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The Conditionality of Trusting Caseworkers in the Social Services Sector – Insights from Germany and Denmark

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Abstract

Citizen trust is a prerequisite for the success of service provision. However, working relations are typically shaped by power asymmetries and one-sided dependencies, contributing to cautiousness towards or distrust of caseworkers (Dumbrill, 2006; de Boer and Coady, 2007). This article sheds light on the conditions and mechanisms that lead (some) citizens nevertheless to trust their caseworker. Based on thematic coding of semi-structured interviews with twenty-five German and sixteen Danish welfare users, our findings elucidate how shared problem perceptions and positive experiences in direct working relationships with committed, citizens-oriented caseworkers mitigate structural asymmetries and allow trust-building. In particular, they underscore the importance of personal bonding and positive emotions, including feelings of sympathy, or even friendship, and of being seen, understood and respected. Our article strengthens the interpersonal, micro-level perspective on trust-building in welfare service provision and provides new empirical insights into the role of personal relations in trust-adverse institutionalised contexts.

Keywords: welfare state; trust; working relationships; frontline workers; citizens

Introduction

With the development from the traditional-hierarchical to the service-oriented welfare approach, trust has become a key element in social services provision. The realisation and effectiveness of welfare support depend decisively on the cooperation between public frontline workers and citizens seeking social services (Wagenblass, 2004; Fabel-Lamla *et al.*, 2012; Brown and Calnan, 2013). It is widely agreed in public administration and social policy scholarship that frontline workers seek to build trust relations with clients for mostly functional reasons (Fabel-Lamla *et al.*, 2012; Becker-Lenz, 2014; Cossar *et al.*, 2016; Van de Walle and Lahat, 2017; Senghaas *et al.*, 2019). Mutual trust is seen as essential particularly in person-centred social services aiming at behavioural change where caseworkers depend on clients' willingness to collaborate (Fersch, 2016; Stensöta and Bendz, 2020).

The characteristics and behaviours that generally make frontline workers appear trustworthy or untrustworthy in the eyes of citizens as well as the approaches and strategies frontline workers use to encourage citizen trust have been widely investigated (Behnia, 2008; Fabel-Lamla *et al.*, 2012; Rautio, 2013; Fersch, 2016; Lundahl *et al.*, 2020; Van de Walle and Migchelbrink, 2022). However, much less is known about citizens' perceptions of trust in the provision of social services, their trust decisions and behaviour (cf. also Tiefel and Zeller, 2014: 336). In this regard, a relational perspective is needed, which takes into account the “interdependencies and reciprocities of trust and distrust between

citizens and governance actors, and the way such relationships are institutionalised in specific [. . .] contexts” (Lahusen, 2020: 3; cf. also Behnia, 2008; Rügger *et al.*, 2021).

Even if frontline workers are committed and able to convey signals of trustworthiness, they may fall short of convincing citizens to actually trust them. In fact, encounters with public frontline workers are in many ways shaped by potentially trust-adverse conditions. Social welfare institutions often involve elements of institutionalised mistrust towards citizens (such as eligibility checks, controls and sanctions). Welfare institutions risk to be seen negatively when elements of control and coercion are more salient than the provision of help and care. Frontline worker-client encounters are typically characterised by considerable power and knowledge asymmetries, dependencies, and significant differences in risk exposure (Wagenblass, 2004: 107–10; di Luzio, 2006: 552–4; Lundahl *et al.*, 2020: 174–5). Even where client-oriented, participatory approaches are implemented, frontline workers take final decisions and exert potentially far-reaching influence in sensitive areas of citizens’ lives. Based on experiences of a required exposure of the private self, stigmatisation and moral devaluation, clients are often ashamed, concerned or afraid and distrustful when meeting frontline workers (e.g., de Boer and Coady, 2007; Buckley *et al.*, 2011; Aamann and Dybbroe, 2018; Gibson, 2020; Rügger *et al.*, 2021; Schneider and Zschache, 2021). Instead of opening up, clients may interact with frontline workers strategically, revealing information only when necessary to achieve their own goals, engaging in ‘impression management’ and ‘playing the game’ of being a committed, cooperative client (Dumbrill, 2006; Klatetzki, 2019; Mik-Meyer and Haugaard, 2021; Rügger *et al.*, 2021; Schneider and Zschache, 2021).

Our own empirical research with families seeking the support of person-centred social services (e.g., at the jobcentre, family services, or child welfare office) confirms this pattern of fragile trust relationships. It shows that trust in frontline workers tends to be the exception, while pragmatic approaches or even forms of scepticism or distrust predominate (Brus, 2021; Schneider and Zschache, 2021; cf. also EnTrust, 2021). Building on these insights, in this article, we seek to elucidate the conditions and mechanisms that are relevant for trust-building from the citizens’ perspective taking their perceptions and decisions into account and strengthening the relational understanding of trust-building.

Trusting in asymmetric relations

In line with a widely shared view in welfare services research, we understand trust as a positive expectation towards the future action of another actor (e.g., Wagenblass, 2004: 106; Becker-Lenz, 2014: 357; Rügger *et al.*, 2021: 2). Rather than perceiving trust as a relatively stable personal disposition, we follow the assumption that trust is built in and shaped by interactions in specific contexts (e.g., Behnia, 2008; Blöbaum, 2022: 42–44). Trust, then, is “not a personality trait [. . .] but the decision to take a risky action” (Schweer, 2008: 17–18) in a situation of uncertainty (Luhmann, 2014: 27–37). What is crucial in asymmetric power relations like those between clients and frontline workers is the trustor’s readiness to be vulnerable to the will and action of another person (Baier, 1986: 235; Baghrmian *et al.*, 2020). Accepting such vulnerability requires ‘good grounds’ (Baier, 1986: 235). In social services, citizens require particularly strong reasons to trust frontline workers due to the unequal distribution of the risks involved. Uncertainty about frontline workers’ judgements and decisions and their serious and potentially harmful consequences for citizens’ lives – being coerced to take on a certain job, move house, or have one’s children taken away – are both a requirement and a major obstacle to trust (di Luzio, 2006: 553).

To accept vulnerability, it is necessary for concerned citizens to recognise that there is a problem, a lack of own resources to solve it, and a need to accept help (cf. Blöbaum, 2022: 40). In addition to such a ‘burden of suffering’ (Rügger *et al.*, 2021: 8), research has underscored the importance of a basic agreement between clients and caseworkers concerning goals, interests, expectations, and understanding of needs. It stands to reason that trust-building will prove more difficult if views diverge about the nature of the problem and the object of the working relationship

(Buckley *et al.*, 2011: 104–5; Rügger *et al.*, 2021: 10). Following this relational perspective, we assume that trust-building between clients and their caseworkers is based on shared problem perception, recognition of needs, and goal orientation.

Secondly, accepting vulnerability requires good grounds for assuming that one's trust is being placed in the right target (O'Neill, 2018). Positive expectations towards the other are usually built on perceptions of trustworthiness in a concrete trust relationship (Behnia, 2008: 1433). While encounters between clients of social services and frontline workers are embedded in a general context of asymmetrical relations, clients' decisions to trust are shaped and formed in the specific working relationship with their caseworker. In the literature, a features-oriented perspective prevails. Overall, two dimensions of frontline workers' trustworthiness stand out: first, there are perceptions about professional expertise and (problem-solving) competence (Wagenblass, 2004: 142; Behnia, 2008: 1427, 1433; Tiefel and Zeller, 2014: 337–8; Nikolova *et al.*, 2015). At the same time, many scholars have argued that ascribed capability is not enough. A moral, norms- and value-based component is imperative. The act of trusting requires the trustor to expect that the other is not just able but also *willing* to provide help (Baier, 1986: 235; Taylor-Gooby and Wallace, 2009; Rügger *et al.*, 2021: 2; Blöbaum, 2022: 41). Elaborating on the notion of 'good will' (e.g., Baier, 1986: 235), public services researchers emphasise the importance of frontline workers' behaviour being consistent with institutional or professional norms, such as being oriented towards the common good, social welfare, and social justice (di Luzio, 2006: 551; Becker-Lenz, 2014: 369), as well as following procedural rules of fairness, equity, and respect (Van Ryzin, 2011; Van de Walle and Migchelbrink, 2022). This includes exhibiting professional morality (Fersch, 2016) and having a caring attitude (Behnia, 2008; Fabel-Lamla *et al.*, 2012: 807). When it comes to specific norms and understandings of what is good and appropriate and thus trust-promoting, socio-cultural and system differences may also become relevant (Six, 2007: 297).

Beyond notions of perceived capability and norm orientation, there is growing debate about the role of the nature and quality of the relationship between clients and their caseworkers. While some scholars argue that client trust is mainly impersonal and shaped by perceptions of caseworkers' professional, role-specific handling of the working relationship (e.g., Wagenblass, 2004; di Luzio, 2006), others underscore the additional relevance of the personal level of the relationship and of whether and how citizens experience their caseworkers as 'humans' and not just as 'professionals' (e.g., Becker-Lenz, 2014; Tiefel and Zeller, 2014; Rügger *et al.*, 2021). The latter perspective also draws attention to the role of emotions and affect, such as sympathy and feelings of closeness and attachment, in the formation of trust between citizens and caseworkers (e.g., de Boer and Coady, 2007; Thrana and Fauske, 2014; Tiefel and Zeller, 2014). This focus on emotions – especially emotional bonding – is crucial in that it stresses the relational, reciprocal perspective on trust-building.

Against this backdrop, we assume that positive experiences of the direct relationship between clients and their caseworker are crucial for the formation of trust. As we will show, such positive, trust-promoting experiences are formed in working relationships that are perceived by clients as comparatively less asymmetrical, and as also involving elements of personal trust.

In order to gain a deeper understanding of what makes citizens trust their caseworker and accept making themselves vulnerable to their decisions and actions, we focus on explicit accounts of citizens trusting their caseworkers in direct encounters. To elucidate the conditions and mechanisms of trust-building, we analyse (1) the ways in which citizens' problem perceptions and a basic agreement with caseworkers' views form a precondition for citizens' trust; and (2) how trust develops on the basis of citizens' direct experiences with caseworkers, often going beyond impersonal client trust (di Luzio, 2006) and involving elements of personal trust.

Data and methods

This article builds on a larger qualitative study about citizens' experiences and perceptions of trust and distrust in their direct encounters with frontline workers of social welfare institutions in seven European countries (EnTrust, 2021).¹ The study focuses on social welfare areas offering support to families where trust plays a relevant role in service provision. It thus includes person-centred, people-changing, social-work-based services from across various social welfare domains, such as employment, child welfare, and social aid. From that study, we learned that citizens' lack of trust or actual distrust of frontline workers are deeply ingrained, and that trust is rather an exception across all countries. Most of the citizens feel highly vulnerable to the decisions and actions of frontline workers and seek to protect themselves from intrusion into their private lives. Yet, among the countries analysed, Denmark and Germany emerged as those where citizen trust occurred more regularly, if certain conditions were met. Against this backdrop, we decided to analyse in further detail those instances where German and Danish citizens trust caseworkers, capturing a variety of citizen experiences in the context of two different welfare state regimes.

Denmark builds on the tradition of a universal welfare model (e.g., Bogedan, 2006) that is assumed to contribute to high levels of generalised trust and citizen trust in welfare service workers (Kumlin and Rothstein, 2005; Fersch, 2016; Betkó *et al.*, 2022). Germany is shaped by a conservative welfare model where welfare support outside the insurance systems follows the principles of need and subsidiarity and is largely governed by eligibility checks and means-testing (e.g., Schmid, 2010). The latter is assumed to contribute to lower generalised trust than in universal welfare states and to negatively affect citizens' trust in welfare service workers (Kumlin and Rothstein, 2005; Jewell, 2007; Betkó *et al.*, 2022; EVS, 2022). During the past decades, welfare regimes of Denmark and Germany converged following a broader trend among industrialised countries to introduce new workfare and activation policies governed by conditionality-principles (Greve, 2016; Van Berkel *et al.*, 2017). Social workers traditionally play a more influential role in Denmark at the frontline of policy implementation than in Germany and research shows that many of them use their discretion seeking to mitigate the impact of neo-liberal policy reforms (Caswell *et al.*, 2017: 8; Caswell and Larsen, 2017). As for child welfare, it is useful adding that both countries follow a family-service model focusing on preventive, supportive, and therapeutic measures for and with the family as a whole, combined with a child-centric orientation where child endangerment is at stake (Wolff *et al.*, 2011; Pösö *et al.*, 2014). Notably, comparative studies suggest that in social-democratic, statist Nordic welfare systems, families are more likely to accept state support and to trust caseworkers of child welfare services, while in the German conservative and subsidiarity-oriented system families' cooperation and trust are more difficult to generate (Hetherington, 2005).

We draw on a total of forty-one in-depth semi-structured interviews with citizens using different kinds of social goods and services for families. The interviews were conducted between autumn 2020 and spring 2021 and comprise sixteen interviews from two Danish municipalities and twenty-five from two German municipalities. Our sample included a broad range of citizens as users of various welfare services, including public employment, social and health services, and child welfare or family services. What they have in common are experiences of repeated face-to-face encounters with assigned caseworkers (typically civil servants trained in public administration or professionals from the areas of social work, social pedagogics, psychology and related fields) focusing on their individual case and person-centred forms of help (in contrast to standardised forms of financial aid). To fit our sampling criteria, the type of support these citizens requested needed to involve a relevant level of discretion on the frontline workers' side for trust to be a relevant element of the working relationship. In many cases, our interviewees were dealing with a complexity of problems, involving economic, social, and mental issues, some needed support for rehabilitation in the workplace, others required support for childrearing or inclusion assistance for persons with disabilities, a few have their children in custodianship or

out-of-placement care, have escaped from domestic violence, or needed counselling and mediation, for instance, after a divorce/separation or in terms of job counselling and placement.

The data corpus as a whole had already been coded and analysed for the purposes of the larger project (EnTrust, 2021). For the purposes of this article and in order to better understand the conditions for trust-formation in a context where scepticism and distrust seem the default setting, we reanalysed the interviews focusing on those parts where respondents expressly describe trust relations with caseworkers. This allowed us to study descriptions and interpretations of a working relationship of trust with a caseworker from the citizens' perspective. The main components of citizen trust – shared problem perceptions and positive experiences of work relations with caseworkers – were derived from the literature (e.g., Behnia, 2008; Buckley *et al.*, 2011; Rügger *et al.*, 2021) and helped us to identify interview passages for the more in-depth text analysis. Employing an interpretive, grounded theory-based approach (Bryant and Charmaz, 2007: 18), we engaged in a secondary analysis of these passages to understand, in greater detail, citizens' problem definitions, related expectations, and the main reasons for trusting their caseworker.

Findings

Agreeing on problem perceptions and goals

Our analysis of interview passages in which German and Danish citizens narrate about trusting their caseworker clearly show that a shared understanding of the problem and purpose of the interaction is a fundamental precondition for clients to build trustful working relations with caseworkers. Its importance becomes particularly evident when looking at the data corpus as a whole, which contains numerous narrations about experiences where that understanding was missing, and clients had different views or completely disagreed with a caseworker. In such instances, they were unwilling to expose themselves to caseworkers' decisions, sought to protect their private or family lives and rejected caseworkers' actions as unwanted interference in their own affairs, thus refusing to cooperate and accept advice (cf. di Luzio, 2006: 559). Often, they tried to interact strategically to keep interventions at a minimum. Indeed, several of our interviewees in both countries recount forms of interaction that typify 'impression management' and 'playing the game' with the purpose of protecting themselves against negative consequences and harm. Disagreement with caseworkers' assumptions, e.g., about their child-rearing capabilities or their willingness to work, is often associated with distrusting their actions, and a reduced willingness to confide in them. Independently of the specific welfare context, distrust towards frontline workers often is linked to perceived opaqueness and arbitrariness of decisions, judgemental and patronising treatment, lacking understanding for citizens' problems and vulnerability, and the fear of being pushed into unwanted compromises. For instance, in both Germany and Denmark we encountered jobcentre clients expressing distrust because of frontline workers' interference with personal life decisions and frustration about the permanent uncertainty of support, sometimes not knowing how to make ends meet. In the case of child welfare and family services, uncertainties could concern fears like having one's children removed or not knowing whether and when a child or the family as a whole would receive the support they needed. Many respondents feel misunderstood by their caseworker and report having clashing perceptions of problems and appropriate forms of remedial action. This leads them to either lack trust in caseworkers' ability and commitment to help, or even distrust them to the extent that they expect their decisions to harm them.

Against this backdrop of negative experiences, we now turn to our main focus of interest, namely instances where citizens expressly state they trust a frontline worker. First, we investigate whether their trust is based on a shared problem view and agreement about the objective of the working relationship, as the literature would prepare us to expect. Indeed, all respondents expressing trust in their caseworker do this with reference to a shared problem perception.

Furthermore, they are aware that they cannot solve their problem(s) alone and require support (one of di Luzio's requirements for client trust, di Luzio, 2006). Accordingly, most of them stress that they approached the welfare service on their own initiative and expect their caseworker to help them mitigate or overcome their problem(s). This is illustrated, for instance, by the case of a German interviewee who contacted the general social service at the child welfare office because of conflicts with her ex-partner.

R: I've sought contact myself because I saw problems with my small son after the separation from my partner. I just didn't know whom to turn to. How we could somehow solve it. [...] Basically, I put all problems, questions, concerns on the table. And the good man [the caseworker] had to somehow pick it apart and put it in the right order. He then gave me offers of help, [...] and we just looked at how we could tackle the problem together. [...] He was very nice. He has made and done a lot. [...] He really made an effort. So yes, he put a lot of love into it. [...]

I: And when you think back [...], did trust play a role for you?

R: Yes, definitely, I also opened up to him. As I said, I could actually talk to him about everything, I unpacked everything and he had to put the puzzle together. (GER_C16)

As this quote illustrates, the respondent not only trusted her caseworker to 'put the puzzle together' and defined the problem in a way that could lead to helpful solutions (i.e., trusting in him as a professional), she also perceived his efforts as an act of love, pointing to the relevance of the emotional dimension of the client-caseworker relationship which we will discuss in more detail below.

Sharing a problem view is usually linked to a specific problem constellation and a concrete interaction with a specific caseworker. This includes the possibility of agreeing with a particular caseworker about a specific problem definition and trusting them to provide help, while rejecting a problem definition of another caseworker together with the related remedial action. A Danish woman, for example, complains about her conflict with the children and family services department, but agrees with her counsellor at the employment office about her health-related problems on the labour market and trusts her to find good solutions for her:

I've got a diagnosis called schizotypy and post-traumatic stress syndrome [...]. Now I am in a five-year work training programme where I get help to recover from my diseases and problems. [...] I think I get a lot of help from the municipality. [...] My mentor means everything to me. I love her! She is there for me every time I need help [...] I can tell her everything. [...]. She comes into my home, knows my children. So, this is why we have built up a trust relationship. She has never let me down. [...]. I can unload my problems with her. I can be myself. [...] I am allowed to have my problems. (DK_C7)

Beyond the functionally specific relationship between professional and client (di Luzio, 2006), this particular caseworker at the employment office is perceived by the interviewee as being committed to providing sustainable forms of help that clearly involve elements of personal trust (note again the emotional dimension: 'My mentor means everything to me. I love her!', and the references to the intimacy involved). Furthermore, and in contrast to the children and family services department, this caseworker seemed to have an understanding of her client's health problems that was compatible with the respondent's own problem definition. Respondents do not always explicitly state that their caseworker shares the same problem perception. However, in their descriptions of experiences they underscore that the specific caseworker understands their problems, specific situation and needs, and deals with their case in a way they feel comfortable

with and safe enough to speak frankly about ongoing issues. Moreover, it becomes clear that there is agreement with the caseworker's perspective when citizens express their satisfaction with how a problem is solved or with the assistance being offered. In one case, for example, a Danish interviewee explains that she sought assistance from a municipal social worker because she needed help with her elder daughter. She emphasises how the experience of being understood and her own problem descriptions being acknowledged gave her the security to further open up and trust the caseworker:

The older one, she makes a lot of trouble [...]. Last year, she got diagnosed with ADHD [...]. She is not able to see the consequences of her actions. [...] She has a habit of lying and coming up with all sorts of things [...] at home with me [...] and the same at her father's house. When she doesn't get her way in one place then she starts it in the other. Our social worker has been really good, she sometimes said to her 'now the party stops' [...] She's amazing [...] I can always call her up at the municipality and say 'there's nothing [in those lies] at all'. [...] She's simply so good [...], understanding [...], there is no need to sit and explain everything and say 'believe me' because she knows us. (DK_C3)

When asked what trust means to her personally in her relationship with the social worker, she further explains: 'R: It means everything. It does. You don't want to sit and tell her all sorts of things if you don't feel safe' (DK_C3). This illustrates how citizens often reflect explicitly on their own vulnerability when speaking about their problems and support needs. Several interviewees underscore their initial concerns about making themselves vulnerable by revealing their problems and taking the risk of encountering negative reactions and unwanted measures from the authorities. They emphasise the value of being assigned to a caseworker they feel safe with and whom they can trust. For instance, a German interviewee explains how problems with her baby were misinterpreted by a former caseworker, who even wanted to take custody from her, and how the working relationship changed much for the better when a new caseworker recognised the family's problems and needs in their entire complexity. This is when she started building trust and accepted making herself vulnerable by speaking openly about ongoing issues:

I really had problems with my son, [...] he was developmentally delayed. [...] And then we just decided to take family assistance into the family. [...] And this is always accompanied by the child welfare office. [...] Initially, there was another woman with whom I had massive problems. Because she also wanted to take custody away from me. [...] And for about five years [...] this new Mrs. [caseworker's surname] has been with me, and I get along with her very well. [...] I definitely trust her. Here, I can show myself as I am. For me, trust means giving yourself as you are. [...] But [...] you have to reckon with the fact that you offer a [...] surface for attack. [...] At the child welfare office it is definitely a very big issue that you trust that the child will not be taken away if you say 'I yelled at him this and that time'. Or 'I sent him to his room and then didn't come back for a while', or things like that. Right? Trust plays a very important role. (GER_C5)

This example illustrates well how defining the problem plays a role at different levels in trust-building. In the context of asymmetric and risky relationships, opening up and cooperating is a result of interactive work that not only involves displays of professionalism on the part of caseworkers, but also provides a 'safe space' for offering the 'surface of attack' which is needed for a shared problem definition and an agreement about adequate solutions to emerge. While defining a problem for oneself is a first step, sharing one's perception of the problem with a specific caseworker and, moreover, elaborating a shared deeper understanding of the problem thus depends decisively on the matching in a concrete working relationship and involves elements of

personal trust. Developing such deeper agreement is inextricably linked with the dynamics of handling the problem and building a relationship over the course of time that are addressed in the next section.

Problem handling and relationship building

Citizens often contrast positive and negative experiences when reporting about their trust in a specific frontline worker. For instance, they explain why they felt comfortable trusting and opening up to one person and uneasy with another. From their perspective, trust is highly dependent on an individual frontline worker and his/her way of handling their problems and works independently of the institutional contexts that citizens encounter. When they are assigned to a 'good' caseworker, interviewees often say they feel lucky. A frontline worker's perceived commitment to offer a kind of support that citizens regard as actually helpful clearly stands out as a core trust-creating experience. Trusting their caseworker is a response to the perception that sincere interest has been taken in them, that caseworkers are genuinely concerned to understand their specific life circumstances, take their views seriously and are responsive and motivated to engage with them as human beings and not only as role-carriers. The importance of being seen as an individual rather than a number in the system carries through from the level of problem diagnosis to the level of solution, in that clients value caseworkers who are committed to adapting support tools and offering individual, tailored solutions that are in line with clients' capabilities and aspirations, rather than preconceived, superficial ones.

A German interviewee reporting on mixed experiences with caseworkers from the employment agency feels fortunate to have eventually been assigned a caseworker who took a real interest in him and in finding a long-term solution that matched his abilities and needs. This was a caseworker who:

... was really willing to deal with me as a subject and to look for what is an effective solution approach, and what means and ways we could start to work on that are really expedient. [...] What options are there [...] that are really fitting, that could help me to find out of this unemployment. And that can really change something about it in the long run. To not only serve a statistic or get someone out of the statistics [...]. And not simply to rationally work it through and say, 'It was just a number' [...]. With her, I really had the feeling that she has a sincere interest, or also has good motivation: 'I really want to help and take on responsibility', to give me good advice and to guide me on my life's journey [along] a way that effectually is expedient (GER_C15).

As this excerpt shows, citizens build trust in frontline workers when they see that they assume responsibility for their particular case, see them as more than a client only, do more than what is required and 'go the extra mile'. This may involve suggesting or even contacting other institutions or organisations to get additional support, providing practical recommendations or taking the time to listen and offer detailed explanations and advice. Referring to her second caseworker at the child welfare office, a German interviewee, for example, underscores how the caseworker's extraordinary commitment allowed her to build trust:

She always tries to help me. For example, during the Corona time, when the daycare centre was closed and there was emergency care, she made it possible for me to bring my boy [...]. She spoke to the manager and made it possible for me to have forty-five hours of care for my son, despite the fact that I don't work. [...] So I am glad that I have her. [...] That's why I can't say that I've only had bad experiences. I've had really bad and really great experiences with the authorities. [...] Here, [with her] the trust is definitely there for me. (GER_C5)

In both countries, citizens' trust is decisively shaped by their experiences of caseworkers' personal behaviour and ways of building a relationship with them. Very importantly, it is impacted by their experience of caseworkers' empathy and understanding of their individual case and genuine commitment to offer a kind of support that citizens find helpful and appropriate. Rather than being merely cognitive perceptions of displays of professionalism, these exceptional positive experiences are often shaped by emotional-affective elements such as a feeling of mutual sympathy, bonding and of being seen, respected, and appreciated as they are.

She is just understanding and attentive and I feel she respects me. I feel that she sees me. It is nice. She is very understanding and shows empathy towards us. To give you an example. One time I wrote to her: 'Something must happen now because otherwise, I will mentally go down; drop into a black hole. I give up'. And she was very empathetic and told me: 'Of course, something must be done. I completely agree with that, and I will return to you as soon as possible.' [...] I e-mailed [the papers about my son] to her at once. [...] Immediately, she writes [...] the recommendations about what kind of help I need [...] and she asks me: 'What do you think? Is it okay?' (DK_C3)

Citizens of both countries describe a caseworker they trust usually not only as helpful and dedicated, but simultaneously also as 'friendly', 'kind', 'nice', 'pleasant', 'human', 'warm', 'understanding', or 'empathetic'. Overall, this affective element of experiencing kindness and feeling sympathy makes a huge difference. The following description of an interviewee's relationship with her advisor at the jobcentre is a good example of this:

When you have a caseworker, it's always a question of sympathy. When you [...] talk to each other personally, I think it's important that you understand each other. That this sympathy [...] is there somehow. Because a person I don't like or who is just rude to me, I can't trust them, I can't say, okay, I have this and this problem or this or that situation has arisen. That simply doesn't work. [...] You have to feel understood somewhere or at least feel that the person, the caseworker, really wants to help you. Right? That is very important. (GER_C23)

While a shared problem definition and a commitment to help are certainly necessary conditions for trust to develop, it seems that – against the backdrop of asymmetric and risky relationships conducive to distrust – elements of personal trust emerging from positive experiences of relationships with particular caseworkers are essential in interviewees' accounts of explicitly trusting a caseworker. These experiences are often linked to a perceived reduction of the power asymmetries involved. A German interviewee, for example, describes her relationship with a social worker of the child welfare office as follows:

She is simply very friendly. And eager, as I said, to provide support. Sympathetic, also empathetic, she can put herself in one's shoes very well. [...] She always treated me very kindly, respectfully, so I never had the feeling there that I am a second-class person or so. I just had the feeling that I am a person in need of help and that this help is granted to me, right. This is indeed very positive [...]. Here, I really have trust. (GER_C5)

Some of our interviewees even suggest that a warm, friendly, and understanding working relationship with a caseworker almost feels like friendship. For instance, a Danish woman participating in a back-to-work scheme emphasises how the municipal social adviser assigned to her clearly saw her individual needs and health-related limitations and took care of organising appropriate assistance for her. At the same time, she notes that, thanks to her empathy and understanding, the caseworker became almost like a friend to her:

She has always done something good for me. If she had not helped me, I would not turn up at the meetings [...] when you are together with her it feels a bit like with a friend because she understands me [...]. She is always open, and we talk about things. You know, she suggests something and says: 'I think it will be good for you'. And if I am tired of something, I can always call her [...]. Because sometimes, I am sick and tired of myself and my situation. [...] I have been four years in the rehabilitation programme, and I have not progressed at all [...] but then she says: 'I will talk to your job consultant. [...]. You must get on with your life [...] You can't work, so now it is time to grant you a pension'. (DK_C15)

As this account demonstrates, citizens build trust on the grounds of positive personalised experiences with individual frontline workers that stand out from all their negative experiences with others. In line with scholarship focusing on trust from the perspective of frontline workers (e.g., Becker-Lenz, 2014; Van de Walle and Lahat, 2017; Senghaas *et al.*, 2019), this indicates that trust is essential for clients' willingness to cooperate (otherwise, the interviewee quoted above 'would not turn up at the meetings'). Furthermore, respondents' reflections on trusting a caseworker show that reciprocal personal trust and its affective components are an important aspect in the development of client trust (cf. Tiefel and Zeller, 2014).

Conclusions and discussion

Citizens' trust in frontline workers of public social services remains an exception. In the face of risky and asymmetrical relations, a neutral, pragmatic or cautious stance, or even distrust, towards public servants prevails (EnTrust, 2021). Citizens are aware of their vulnerability and the risks they take when exposing their problems to public authorities. In view of possibly far-reaching consequences in sensitive areas of their lives, they need good reasons to take those risks and allow themselves to be vulnerable to external interventions.

As our analysis shows, a starting point in the decision to trust a frontline worker is citizens' recognition of a need for help. Even more importantly, citizens need to agree with their caseworkers' view of the problem and their definition of basic objectives. Clashing views are not only a barrier to trust-building, but often also a source of distrust and self-protective behaviour. Across both countries, our findings thus confirm the expectation, as derived from the literature, that a shared problem definition and common goal orientation constitute a precondition for building trust in a frontline worker.

Beyond such a shared cognitive orientation, our research demonstrates that citizens base their decision to trust heavily on their experiences of the concrete working relationship. Trust is built when citizens develop the conviction that their caseworker is sincerely committed to helping them solve their problems in ways they consider appropriate and acceptable. Trust-building is fostered when citizens feel that their caseworker has an earnest interest and takes the time to listen and fully understand their individual case in all its complexities, and thus sees them as a person and not just a case to be pigeonholed. Furthermore, trust is promoted by the experience that frontline workers provide individualised, tailor-made offers of help that account for citizen's personal needs, expectations, and limitations, and involve them in decision-making. Trust is further enhanced when citizens see that caseworkers do more than what is required and assume responsibility for the concerns citizens have.

These findings are part of the larger picture portrayed in social policy and public administration research on frontline workers' role and self-perceptions. As our analyses suggest, trust in welfare services is not dependent on systemic factors only, but case specific and highly contingent. Citizens build trust towards those frontline workers who use their scope of discretion in client-oriented ways and behave as 'citizen agents' (Maynard-Moody and Musheno, 2000) or 'caregivers' (Zacka, 2017) who advocate for clients' interests and seek to meet their specific

demands and needs (also Lipsky, 2010: 72). At the same time, our research shows that such trust does not solely depend on frontline workers' individual characteristics or forms of conduct. It is of crucial importance that citizens perceive a fit between their own problem views, expectations, values, and action orientations and those of the caseworkers assigned to them. In this respect, our study corroborates recent findings on the relational dynamics of trust-building, the importance of shared understandings, goals, and values and, thus, of a 'matching' between citizens as trustors and caseworkers as trustees (Taylor-Gooby and Wallace, 2009; Rügger *et al.*, 2021: 10–11). However, frontline workers may face a dilemma and role conflict when citizens' expectations and demands conflict with their institutional or professional norms, values and expertise, for instance, when child welfare is at stake or when there is substantial dissensus about appropriate solution approaches (e.g., Rügger *et al.*, 2021: 11; Lipsky, 2010: 73). In this sense, trust building that is highly dependent on meeting clients' expectations can be precarious, especially when there are serious professional limits to responding to them.

Beyond the motivational and cognitive dimensions, our findings shift attention to the emotional-affective dimension in building trust. While experiencing an attentive, person-centred and matching provider of help was found to help citizens build some trust in caseworkers, such trust was stronger and more stable when a working relationship also involved positive emotions and affects. Feelings of mutual sympathy and of being seen and treated with kindness, human warmth, benevolence, empathy and, most importantly, respect and appreciation emerged as key components for citizens to develop a deeper trust towards a caseworker. In some cases, citizens even described their personal relationship with a caseworker as a kind of friendship (cf. Ribner and Knei-Paz, 2002; Buckley *et al.*, 2011; Rautio, 2013).

Instead of system-specific features such as the degree of universalism in different welfare regimes or role-specific features such as efficacy or professional expertise, citizens' trust in frontline workers is decisively shaped by the way they assess the quality of their relationship in concrete interactions. Our findings thus corroborate recent scholarship on the importance of personalised relationships in the provision of welfare services (e.g., Behnia, 2008; Rügger *et al.*, 2021) that go beyond the functionally specific relationship between professional and client (Wagenblass, 2004; di Luzio, 2006). They also provide new empirical evidence that personal trust, and the various emotional aspects involved, play an important role in direct working relations between citizens and caseworkers, a role that has until recently been associated mostly with private trust relationships (cf. Becker-Lenz, 2014; Tiefel and Zeller, 2014).

Across Denmark and Germany, we found very similar patterns of trust-formation. For citizens relying on services, welfare regime differences therefore appear to matter little. While general levels of citizen trust towards welfare state institutions may well be shaped by systemic features and thus differ notably between countries and welfare contexts (e.g., Rothstein and Stolle, 2008; EVS, 2022), the deeper and riskier form of trust that is at stake in concrete interactions of citizens and social services frontline workers is subject to other mechanisms. In the general context of predominantly asymmetrical relations, citizen trust is highly dependent on relationships being less asymmetrical. Elaborating on the relational understanding of trust-formation, our research demonstrates that a shared problem definition and the experience of an engaged, respectful, and friendly working partnership constitute core mechanisms of trust-building as they mitigate and counterbalance structural power asymmetries, allowing citizens to put aside their concerns and fears and experience a degree of agency and autonomy. Moreover, establishing personal, affective bonds built on benevolence, empathy, and mutual sympathy foster deeper and durable trust. In this regard, elements of personal trust form an essential element of trust-building between citizens and caseworkers (Tiefel and Zeller, 2014) and, in some cases, may even be a precondition for the development of client trust. Hence, citizens' trust differs from caseworkers' trust in important ways: While trust is clearly a functional resource for social services (e.g., Senghaas *et al.*, 2019), this is only partly the case for citizens, namely when it helps them receive the kind of help and support they think they need. In the context of power asymmetries and the risks that the social services

potentially pose for clients, however, the role of trust is more complex because emotional or affective issues revolving around recognition, respect, and agency seem more important than just goal attainment.

In both countries, citizens typically individualise their experiences, assigning them to specific caseworkers. Nevertheless, we certainly cannot rule out that the welfare system, social policy orientations and framework conditions, such as resourcing or institutionalised professional features, play a background role. What citizens interpret as personal behaviour in frontline workers' dealings with their case will certainly also reflect different coping strategies in handling varying degrees of increased administrative requirements and workloads, different conceptions of the welfare state, the effects of professional education and socialisation on role definitions and occupational values, or different settings and institutional framework conditions. In both Denmark and Germany, welfare policies have undergone considerable reforms in recent decades, including the implementation of new management approaches (e.g., Brodtkin, 2011; Penz *et al.*, 2017) in social welfare administration, but also the introduction of participatory approaches to service provision and person-centred case management (e.g., Newman, 2007: 396; Böllert, 2012). Recent scholarship also points to cultural changes in the perception and performance of administrative roles, underscoring that 'emotional labour' has become an important element in the provision of social services (Gray, 2002; Behrend, 2013; Penz *et al.*, 2017; Nissen, 2023). Against the backdrop of limited public resources, these developments in welfare service provision imply practical challenges of coping with conflicting demands. Under often severe time constraints, caseworkers are required to reconcile efficiency orientation and managerial requirements with the professional demands of client-oriented, person-centred service provision. This dilemma seems even more enhanced for a working approach based on engagement, cooperation, and affective and trustful relationship building, thus increasing the danger that 'caregivers' will selectively choose whom to provide with their full support (Penz *et al.*, 2017: 553; Zacka, 2017: 105–6). Further research into trust-building from a relational perspective will be useful in more systematically studying the implications of these developments for citizen trust, keeping account also of the conditions for fostering a culture of recognition, respect, and agency in social services provision.

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Note

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