed through ‘Teaching London Kids’ ‘Blackbored’ and ‘The English and Media Magazine’ (Jones, 2014:118). The ‘All London Teachers Against Racism and Fascism' (ALTARF) was set up in 1978 by a group of radical teachers as a response to increased activities of the National Front in London. It published ‘Challenging Racism’ (1984) with the NUT, supported by the Commission for Racial Equality (CRE) and the Institute of Race Relations. ALTARF did not just address racism within the classroom but felt that:

"Anti-racist teaching which stops at the classroom door cannot truly be described as anti-racist. We must challenge inside and outside the schools, the racism, sexism and class structures which divide us" (ALTARF,1984:2 quoted in Troya, Williams, 2014: 67).

This was one example of an initiative which encompassed wider political issues as well as the classroom, which was characteristic of many movements of urban teachers (Jones, 2009:30).

The importance of making connections between schools and communities was recognised in more specific community education projects. The Cockpit Arts Centre in London, between 1979 and 1985, provided an example of a community based arts project which ran a mix of out-of-school, after-school and holiday projects for young people and used photography as a form of
creative expression. The approach taken by the project was informed by youth and community arts projects where arts workers had developed open and informal ways of working, with bases in working class communities (Dewdney and Lister, 1988:4). Dewdney and Lister argued that in arts education:

“If you really want to engage young people in critical work, you have to do this through the currencies and concerns of their own worlds.... And you have to be in a position to offer them acceptable and powerful forms in which to do this” (Dewdney and Lister, 1988:7)

This was in contrast to art teaching in schools at that time which failed to do this. They argued that the “recognition of the cultural productivity of young people should be central” (Dewdney and Lister, 1988: 5).

Unlike teachers who operated within schools with other members of their own profession, nurses worked in the NHS with doctors and a range of other health professionals. In the 1970s, nurses, through the Radical Nurses Group (RNG), campaigned for “a distinctive ‘nursing’ voice”. This was to be achieved in part through the “evolution of an overtly ‘feminine’ discourse of care, centred on compassion” (Grumbling Appendix, 2013). RNG used a feminist analysis to examine the role of nurses and their relationships with the medical profession. At the time, nurses often argued against taking on tasks done by doctors, not wanting to dilute their caring role. The RNG was an attempt to provide support for nurses who felt that questioning the power of the medical model was necessary to improve the quality of patient care. They were also questioning the nature of their own professional knowledge and power. A contributor to the RNG Newsletter in 1988 wrote:

“I think we must look closely at some of the foregone conclusions we assume as ‘those with knowledge’ who ‘know best’. I remember asking a patient whether they would like to change their position in bed and being quite aghast at their response: ‘you know best, nurse. What do you think?’ I explained the nature and necessity of pressure area care but asserted that it is the patient who knows most about their degree of discomfort and can best advise the caring staff on such a personal matter. This small incident made me realise what power I held and not surprisingly, made me feel quite inadequate to take on such responsibility as a student on my second ward. I wonder how much power we consider the patient has in relation to their nursing care.” (DB in RNG Autumn 1988)

Social workers were strongly influenced by several factors in the late 1960s and early 1970s which led them to question their knowledge base and practice. The introduction of integrated social services departments which created large teams of social workers, a stronger sense of professional identity and trade union organisation and the growth of user movements all contributed to the development of radical social work (Ferguson, 2009: 86). A wider recognition that the client’s problems were caused by their material circumstances rather than individual problems and failures led to different approaches to social work. Academic, sociological research, which looked at the family, mental illness and structural factors and individual behaviour also influenced radical social work practice. The 1970s have been described as a “very optimistic time for social work” (BASW respondent, 2014). There was a greater focus on group and community based approaches as well as stronger trade union organisation. Social work training started to include welfare rights and community work teaching, introducing new forms of social work practice. There was a wider questioning of the nature of social work and what social workers needed to operate within the Welfare State.
Social workers created a new publication, called 'Case Con', which brought together theory and activism. It covered topics such as a rank and file trade unionist conference, a claimants union, an occupation by tenants and wider housing issues. Later issues covered women’s issues, children, training, community and residential work. 'Case Con' had an influence on the development of term 'radical social work' which was articulated by Bailey and Brake (1975/1980) in 'Radical Social Work' as collective action, challenging individualism, working with communities/community politics, democratising and decentralising social work team work (Bailey and Brake, 1980). Although there were links between 'Case Con' and 'Radical Social Work', 'Case Con' was primarily activist focused, whereas 'Radical Social Work' contained more social work academics.

'Social services professionals' approached the development of their own competence/knowledge in several ways. Professionals who operated with members of their own profession, often developed their own publications which allowed them to develop new forms of professional, radical practice. Nurses also used newsletters as a way of sharing ideas and radical approaches to practice but it was their concern with their separation from the medical profession which was the trigger for re-thinking their professional roles and the knowledge required to do this.

The location of professionals had an influence on the type of activities. Social workers started to function in new social services departments after 1971 which brought together social workers who worked with different client groups for the first time and this integration made them realise that the way in which they worked with their clients would have to change. Teachers who worked in community settings, e.g. youth clubs, found that they had to prepare themselves by establishing bases within working class communities, which allowed them to develop new ways of supporting the students. This was only the beginning of a more complex process which often drew teachers into alliances and partnerships with organisations outside the school to campaign about wider issues affecting communities.

**Integrity**

A democratic professional will require a self-awareness and a realisation of their own values, prejudices, beliefs, limitations and fallibility (Taubman, 2013). This involves extensive reflection on professional practice and honesty about professional limitations, which are not easy processes. Teachers will have to exercise professional agency in both an individual way as well as taking collective action (Stevenson & Gilliland, 2015:6).

Although by the 1970s, cuts in education budgets and attempts to restrict comprehensive education were accompanied by a wider public criticism of teachers, radical teachers were still able to find opportunities for innovation and radical practice. CCCS (1981) argued that the main lessons learnt from the 1970s, and previous decades, were the limitations of achieving equality through education reform in a society still unequal in terms of race, gender and class (CCCS, 1981: 247). This informed a more radical practice in relation to different forms of oppression and emerging social movements. Some local education authorities provided support through teachers’ centres, training and resource development. This built up a sense of collectivism for radical teachers in the period before 1988 (Jones, 2014).

The ways in which radical education practice attempted to address anti-racist and anti-sexist issues and wider issues of access to education varied. Joyce (1987) explored what being a feminist teacher was like in the 1980s through a series of interviews with women teachers in schools in Inner London. After interviewing women teachers at many different levels in schools,
she documented many examples of how feminist teachers incorporated a feminist perspective into their teaching, showing high levels of commitment and persistence. The approach was described as:

*I want to carry out what I believe in the classroom as well as outside the school. It’s really part of a whole philosophy of encouraging children to work cooperatively and to question everything intelligently*” (Infant teacher in Joyce, 1987: 69).

Interviewees commented on their relationships with other people in the school, almost all identifying problems with being taken seriously in this part of their working life. There was some support from the Inner London Education Authority (ILEA) in terms of anti-sexist policies and support groups, however all teachers reported a struggle to work on anti-sexist issues in schools and a sense of isolation (Joyce, 1987).

Nurses became involved in community health development projects as a way of improving access to services for groups whose specific needs were not well addressed by the NHS. Some of the initiatives for women’s health and Black and Minority Ethnic health led to changes in the way in which maternity services were run and the creation of well-women clinics and multi-advocacy projects. Nurses were involved in some of these initiatives. For example, Elizabeth Anionwu, a nurse at the Central Middlesex Hospital, was involved in setting up the Brent Sickle Cell and Thalassemia Centre, a service for people with sickle cell or thalassemia. Although it was part of the NHS, the centre had formed very close links with the local Black community and was sensitive to their needs. This had been achieved through networking between volunteers, patients and health professionals (Fieldgrass, 1992:83). This type of centre was replicated in many other health districts.

Ferguson argued that in the 1980s, social work moved away from a predominantly class analysis to a view of society influenced by oppression, identity and difference, which continued into the 1990s (Ferguson, 2009). One example was a group of Black social work students who identified the Eurocentric nature of existing social work training and the poor experience of Black social work students. Black children were over-represented in the care system which was run by white social workers. Similarly, Black mental health users were over-represented in mental health services. A Black Perspectives Committee was set up in 1987 and in 1989, as part of the review of the Diploma in Social Work, this committee wrote Annex 5 of Paper 30 and a CCETSW position paper on racism. Although the reaction to this report led to the disbanding of the Black Perspectives Committee, it represented an attempt to develop a more radical practice in training (Weinstein, 2014).

Some of the radical social work initiatives in the early 1970s, although they were concerned with claimants’ unions and tenants’ groups, were not necessarily focused on service users and did not develop links with the growing user movements, even though there was an increase in the activism of people with disabilities during the 1970s. ‘The Fundamental Principles of Disability’ was published in 1976 by the Union of Physically Impaired Against Segregation (UPIAS) and the Disability Alliance. However, since 2000, one of the biggest influences on new social work practice has been through user movements. The British Association of Social Workers was one of the core members of the Mental Health Alliance, a coalition campaigning to improve mental health legislation, which resulted in the 2007 Mental Health Act in England and Wales. The coalition included church organisation, user groups and professional organisations. It now works “to advocate for the fair implementation of the Mental Health Act in England and Wales” (Mental Health Alliance, 2015).

The development of radical practice that challenged racism, sexism and other forms of prejudice illustrates how democratic professionals can exercise a sense of integrity. In these examples,
the focus was on widening access to public services by questioning specific forms of oppression. Again, the form in which these actions took was influenced by the nature of the relationship with the service users. Teachers attempted to challenge racism and sexism in the classroom as well as joining in wider community-based coalitions. Nurses attempted to widen access to health services by working with Black and Minority Ethnic communities to design services that met their needs more effectively than existing health services. Social workers addressed racism through the development of more radical social work training. More recently, democratic professionals have worked directly with user movements to challenge prejudice. Although radical social work attempted to highlight the needs of clients, it was the external influence of user movements that led to changes in social work practice.

Respect

Democratic professionals need to have an ability to listen, help and empower as well as a commitment to work towards greater equality and mutual understanding. Stevenson and Gilliland (2015) defined teaching as a process of social transformation which should be underpinned by values of social justice and democracy. This will involve giving validity to pupil/student views, one of the aims of the expansive education network, which works towards establishing lifelong learning by acknowledging that education is more than just about passing exams. It recognises that learning opportunities occur outside the classroom and that individual intelligence is expandable rather than fixed. Expansive education defines teachers as learners who are looking for and researching better outcomes (Expansive Education Network, 2015).

By the 1960s, there were many examples of how teachers contributed to new ways of educating children and students, often by working in one or more schools to develop forms of child-centred education. For example, George and Judith Baines in Eynsham County Primary School who “pioneered new teaching methods in an open-plan environment in the 1960s-1980s”, including learning through project-based work and using self-directed learning (Institute of Education, 2015).

Another strand of radical education which aimed to worked towards greater equality between professionals and service users was the introduction of more child-centred ways of running schools system, which were more controversial. Influenced by the work of A.S. Neill at Summerhill School (Risinghill, 2015), Michael Duane was appointed head of Risinghill School, a new comprehensive school in Islington, which opened in 1960. The new school was formed through the merger of four local schools and Duane attempted to create a school run on child-centred principles. A school council was set up with children as a majority of members, school uniform was optional and corporate punishment was abolished (Libertarian Education, 2007). After five years, the number of students entered for O-Level exams, had risen from 18 to 80. The number of children on probation had fallen from 98 to 9 and in 1965, and for the first time, two ex-pupils went on to university (Libertarian Education, 2007). However, this radical way of running a school attracted much criticism locally and nationally and the Inner London Educational Authority (ILEA) closed the school in 1965. This illustrates some of the resistance to new systems of organisation where children were given more influence and status.

An example of a new form of school organisation which was longer-lived than Risinghill School was Countesthorpe College, a new purpose-built upper school in Leicestershire, which introduced a more collective form of decision making. Decisions on school policy were made by all the staff and students were given more autonomy. A new curriculum was created which was common to all but flexible enough to accommodate individual interest and motivation. Course work replaced examinations as the main form of assessment. Although the head teacher, Tim
McMullen, had to resign after two years due to ill-health, by the late 1970s, the school curriculum was valued by students, parents, teachers and visitors (Armstrong, 2008).

Another form of progressive education in the 1970s included experimental ‘free’ schools, set up as alternatives to formal schools. Some of the main ‘free’ schools were White Lion Free School, London, Scotland Road Free School, Liverpool (1970), Bermondsey Lamp Post (1973). The White Lion Free School, set up by Pete Newell and Alison Truefitt, opened in 1972 and closed in 1990 (de Castella, 2014). It was funded by the Inner London Education Authority (ILEA) and was the only state-funded free school. There was no timetable, no compulsory lessons, no uniform and no hierarchy, with a collective approach to decision making (Libertarian Education, 2008).

The way in which nurses introduced greater respect to service users/patients was through the development of more user-focused services. One of the best examples was the establishment of well-women clinics which used a holistic approach to health resulting in a service which addressed the overall health needs of women rather than a series of specific conditions. Islington Trades Council, the National Abortion Campaign and Islington Community Health Council worked together to form five Well-Women clinics in Islington Health Centres (Dale, Foster, 2012). For nurses working in well-women clinics, a change in practice was required which changed their relationship with the services users, who were not necessarily ill (Personal observation as a member of Islington Community Health Council, Women's Health Working Party, 1986). Nurses recognised that women who used the clinics wanted to be able ask for advice on a range of conditions as part of an equal relationship.

There are many examples of social workers initiating community projects, either becoming community workers or supporting community projects in the 1960s and 1970s. They can be seen as a reaction to individual case work. Community work could involve local communities in collective action as well as supporting citizens in negotiations with government. Supported by government policies, which were also funding Community Development Projects to strengthen communities, there was a wider awareness that radical social work had to incorporate a community focus. A Gulbenkian Foundation report (1984) recommended the setting up of a national centre for community development, a reflection of the enthusiasm and energy which was focused on community development projects. The Gorbals Anti-Dampness campaign in the late 1970 and early 1980s was an example of how social workers worked alongside a tenants’ group to campaign against damp housing (Ferguson and Woodward, 2009).

Respect involves the creation of new relationships between democratic professionals and services users. This may be through new forms of organisation, new methods of teaching or new ways of delivering services. Service users are seen in a more equal relationship which often required democratic professionals to look at their own practice. As well as working with services users, many community based projects took a broader approach to working with communities, identifying different ways of both identifying community needs as well as different ways of meeting these needs. For democratic professionals who led some of these processes of change, support was important to deal with the challenges to their own professional practice as well as to deal with the criticism of other stakeholders who were not necessarily sympathetic to the changes. There were examples of head teachers who introduced new forms of organisation to make schools more child-centred but had to resign because of the criticisms triggered by the introduction of new practices. Some never became head teachers again.

Responsibility
A democratic professional will have to accept that there are dilemmas inherent in professional work and that relationships between professional-student, professional-client and professional-patient are increasingly complex. Responsibility can be seen as a form of self-regulation. If professionals start to work in different ways with stakeholders, this will also require the creation of new forms of democratic accountability at the local level which go beyond self-regulation (Spours, 2013).

The campaign to save Croxeth Comprehensive in Liverpool designated by the Liverpool Education Committee for closure in 1982 led to a different type of alternative school. Parents occupied the school and a three year occupation kept the school open (Stephen King Photography, 2015). This campaign was significant in that it brought together parents, teachers and local activists in a different relationship to that of a conventional school. All three groups had to work out their different views of discipline, curriculum and school organisation (Carspecken, 1987). The three-year experience highlighted some of the wider issues raised when teachers and other stakeholders work together.

Another example of community-based education was the publication of several volumes of collections of children’s writing entitled ‘Stepney Words’ by Chris Searle, a London teacher. He used a critical pedagogy approach which “exposes and deals with the issues that shape the world in which the students have to live, helping them to make sense of it in their own terms” (David, 2009). This approach to teaching linked language and action so that children could write about their own worlds and so “became aware of struggles within their social contexts and then were motivated to take collective cultural actions” (Cortes Camarillo, 1998: section 2: Collective Words and Cultural Action). This approach was not valued by the school and the publication led to Searle’s dismissal. In response, students went on strike at Stepney School and generated national support. Although it took two years for Chris Seale to be reinstated, during that period he set up a writers’ group in the basement of St George’s Town Hall where the students could continue with their writing. They were joined by people of different ages from the local community. Over 15,000 copies of ‘Stepney Words’ were sold and the money raised was used to fund other publications.

By the 1970s, nurses were starting to question the medical model that dominated the NHS and which nurses felt compromised the quality of care they were able to provide for patients. Underlying this concern for patient care was a more fundamental struggle between nurses and doctors, with nurses trying to challenge the rigidity of the medical model and moving towards a more holistic model of health. The creation of the Radical Nurses Group (RNG) around England in 1980 was “by and for nurses because of the dissatisfaction so many of us have about so many aspects of our jobs” (New Left Project, 2013). The newsletters produced by the Radical Nurses Group demonstrate some of the issues that nurses discussed. They show that they were attempting to articulate a new way of thinking about patient care. These examples show the problems faced by nurses which were related to other professionals.

“The lack of adequate communication between doctors and patients can be very frustrating for nurses who think that patients should be given a clear idea of what is happening to them, as the decision to tell a patient her diagnosis rests with the consultant, even though very often the nurses will know a patient much better than the doctors do. So the patient, being treated for a fatal disease without her knowledge, because of doctors’ inadequacy at communicating often comes to the realisation of impending death alone, with the reality being consistently denied by both doctors and nurses.......Thus a profession which is predominantly female continues to be intimidated by a profession which is predominantly male. Medical staff are educated within a system which sees acute medicine as having more status and power than a ‘caring’ speciality like geriatrics. For this reason, they come to see ‘caring’ as unimportant in terms of their career. A radical change in both
nursing and medical education is needed to promote caring as well as curing." (MT in RNG Newsletter: January 1981)

Another form of questioning existing service delivery was the involvement of nurses in campaigns against hospital closures. Nurses played a role in the occupations of the Elizabeth Garrett Anderson (EGA) Hospital and South London Hospital for Women and Children in the 1970s and 1980s. Both of these hospitals had been founded to provide for the health care needs of women and were eventually taken over by the NHS.

The closure of the EGA was announced in 1976. An action committee was set up which brought together large health trade unions but increasingly the action committee worked with local residents in Somerstown, near the EGA. The EGA Well-Woman support group started to campaign for a clinic with a wider, community-oriented approach to health that provided information as well as medical services. Campaigners argued for the EGA to become a ‘centre for innovation and research’ in women’s health matters, and a resource in the community. Campaigners and workers sponsored discussion meetings on health issues. A ‘work in’ began a few days before the hospital was due to close. 100 nurses and 78 ancillary staff began the occupation. By 1979, the EGA campaigners were successful in keeping the EGA open for gynaecological services. This campaign brought together nurses, other medical staff and local community campaigners. It started to involve women’s health movement activists with nurses. Eventually the decision to close the hospital was reversed and the hospital re-opened in 1984 (UCL Bloomsbury Project, 2014). The significance of nurse participation in hospital occupations showed nurses developing new alliances with patients and other groups campaigning against closure. This was part of a process of challenging the medical model and developing an alternative, holistic model of health.

When democratic professionals try and translate a greater sense of responsibility into radical practice, the increased complexity of relationships with service users and local communities requires the exploration of different understandings of education or care. These processes are often time consuming and do not always result in a consensus. The parents and teachers in Croxteth Comprehensive had to spend time trying to come to an agreement on discipline, the curriculum and school organisation. Other examples, such as the EGA campaign brought nurses together with the local community.

1990 onwards

In terms of periods of radical practice, there is a clear divide for all three groups, between the period up to 1990 and the period after 1990. For ‘social services professionals’, the opportunities to pursue radical/ democratic practice were greater before 1990. There were often systems of support within the Welfare State that ‘social services professionals’ could draw on for new initiatives. These types of action provide one way of examining the development of radical/ democratic practice in public services during the period after the 1960s. An analysis of these different types of radical action show that they can be characterised as related to:

- Making services more user centred;
- Listening and redefining problems and issues;
- Questioning existing models and promoting more holistic/ social models to inform practice;
- Working with communities to share knowledge and take action,

These can all be seen as forms of a more democratic organisation and practice of public services. Since the introduction of marketization and public management reforms, with the emphasis on the commodification of services, the introduction of new initiatives has been made more
difficult. All ‘social services professionals’ have started to campaign against marketization and more recent austerity policies and these activities characterized their more radical actions in the period after 1990. Jones (2014) argued that the strength of neo-liberalism within the education system makes it much more difficult to introduce new forms of radical practice, even if teachers are still critical of the managerial agenda. Instead of developing new forms of radical practice within institutions, it is the force of wider social movements that provide examples of how new educational approaches can be developed (Jones, 2014:195).

Social workers have used conferences, networks and manifestos as ways of drawing attention to some fundamental issues facing social work and developing supportive networks of practitioners. Part of the emphasis is on returning to a values-based social work, particularly working with service users. After Jones, Ferguson, Lavalette and Penketh (Jones et al., 2004) published ‘The Manifesto for Social Work and Social Justice’ in 2004, a conference in 2006 “Social work: a profession worth fighting for?” led to the creation of the Social Work Action Network (SWAN). This aims “to challenge the growing marketisation of social work and social care, and to defend a social work practice based on social justice” (SWAN, 2015). As well as campaigning, SWAN aims to reassert values within social work as a form of professional development. It works with UNISON supporting social workers on strike, care workers on strike and victimised social worker trade union members (Lavalette, 2011).

There have been attempts to create new forms of school organisation, which draw in stakeholders more effectively. Vincent and Warren (1997) defined three types of parent-centred organisations, where new relationships between teacher professionals and parents could be opened up. Gutmann (1999) had already argued that teachers should “cultivate the capacity for democratic deliberation” (Gutmann, 1999: 76). Bangs and Frost (2012) argue that education is a public good and should be subject to a commitment to social justice and democracy. Education should play a role in the development of active participatory citizenship. Schools should be models of democratic practice. Bangs and Frost (2012) identified that teacher agency should play a part in 1) shaping the learning and working conditions e.g. class size; 2) developing and implementing policy and; 3) influencing their own professional knowledge and professional learning.

An important strand of recent debates about democratic professionalism is the role of trade unions in supporting the creation of democratic professional practice. Whitty and Wisby (2006) emphasized the role that trade unions and professional associations must play in developing alliances with a much larger range of stakeholders than has been traditionally the practice. Trade union and professional associations had to start by defining who should be responsible for teacher professionalism and working with not just the teaching profession but the wider school workforce and the public. This would require new forms of relationships and alliances. Whitty (2008) further clarified a model where teachers would work with a wider range of stakeholders. Stevenson and Gilliland (2015) recognised that teachers’ unions have to be “at heart of DP (democratic professionalism)” and must themselves become models of democratic professionalism, through organising ideas, organising from the base and organising for unity. This form of trade union action is a type of ‘social justice/social movement unionism’ which trade unions have been developing over the last twenty years as a response to declining membership and an increasingly hostile environment towards organised labour (Hyman, 1997; Moody, 1997; Wills, 2001). Teaching unions in North America have been involved in ‘social justice/movement unionism’ and their experience shows that the process takes time to develop, requiring social justice to be seen as part of member advocacy (Rottmann, 2008; Weiner, 2013).

The world of radical practice in the 1960s-1990s may seem remote to the democratic professionals attempting to work in public services shaped by thirty years of public...
management reforms. The value of looking at earlier forms of radical practice is that it contributes to a better understanding of what democratic professionalism looks like. It shows some of the positive dimensions of working together on radical practice but it highlights the importance of support for democratic professionals and other stakeholders who are trying to change organisations and ways of delivering services. For democratic professionals who are attempting to introduce new practices, the creation of support networks has to be part of the process of transformation. Trade unions can play a role in this process.

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