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Introduction

The publication in 2010 of the 30th Anniversary edition of Lipsky’s 1980 book, Street-Level Bureaucracy: Dilemmas of the Individual in Public Services, indicates the enduring contribution of this classic work. The breadth of scholarship drawing inspiration from Lipsky is indicated by the nearly 7000 citations of this book in Google Scholar. The book’s continuing relevance globally and across sectors lies both in the continued importance of public services and its focus on what remains their central challenge: ‘how to treat citizens alike in their claims on government and how at the same time to be responsive to the individual case when appropriate’ (Lipsky 2010, p.xii). The practical relevance of the analysis is, moreover, made clear by the response to it of those involved in policy implementation: it not only just makes sense, but it also encourages them to reflect on how to work differently (e.g. Brodkin 2012; Rowe 2012).

In this chapter, I will briefly outline the core features of the theory of street level bureaucracy (SLBy) and then discuss what I see as its key contributions to the field of public policy analysis. This discussion illuminates the analytic and practice relevance of this book (Brodkin, 2012).

In analytic terms, Lipsky’s book brought public administration work into conversation with public policy and political science. Lipsky was neither the first to consider administrative discretion (Davis 1969; Wilson 1978) or organisational influences over agents’ behaviour (Argyris 1964; McGregor 1960). Nonetheless, his comprehensive and eloquent analysis, derived from analysis across diverse work settings, presented a timely challenge to those considering implementation primarily from a political science perspective. His consideration of what the street level bureaucrats responsible for public service delivery actually do in policy implementation and how their actions differ from the policy pronouncements of central level planners, contradicted the assumptions of top-down analysts, as exemplified by Pressman and Wildavsky (1973). Key among these assumptions were that policy goals were clear, knowable and operationalisable, and that policy is decided by politicians and simply implemented by public administrators. By indicating the limits of central control over SLBs’ behaviour and proposing alternative strategies for holding them to accountable for their actions, Lipsky was, moreover, ‘in many respects the founding father of the bottom up perspective’ (Hill & Hupe, 2009, p. 52).
The practical relevance of the book is, meanwhile, political - to use research on street level bureaucracies to improve the performance of public social welfare agencies, bolstering political support for, and generating greater investment in, them. Although Lipsky’s insights on how to improve the performance of these agencies remain pertinent today, the still limited research around these ideas indicates that this practical project remains a particular priority for future work.

**Street Level Bureaucracy: core elements**

Lipsky’s (2010) preface to the anniversary edition provides a good summary of the core elements of the theory, from the author’s own perspective.

Street level bureaucracies are the public services whose workers ‘interact with and have wide discretion over the dispensation of benefits or allocation of public sanctions’ (p.xi) and through whom citizens ‘experience directly the government they have implicitly constructed’ (p.xi). Although there are many different types of public service workers, their work is not only ‘often highly scripted to achieve policy objectives’ (p. xii) originating in the political process, but at the same time it also commonly requires them to improvise in order to respond to the particular needs of individual clients.

Exercising discretion as they interact with citizens, public service workers (street level bureaucrats) lack the time, information or other resources to respond ‘according to the highest standards of decision-making’ (p.xi) in their field to each individual case. They are put under pressure by the key features of their work settings including: chronically inadequate resources; an ever growing demand for services; vague or conflicting organisational expectations and policy goals; difficulties in measuring their performance; clients who do not voluntarily choose the services.

These workers manage their difficult jobs by developing common routines of practice covering ways of organizing their work, modifications of how they understand their jobs and modifications of how they conceive of their clients (essentially stereotyping more and less deserving clients). The routines influence, in turn, the way they do their work – such as managing and conserving resources (e.g. by building slack time into their days to give them the capacity to respond to unpredictable situations) – and have consequences that include controlling clients so they cooperate with procedures and rationing services to them e.g. by imposing financial or time costs on clients. Often there is, therefore, also a need to establish strategies to manage the consequences of routine practices e.g. by referring ‘difficult’ cases to more specialized workers, or complaints systems. Ultimately, moreover, ‘the decisions of street-level
bureaucrats, the routines they establish, and the devices they invent to cope with uncertainties and work pressures, effectively become the public policies they carry out’ (p.xiii, italics in original).

Lipsky acknowledges that SLBs are often committed to public service and have high expectations for themselves in their careers, but argues that the demands of their work setting challenge these expectations. In these settings they cannot deal with clients on an individual basis and have to develop work practices and orientations that allow the mass processing of their clients (e.g. teaching a class of children not an individual child). They justify their coping mechanisms to themselves as pragmatic and reasonable, given their work settings, but these mechanisms distort service ideals or put SLBs in the position of ‘manipulating citizens on behalf of the agencies from which citizens seek help or expect fair treatment’ (p.xv). Their clients, meanwhile, are ‘bureaucratic subjects’ who, in accessing services, ‘must strike a balance between asserting their rights as citizens and confirming to the behaviours public agencies seek to place on them as clients’ (pxvi). The client’s dilemma is particularly acute if s/he is from a different socio-economic, or racial background to public employees. At best, SLBs ‘invent modes of mass processing that more or less permit them to deal with the public fairly, and appropriately and thoughtfully. At worse, they give in to favouritism, stereotyping, convenience, and routinizing – all of which serve their own or agency purposes’ (p.xiv)

An important note in the revised edition is that Lipsky did not intend to use the term street level bureaucrat to apply to all public service workers. Instead, he saw SLBy as public service employment of a particular sort, performed under certain conditions and pressures in which coping behaviours ‘may widen the gap between policy as written and policy as performed’ (p.xvii). In other conditions, however, coping behaviours ‘reflect acceptable compromises between the goals of enacted policy and the needs of street level workers’. So ‘perhaps it is best to imagine a continuum of work experiences ranging from that that are deeply stressful and the processing of clients is severely under-resourced, to those that provide a reasonable balance between job requirements and successful practice. Workers’ places on that continuum may change over time as they gain experience, as caseloads and assignments vary, or as the workplace itself adopts new approaches or engages new clienteles’ (p.xviii)

Finally, he notes that in his view, despite popular discontent with the work of SLBs, there is simply no alternative to people making decisions in public services. His contribution is therefore to ‘locate the problems of street-level bureaucrats in the structure of their work, and attempt to identify conditions that would better support a reconstituted public sector dedicated to appropriate services and respect for clients’ (p.xix).
**Street Level Bureaucracy: contributions**

Recent scholarship drawing on Lipsky’s ideas combined with reflection on the current relevance of his work to a new field of application, health policy and systems analysis in low and middle income countries (LMICs), suggests that it has made three key contributions to the field of public policy analysis. These are its recognition that: a) street level bureaucrats (SLBs) have discretion and power in implementation, and so their practices are what citizens experience as policy and have political consequences; b) SLBs’ behaviour is systematically influenced by the organisational and institutional environment in which they work, rather being primarily a response to personal preferences and interests; and c) efforts to control SLBs’ behaviour only undermine their responsiveness to clients, so new approaches are needed to support them as the face of a responsive public bureaucracy.

**What is discretion and why does it matter?**

The very notion that SLBs have discretionary power was central to Lipsky’s challenge to the top-down policy theorists, and the nature of discretion and its consequences have remained two important areas of scholarship.

*The nature of discretion*

Lipsky argues that human agency is central to policy implementation, and that SLBs will always make their own decisions on at least some issues. Discretion occurs ‘whenever the effective limits on [the public officier's] power leave him free to make a choice among possible courses of action and inaction’ (Davis 1969, p.4). In other words, discretion is the space between the legal rules in which actors exercise choice, the sphere of an actor’s autonomy for decision-making (Hawkins 1992 and Galligan 1990, respectively, cited in Loyens & Maesschalck 2010). Lipsky also argues that this space exists because, on the one hand, policy goals are often not clearly stated and policy details are not finalized before implementation; and, on the other hand, in pursuing policy goals, SLBs are asked to be responsive to the complex challenges clients present, not all of which can be predicted.

Subsequent work has illuminated different forms of SLB discretion. One distinction is that between strong and weak discretion (Evans & Harris, 2004; drawing on Dworkin, 1977). Strong discretion entails both deciding the criteria for decision-making and making the decisions, and is commonly exercised by professional groups, such as doctors. Sharing occupational characteristics, these groups are given valued status by society, perhaps in part because they are seen as altruistic, and so are also trusted to use their competence and expertise to
make decisions in unpredictable and complex situations hidden from public view (Hupe & Hill 2007). Weak discretion, meanwhile, entails applying a standard or rule, or making a decision within the rules. Ellis (2011) contrasts the ‘value discretion’ of professionals, for example, with the weaker and more informal discretion at the disposal of most SLBs, who decide what rule to apply in particular situations, or how to interpret a rule in a particular situation.

Empirical work brings alive these conceptual distinctions. An ethnographic study of UK child welfare services initiated in 2007, for example, examines social worker practices in an era of enhanced performance management and procedural standardization, involving the use of information technology to drive and record practice (Wastell et al. 2010). The study shows that performance indicators became an accepted part of organizational life, clearly influencing routine practice. However, social workers exercised discretion in the way they applied the established procedures (through their coping strategies) – such as ‘playing the system’ to buy the time needed to conduct more thorough assessments of children and their families than these procedures allow. They also continued ‘to exercise professional discretion through categorisations, ‘diagnostics’ and the social sorting of children and families’ (p.317). The authors also argue that discretion can be seen in the language that social workers used about their work: ‘[s]treet level language gives the power to define, reaffirms the invisible trade and reinforces the occupational identity whilst at the same time rattling the cage of the rule-bound bureaucrat’ (p.317). Weak discretion, thus, encompasses doing their work in ways SLBs feel is appropriate and, as Lipsky also noted (1980), in ways that maintain their own sense of identity and self-esteem.

More recent empirical work has, meanwhile, brought new perspectives on strong discretion. Drawing from American SLBs’ personal narratives, Maynard-Mooney and Musheno (2000) have introduced the notion of ‘citizen agent’ to contrast with the ‘state agents’ portrayed by Lipsky. The term seeks to highlight that SLBs see themselves as working in their client’s interests rather than as an extension of the state, guided by their own judgment of each person’s worth. Similarly, Durose (2011) describes UK local government workers involved in a range of community and health development activities as ‘civic entrepreneurs’. They draw on their local knowledge and resources, including policy resources, to experiment and innovate in engaging with hard to reach community groups and confronting ‘wicked’ problems like social exclusion. These authors argue that citizen agents are ‘rule saturated’ not ‘rule bound’ and, acting like any professional, use their discretion pragmatically in response to client need (Durose 2009; Maynard-Moody & Musheno 2000).
Variation between SLBs in their discretion may reflect differences in jobs or changing expectations of SLBs in general. In a hospital, for example, there are both professionals, such as doctors and nurses, with stronger discretion, and non-professionals groups, such as clerical and ancillary workers, with weaker discretion. Some jobs, meanwhile, demand multiple levels of discretion to match the varied nature of expected tasks (Piore 2011). Durose (2011), finally, discusses how expectations of front line workers have changed over time in the UK, in line with changing bureaucratic forms. In the 1970s, Weberian bureaucrats were expected to follow rules, the SLBs of the 1990s were expected to use discretion to ration services and the civic entrepreneurs of the 2000s were expected to engage actively with community clients. As Lipsky noted (2010, p.xviii) there is, therefore, a ‘continuum of work experiences’ within street-level bureaucracies.

**Why discretion matters 1 – the political consequences**

In practical terms, SLB discretion matters because its use is a political act, ‘potentially building or undermining support for government as a vehicle for advancing social welfare, equity and justice’ (Brodkin 2012, p.947). Through their decisions SLBs influence both citizens’ levels of access to public services or welfare benefits, as well as their experience of that access (Hupe & Hill 2007). Sometimes their exercise of discretion has critical consequences for the life chances of their clients (Marinetto 2011). SLB discretion, therefore, also mediates the broader relationship of state and citizen – as SLBs ‘teach clients to behave properly’ and the public trusts SLBs to make significant decisions about citizen welfare (2010, pp.235–6). SLBs are, quite simply, the daily reality of the state in most people’s experience and so their behaviours signal the value the state, society places on different people. In their own view, street level workers are ‘empowered citizen agents, who in their decisions to ration resources, provide access to programmes, and sanction individuals, both communicate and convey social status’ (Maynard-Moody & Musheno 2000, p.355).

A major strand of SLB empirical work continues to provide evidence confirming that ‘the types of coping strategies that Lipsky identified are both prevalent and plentiful ... robbing services of their substantive value and skewing the distribution of benefits’ (Brodkin 2012, p.943). Ellis (2007), for example, examines British experience of replacing direct care schemes for older and disabled people with cash payments that, in principle, allow clients greater choice and autonomy in deciding what personal assistance they receive and from whom. In addition to their formal role of rationing available resources, Ellis finds evidence that SLBs ration information to limit demand, and stereotype clients – for example, by assuming older clients do not want decision-making autonomy and that middle class clients were better able to take advantage of direct
payments. These attitudes towards clients are essentially personal judgements about who does and does not deserve support.

Although few studies of SLB behaviour have been conducted in the health sector, by definition health professionals might be assumed to work primarily in the patient’s interests – like citizen agents. However, some LMIC studies, for example, have shown how professional values may go hand in hand with attitudes and behaviours towards patients that are replete with SLB coping strategies and that have distributional consequences. Patients are quite strongly ‘controlled’ in health facilities through queuing and patient flow systems, and informal practices such as the timing of tea breaks, are subject to stereotyping (such as judgements over who ‘deserves’ access to family planning or abortion services) and can experience health providers as demeaning and even abusive towards them (Harrison et al. 2000; Walker & Gilson 2004). Patients’ poor experiences in health facilities may, therefore, lead them to dis-trust providers, to delay seeking care, or even deter them from accessing care altogether (Gilson 2007). The least powerful patients commonly bear the brunt of SLB behaviour, and its consequences, including increased costs, can threaten family livelihoods (Goudge et al. 2009; Russell & Gilson 2006) and exacerbate exclusion and impoverishment (Tibandebage & Mackintosh 2005).

However SLB behaviour is always complex. Horton (2006) presents an ethnographic account of experience in a US mental health clinic located in a hospital serving a low income and largely Latino immigrant patient population, in 2003-5. The majority of clinicians were also from Latin America, but from more privileged backgrounds, and worked in the clinic because they felt it offered better care for its target population than either the mainstream public or private sector services. They played dual roles in the clinic, informally acting as patient advocates in the wider bureaucracy and formally working as therapists – with both roles important to their care for their clients. Patient advocacy roles included, for example, supporting victims of political violence facing deportation in their engagement with the legal and immigration system. Although important to patient treatment, and acknowledged by the hospital administration, this work was not seen as part of their job, and had to be done out of working hours on top of usual workloads. At the same time, within the clinic their professional practices were being squeezed by cost containment measures intended to promote clinician productivity, all of which most affected the uninsured and immigrants with serious psychosocial issues. The measures included time limits on appointments, denying free care to uninsured patients, and providing group rather than individual therapy. In response to these pressures the clinicians themselves also decided to deny future care to any patient after three successive failures to arrive for a pre-booked appointment. As Lipsky (1980) noted, SLBs have two mindsets – the professional, involving discretion and autonomy and
the bureaucrat, compliant with supervisor’s directives - with different consequences for particularly vulnerable patient groups.

There is also wider evidence of the complex realities but positive potential of SLB discretion. They work as principled agents fulfilling their professional goals in the Danish welfare system (May & Winter 2007), or combine coping strategies with professional behaviour, rising above the demands of their jobs as US school psychologists to provide needed services (Summers & Semrud-Clikeman 2000) or moderate practice to accommodate the non-functional features of policy in Finnish and Swedish psychiatric services (Markström et al. 2009; Saario 2012). Studies that regard SLBs as civic entrepreneurs, meanwhile, note how they use discretion creatively, bending policy rules to be responsive to community concerns but also trying to pursue government agendas (Durose, 2009; Markstrom et al., 2009; Maynard-Moody & Musheno, 2000).

A much smaller body of work has so far considered the influence of SLB actions on the relationship between state and citizen, and further research is important. There is, for example, a little evidence of how SLBs: mediate social status and identities, such as race and gender (Brodkin 2012); act corruptly (Staranova & Malikova 2007) or offer responsive services (Berenson 2010), in wider contexts of bureaucratic failure. At a conceptual level, meanwhile, political scientists (Rothstein & Stolle 2008; Rothstein & Stolle 2001) pick up on Lipsky’s discussion of trust and SLBs. They argue that people’s experience of the local political institutions responsible for public policy implementation and specifically, the impartiality and fairness of their treatment, affects their trust in these institutions. This institutional trust influences, in turn, levels of ‘generalised trust’ or social capital, in society at large. In similar vein, Mark Moore (Moore 1995) has coined the term ‘public value’ to capture the two potential benefits of public services: producing things (services) of value to citizens and operating in fair, efficient and accountable ways that meet their desire for a well ordered society.

Why discretion matters 2 – understandings of policy, accountability and legitimacy
In analytic terms, discretion matters because it challenges the dominant account of public policy implementation – and how to manage it to achieve policy goals/public value. Within the top-down perspective on policy-making, central level decision-makers are assumed to hold the dominant power, and implementers are expected to comply with the instructions and guidelines laid down for them (Barrett 2004). Underpinning this perspective is the normative judgement that within a bureaucracy, implementers are accountable through their superiors to the legitimate (democratically) elected government. They must, therefore, align with the democratic will and the rule of law (Ellis 2011). SLB deviation from policy prescriptions and guidance is, in this view, illegitimate.
The empirical evidence shows, however, that policy as experienced by clients is embodied in the formal and informal practices of SLBs, whatever paper and rhetorical goals are formally established (Brodkin 2012). Human agency and interactions are key influences not only over how policy is implemented but also over what policy is; indeed, for all bottom uppers, policy-making is still in progress at the moment of delivery (Hudson & Lowe 2004; Parsons 1995). Ultimately, the reality of SLBs’ agency means that expecting compliance with centrally imposed rules is unrealistic. It suggests instead that they must be empowered to perform, to exercise their discretion to be responsive to clients – and to be held accountable for that (Barrett 2004).

This represents the crux of the top down/bottom up debates: the distinction between what ought to be and what is, and between the traditional top down notions of accountability within Weberian bureaucracies and the emerging understandings of multiple accountabilities within networked systems (Hupe & Hill 2007; see also below).

At one level, this point reflects very different understandings about the nature of policy. Moving beyond an instrumental view of policy and a linear view of policy-making, the very notion of discretion and the idea of policy as practice reflects understanding of the socially constructed and constituted nature of public policy. Policy is not fixed by central level planners but negotiated through power and discourse in the course of its implementation (Laws & Hajer 2006). The idea that SLBs work within rules that define their power and yet, influenced by their values and interests, use their discretion to re-define those rules, reflects broader discussion about the interplay between structure and agency. Barrett (Barrett 2004), a British contemporary of Lipksy, for example, notes how she was influenced by the notion of structuration (Giddens 1984) - the ‘understanding [that] structures or rules of the game determine the status quo of power relations, but since these are socially constructed they are also susceptible to change through human agency’. She argues: ‘This has offered a new way of looking at concepts of power and negotiation in implementation as the dialectic between structure and agency, which reinforces a view of performance, or what happens in practice, as a function of the scope or limitations of scope for action (rules and roles), and the use made of that scope (values and interests)’.

At another level, judgements about legitimacy themselves reflect broader political imperatives and ideological paradigms (as Lipksy, 1980 himself noted, ch12). The benefit of hindsight provided by reflecting on the thirty years since the initial publication of Lipsky’s book allows sight of the evolution of thinking about bureaucracy. Whilst the global context may be broadly similar (economic
uncertainty, growing poverty, increasing demands on public services), there have been huge changes in approaches to public administration and management (Ellis 2011).

The era of the Weberian bureau-professional regime, in which access to public resources was controlled by professionals applying bureaucratic standards and eligibility rules that sought to ensure equal and fair treatment for all, was overtaken, globally, by the new public management era. Linked to neo-liberal economic thinking, this era brought performance monitoring and market mechanisms into the public sector and entailed a tightening of top down control. At the same time, however, bottom up theorists continued to track practice and develop thinking around the dispersed power within, and networked nature of, bureaucracies (Barrett 2004). New understandings of governance have subsequently emerged that recognize the inter-play of policy and action and the range of forces shaping action within bureaucracies, as well as more relational understandings of accountability (Durose 2011; Hupe & Hill 2007). In the UK, for example, the Thatcherite emphasis on market mechanisms was moderated by new Labour’s emphasis on consensual governance, involving partnerships and networks between public sector and community groups (Ellis 2011), and inclusive policy processes that also engaged with public sector staff (Durose 2011). In Europe, more generally, decentralization of authority combined with ‘activation policies’ intended to reduce client dependency on the welfare state, have brought new roles for SLBs (Rice 2013). In the US, meanwhile, Mark Moore’s work on public management and public value (1995) has opened up discussion both about the nature of public value and the related strategies of public leadership (as distinct from private value and leadership).

Each of these different eras represent different ways of understanding the role of the public sector in society, and different ideas about its primary imperatives. The balance between efficiency, equity and responsiveness, as well as different approaches to management within it, are primary concerns. Ellis (2011) posits, therefore, four different forms of SLB action and discretion, framed by the balance between professionalism and managerialism, and the degree of formality/informality (and related legitimacy) with which discretion is exercised. The notions of state agent and citizen agent capture something similar and highlight the critical difference in understandings of legitimacy: are the rules of policy, developed through vertical lines of political and bureaucratic accountability the touchstone of bureaucratic legitimacy or is that touchstone rather, the bureaucrat’s responsiveness to the client and community?

What shapes SLB behaviour?
Lipsky's second critical contribution to understanding policy implementation is his recognition that SLB discretionary behaviour is patterned by the structural conditions of the working environment, rather than being the random acts of self-interested individuals behaving badly as envisaged in, for example, public choice theory (Downs 1967; Niskanen 1971). Individual SLBs are, therefore, not solely or even primarily to blame for the challenges the public experiences in accessing public services, as their behaviours are shaped by their broader work environment. Lipsky (2010, p.xv) talked about the ‘corrupted world of service’ in which SLBs work. He argues that they are caught in fundamentally tragic situations where they simply cannot put their ideals into practice, and instead lower their expectations of themselves and clients. This is the ‘dilemma of the individual in public services’, as the sub-title of the book has it.

This insight is confirmed by empirical evidence. Studies show that SLBs generally do not oppose policy aims or deliberately work to subvert them, but instead find that being responsive to clients is simply ‘incompatible with their work lives’ (Brodkin, 2012; in the health sector, for example, see Walker & Gilson, 2004). Lipsky gave particular attention to resource constraints, workload pressures, policy ambiguities, bureaucratic efforts to exert greater control and relations with clients as structural influences over SLB behaviour. However, he also acknowledged a ‘continuum of workplace experiences ranging from those that are deeply stressful and the processing of clients is underresourced, to those that provide a reasonable balance between job requirements and successful practice’ (2010, p. xviii).

Subsequent empirical work provides evidence of four main categories of influence: a) individual decision-maker characteristics (such as professional norms, personal interests, moral values, gender, ethnicity, role definition, personal meanings) b) organizational characteristics (internal structure, rules and constraints, organizational routines and culture, workload pressures), c) client attributes (levels of need, or perceptions of clients), and d) extraorganisational factors (e.g. broader community, laws, regulations, media, other service agencies) (Loyens & Maesschalck 2010). Jewell and Glaser (2006), for example, derive and test an empirical framework of six influencing factors: SLB authority to influence clients; role expectations reflected in SLB attitudes to work and clients; workload; client contacts (frequency, regularity, quality, time); personal knowledge and expertise; and incentives (formal and informal, including intrinsic rewards).

However, the mix of influencing factors play out in different ways in different situations – depending on the scope and nature of SLB discretion in a particular task or job. Empirical work has, on the one hand, demonstrated that resource constraints and managerial interventions – such as target setting, incentives and
the use of information technology – influence SLB behaviour, narrowing or containing even weak discretion (Brodkin 2012). On the other hand, street level factors are also clearly influential in some settings and perhaps especially where SLBs have wider or stronger discretion (May & Winter 2007).

At an individual level, recent work has again demonstrated how personal beliefs and norms about fairness influence the personal judgements ‘citizen agents’ make about the relative worth of individual citizens (Marinetto 2011; Maynard-Moody & Musheno 2000). Relatedly, Evans (2010) argues that professional status is important as it entails commitment to values that focus on service user wellbeing (over economic priorities), and brings a greater degree of decision-making autonomy than held by other SLB groups. He criticizes Lipsky for overlooking this influence. Other individual level influences include, for example, SLBs’ understandings of their jobs (Bergen & While 2005; UK community nurses) or policies (Pennay 2012): Australia, policy officers and drinking laws), feelings of competence and awareness of the responsibility that comes with power (Ydreborg, Ekberg, & Nilsson, 2008: Sweden, social insurance), and knowledge of local situations (Durose, 2011: UK, local government).

Beyond the formal features of organizational settings, the broad SLB literature also highlights the web of horizontal and vertical relations in which SLBs are nested as important influences over their behaviour (Hupe & Hill, 2007). SLBs themselves identify three key relationships (Maynard-Moody & Musheno 2000); (see also Marinetto 2011). Those with: citizen clients, fellow street workers and the system within which they work (including elected officials, even the media). SLBs see themselves as independent moral actors in opposition to the system, which offers some loose support but also can intrude into their work. Interactions with clients can bring both a sense of accomplishment and threat, but interaction with peers, their primary reference group, is generally one of mutual support and learning. Collaboration across sectors/organisations can, nonetheless, be undermined by perceptions of relative inter-professional status (Halliday et al. 2009).

Another potentially important relationship, although overlooked by Lipsky originally, is that between SLBs and their line managers. Evans (2010) distinguishes between central and local managers. He presents evidence to show that shared professional commitment (in this case, among UK social workers) allows front line workers and their managers to collaborate in addressing the needs of service users as they judge best, despite higher level managerial pressure to focus on expenditure control and performance management. Although Brewer (2005) also finds evidence of front line supervisors’ influence, the limited available evidence is equivocal. For example, a Danish study of employment policy implementation at local government level uses statistical
analysis, unusually, to test various related hypotheses (May & Winter 2007). It determines that the amount of supervision and degree of delegation have some, but relatively little, influence over how caseworkers interpret policy guidelines in their interactions with clients – in comparison to the influence of local politicians and, most importantly, SLBs’ own understanding of policy goals, personal acceptance of those goals and perceptions of their own knowledge of relevant policy rules.

Managerial and other relational influences are, however, recognised in Piore’s (2011) more recent and, for SLBy literature, unusual exploration of the influence of organisational culture. Starting from the understanding that SLBy is a particular organisational form distinct from classic Weberian bureaucracy or markets, Piore draws on sociological theory and case studies (of labour inspection organisations in Latin America and southern Europe and the US Department of Defense’s research arm) to understand how organisations shape behaviour beyond incentives or bureaucratic rules. He actively looks for explanations of innovative and entrepreneurial behaviour (like that of civic entrepreneurs). He argues that in an SLBy decisions are made within a framework of tacit rules and procedures, embedded in the organisational culture, passed on through the socialization of new organisational recruits, and reinforced, and evolving, through discussion among peers and managers. Theory suggests that organisational culture is likely to have greater influence over individuals where they depend on their organizational colleagues for approval and support, and where organisations operate in a hostile environment. In these settings, managers might encourage SLBs’ innovative, entrepreneurial behaviour by shaping the organizational conversations that, in turn, shape practice.

Overall, therefore, SLBy theory has contributed understanding about relationships within organisations (Friedman 2006) and fed into wider work on the sociology of organisations (Hill & Hupe 2009). The very notion of discretion, as discussed earlier, is tied into consideration of the structure-agency dialectic. Based on this, Rice (2013) develops what she calls a ‘micro-institutionalist theory of policy implementation’ that presents an overarching framework of influences over the caseworker-client interaction (Figure 1). On the one hand, the standardized interactions between caseworker and client become part of the broader institutional framework guiding those interactions and restricting what actions are permitted or are regarded as relevant or appropriate. On the other hand, that institutional framework may change not only as a result of systemic forces (such as change ideological change) but also as a result of individuals doing things differently in that interaction. She argues that whilst legal and regulatory documents, staff and budgets represent the building blocks of the welfare state, it only becomes real as a political institution when caseworkers (SLBs) meet citizens and take decisions. But the moment ‘at which the welfare
state becomes a manifest reality in the interaction between caseworker and clients is also the moment at which it starts to evolve and possibly to change’ (p.6). Her framework bridges the micro-level of the caseworker-client interaction, the meso level of the implementing organisation and the macro level of the wider societal context. She argues it develops Lipsky’s thinking in making explicit the interrelatedness between the case worker-client interaction and its wider institutional and systemic context.

Figure 1: Overview of systems and institutions influencing the caseworker-client interaction (Source: Rice 2013)

How can SLBs be better supported to offer public value?

The third critical contribution of Lipsky is his recognition that attempting to control SLBs to contain or prevent their discretion, as proposed by top down theorists, only leads them to stereotype and disregard client needs (Hill & Hupe 2009).

Subsequent empirical work has only proved the point. Although the managerialist interventions of target setting, incentives and the use of information technology, together with cost containment interventions, influence the scope and exercise of discretion, they do not control it (Brodkin 2012). They may encourage ‘compliance without conviction’ (Wastell et al. 2010) or produce fresh conditions and requirements for covert rationing (Evans 2010; Keiser 2010). Most critically, as Lipsky predicted, the efficiency gains that are achieved through managerial intervention ‘squeeze out’ SLB responsiveness to client
need, and so have negative consequences for quality and efficacy (e.g. Marinetto 2011), and as yet little known consequences for equity and discrimination. Whether the (unanticipated) consequences are judged as positive or negative is ultimately an ideological or political judgement about the role of the state in society and the importance of responsiveness as a public sector goal. At the very least, however, Brodkin (2012) urges caution in using incentives to influence SLB behaviour and public sector performance.

These experiences offer important insights for health system development in LMICs. Strongly influenced by global organisations, international power relations and national interest groups, particularly medical professionals, health policy implementation in LMICs is commonly seen to be a function of exercising central authority within machine-like organisations. The solutions to the gap between policy goals and implementation experience are, therefore, often seen to lie in action to guide individual implementors’ behaviour – such as clinical guidelines and performance (or results-based) based payments (e.g. Lewin et al. 2008).

So, what other managerial approaches can support SLBs, and hold them accountable as they allocate public resources and mediate state-citizen relationships?

In the revised edition, Lipsky (2010, pp. 235–6) notes that the need for human judgement in policy implementation means that the ‘central challenge for management is to improve workers’ capacity to render that judgement dispassionately’. Whilst treating everyone alike is necessary to build public trust, he argues that exceptions can be acceptable when neither discriminatory nor the result of favouritism, and where SLBs have the skills, training, and experience to exercise discretion properly (see also Rothstein 1998).

Recognition of the moral reasoning underpinning SLB discretion (Maynard-Moody & Musheno 2000) points to the importance of strengthening SLBs’ reflective practice. Lipsky (1980) suggested, for example, that it is important to create regular moments of reflection among peers and with managers, to review practice and learn from experience (as also noted subsequently by others thinking about SLB: Brodkin, 2012; Rothstein & Stolle, 2001; Rowe, 2012). Deliberative and reflective practice is itself a recognized and growing area of conceptual and empirical work (Schon 1983; Ghaye 2008), including consideration of the role of communities of practice in supporting learning (Wenger 1998). A Dutch example of efforts to improve individual ethical practice and, ultimately, public trust in the tax administration is instructive (van Blijswijk et al. 2004). The approach combined external oversight of standardized rules and codes of conduct with processes to encourage deliberation among people within the organization about their personal practice (through training, use of
counselors, and reflection groups add), in an effort to develop their moral compasses and ethical judgement.

Although intending to influence individual behaviour, processes of deliberation and reflective practice are, therefore, likely to recognize and build on the complex sets of relationships within which SLBs are nested. Hupe and Hill (2007) provide a comprehensive conceptual account of these relationships and their relevance to street level accountability. Rather than, as in top down approaches, seeing accountability as purely an issue of compliance to rules (enforcement) or targets (performance) they also allow for co-production, entailing professional or participatory forms of accountability (reflecting bottom up perspectives). Indeed, understanding accountability as ‘a social relationship in which an actor feels obligation to explain and justify his conduct to some significant other’ (Bovens 1998, p.172, cited in Hupe & Hill 2007), the multiple relationships within which SLBs work, therefore, provide various ways through which citizens can hold SLBs to account. All are likely relevant in supporting improved SLB performance, within balanced approaches that take account of different types of SLBs, organisations and role expectations.

Although there is clearly great scope and need for more empirical research to understand accountabilities as practiced at street level, some ideas about these different dimensions can be derived from existing work. Based on analysis of SLB failure in UK social work, Marinetto (2011), for example, points to the potential role of peer accountability, exercised through informal professional relationships, in encouraging SLB responsiveness to client needs. Lipsky (2010) himself highlighted models of SLB practice that encourage open discussion of potential errors in decision-making and teamwork to enable learning and support decision-making. Hill (2003), meanwhile, actively explores the role of professional organisations, academics and other interest groups as ‘implementation resources’ supporting learning. Their support can take the form of basic and in-service skills’ training, but they can also provide a range of other intellectual resources – theoretical perspectives, insight into what policy means, ideas on ‘best’ practices’ for implementors or on organizational technologies for implementation. Although outside government these groups may be seen to be more prestigious and carry more legitimacy than government-based resources.

Another professional resource available to SLBs, and one not originally well recognized by Lipsky, are managers - where they work to offer professional support and guidance rather than just acting as agents of hierarchical control (Evans 2010). Recognition of co-production as a mode of implementation also directs attention to the role of trust as a managerial mechanism, instead of rules or contracts (Hill & Hupe 2009; see also Gilson, 2003, and Gilson, Palmer, & Schneider, 2005 for consideration of the role of trust in LMIC health systems).
Related managerial strategies focus on leadership of people by building their individual capabilities, building teams, and shaping organizational culture (Mintzberg 2009). In thinking about how to shape organisational culture, Piore (2011), meanwhile, highlights the managerial role encouraging interpretive conversations within an organization. These create spaces for the tacit knowledge of SLBs to be heard and shared, supporting the organisational sensemaking (Weick 2009) that underpins current SLB practices as well as enabling change in those practices. Reflecting institutionalist thinking, this managerial approach emphasizes the role of ideas, narratives and meanings in shaping SLB behaviour, and, again, the role of deliberative and reflective practice in influencing behavioural change. Piore also suggests a link to the wider world of systems thinking and continuous quality improvement strategies (such as benchmarking, the Toyota method, the Six Sigma approach etc). All of these, as also identified by Lipsky in the revised edition (2010), use indicators to stimulate discussion rather than primarily to judge performance.

Relationships with clients are another stimulus for better practice and line of SLB accountability (Hill & Hupe, 2009). Lipsky (2010) suggested clients could become a stronger reference group for SLBs by, for example, involving them in the definition of good practice at street level, empowering them to be more involved in decision-making, or moving towards models of care that are based on team not individual relationships. In LMICs local health facility committees have been quite widely established as mechanisms of community accountability, with variable success (McCoy et al. 2012; Molyneux et al. 2012). Finlay and Sandall (2009), meanwhile, discuss a new UK model of midwifery care that offers possibilities for relationship continuity and a focus on the experience of service users. Where SLBs work as citizen agents their accountability to the community is, moreover, both acknowledged and encouraged. They ‘...engage with the community and develop strategies aimed at achieving community-centred or ‘civic’ ends’ (Durose 2009, p.991), building relationships and sharing information with, as well as signposting for, their community clients (Durose 2009).

Finally, Brodkin (2012) points to the potential value of backward mapping (Elmore 1979) as a process for thinking through how policy itself can enable SLBs to engage appropriately in their human interactions with clients. Paying more attention to policy delivery as policy is developed was encouraged under the new Labour government in the UK (1997-2010). The principle of policy inclusiveness encouraged policy makers to consider to involve those involved in policy implementation at an early stage of policy design and to think through the possible policy impacts on intended beneficiaries (Bochel & Evans 2007). The importance of framing policy in ways that enable front line workers, rather than seeking to control them, has also been picked up in systems thinking work on UK
health policy. Chapman (2004, p.91) specifically suggests that policy outputs 'should be as unprescriptive about means as possible'. They should establish the direction of change clearly, set limits on implementation strategies, allocate resources for reasonable lengths of time without specifying how they must be spent, clearly specific areas of discretion for local managers and workers, and specific core evaluation requirements (including feedback by end uses).

**Conclusions:**

Lipsky's seminal work illuminates the essential human and political features of policy and implementation, providing insights that remain ground-breaking thirty years later. For practitioners and researchers alike, this is not just a classic book - it has persistent relevance. Perhaps most importantly, its still relatively untested proposals about how to strengthen the performance of public sector bureaucracies offer value worldwide today. In LMICs, for example, efforts to improve the responsiveness of health systems could focus on encouraging reflective practice, trust-based workplace management and applying sensemaking as a way of shaping organizational culture.

Future research globally and across sectors should, finally, follow Lipsky's example in seeking to understand street level bureaucracies from the inside out (Brodkin 2012), for example through ethnographic work (eg. Maynard-Moody & Musheno 2000) or interpretive policy analysis (eg. Durose 2009). The gaps in current research show the particular value of better understanding the forces shaping SLB behaviour and of testing proposals for re-framing them to support public service improvements. In the face of fluctuating political and ideological support for public services there is also a continued need to demonstrate the impact of different approaches to delivering public services in people's lives.

**References**


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1 A scan of the main and continuing lines of SLB scholarship across continent and sectors was conducted as background for this chapter. Using the simple search term ‘street level bureaucracy’ (with particular but not exclusive interest when the term, or the word Lipsky, was used in the paper title) I initially searched for recent, published journal papers within Thomson Reuter’s Web of Knowledge (a general database) and the Cumulative Index to Nursing and Allied Health (a health database). This was followed by a hand search for unusual references from review papers and a limited number of more specific geographic and author searches in Google Scholar (e.g. SLB Africa; SLB Asia; SLB India; SLB Rothstein).

2 The emerging field of health policy and systems research takes seriously the idea that implementers are people with agency – recognizing their roles in bringing alive policy through their practices and so becoming what the health system is experienced as by patients and citizens (Lehmann & Gilson 2013; Ssengooba et al. 2007). In line with broader SLB thinking, health systems are, therefore, understood as relational systems in which people are influenced by each other and their broader institutional environment – requiring new approaches both to managing (Gilson 2012) and researching within them (Gilson et al. 2011; Sheikh et al. 2011). The broader SLB literature, thus, offers insights and ideas to stimulate this area of research.