Organisational Dilemmas, Gender and Ethnicity
A Video Ethnographic Approach to Talk and Gestures in Homeless Shelter Consultations

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ORGANIZATIONAL DILEMMAS, ETHNICITY AND GENDER: A VIDEO ETHNOGRAPHIC

APPROACH TO TALK AND GESTURES IN HOMELESS SHELTERS

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ABSTRACT

Most qualitative research in organisations is based on interviews. Interview studies can

illuminate the experience of the people studied. However, interviewees retelling and

restructuring their narratives in accordance with the agenda of the researcher may not be the

most appropriate means of understanding *why and how* people act the way they do.

        This chapter demonstrates how video recordings of real-time interactions between

homeless individuals and service providers can illuminate the many organisational dilemmas that

affect the relationship between professionals and clients. Video recordings demonstrate the way

professionals and clients actually interact – and manage the dilemmas – in specific situations.

Their body language such as expressions of anger, leaning towards a person, being silent, etc.

add to their verbal expressions and qualifies the analysis.

        The chapter's analysis reveals that it is difficult to reconcile the role of male clients'

weakness (being homeless) with stereotypical perceptions of masculinity and strength. The

chapter pays particular attention on caring, parent-child relationships, and other ambivalent

relations and positions that challenges both clients and professionals. For instance, clients with a

background in Greater Middle East are particularly challenged, as they find it more difficult than

their Danish counterparts to accept the passivity, care, and the childish role attached to their

position as homeless. Even though social workers emphasise that clients should take

responsibility and have control over their situation, they often reproduce a practice that takes the

clients' lack of responsibility for granted. The analysis thus demonstrates one of the greatest

forces of ethnography, namely why people actively reproduce the practices from which they explicitly distance themselves.

ORGANIZATIONAL DILEMMAS, ETNICITY AND GENDER: A VIDEO ETHNOGRAPHIC APPROACH TO TALK AND GESTURES IN HOMELESS SHELTERS

INTRODUCTION

Most qualitative research in organisations is based on interviews (Silverman, 2014). Interview studies can illuminate the 'experience' of the people studied. However, interviewees retelling and restructuring their narratives in accordance with the agenda of the researcher (Gubrium and Holstein 2009) may not be the most appropriate means of understanding *why and how* people act the way they do. This chapter will demonstrate how an ethnographic approach that primarily uses video recordings of real-time interactions between homeless individuals and service providers can illuminate aspects of the organisational life of homeless people that cannot be captured in interviews or observation notes of the researcher.

Video ethnography in organisational research

Decades ago, Howard Becker warned against methodological purism when researching social life (Becker, 1995). According to him, visual methodologies such as photography, photojournalism, etc., qualifies analyses of the social sites sociologists investigate (Becker, 1995). Similarly, organisational scholars emphasised long ago that investigating social life in organisations necessitates the inclusion of various kinds of visual representations (e.g., Meyer, 1991). Video recording is one useful data-acquisition tool as it enables the researcher to acquire informal and detailed knowledge about the object of the study (Cassell, 2017; Heath & Luff, 2012; Heath et al., 2010; Myers, 2009). Video recordings provide information about what organisational theory calls tacit and silent knowledge (Polanyi, 1966). Thus, researchers are

enabled to spot actions and perceptions that are taken for granted in the organisation to such an extent that organisational members do not consider them in their everyday work life. Such actions and perceptions will therefore not be revealed in an interview setting. Knoblauch (2012: 253) suggest the term 'videography' to pinpoint that video analysis is an interpretive approach and that the researcher must go to 'where the action is' (Knoblauch, 2012: 252).

Hence, video recordings are a reflexive, self-conscious approach to the data and it is the responsibility of the researcher to 'reveal the constructedness of her or his text' (Pink, 2001: 589). For instance, the angle of the video recorder may have different effects. A 'mid-shot' angel (as with my video recordings in this chapter) fixates on one perspective on the situation recorded, whereas multiple shots provides more perspectives on the situation recorded (Luff & Heath, 2012: 268). Luff and Heath (2012) argues for the benefits of pointing a camera towards the action. For instance aiming the camera, in a sit-down meeting, towards the table-activity such as pouring coffee, adding sugar, taking notes, etc., as these activities can be ways for participants to abstract from awkward situations, etc. In addition, the camera can 'zoom in' (to record the participants' micro behaviour) or 'zoom out' (to record the context of the interaction) (Jarrett & Liu, 2016: 371-3). The point is that whichever choice the researcher takes (angel of the camera, zooming in or out, etc.) will bear an effect on the analysis. However, scholars must not only tend to technical matters when recording real-life encounters. The participants' actions will also be affected by the recording (Hazel, 2016). They may act in a 'recording-appropriate or -inappropriate conduct' (Hazel, 2016: 446) or they may even talk about the recording while the camera is filming (Aarsand & Forsberg, 2010: 256) – which happened in my recordings as well. Hence, video recordings are not representations of a pure or true insight in the social worlds being recorded as participants are always aware of the camera (Aarsand & Forsberg, 2010).

Hazel (2016) describes this participant awareness as 'the observers paradox', that is the way 'the object of investigation is transformed in the process of being observed' (Hazel, 2016: 447). When, for instance, participants perform for the video camera they become a proxy for the observer (Hazel, 2016: 459). For this reason Jarret and Liu (2016: 374 - my emphasis) suggest 'zooming *with*' the participants. 'Zooming with' describes a reflexive process where the participants afterwards see the video clips and interprets the recordings together with the researcher (Jarrett & Liu, 2016: 374).

However, including participants' opinions in the analysis of data does not solve the key problem with this methodology (or any other methodology). Video recordings will never be a true representation of real-life encounters. Video recordings of real-life encounters are *recordings* of real life encounters. Nevertheless, video recordings represent a different kind of data; a 'elusive knowledge' (Toraldo et al., 2018) as the recordings show the tacit, non-verbal and embodied aspects of organisational life. This kind of tacit, non verbal knowledge may be challenging to grasp and communicate through traditional methodological tools such as, for instance, interviewing (Becker, 1995; Meyer, 1991; Soulaimani, 2018; Toraldo et al., 2018). Video recordings reveal the non-verbal knowledge of organisational life; the 'habitualised knowledge implicit in social action'(Toraldo et al., 2018: 439). Hence, although participants will be well aware of the fact that a recording is taking place, the recording can still disclose the participants' social worlds that are shaped in mundane actions and visible through their verbal and body language (Soulaimani, 2018; Toraldo et al., 2018: 446). Smiles, bodily orientation, and silence are all key expressions for analysing the intersubjective communication among participants (Soulaimani, 2018). Thus, body language such as expressions of anger, leaning

towards a person, being silent, etc., are actions of participants that supplement what they are saying verbally and that makes the interaction meaningful and coherent.

In one study of job interviews, the video recordings of the interview situation revealed that successful applicants internalised the organisational discourse of teamwork, flexibility, and the productivity of time management (Campbell & Roberts, 2010: 248) – key organisational norms. However, these skills were irrelevant to the job in question, leading to the concluding analysis that the job interview is as much a ritual about the norms of the organisations as it is about hiring the right candidate (Campbell & Roberts, 2010: 267). Similarly, video recording of palliative care consultations demonstrated how doctors' verbal and bodily display of empathy towards the dying patient reflected an organizational narrative about accommodating patients' subjective experiences – and did not relate to the key goal of doctors to deliver a biomedical, task-driven, correct treatment to patients (Ford et al., 2019). In this study, the organisational norm of empathy was displayed in the video-recorded sessions both verbally and non-verbally. In a third study of real-life encounters, Pino's (2016) video analysis showed how professionals' disciplinary treatment of clients was accepted by the clients. In this case, the video recordings exposed how professionals' use of anecdotes was an indirect way for them to correct or modify clients' behaviour – and hence an interactional tool that secured the cooperation of clients. The video recording of a fourth study highlighted how the routine-based question-response sequences in a dementia consultation foregrounded co-remembering of patients and professionals: 'questions are a powerful tool to control interaction [in organisational encounters]: they pressure recipients for response, compose presuppositions, agendas and preferences' (Williams et al., 2019: 395). In this case, the analysis revealed that the interaction between professionals and persons with dementia resembled witness questioning in a courtroom. Just as in courtrooms,

yes/no questions in a dementia setting were a powerful tool for establishing facts. William and colleagues' video analysis emphasised the 'face work' of the two parties in the intersubjective process of remembering. The choice of video recording of another study's resulted in an analysis that displayed how participants drew on gender stereotypes, when supporting their own arguments (Robles & Kurylo, 2017; Stokoe, 1998). In this case, the participants were students in tutorial sessions who talked about themselves as non-sexist individuals whilst actively reproducing gender generalisations and stereotypes (Stokoe, 1998).

All of these studies demonstrate how working with video recorded real-life encounters often results in discovering new, surprising relations and perceptions in a field (Patton & Patton, 1990). The focus of this chapter on gender in encounters with the homeless is similarly a result of my scrutiny of video-recorded placement meetings that revealed that these encounters were indeed about gender (as well). Thus, the focus of the chapter on gender is not a result of a pre-conceived idea of gender being a central theme in homeless placement meetings. However, the data used for analysis is not only video recordings; I have supplemented with interview data. Inspired by Meyer's (Meyer, 1991: 232) observation that a weakness of one method can be the strength of another made my choice of combining video recordings with interview an obvious choice (Meyer, 1991: 232).

DILEMMAS IN PUBLIC ORGANIZATIONS

Public organisations, including shelters for homeless people, can be described as hybrid organisations that operate with divergent goals, resulting in a range of dilemmas (Hoggett, 2006; Mik-Meyer, 2017; Noordegraaf, 2015; Sturdy et al., 2014). A central dilemma at Danish shelters is that a stay should not be too homely and pleasant for the clients to not want to leave the place.

On the other hand, most staff members do not believe it would be morally justifiable to work in a shelter that clients dislike. This dilemma is related to a central question for the staff: Are the clients capable of living on their own and taking care of themselves, or are they so heavily burdened with problems that living independently becomes an unrealistic goal? The video recordings show this dilemma. Often, the social workers address the clients' will to engage with in daily activities and the requirements of the shelter. They focus on the will of the clients to change their life, take responsibility, and engage in a process of change. However, the clients' everyday actions indicate that they often cannot live up to the organisational sanctioned demands and requests of staff. Thus, staff *wish* that the clients had all these positive qualities that the activities in the facilities demand of clients. Moreover, clients prefer to focus on the structural problems related to their situation: lack of housing, money, and so on.

Another dilemma relates to housing shortage. In homeless shelters, staff must find affordable housing for the homeless individuals, but the task is challenging. Just like other larger cities in Europe, apartments and rooms in most Danish cities are too expensive for clients living off social welfare. In addition, there is typically a year-long waiting list for the few available apartments/rooms that clients can afford. Housing on the so-called short-lists for vulnerable clients costs approximately £460 a month. However, if you are a refugee or an immigrant, or under the age of 30 and receive the so-called 'integration benefit' or 'youth benefit' (amounting to £680 monthly), then your disposable income does not cover the cost of food and clothes after the rent is paid—even when including subsidy for the rent. In the city of Copenhagen, a rule states that clients should have at least £460 *after* every fixed cost is paid. Therefore, a bed in a shelter that costs around £4,100 may be the only solution for this group of clients (Mik-Meyer, 2018).

Recent international studies similarly report that the field of homelessness has scarce

financial resources (Kadi & Ronald, 2016) and that homeless people have difficult access

to housing and aid (Perez, 2014; Sznajder-Murray & Slesnick, 2011). However, it is not only

structural factors that create dilemmas in the field of homelessness. Social workers who try to

solve the problem of homelessness often work with highly ambiguous goals (Ravenhill, 2008;

Smith-Carrier & Lawlor, 2017; Stonehouse et al., 2015). Social workers must sort out the

complex troubles of the situations among homeless people (drugs, psychiatric issues, and family

troubles), as well as discuss with them what a better life might entail (Dwyer et al., 2015; Mik-

Meyer, 2018).

In order to investigate the organisational dilemmas related to homelessness, an

ethnographic approach that centres on the context and the actual encounters between

professionals and clients is pivotal (Carr, 2011; Marvasti, 2002; Smith & Hall, 2018). An

ethnographic approach can shed light on how policy, power, and everyday perceptions of clients

and staff play out in real-life situations. This chapter will analyse homeless consultations among

shelter residents and social workers in three Danish shelters. During these consultations, social

workers try to fit the complex situations of the homeless with the activities and goals of the

shelters. I will focus on gender and ethnicity issues since a key dilemma has to do with the fact

that shelter residents (predominantly men) have to learn to 'open up', cook, tidy up the kitchen,

and take on other tasks stereotypically associated with women. There are two 'idealised'

perceptions (Mumby & Ashcraft, 2004: 132) of clients, either as weak individuals (Gubrium &

Järvinen, 2014) or too 'masculine' and strong (usually applicable to men) (Edley & Wetherell,

1995). These perceptions clash in the everyday organisational lives of the homeless.

TAKING A GOFFMANIAN APPROACH

The chapter is inspired by Goffman's work on interaction, face work, and front/back stage behaviour. 'Interaction (that is face-to-face-interaction) may be roughly defined as the reciprocal influence of individuals upon one another's action when in one another's immediate physical presence' (Erving Goffman, 1990: 26). The concepts of 'interaction' and 'face work' direct attention to the social situation in which the interaction takes place. When analysing homeless consultations, the focus is placed on the roles of the participants and how these roles relate to situation or 'framework' (Goffman, 1974; Goffman, 1990) in which the interaction occurs. Participants can be 'in face' (acting in accordance with the situational roles) or in 'wrong face' (contradicting the situational roles) (Goffman, 1990). Additionally, his concepts of 'front stage' and 'back stage' direct attention to levels of formality. Consultations are front stage meetings where a number of predefined issues must be discussed (e.g., the so-called Action Plan for the client). However, the video recordings display back stage behaviour as well. For instance, social workers may kindly touch or pat the clients, laugh and sit in open postures to create a cosy and informal environment. The participants—social workers and clients alike—switch between front stage and back stage constantly, as a formal front stage approach of social workers gets in the way of solving the complex problems of the clients. In many cases, tensions occur and the participants, especially the social workers, react by giggling (Douglas, 1999; Mik-Meyer, 2007). Laughter plays diverse roles; social workers use laughter to direct attention away from the situational tensions/ambiguity in the work. They try to overcome the organisational contradictions that occur when the goal of the work is to solve the (unsolvable) complex problems of homeless individuals.

THE DANISH CONTEXT AND KEY DILEMMAS

Every year, 6,400 people use 85 homeless shelters that are available in Denmark (Benjaminsen, 2019). These shelters fall under the Danish Social Service Law §110, which states that municipalities are obliged to provide temporary housing for persons, who, due to not having a place to stay, or not being able to live by themselves, need housing and care. The standard price for the Danish welfare state for a bed in a shelter is roughly £4,000 a month. Approximately, 77 % of those living in the 85 Danish shelters are men and 24 % are women. A third of the homeless population stay at a shelter, which makes it the most common solution during homelessness. The second most common place to stay during homelessness is with family and friends (25 percent), and only 11 percent are sleeping on the streets (Benjaminsen, 2019: 25). Because Danish residents have a right to a shelter bed, it is the most vulnerable homeless people that end up as "rough sleepers" sleeping on the streets (Benjaminsen, 2019: 31). In this study, the participants are on average around 45 years old. They were all unemployed, and most of them collected unemployment benefits (45 %) or social pensions (27 %). The participants had comparable issues: they needed a place to stay/sleep; they usually had a high intake of different drugs; and they usually had several physical and psychological challenges according to themselves and staff reporting. In addition to social activities, such as participating in morning gatherings and in workshop activities, shelter residents were offered support to sort out their financial situations, find a place to live, contact partners and children, and if necessary, sign up for treatment for their drug abuse.

METHOGOLOGICAL APPROACH

The chapter is based on video recorded consultations between homeless individuals and social workers, as well as interviews with the participants after the consultations. We chose to focus on

the routine consultations because these meetings involved making decisions on how to solve the homeless individuals' problems. The themes discussed at the consultations were highly complex, making naturalistic data very suitable (Heath and Luff 2012: 35). The data consists of 23 recorded consultations with 19 homeless men and 4 homeless women, and 77 individual interviews with the participants conducted after the consultations. The recordings took place by the year-end between 2017 and 2018. The meeting participants included a shelter resident, a shelter social worker, a municipality social worker, and in some instances also client relatives, mentors, or other staff such as drug counsellors. On average, four persons participated and each consultation lasted approximately one hour.

The participants of the study were recruited through the managers of the three shelters. By contacting the managers, the shelters' acceptance of participation in the study was ensured, and further contact to shelter social workers with current cases was established. Once an arrangement with one shelter social worker was agreed upon, it often generated more meetings with other shelter residents and municipal social workers. As an ethical standard, the contacted shelter social worker was always asked to make sure that all participants fully agreed to partake in the study and that all participants knew that they could withdraw from the study at any point in time. At the start of the consultation participants met with me or my student to ensure that everyone participated voluntary and we explained to the shelter residents that their participation would not affect the administrative handling of their "case". We explained (yet again) that they were given anonymity and we re-asked all participants for permission for the video recording. They were explained that the video recordings would only be viewed by the research team and that data (footage and interviews) would be stored in a safe space where only the research team had access. After the consultations most participants were interviewed individually about how

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they experienced the consultation and the decisions made. In the study, all participants have been given anonymity, and all mentioned names and places in the analysis are fictionalised.

I started my analytical process by reviewing all 23 recordings to get a sense of the material at large (and to develop ideas for the following coding process). Hereafter, all video recordings and interviews were transcribed in full, including notations of long pauses, interruptions, and laughter. For analytical purposes, body movements and gazes are indicated in the selected passages of the video recordings presented in this chapter. The video recordings and interviews were coded using the software program NVivo 11. In line with a constructionist grounded approach (Charmaz, 2006), an open reading of the dataset was sought. That means that specific hypotheses on gender and ethnicity issues (the focus of this chapter) were not developed prior to the coding process. However, the first initial coding process of the consultations and interviews revealed that gender and ethnicity were the sociological factors that both groups engaged in and hence served as a central theme in the dataset. In most recordings (video and audio), the participants negotiated what could be broadly described as 'gender and ethnicity issues'. For instance, 'gender issues' cover gender stereotypes of social workers and clients and include 'gendered stories' of what it takes to be a man/woman and pronounced gendered negotiations. These stories were intersected with the ethnicity of the clients in surprising ways. Consequently, since gender issues, weaved together with questions of ethnicity, occurred so frequently in the dataset, we conducted a more 'focused coding' (Charmaz, 2006: 57–60) of the entire dataset for quotes/discussions on these topics .

ANALYSIS: ETNIC DANISH MEN NEGOTIATING MASCULINITY AND CLIENTHOOD

Consultations typically start with a small-talk and offering of coffee. The goal of the first part of the meeting is to establish a friendly atmosphere of equality and mutual empathy. It is a guiding norm at these consultations that social workers act as facilitators, who enable clients to help themselves. An obligatory passage point (Clegg, 1989: 205) that guides all consultations is the Action Plan. For instance, all clients are asked about money issues, their network/social life, drug problems, mobility issues, economy, and ability to take care of housework (cooking, cleaning, and so forth). It is a trick list that ensures that the social workers can decide on the amount of help and assistance needed.

Hank – accepting psychological problems

Gender aspects are very visible during the consultation with Hank, a man in his fifties who has been evicted from his apartment because he failed to pay the rent. He sits with his outdoor jacket on to signal that he may be leaving any moment. He is not very talkative and clearly uncomfortable with the personal questions asked by the young female social worker in her 20s (still a student). It is quickly apparent that his perception of his situation does not align with that of the social workers (Pauline, Brenda, and Linda). What they think Hank *need* is not the same as what Hank *wants*. A consultation with him reveals this dilemma:

> Pauline: The two of us [looking at Hank], when we talked earlier, we talked about
> needing a longer perspective on your situation. We discussed that we should assist you
> with getting your own residence, and stuff like that, and you said 'maintaining some
> contact with us could be ok' [indicating with her tone of voice that this is speculative].

I'm thinking [points to Becky] that you need us to help you check your *e-boks* [a Danish mail system for official mails].

Hank: Yes, yes. [Sitting in a lofty pose, leaning back, gesturing with his body language that he is bored/annoyed] But, I mean, I can easily check my own *e-boks*. That's not my problem [looks down and speaks in a low voice].

Pauline: [Puts her hand on Hank's arm] I don't doubt that you can do that at all.

Hank: But it's just… I can't pay the bills I get [shakes his head in a humble way and makes eye contact with his head down].

Pauline: No, no.

He continues to talk about his need of a place to stay and lack of financial resources (two structural problems, lack of housing and little money, which are a real challenge to solve for the social workers as well). According to him, these are his main problems. However, Pauline wants to help him with his *e-boks*. By touching his arm, Pauline steps backstage and tries to calm him down. She momentarily takes back her statement indicating that she never doubted his abilities. Her comforting touch on his arm comes off as a mother caring for a child in need of comfort. However, seen from Hank's perspective this should neither a technical issue (*e-boks*) nor an emotional, caring issue that demands touch or pats, but a financial issue. His body language clearly indicates that he does not appreciate Pauline's caring, backstage approach. This idea that

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male clients may have other problems than the ones they think they have is shared by most social workers. After the consultation one of the other participating social workers shares her perception of men such as Hank, that is, male clients in their fifties:

It is really good to have a shelter, where there is someone to talk to, and where a guy like Hank can learn to talk about all the problems he has. He is a man too, you know, and they are not that talkative. That goes for his entire generation, right?

Similarly to her colleagues, she has gender- and age-specific expectations, including the idea that Hank and other men of his generation need to learn how to talk about their problems. When talking to Hank after the consultation, he touches upon this emotional interaction with the female social workers and states that he finds it annoying. He associates this kind of interaction with a loss of status. He explains:

It's a bit difficult for me to stay here. Because I haven't done that before. I've never opened myself up to four women that way. That way it's difficult but, well, now I'm at rock bottom, so it actually doesn't hurt that much. It'd probably be worse if you'd been all the way up there [indicates with his hands] and then had to sit and listen to that kind of talk, right?

Thus, being at 'at rock bottom' implies that his masculinity is lost and that he is unable to fight off the social workers' emotional and caring relations. This loss of masculinity may explain his infelicitous act (Austin, 1975) when at the end of the meeting, he asks out the young social

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worker-student (Brenda). After summing up the discussion of the consultation, Brenda asks if there is anything they have not touched upon. She continues:

Brenda: Is there anything you want to ask about?

Hank: Yes. Do you want to go out on a date?

[Everybody laughs]

Brenda: No. We are not going out on a date.

Hank: Aha. So you don't think so?

Brenda: We can schedule a consultation on January 5?

Hank: Yes. Okay. And then we take it from there.

Before asking her out, he compliments her looks. For an observer, it is clear that Hank has overstepped a line, making everyone uncomfortable. The function of the joint laughter of social workers is to 'solve' the tension his infelicitous question has created (Douglas, 1999; Mik-Meyer, 2007; Potter & Hepburn, 2010). His position as a homeless man with the accompanying associations of failure and loss does not align well with the rules of a dating game of mutually interested parties.

Rick – accepting parental caring

The social workers' caring approach to clients often creates an imbalanced relationship between clients and social workers. In these situations, the social worker will repeat the name of the client several times, just as parents do when addressing (and correcting) their children. Rick, who is currently his forties, started drinking when his wife left, 'forgot' to pay rent, and ended up on the street. In the following dialogue, Beth (a social worker) compliments Rick for his honesty:

Beth: [leans towards Rick and looks him in the eye with her head tilted] I think that you're just deeply honest, calling things out, and you know what—that's actually what's really nice about you. Also, that when I ask you something, I actually get an answer from you.

Rick: Yeah [very low voice].

Beth: I mean, it's never like I sit around and think 'oh now he might be saying something that's not true', because no, you wouldn't [raises her voice encouragingly and shakes her head].

Rick: Mmm [shakes his head]

Beth: You say what you mean and then you actually don't care how we perceive it. And that's really nice because it provides us with a fitting image of you.

Beth applauds Rick for being honest. The logic must be that she cannot expect him as a client to tell the truth, which in other conversations among adults is a surprising logic. She continues to compliment him for his 'fine development':

Beth: When we last met, we also had a good talk [nods while talking, looks at Rick and then at the other participating social workers].

Linda: Yes, I completely agree.

Beth: Definitely, but it really was a completely different conversation.

Rick: Yes [nods solemnly while he touches his face with one hand, somewhat shyly/embarrassed].

Beth: But that was a long time ago.

Linda [second social worker]: Yes, that was a long time ago now.

George [third social worker]: [looks down and talks calmly while nodding] Yes, you've come far, you've come far—that's for sure, in terms of your behaviour.

Their appraisal is obviously well-intentioned and caring, but it speaks to the idea of an imbalance in the client-staff relationship as it is disproportionate—why should Rick not be someone that could be trusted? From the way they interact, it appears the social workers are taking a much more active role in Rick's behavioural change than Rick himself. They are encouraging and praising Rick, but he is responding with silence (Dupret, 2018), and he appears to find the situation somewhat awkward and embarrassing.

The three social workers try to deal with the basic dilemma pertaining to the awkwardness of their roles. They have to impose certain plans and values on Rick, hoping that he will adopt them. However, they are undertaking such an active role compared to him that his personal development almost comes off as their achievement, rather than his, and he goes along with it *because* he is the client (and not because he has changed dramatically). What is the key in this and other consultations is that the client's loss of status and loss of masculinity is avoided. However, since the role of client necessitates indicating problems and weaknesses, which resonate poorly with masculinity, strengths, and control (stereotypical male attributes), male clients in particular may find the praising and caring approach downgrading. It becomes evident in the next part of the analysis that the mix of roles and expectations (client/male) is further strengthened when the male clients have a Greater Middle Eastern (GME) background.

ANALYSIS: GREATER MIDDLE EASTERN MEN NEGOTIATING MASCULINITY AND CLIENTHOOD

Observations of Danish male clients' show some familiarity with the role of client (e.g., Hank's explanation of hitting 'rock bottom'), which are not found in consultations with men with a GME background. Their negotiation with social workers takes a somewhat different route. The video

recordings indicate that these clients may experience an even stronger perceived loss of masculinity than their ethnic Danish 'colleagues'. Where the ethnic Danish men seem to understand and accept the role of client, the GME men do not always understand this role and therefore have a difficult time navigating within the framework of the system they are now part of. They have a hard time accepting the loss of independence/autonomy that comes with being a client. With this follows that they often appear confused by the role of social workers, especially when social workers try to discipline them into doing domestic chores.

Walid – Stating the obvious

Walid is in his forties and have been living in the shelter for quite some time. The goal of his consultation (for him and the shelter social workers) is to be reassigned to the short list of cheap housing. He was taken off the list due to heavy drinking, but this behaviour has stopped. The presented sequence displays how an awkward situation (and related distribution of roles) is managed by the client (silence) and social workers (laughing). We enter when Bridget (a social worker from his ward) compliments him:

Bridget: I think you're a tremendous resource up at the ward. I mean you help out, even if you weren't the assigned responsible one [smiles cunningly at Walid], you still help out… [Pauses] And you cook and keep your room tidy… [Pauses] And it's going pretty damn well.

Walid: Of course [smiles and nods]

[Carol and Samantha laugh in a nervous manner as Walid leans forward with a smile on his face looking down. His shoulders are pulled up, his body made small, and he is rubbing his inner thighs with his hands, almost as if he were freezing]

Carol: Yes.

Samantha: Yes, so we're hoping for the best.

Walid: Yes [Speaks in a low voice and looks at Samantha]

The awkwardness is revealed in Walid's body language and the social workers' awkward pauses and nervous laughs. Walid's lack of verbal response, his silence, and a tense forward leaning position indicate that he does not see these domestic chores as related to anything. His only verbal reaction is 'of course' and 'yes', indicating that they are stating the obvious. For him, this conversation has no point. As opposed to the ethnic Danish men interviewed, he cannot see any reason for discussing this issue in a consultation with his municipality social worker (Jonathan) visiting the shelter. The social workers' nervous laughter, which is partly caused by Walid's body language, makes it clear that the situation is tense. His change of position (leaning forward) emphasises his annoyance with what is being said. It is as if he tries to bring himself into a front-stage character with which he could potentially meet their expectations, but ends up deciding against his involvement. His reaction is similarly documented in other consultations with GME men. In several consultations, this group is quite outspoken about independence and explicitly connotes independence with masculinity. The subject of independence is clearly demonstrated in

these consultations, as opposed to the consultation with the Danish men where independence and autonomy are more of an implicit issue. Thus, Walid states explicitly that it is an embarrassment for him to receive financial assistance, as he is a (criminal) man of action:

> Walid: No [I don't like receiving social welfare] because that implies that you've sunken to a low level. Because as a man, I've never ever needed social welfare. I'm… I'm not proud of this. I am a criminal. I am a criminal. I function by selling and being a salesman and using my street abilities to be a good salesman. I could work somewhere else, in a factory or something like that.

Walid refers both to his maleness and his criminal skills as relevant to his lack of reliance social welfare. He thereby paints a picture of himself as an independent 'man of action', who can handle himself in these respects. The paradox is hard to overlook. He cannot possibly be as independent and self-sustaining as he wants to suggest, as he is currently homeless and enrolled in the social welfare system.

Wasim – Not going along with the frame

Wasim is in his twenties and has a strong desire for independence. He explains this to his social worker (Annie) in the consultation several times. However, staying at a shelter challenges this important goal (as in the case of Walid):

> Annie: [Leaning in, gesticulating with one hand and shaking her head] It is important to have daily chores and getting them done. It's not as if I'm saying there needs to be

personnel watching you all the time, Wasim—not at all—I totally get that it is important to you…

Wasim: [Interrupts while Annie puts her flat hand out towards him like a stop-sign] I am independent [leans back, stares at Annie with an empty facial expression].

Annie: [Keeps waving her stop sign hand] To be independent and have your own… I completely understand. I just get a little bit worried about you if you don't get any help at all.

Wasim: Once in a while [I can accept], but not always.

Annie: No of course [shakes her head], of course [nods].

Wasim reacts reluctantly both verbally and bodily to Annie's worries. It is clearly important to him to be considered independent, which he keeps stating somewhat stubbornly. This repetition indicates that he does not think Annie understand him 'completely' as she says. To him, his independence does not match the perception of independence by his social worker, even when she emphasises her empathy towards him by saying that she 'totally gets it'. Her body language indicates that she is desperately trying to convince him of her ability to connect with him, but she fails miserably. She shakes her head and nods which are gestures that are almost symbolic for the entire conversation: Wasim's wishes are unrealistic, but this cannot be stated outright as he also has to be considered active and responsible.

Rashid – Unrealistic expectations

Rashid has recently emigrated from Lebanon to Denmark. He was educated as a physician and is currently in his fifties. He has limited knowledge of Danish and communicates with an interpreter. He is recently divorced and desperately wants to live close to his two early-teenage children and the local hospital where he hopes to work. His social worker (Samantha) tries to bring his expectations down:

> Samantha: [Leaned in towards Rashid] No, no… So, because it's, you know, there's a very, very long waiting list for apartments where you want to live, so it's really… [Rashid nods, stands up and sits down again]. So I'm thinking that, uhm, you… [draws out her words] you have to consider getting registered in some housing, located a bit, maybe in the surrounding municipalities [draws a circle in the air], or a bit further away where the waiting list is shorter [Rashid takes a sip of his coffee].

> Translator/Rashid: [Rashid makes the 'stop' signal with his hands while talking to the translator and gesticulates while the translator speaks Danish] My entire family is living in this town; they work in there. I also want to work at the hospital situated in this town. And I don't have the money—£300 a month to get back and forth all the time with public transportation. My friends all live there.

> Chad: Yes [nods and takes notes].

[Rashid breathes out frustrated].

Samantha: Yes [pauses] I mean… [Leans back so she is sitting further from the table, corrects her glasses and lays down her pen on the table] You could say that, and I totally… [claps her hands so they are folded in the air and looks at Rashid]… I totally understand Rashid that it would be nicest for you to be near your children, and near you friends, and near work if… uhm… you hopefully get it at some point. But [raises her voice and breathes out] you can, I mean, it might be necessary [points her two index fingers into the air] to have a look in other municipalities as well, because you can't stay here forever.

As the passage shows, Rashid's expectations are too high. He imagines that he can get a job as a doctor in a Danish hospital and get an apartment near his children and friends. However, his social worker's focus at a much more basic level: he needs a roof over his head. She tries to correct his expectations, while at the same time trying (and failing) to not be too discouraging: 'if, uhm, you hopefully get it at some point' ('it' referring to work). In the first part of the sequence, her body language indicates a personal and empathetic (backstage) attitude towards Rashid, but it changes in the last part where she takes on a professional body language, understanding now that she needs to be the voice of reason. The tension lies within the fact that Rashid still sees himself as an independent and capable man in control with a high level of opportunities in life, while Samantha indicates that this is probably not the case. His problem is that he does not understand what it means to be a client, that is, what and how much (or little) a client is entitled to ask of the system, or what is expected of him and why.

CONCLUSING DISCUSSION

In this chapter, I have demonstrated how a 'videography' approach (Knoblauch, 2012) qualifies an analysis of what it means to be a man and a client in Danish homeless shelters. This chapter's analysis has revealed how a caring approach is an important organisational norm of professionals – even though caring may inadvertently work against another important stated goal of giving clients a voice and the responsibility to decide over their lives. Organisational dilemmas are the key in most organisational research (Hoggett, 2006) studying the relationship between professionals and clients (Gubrium & Järvinen, 2014b). However, most of the research does not provide *concrete* displays of how the dilemmas are negotiated in everyday organisational life. A videography approach to the many small everyday practices of organisational life demonstrate the way professionals and clients actually interact – and manage the dilemmas – in specific situations. Hence, video recording organisational encounters is a useful approach if the aim is to conduct a fined-grained analysis that will reveal people's behaviours during meetings.

The chapter's analysis reveals that it is difficult to reconcile the role of clients' weakness with stereotypical perceptions of masculinity and strength. I have exerted attention on caring, parent-child relationships, and other ambivalent relations and positions that create problems for both clients and professionals. These ambivalent relations are particularly visible in the video recording of the participants' body language (including gestures, silent pauses, and laughter). Thus, the video recordings showed many situations where the client responded with silence and the social worker reacted to this pause with giggling. In these cases, the social workers especially try to 'solve' the tense, ambivalent situation by giggling. The word 'solve' is put in quotation marks as the situations remain ambivalent and tense. In the situation, the parties only

momentarily maintain their 'faces' by laughing. The analysis of the chapter weighs the bodily dimension of the client-social worker encounters. The reason for emphasising body language is to present the strength of video data when one wants to understand why and how people interact the way they do. As the analysis has demonstrated, body actions are just as important in the analysis as the spoken language. The body reveals how the participants relate to the situation (Soulaimani, 2018), and for this reason it is quite surprising that video data is not used much more than what is actually the case.

An ethnographic approach that takes the lead in video footage of real life interactions can illuminate the ambivalence of much of the work in public organisations. As Hoggett (2006) points out, public organisations are highly affected by dilemmas, and video data can be quite useful data in helping us to better understand these dilemmas.

This chapter's analysis has also examined how gender permeates the work of organisations. Gender and organisations are inseparable entities. Gender, as well as ethnicity and age, must be taken into consideration when we research why people act the way they do. These factors are equally important if we want to better understand why some organisational members' actions are deemed reasonable while others are not. In this context, clients with a background in GME seems to be particularly challenged, as they find it more difficult than their Danish counterparts to accept the passivity, care, and the childish role attached to their position. Even though social workers like to see clients take responsibility and have control over their situation, they often reproduce a practice that takes the clients' lack of responsibility for granted. By using a videography approach that explores how both parties negotiate the stereotypes connected to gender, ethnicity, and clients, it becomes possible to analyse the many ambiguities that characterise public organisations such as shelters. This chapter's analysis has thus demonstrated

one of the greatest forces of an ethnographic approach, namely why people actively reproduce the practices from which they explicitly distance themselves. In this case, many practices reinforce passivity in clients despite an explicit stated wish of social workers to achieve exactly the opposite: to enable clients to become active and responsible for their own situations.

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