How could they?: Hyper-rational responsibility and the ethics of managerialism

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The paper is a critique of managerialist ethics. I argue that managerialism utilises a perverse form of consequentialism and a distorted version of Kantian deontology to create a culture that is both punitive and authoritarian. I attend to the question ‘How could they?’ by calling on Buber to reflect on dehumanization processes which make it possible to harm others, and on managerialist deontology to explain how it is possible to feel virtuous whilst doing so. I examine how bureaucracy and hierarchy are utilised to dissipate responsibility and avoid blame at the level of institution, and to attribute blame to individual workers trying to do the right thing. Finally, I describe some of the problematic managerialist practices taking place in IAPT, to show how they fashion and sustain an illusory reality.

The Neem tree

For over 2000 years components of the Neem tree have been used by farmers in India as pesticide. In 1992 an American agricultural company ‘Grace’ patented a version of the pesticide. If farmers continued this practice, they would be breaking the law. They protested. But US patent law would only allow challenges to the legitimacy of the patent if it could be shown that prior knowledge had appeared in a printed publication – preferably a scientific journal. This being folk knowledge, there was nothing in formal print. On this basis, the courts ruled that there was no scientific evidence and dismissed the actual evidence, the lived experiences of untold individuals, as anecdotal and non-scientific. After decades of legal battle, the patent was revoked.

I tell you this story because it perfectly captures the workings of the hyper-rationalist world, in which it is the presence or absence of documentation that is the ultimate arbiter of truth and reality, more ‘real’ than the lived experience of tens of thousands over millennia.

Keep this story in mind, as it serves as a background for the tensions that I will be speaking to.

Value for money

Given that the Exchequer spends our money on providing services, it is perfectly reasonable that it should ask: is it getting value for money?

But what is value?

Jeremy Bentham was faced with a version of this same question when he sought to increase the happiness level of the nation. He thought the level of happiness was correlated to its utility. Which is why his philosophy is called utilitarianism. He thought it possible to measure utility numerically, and on the basis of these numbers decide which action would generate ‘the greatest good for the greatest number’.

In moral philosophy this way of thinking is known as consequentialism. Consequentialism is the principle that one should judge the rightness or wrongness of an action by the consequences of that action.

Like Bentham, managerialism believes that value can be measured, and indeed they claim that Key Performance Indica-

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1 A version of the paper was delivered November 2018, at the 3rd Limbus Critical Psychotherapy Conference ‘Toxic Organizations’. www.limbus.org.uk/toxicorganizations
tors and scores of various kinds do in fact measure value. But the calculations behind Key Performance Indicators bear little resemblance to real mathematics. They are ideological assemblages that are designed to obscure more than they reveal.

Even so, scores and measures make sense in mechanistic settings like factories with conveyor belts. But when these ways of thinking are applied to persons then they become deeply problematic. The philosopher Emanuel Kant was one of the first to explain why this was so.

Kant made a powerful distinction between cause and reason.

He thought it necessary to divide the human realm from the material universe. To understand the workings of the material universe, we look for causes because it is mechanistic, deterministic and so more or less predictable.

But to understand human activity we have to look for reasons. Otherwise humans would not have to take any moral responsibility for their actions. They would simply have been caused by what had occurred just before. Unlike the billiard ball which has no choice, humans have the capacity to think and on that basis choose to some degree how to respond to a prior event. The capacity to think and choose makes the outcome of human interaction intrinsically unpredictable.

Kant also thought that it was unethical to impose a mechanistic understanding onto human beings, because this would be to treat them as mechanisms, as things. Not only is this dehumanising, it also does away with the human capacity to think; a capacity that is intrinsic to our ethical sensibility, and the freedom to act in accordance with that sensibility.

When the positivist methods and principles from the natural sciences (the region of causes) are applied to the human domain (the region of reasons) then what is produced is not science but something better called scientistic – something that looks like science, something that claims to be science, but is not science.

**Science of managerialism: Perverse consequentialism**

Managerialism straightaway falls foul of all of Kant’s injunctions because it thinks itself to be scientific. Managerialism thinks that it can pre-determine the outcomes it desires by writing policy; it also presumes that human interaction is measurable; and last, it thinks that if procedures are properly followed, they will produce predictable outcomes. In effect persons have become things, and so human beings have become human resources.

In the natural sciences data is used to tell us what reality is like – for example that iron is heavier than water. But what tends to happen in managerialist organisations is the other way round. A pre-determined reality, the target, the assertion that this is what the reality ought to look like, determines both, the way that data is collected as well as the kind of data that is collected, in ways that are reminiscent of the kind of thing that used to take place in Stalinist Russia.

Stalin having forced both collectivism and Lysenko’s bizarre biological beliefs on to the peasantry, the consequences were famine and the death of millions. But whenever the Party descended to audit the harvest, collectives were often able to show a huge increase in wheat production by the device of amalgamating the harvests of several collectives. The peasants were propping up an insane system. But they had to, otherwise they would be accused of treachery and of hoarding the non-existent wheat, and very quickly find themselves in one of the gulags. Managerialist versions of the gulag are called ‘special measures’ and ‘performance management’. In order to survive in authoritarian contexts, the task becomes to make things look right, even whilst one knows that they are not right.

Here is an instance of an attempt to make things look right from about 10 years ago. The Metropolitan Police Force discovered that they had used their counter-terrorism measures to stop and search disproportionate numbers of Black people. No surprise there. But rather than reduce the numbers of Black people they were stopping, senior
managers gave instruction that more White people should be stopped. In this way they could continue their racist practices but their statistical data would show that they were complying with the requirements of the Race Relations Acts. The gambit was discovered when the White bowler hatted gentleman being stopped started to make a fuss.

Rather oddly, these sorts of statistical machinations are often not secretive. They are initiated in the high offices of the land, and are in the public domain. For example:

There is no legal compulsion to fill out the so called ethnic monitoring form that is habitually given out to all and sundry. Legally, the form has to include an option to not-declare one’s ethnicity. The Department of Health having designed this form with the option included, goes onto advise organizations not to make this option available to those filling in the form because

‘high proportions [of ‘not-stated’ codes] have an adverse affect on the overall DQI [Data Quality Indicator] and hence on the organisation’s overall performance’ (DOHSC, 2005, para. 45).

On the one hand the DoH makes a token gesture to the individual’s freedom to choose, and on the other hand it openly advises that this freedom should be hidden so that the performance score is as high as possible.

It becomes clear then that managerialist institutions subscribe to a bizarre version of a consequentialism that is devoid of ethics. Its strapline might be:

Do whatever is necessary to make it appear that one has arrived at pre-determined ends, commonly known as goals and targets.

‘How could they?’

We are repeatedly shocked by the effects of state directives that result in the suffering of the needy and vulnerable. There are untold instances of despair generated by the brutality of ATOS, or when care packages are cut back or simply removed, and so on. How is it that those sitting in ‘The Boardroom’ feel able to implement policies that they know will degrade working conditions as well as erode the quality of the services provided to the so-called ‘customer’?

And so we exclaim: ‘how could they?’.

If pressed they tend to answer not the ‘how’ question but the ‘why’ question: ‘there is not enough money. It is unfortunate, but we all have to make do with less’.

Even if that were true, which I don’t think is the case, the question remains: how could they?

A key ingredient of the ‘how’ has to do with the depersonalised, detached, third person perspective that prevails at all levels in organisational life. From this perspective, ‘hes’ and ‘shes’ are no different to ‘its’. The managerialist rationale for taking up this perspective is that it is the same depersonalized perspective of the rational sciences.

True, the perspective of the natural scientist is depersonalised – but depersonalised is not the same as dehumanised. The distinction is important; it is the difference between being dispassionate and being heartless.

The thing is, that when this self-same depersonalized scientific attitude is brought to bear on human beings, not only does it dehumanize the other, but also the self. Why this is the case is best understood in Buber’s language.

When the I/It perspective of the natural scientist is applied to persons (the scientific stance), persons are made into ‘its’. But the only way of being able to treat another human as a thing, as an ‘it’, is to curtail one’s own capacity to feel, and in doing so one also turns oneself into an ‘It’. So scientific relations are better described as It/It rather than I/It.

With all traces of humanity removed from the picture, institutions and individuals are able to take all kinds of callous actions with no emotional repercussion. As far as a stone is concerned, I am heartless and entirely untroubled by what happens to it as I casually kick it aside.

In contrast, in I/Thou interactions,
humans are present to each other as humans not things; they are involved and entangled. In this realm, the I/Thou interactional relational, our experience takes place in the first and second person.

Being entangled, we necessarily feel the other and cannot help but feel for the other. Empathy is integral to this kind of interactional relational. Raimond Gaita puts it like this:

*Our sense of the reality of others is partly conditioned... by our shocked and bewildered realisation of what it means to wrong them. Remorse is that realisation.* (Gaita, 2008, p.34)

The realisation is that the other is sentient, and being sentient, is capable of suffering. Now, we cannot help but feel with them and for them. In this realm what happens to the other matters deeply, and it matters to me.

Note the distinction: language between persons is in the first and second person, whilst language about persons is in the third.

Of the two perspectives, the one that is privileged in managerialist organisations is that of the detached third person, from which it is easy to think that one is merely doing one’s job, merely implementing procedures. This was exactly Eichmann’s defence at Nuremberg – that he was doing his duty by doing his job. And he was indeed ‘only dutifully doing his job’, which was why Hannah Arendt called it the banality of evil.

**Kantian deontology**

The mention of duty tells us that we are now in another of the domains of moral philosophy – Kantian deontology. Kant’s position was the polar opposite of the consequentialists. He thought that actions were right or wrong in themselves, independent of the outcome. The fact that a morally bad act might eventually result in positive consequences does not make that act morally good. For example, a homeless old lady gets beaten up, but then in hospital she is discovered by her long lost wealthy daughter, and they live together happily ever after.

Kant requires us to use our rational minds to work out a set of moral maxims that are universally true. Once worked out, he thought it one’s ethical duty to follow the maxim come what may. Deon is the Greek for duty; which is why his ethical system is called deontology.

It turns out that it is an amputated version of Kantian deontology has come to preside in managerialist organisations. Once policies and procedures are in place, managerialist deontology decrees that it is one’s professional duty to follow them. Right and wrong becomes equated with compliance, with rule following. Entirely missing is Kant’s injunction to think about the rightness of the policy each and every time. It seems to me then that unlike Kantian deontology, which despite all its problems, is essentially a way of trying to be ethical, managerialist deontology is actually anti-ethical, because without thought there can be no ethics.

But where do the rules and policies come from? Here is a true story that also serves as a parable.

A novice school teacher was really struggling with discipline. At the start of the second year he asked the pupils to copy a set of rules into their notebooks, rules which clearly linked punishments with misdemeanours. Life became easier because now the students were tending to accept punishments without protest. It appeared to them that the teacher was as helpless as them, obliged to follow the same set of rules as them. He said to them forlornly: I am sorry but I have to punish you for this misdemeanour because it says so in the rules. And they forlornly accepted.

The world is not as simple as this classroom, and even the classroom is not as simple as I have portrayed it. However, the very simplicity of the story allows us to see something of the ideological nature of rule creation as well as something about our tendencies to comply with them.

Just a few weeks ago a friend at a London university was witness to police overreacting and arresting a White English colleague.
When going through security into a building, he had foolishly made a flippant comment about his bag containing a bomb. The comment triggered a draconian procedure, which was followed regardless of whether it made any sense or not. My friend spoke up and stood up for his colleague, saying that it was obvious to everyone that this person was not a bomber. For taking this ethical stand and speaking up against a wrongdoing, my friend was put through a disciplinary on the grounds that in acting as he did, he had brought the university into disrepute. The disciplinary was initiated by his head of department, who said in a forlorn voice not unlike that of the school teacher, ‘But what else could the university do?’.

This perverse form of deontological ethics not only allows one to be able to inflict harm on another without remorse, it actually enables one to feel virtuous whilst doing so. ‘It’s a dirty job; but somebody has got to do it’.

For example:

When Theresa May was Home Secretary, she put in place a policy that required Home Office staff to find and forcibly remove migrants who had no right of stay. To encourage them she also put in place a bonus system. The language in the official policy was sanitised, couched in the objective-sounding language of managerialism, referring to the forcible abduction of human beings as ‘objectives’, ‘business goals’ and even ‘levels of ambition’.

Once payment is linked to targets, then the employee’s target becomes the bonus and everything else falls by the wayside. Twenty-three per cent of those working in enforced emigration received bonuses. As we now know, their zeal led to many innocent lives being destroyed. In compensation the Home Office has paid out about £21 million so far (Gentleman, 2018).

This vignette not only shows ‘how could they?’, it also shows how this kind of perverse managerialist deontological ethic allows the employee, like Eichmann, to feel proud and virtuous whilst causing the suffering of others.

Another aspect of the answer to the ‘how could they?’ question has to do with the atomisation of the work place. When tasks are cut up and distributed over a conveyor belt like process, then what one is mostly preoccupied by is one’s own contribution in the scheme of things. Consequently no one gets to see the full picture. This is particularly the case with the imposition of internal markets, which results in rivalrous relations between sections of the same institution; with people in one silo having little idea of what is taking place in the silo next door. Gitta Sereny describes the self-same process in her book *The German Trauma*; it was exactly this sort of strategy that was deliberately employed by the Nazi elite so that very few were aware of the full horror of what was taking place. In this way they managed to hide the fullness of the horror in plain sight.

**Divesting responsibility**

In such situations, who is to blame? Who is responsible? The bureaucratic protocols that are designed to ensure transparency and to function as instruments of accountability don’t seem to be of much help. And in actual fact they are regularly used as a get-out-of-jail-free-card.

For example: the NHS outsourced a routine operation to a private hospital. The surgeon cut through a vein which resulted in the patient haemorrhaging to death because the hospital did not keep blood on its premises, nor the equipment necessary to deal with haemorrhages. On the television programme *Panorama* Jeremy Vine asked the Head of Care Quality, one Tracy McNeill:

> Isn’t it just terribly obvious that you need blood in a hospital that is doing operations in case somebody has a haemorrhage?'

Astonishingly, she felt able to answer no, because, she said,

> ‘we met all of the criteria and all of the regulations. It was not a requirement’ (Panorama, BBC 1, September 30, 2009).
Responsibility is hard to pin down despite the fact that the avowed function of bureaucracy and hierarchy is to lay down clear lines of accountability. This is because hierarchies can also function in ways that are the exact reverse of this. A case in point being the military.

The General, despite having activated strategies that will result in untold deaths, is able to sleep easily for several reasons. First he has given his orders in the service of something greater than him – his country, his people and so on. Second, from his perspective there are no persons present – just entities like battalions, fleets and squadrons to be moved from here to there on the chessboard. Third, his hands are clean as he does not have to do the actual dirty work of killing. Meanwhile the soldiers doing the dirty work of killing also need feel no guilt or remorse because they are simply following orders, and so they have no personal responsibility for the consequences of their actions.

My point here is to show how hierarchies can be used to disperse responsibility in such a way that it seems to disappear whenever you try to grasp it. It always seems to be elsewhere. But the system is not completely efficient. Many a soldier and general does get traumatised by what they are required to do. I will have more to say about this shortly.

It seems to me that in very many ways the CEO sitting in the Board Room is little different from the General sitting in the War Room. They are both removed from the action. Directives and requirements emanating from both Rooms are to be precisely followed, else court marshals and disciplinaries will follow. Not allowed to think, both employee and soldier are rendered into castrated Kantian beings, objects to be manipulated.

**Accountability: Accounts vs. Giving an Account**

It is tempting to make a neat dichotomy by ascribing the detached It/It perspective to the baddies, the faceless bureaucrats, and the entangled I/Thou perspective to the goodies on the front line doing the face to face work. But this would be a mistake for very many reasons, one of which is that the detached third person perspective has triumphed to such a degree that it has become the cultural norm in managerialist institutions; and this being a culture, all are necessarily caught up in it and by it, resulting in ‘The Corrosion of Character’ as Richard Sennett named it many years ago.

But not everyone embraces this sort of culture. I, like you, have had numerous experiences of warmth, concern and care from many who went the extra mile for no good reason apart from that it was the decent thing to do.

But it is hard to sustain this kind of good will under the constant pressure to account for oneself to the auditors.

The kind of account that the auditors require are quite literally, a set of accounts consisting of numbers, tables and charts. Meanwhile the way of accounting from the first person perspective is to give an account, by which I mean a narrative, and a meaningful narrative at that: ‘this happened, and then that happened, because of which I did such and such’. But this is of no interest to the auditors who only listen when spoken back to in their language. And so experiences on the front line, couched as they are in the first person, have to be translated into the auditor’s language, that of the 3rd person. But when lived experience gets translated into data, the experience itself gets corrupted and distorted.

So what happens when persons find themselves in conflict with the rule bound deontological ethic of managerialist institutions? In authoritarian contexts, as the Milgram electric shock experiments demonstrated a long time ago (Milgram, 1963), when caught between doing the right thing and the thing one is told to do, one is prone to capitulate and do what one is told to do. This is particularly the case when the possibility of paying one’s mortgage depends on it. Even so, this sets up a terrible tension within the individual. This tension creates a kind of schizophrenia, a kind of madness,
that results in a kind of trauma which these days goes by the name of stress. But in actual fact it is better called distress.

The notion of stress is borrowed from physics and so it invites one to look for its causes rather than reasons. If the cause of the sick days is stress, then the obvious solution is to de-stress. Whether one calls it stress or distress, the thing is, that everyone in the institution is affected by it – even the bureaucrat as a report out just a few days ago revealed:

Civil Servants took more than 300,000 days off over mental health last year… In January it was disclosed that more than a quarter of civil service sick days were the result of mental ill health. (Zeffman, 2018)

To this end,

The Department of International Trade had set up a ‘tranquillity room’ in which officials can de-stress. Fourteen departments have set up wellbeing rooms to offer a ‘calm private space’. (Zeffman, 2018)

Responding to this situation, the Cabinet Office proudly announced

Good workforce health… is fundamental to delivering brilliant public services… Supporting the mental health of civil servants is a key part of our ambition to be the UK’s most inclusive employer by 2020. (Zeffman, 2018)

The Cabinet Office makes no reference whatsoever to the deteriorating working conditions they themselves have imposed on civil servants – this being the real reason for the stress and distress. And let us be very clear about this: in these situations stress, depression and anxiety are not signs of mental ill health. Stress and distress are rational responses to being asked to tolerate the intolerable; they are also ethical responses.

To my mind it is the ones who take sick days who are in fact the healthy ones; they remain in touch with their own humanity which is why they find themselves in a state of unbearable tension. Meanwhile the ones who are seemingly resilient enough not only to carry on, but also to flourish whilst carrying on, do so by disconnecting from humanity per se. They have become efficient automatons. It is they who are suffering from a mental illness, and if not a mental illness, then certainly an ethical illness. In the ‘psy’ professions they are known as psychopaths.

As Gaita says:

We cannot radically rescind from the ethical constitution of our inner lives without becoming unintelligible to ourselves. (Gaita, 2008, p.53)

What all of this also shows is that hierarchies are unable to machine away guilt and responsibility in their entirety. Many soldiers and generals, no less than professionals and bureaucrats do end up being traumatised by what they are being required to do and the conditions that they are required to do it in.

By the device of medicalising the problem as one of stress and mental illness, the problem is both individualised as well as decontextualised. The problem is ‘in’ the employee, and nothing to do with the circumstances. And then the suffering employee is offered tokenistic forms of help like tranquillity rooms, mindfulness and happiness trainings, and workshops in resilience and hopefulness. The intention of all these technologies is to bewilder suffering persons into thinking that their suffering has nothing to do with the circumstances, and everything to do with their mistaken habits of thinking and their mental illness.

**Psychology**

In line with mainstream economic theory, the managerialist conception of the human condition is individualistic, cognitivist and mechanistic; it also believes that humans are motivated entirely by self-interest. This was the view of the first guru of ‘scientific management’ theory, Frederick Taylor, who said over a hundred years ago:
hardly a competent workman can be found in a large establishment... who does not devote a considerable part of his time to studying just how slowly he can work and still convince his employer that he is going at a good pace. (Taylor, 1911, p.30)

To compensate for this tendency, Henry Ford paid his assembly line workers a wage significantly higher than the going rate. This did not seem to help to sufficiently and so a culture of scrutiny and control arose in the workplace, to ensure that workers kept their noses to the grind stone. At the heart of this culture is the belief that the worker is not to be trusted.

This viewpoint came to be increasingly formalised in management theory in the latter part of the twentieth century. In the 1950s James Lincoln author of the influential work Incentive Management seemed to better understand the worker.

The industrialist concentrates on machines and neglects man... the goal of profit [for the stockholders] will engender no enthusiasm in the workers.

Sounds good. But it turns out that he actually thought that:

Selfishness is the driving force that makes the human race what it is...it is the force that we must depend on, and properly guide, if the human race is to progress.

But how to guide? Lincoln realised that when it comes to motivation:

[much more important than money] is recognition of our abilities by our contemporaries and ourselves. This recognition occurs with the worker being rated by his peers and bosses, by all those who have accurate knowledge of some phase of his work. On this rating he is rewarded or penalized. (Lincoln, 1951, quoted in Fromm 2010, pp.233–9)

Recognition, acceptance, belonging; having realised that these are all indeed human necessities, they are opportunistically exploited and put in the service of manipulating the worker. Ratings are used to stoke feelings of jealousy and rivalry between workers in their attempts to become the ‘Employee of the Month’. But notice: recognition itself has been reduced into something called a rating, a number. Ratings on pieces of paper are delivered from a third person perspective and are very different from a first person experience of recognition. Real recognition takes place through the eye of the other, and it has to be seen in the eye of the other for it to be a meaningful experience of recognition.

The rhetoric of recognition is a cover for the fact that managerialism believes that the worker cannot be trusted, which is why it requires the worker to be continually reporting back to them. This is the real rationale behind rating systems, 360 degree appraisals and the like. Whatever their avowed rationale, they all function as forms of surveillance. In this way the managerialist institution has turned itself into another one of Jeremy Bentham’s inventions, the Panopticon, in which not only is everyone is watching everyone else with a critical eye, one learns to watch oneself with the same critical eye. Continually scrutinised, the end result is an ongoing toxic state of fear and anxiety. No wonder so many find that they cannot continue.

Before moving on to the final section, I want to say something about selfishness. The fact that all humans have the capacity to be selfish, does not mean that this is what human beings are intrinsically like. If you create desperate circumstances then people will behave in desperate ways. It says nothing about their true nature.

In my final section I will focus on the managerialist institution called IAPT – which is allegedly Increasing Access to the Psychological Therapies. What follows will show how perverse versions of both consequentialism and deontology are being used by IAPT to produce illusory realities.
Customer choice: Privatisation by another name

IAPT has embraced the neoliberalist’s veneration of the marketplace and also ‘Customer Choice’. IAPT says that when patients are given choices, they are more likely to engage with the treatment; the sense of control is integral to recovery.

How to give the patient more choice?
And choice over what?

To this end the Department of Health initiated a consultation entitled ‘Liberating the NHS: Greater choice and control’. (Notice by the way the presence of the weasel word ‘liberating’).

In paragraph 43 they say that they want to give customers more choice, but in the very next paragraph they tell us that there will be no choice as to the kind of treatment they will receive, which will continue to be ‘NICE... approved... evidence-based therapies’ in other words CBT. But they will be offered choices about which provider to go to for their treatment.

To enable the customer to have choice, the DoH has to encourage providers other than the NHS into the mental health market place. This it does by saying that it is a business opportunity, an opportunity to make money. Tenders are put out. Organisations that qualify and allowed entry into the mental health market place are called AQPs which stands for Any Qualified Providers (AQP). However, not many take up the offer. Very often the mental health market place has just two stalls, the NHS and one other provider, one of whom proudly said:

_It has certainly enhanced patient choice: clients have a choice between us and long NHS waiting lists._ (Griffiths et al., 2013, p.39)

But Customer Choice is a Trojan Horse; it is a rationalisation for outsourcing, which in turn is a covert way of privatising the NHS. The NHS is being sold off as a way of increasing customer choice, because apparently customer choice is good for the customer.

Anyhow, through the tendering process commissioners and providers agree a tariff – a system of payments linked to how many patients are seen (through put), how quickly they are seen (waiting list times), the severity of their problem (caseness) and whether or not they have recovered (recovery).

To ensure that there is no wastage, the contract between commissioners and AQPs is a zero hour contract. They will only get paid for work completed; they call it Payment by Result (PbR). The effect though of this arrangement has been to produce a number of perverse incentives that have corrupted what is delivered and the way that it is delivered.

Because the AQP only gets paid if and when it meets various elements of the tariff, ‘meeting the tariff’ becomes their central preoccupation. Their task is made all the harder because tariffs have been set at unrealistically low levels based on Layard’s claim that it costs just £750 for CBT to cure a patient; independent studies show that the delivery of the treatment actually costs something in the region of two to three thousand pounds (and it doesn’t actually cure patients – but let’s leave that aside for now). How to squeeze two thousand pounds worth of work out of £750? The answer of course is by being more efficient. In this case what efficiency actually means is requiring employees to do more for less money, by giving the patient less whilst claiming that it is better, and by plain and simple cheating – by cooking the books. I begin with the first of these, employees.

Psychological Wellbeing Practitioners (PWP) working in IAPT tend to be poorly paid and carry very heavy workloads – 45 cases at any one time and tasked with completing 250 treatments a year. AQPs also tend to be understaffed. This puts practitioners under enormous pressure. Said one PWP anonymously,

_Our recovery targets set by the CCG have increased from 50% to 60% ... I’ve not had proper clinical supervision for months, only_
micromanagement supervision which looks at client improvement and throughput, so am finding it to be continued high stress and low satisfaction because I’m not learning anything other than how to meet targets and am looking to move away from IAPT.

Ironically, to try to pre-empt the departure of burnt out practitioners, some IAPT services are actually offering practitioners the very same manualised treatments that they have been struggling to deliver to other suffering individuals.

Efficiency has also come to mean diluting the service being given to patients; session times are reduced – down to 30 minutes in some cases, and the number of sessions are habitually reduced from 24 to 12 to 6.

This is a bit like arbitrarily reducing the dosage of an antibiotic that is known to cure an infection if taken three times a day for seven days down to half a tablet a day for three days.

But managerialists have become masters at making it seem that a cut to the service is magically an enhancement of that service. In IAPT teaching materials called Reach Out, we discover that it is for the benefit of the patient that face to face meetings are being replaced with telephone contact.

\textit{Low Intensity treatment is more convenient to patients,… [requiring] less support from a mental health worker in terms of duration or frequency of contact, and is often delivered in non-traditional ways such as by telephone or using the internet.} (Richards & Whyte, 2011, p.7; emphasis added)

Notice more weasel words, convenient and non-traditional.

Let me move more directly to cheating of which there are two kinds – the official approved kind and the behind the scenes cooking the books kind. Here is an instance of the official kind.

Payment is triggered for each completed treatment. NHS England have decreed that if a person \textit{attends just two sessions}, then that constitutes a \textit{finished treatment}. After which the AQP can collect payment. \textit{Finished Treatment:} This is a count of all those who have left treatment within the reporting quarter having attended at least two treatment contacts, for any reason including: planned completion; deceased; dropped out (unscheduled discontinuation); referred to another service or unknown. (NHS England 2016, p.11.)

Wow. I obviously went to the wrong sort of therapy school.

Meanwhile, here are some of the unofficial but commonplace ways that the books get cooked.

One IAPT practitioner revealed:

\textit{In the service in which I work, all assessments are marked as ‘assessment and treatment’ [which makes it look like more people have been treated than is the case] ...}

\textit{When I discussed this concern with management, I was told that ‘NHS England have told us to do it this way’ which would indicate either that the service is wilfully lying or NHS England are actually aware of this and are allowing the data to be manipulated.} (Serioussham, 2016).

Shortly after raising this issue Serioussham was made redundant. He wrote to the National Audit Office (NAO) about the malpractice. The NAO said that they could not look into this because their budget was so small (ironically due to more managerialist cuts and ‘efficiencies’), that they did not have sufficient resources to launch an investigation.

Another scam is to shift patients whose scores are not improving onto a non-IAPT list during or after treatment. Having done this, the data will show the service as having met two targets: the accessing services target and the waiting list time target. Two parts of the tariff will be ‘met’ for which the AQP will collect payment. The non-IAPT data does not feature in any of the calculations and so disappears from view. Most importantly,
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the Treatment target is not degraded by any record of the lack of improvement.

Meanwhile, when someone who has been declared ‘recovered’ from their mental illness following treatment, ‘relapses’ and returns to the service for more help, then policy dictates that they have to see a different practitioner from the one they saw for the first treatment. This is because it will count as a new ‘treatment episode’. In other words, it will look like two people have been seen once, rather than one person twice. The glittering statistics will show two recoveries rather than one failure, and two sets of payment will be collected.

In some services when a patient’s score does not show sufficient improvement at the end of treatment,

They just sit on the case load until they recover because we know that some people spontaneously recover. [After some weeks or months] you call them up. And you say, ‘Oh, how are you feeling? Can we run through these questions (Alice, interview, 2017).

Perhaps the most perverse of incentives is the one which leads to patients being actually refused treatment. It is common knowledge that

AQPs avoid taking on the more complex cases because they ‘aren’t going to be your quick win, these are going to be 20+ sessions who are going to cost them (Griffiths et al., 2013, p.38).

Said a provider:

I’ll be brutally frank, if I see a person on AQP who’s presented to me… [with complexities], I’ll get them closed down enough to discharge them from AQP, and refer them to our main counselling service. (Griffiths et al., 2013, p.36)

In other words, for many of those suffering from complex issues, ‘customer choice’ ends up becoming not only ‘no choice’, but ‘no treatment’.

Conclusions

I have been arguing that managerialist ethics is devoid of ethics. I have been arguing that managerialism utilises perverse versions of consequentialism and deontology to produce illusory realities, and to create authoritarian regimes to enable the illusions to be sustained.

The desired ends (targets) are used to design corrupt means (policies) to make it more possible to look like the institution is meeting its targets. Once these policies are in place, managerialist deontology decrees that it is the professional duty of employees to follow these policies without question. To question the ethics of institutional activity is made a disciplinary offence. Look at the fate of whistle blowers. Clearly, managerialist deontology is nothing other than a means of coercion and control.

We have also seen that managerialist institutions mobilise regulations in two very different ways, sometimes to defend, sometimes to attack. On the one hand regulations are used to absolve institutions of responsibility. A case in point being Tracy McNeill arguing that there is no case to answer because ‘we met all of the criteria and all of the regulations’.

On the other hand at the level of the individual worker, the institution can make malicious use of regulations to blame the blameless. A case in point being the charge levelled at my friend, that of ‘bringing the university into disrepute’.

I want to end on two points, the first of which is this:

Although institutions might be able to use regulations and documentary evidence to absolve itself of responsibility, the experience of responsibility is not so easily escaped at the individual personal level. On paper, the hospital had no case to answer. But my guess is that even though Tracy McNeil used regulation to brazenly defend the hospital, if her humanity has not completely atrophied, she and other individuals are bound to feel bad about what has occurred. To voice guilt and remorse would be dangerous as it
would be construed of as being disloyal to the organisation. I imagine that what might happen next is that the guilt is repressed and will continue to fester until, like the civil servants, she is forced to take time off suffering from a ‘mental health’ issue.

My very final point is this: in asking ‘How could they?’ I have let myself (and perhaps you) off the hook because I have made it seem that I am not a part of the ‘they’. Like the Russian peasantry, we all keep cooperating and keep an insane system going. We too tend to say in that self-same forlorn voice, ‘but what else can we do?’.

I have no neat and ready answer, but surely continued compliance is not an option.

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