



Assumed empowerment: consuming professional services in the knowledge economy

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Abstract

Purpose – This paper considers the notion of consumer empowerment across the financial, legal and medical service sectors in the UK. Although the advent of the internet is generally seen as potentially enabling consumer empowerment, theoretical papers divide on the question of efficacy. On the one hand, it is argued the much-vaunted internet opportunity must not be simply taken as evidence of change in the consumer-producer relationship. On the other the change must not be unquestioningly be taken as advantageous to the consumer.

Design/methodology/approach – Empirical data were generated through ten consumer focus groups and eight interviews with professionals.

Findings – The paper supports the contention that empowerment is partial and unevenly distributed among consumers. It is argued that characterisations of consumer indifference and producer discipline as preventing effective empowerment are too simplistic. Additionally, any taboo restraining the questioning of professional judgement is largely absent from the assumption of choice and of recognition/respect among the consumers participating in the research.

Research limitations/implications – Focus group research does not enable a judgement about the prevalence or distribution of empowerment assumptions among consumers.

Practical implications – It is inevitable that in the broader consumer market professionals will be required to respond to a complex of consumer assumptions and these will include an assumption of empowerment.

Originality/value – Much of the services research in marketing has been set within the service recovery paradigm; given information, consumer power is an implied function of the market. In this paper, we see consumer empowerment as a process of negotiation partially facilitated by information.

Keywords Empowerment, Information searches, Internet, Consumers

Paper type Research paper

Introduction

Comparing accounts of consumer empowerment across financial, legal and medical sectors might appear unusual in that in most western economies these services occupy

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different provisioning structures, ranging from primarily private to primarily public. However, convergences, at least in the political and professional rhetoric, of financial, legal and medical services delivery are increasingly apparent (Hodgson, 2002, p. 325). Like other services, these sectors have at various times been “professionalized” (see Foucault’s (1973) and a similar analysis of recently commodified funeral services in Gabel *et al.* (1996)).

The specific aspects of these services on which the research focuses, namely pensions, divorce, and primary healthcare, possess important similarities. In all three cases consumers exhibit high involvement yet are largely disinterested before becoming directly engaged with the service. Additionally, such services all involve a level of personal risk and consequently there are reasons why consumers might harbour a degree of reluctance to engage with the service. That is, these services involve either paying in advance for future financial security or paying for and/or engaging in painful, displeasing events. Such complex professional services consequently provide a context in which consumer and professional negotiation of roles, and by extension boundaries, can be critically examined.

Anchored in existing literatures on consumer empowerment, the primary aim of this paper is to examine the evolving nature and dynamics of consumer empowerment in the context of the emergent knowledge society. The rise of the knowledge society on the back of the information revolution has impacted on the consumption and provision of knowledge based services (Laing *et al.*, 2005). The patient confronting the medical professional with information downloaded from the internet has become symbolic of the perceived changes in consumer behaviours and roles in such settings. Although providing a powerful image of the renegotiation of the professional service encounter, such anecdotes run the risk of simplifying the complexities inherent in any renegotiation of the consumer-professional encounter. Through in-depth qualitative research with professional service consumers, this paper explores the nuances of evolving patterns of consumer empowerment and in turn contributes to the evolving conceptualisation of consumer empowerment. In particular, it will facilitate understanding of the changing nature of consumer-professional relationships and the consequences of a potential drift towards transactional consumer-focused encounters in such service settings.

Conceptualising consumer empowerment: theory to evidence

Writing in the 1940s L.E. von Mises produced perhaps the most “provocative” theoretical accounts of consumer sovereignty. Gonso (1990) summarises von Mises position:

The heart of his argument is that if strict laissez-faire capitalism exists, wherein the state enforces juristic laws and leaves the operation of natural laws unhampered, then consumer sovereignty will rule over all, with the rational interests of all other classes being harmonized with it in the long run. In more detail, the consumers’ rational wants, as expressed by effective consumer demand in product markets, ultimately (the exact meaning of “ultimately” being left unclear) will determine all prices; self-interested entrepreneurs, factor owners, savers and investors will voluntarily and rationally calculate and choose courses of action in the light of price facts; and so effective consumer demand will govern “all economic phenomena” and optimally satisfy itself.

In this theory consumers are empowered through “catalytic, or indirect, power”. However, Gonso (1990) also lists what has now become a familiar critique of this highly theoretical position when he asks:

... could the notion be convincing in the face of externalities, imperfect consumer rationality, variations in the distribution of income of consumers, real costs, monopoly, mass production of standardised products, and [producers’] selling efforts?

Although these questions still form the basis of many of the contemporary debates around consumer empowerment in professional services, significant changes have occurred in the market relationship between producers and consumers to reinvigorate that debate.

The perfect “new consumer”

The work of David (2001) exemplifies recent articulations of the notion that in more affluent societies unprecedented access to information, especially via the internet, has empowered consumers in respect of healthcare:

One of the main forces within the e-environment is *consumer empowerment*. With greater access to higher education and better, more readily available sources of information than their forefathers, consumers are assuming an increasingly active role in their own healthcare. [...] Instead of being passive recipients of judgements and treatments handed out by the medical community, consumers will be actively involved in managing their own healthcare. They will demand a better quality of life, better care, personalized treatment, convenience, choice, and value for money. (2001, 6/7 *emphasis added*).

David’s formulation is both descriptive and predictive in accordance with the contemporary “relationship marketing” paradigm: empowerment will move producers away from standardised products.

Much debate, especially in healthcare, but also to a lesser degree in other professional services, focuses on firstly, the quality of information available to consumers in an unregulated environment, and secondly the capacity of consumers to process the available information. From a libertarian perspective the unregulated nature of the internet is precisely what empowers consumers. Conversely, the professional perspective sees “misleading” information as a bar to properly informed consumers (Impicciatore *et al.*, 1997; Flanigan and Metzger, 2000). This rests on a concept of professional knowledge skills as necessary to the “correct” interpretation of information. From the competing perspective, any restraint on content might be seen as a return to professional monopoly that would run counter to broader social changes.

Knights *et al.* (1994) argued that, at the point of their review, customer orientation in financial services was more sustained by industry and academic rhetoric than reality. Certainly deregulation, the new rhetoric of consumption, consumer fragmentation and growing affluence had provided the conditions for a consumer orientated marketing in an industry accustomed to segmenting consumers along lines of risk. In these conditions greater differentiation and the development of “new” products might be expected. However, a marketing (re)orientation is, they argue, also dependent on an active consumer. Empowerment requires both market conditions and consumer will. Where consumers are largely indifferent to the product category, not exercised by “need”, or in a vulnerable situation (Gabel *et al.*, 1996) there is little drive towards increased consumer literacy. Thus, in spite of the favourable conditions,

Knights *et al.* (1994) saw few consumers as having the sophistication or interest to discriminate between providers.

Nevertheless, consumer empowerment, either notional or real, in relation to financial services has remained the subject of debate (Hodgson, 2002). This is not least because of the growing level of consumer business conducted on the internet and the capacity of that channel to deliver provider and product comparisons (Hodgson, 2002; Peppard, 2000). Peppard (2000, p. 318), for example, predicts an extreme vision of a consumer orientated e-finance future:

In the marketplace consumers can search out the best deals, often using the services of intermediaries[, and using reverse auctions it is only a matter of time before customers will post their financial requirements and financial institutions together with other non-banks will bid for their business.

From Knights's *et al.* (1994) perspective, however, these views document the conditions within which the empowered consumer might act; they do not directly document the consumption itself. They do not demonstrate consumer interest driven by "need". Rather, empowered consumption may be inferred from either the consumer friendly opportunities offered by the internet or the success of online service providers.

Competition and professional monopoly

David (2001, p. 7) implies a breaking down of professional monopoly when he refers to the ending of judgements being "handed out by the medical community". Thus, increased competition and/or diversification is both the assumed condition for and a consequence of consumer empowerment (McKean, 1999; Port, 1999). Peppard (2000, p. 318) argues that "competition in the market place returns power to the consumer". In reviewing the literature on this much-vaunted transference of authority from the producer to the consumer Abercrombie (1994) sounded a note of caution. He agreed that spaces for consumer empowerment opened during times of producer restructuring and increased competition. However, increases in consumer power require to be seen as evidence of what von Mises viewed as a general and inevitable trajectory. Abercrombie (1994, p. 56, emphasis added) concluded that:

One may therefore expect rising groups of producers to advocate, and try to introduce, market relations in an effort to disrupt the authority of existing dominant producers, an effort which will have the *temporary* effect of empowering consumers.

Whereas "... the 'consumer movement' in medicine has evidently changed the ways in which doctors normally deliver diagnosis" (Heritage, 2001, p. 54), Knights *et al.* (1994, p. 51) argue that in financial services, because of a general consumer indifference towards the product, "pressure group activities" have affected only some in the professional and middle classes. Knights *et al.* (1994, pp. 51-2) make one further important distinction. They contrast the professional advice based-model where the consumer is protected by government and professional self-regulation with the competitive market sales model. In the latter the consumer needs to be sophisticated in ways both they and Hodgson (2002) questioned. Even where the conditions and will towards empowerment are present, MacStavic (2000) argues one should not simply assume only benefits. He charts the disadvantages to consumers of greater empowerment. Firstly, they make choices that, in spite of their greater knowledge, they might be ill prepared to make. Secondly, they take risks and bear the responsibility.

Thirdly, they spend more time than previously making decisions. Consequently, “the fact that consumers have more choice means the onus is on them to make them” (MacStavic, 2000, p. 30).

Constrained empowerment: producer power

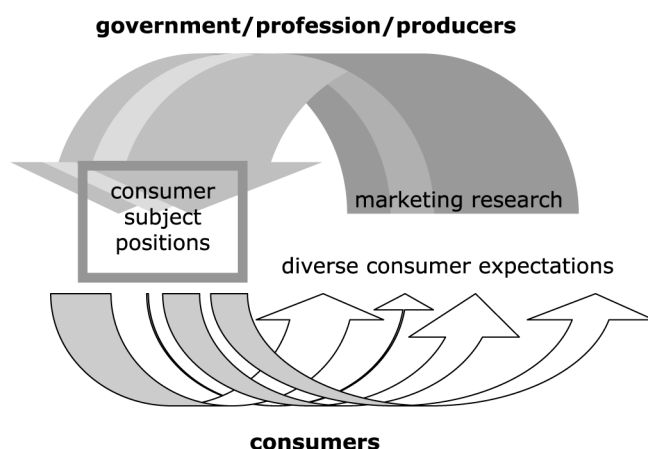
Although greater consumer knowledge and access to information clearly has the potential to alter consumer-professional relationships, Hodgson (2002) argues that at least in financial services such formulations oversimplify the notion of consumer empowerment. Drawing on a Foucault’s (1980) perspective, notions of empowerment are viewed as being set within disciplinary processes that allow freedom to choose only from a limited range of acceptable subject positions. In political representations of citizenship it may be argued that the disinterested individual does not occupy one of these positions. However, the rational consumer selecting between available products, and responsible for their own future, is in such a position. In such a context, Hodgson argues that marketing is the processes through which attempts have been made to make the population calculable. Thus, the “modes of freedom being offered” (Hodgson, 2002, p. 326) are complex in a way that is underplayed in the either/or debates on empowerment.

David (2001) inadvertently illustrates Hodgson’s point when enthusing about the opportunities the new “forces of consumerism” offer pharmaceutical companies:

The internet will change what pharmaceutical marketers do and enable them to reach and influence consumers relatively economically. [And] the company will deliver a total healthcare package [as] an individualized health-management portfolio [to] provide medicines [and] “wellness” measures like exercise programmes (2001, 7/8).

Hence, where consumers have been empowered to make choices, responsible choice as framed by the profession will be the only rhetorically acceptable option and there will be strenuous efforts on behalf of the established professional players to influence the content of the consumerist choice framework. As Hall (2001) argues, Foucault says we adopt subject positions (medical patient, legal client, financial investor) in order to make sense of a world of discursive formations. Thus, from Hodgson’s view, to uncritically celebrate the new freedom without recognising any constraints is as naïve as to reduce the rhetoric of consumer empowerment to an illusion manufactured by capitalist hegemony. Penaloza and Price (1993) ably describe the situation as “the interplay between the agents of resistance [consumers] and the structures withstood [professional services]” within market situations.

This critique of consumer empowerment sees the diversity of possible consumer strategies reduced by “governmentality” (Hodgson, 2002) of the dominant professional or producer group to a number of subject positions that are offered to the consuming population. This argument is shown in Figure 1 representing the way in which professionally determined subject positions offer constrained consumer choice. Since professional disciplinary power is never understood as complete or entirely dominant because it is exercised in localised practices (Foucault’s, 1980), choice outside the box is always possible. Such choice, however, requires active and forceful consumer engagement to challenge professional “truth regimes”. Consumer accessing of complementary and alternative therapies in face of opposition from the medical establishment exemplifies the requirement for forceful engagement.



Assumed
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Figure 1.
Service positions and
consumer expectations

The ability of the government, professions and/or producers to hold these positions depends on their perceived legitimacy. Abercrombie cites expertise, deference, control of meaning and taboos against change as the four most important constituents of (producer) authority. He considers that in some specific relationships “doctor-patient (we might add lawyer-client and financial adviser (IFA)-client) expertise or skill is of the greatest importance” (Abercrombie, 1994, p. 50). More generally he says:

I would argue, control of meaning is particularly significant in contemporary societies; that is the authority of the producer is sustained by the capacity to define the meaning of the transaction involved and is lost as the consumers acquire that power. (Abercrombie, 1994, p. 50).

It would be hard to conclude other than that some loss of legitimacy in this respect is being experienced by professionals across medical, legal and financial sectors in the face of an increasingly consumerist society with unprecedented access to specialist technical information, and the means to interrogate and challenge that information.

Constrained empowerment: consumer restraint

Individual economic capital has been widely recognised as restraining individual consumer choice and limiting consumer capacity to switch suppliers (Gonse, 1990). Proponents of consumer empowerment have contended that increasing consumer wealth in post-industrial societies has, for many, affected the nature of the consumer-supplier relationship, suggesting a general empowering of consumers *vis-à-vis* suppliers (David, 2001). Henry (2005) challenges this economic conceptualisation of empowerment, arguing that not all consumer aspirations towards empowerment are equal. He argues that “distinctive self-perceptions” (Henry, 2005, p. 775) imbued within “class positions”, impact on the expectations of empowerment. Thus, some individuals “self-restrict already limited opportunities” (2005, p. 767) even where markets are more generally open to consumer empowerment. To an extent a culture of empowerment rhetoric, experienced in work, home and leisure contexts, is necessary to the practice of consumer empowerment in service delivery contexts. Such critical models of consumer empowerment and disempowerment

presume a number of mismatches. Between consumer expectations and governmentality of offered subject positionings; between the disciplinary rhetoric of offered subject positions and consumer practices; and between the environment of consumption choices, represented by offered subject positions, and consumer self-restricting behaviours. Consequently, although producer enhanced choice does not necessarily lead to the experience of empowerment by consumers (Wathieu *et al.*, 2002), the experience of empowerment can be produced by consumers even where they perceive oppressive productive regime through the adoption of alternative subject positions (Thompson, 2003).

Conceptualising empowerment in contemporary culture

Most advocates of the new consumer empowerment have documented the conditions for empowerment to occur, rather than demonstrated its existence and practice. However, contemporary critiques of the notion of consumer empowerment have not rejected the notion of empowered consumers in totality, as, for example, Packard (1957) and Marcuse (1964) would certainly have. Rather such critiques have noted the limitations to empowerment. Specifically, empowerment might ebb and flow in line with the level of producer competition, to an extent it must be a function of negotiations between consumers and producers, and not all consumers will equally avail themselves of the opportunities either because they lack the interest or think themselves unable to exert such power. These are important caveats to prevailing conceptualisations of consumer empowerment. Nevertheless, the paper will contend that ultimately in any sectoral setting it is not necessary for all consumers to evolve into active empowered consumers for producers to reconfigure the nature of the consumer-supplier relationship and embrace empowered consumers as partners. Rather producer behaviour will respond to and evolve in line with, the dynamic behaviours and expectations of consumers. As Abercrombie acknowledges, when taboos have been breached, it is difficult to imagine them being re-established quite as comprehensively as before. It is within this conceptual context that evolving patterns of consumer-professional interaction across the three focal sectors will be examined.

Research context and method

In this paper, we examine perceptions and practices of empowerment among high involvement (Zaichowsky, 1985) consumers in the context of three distinct professional service settings, namely primary healthcare, civil legal advice, and personal investment management. These consumer perceptions are primarily narrated through stories of service encounters and characterisations of the nature of the consumer-professional relationship. The underpinning research programme reported in this and other papers (Hogg *et al.*, 2004; Laing *et al.*, 2005) addresses the impact of changing information access, primarily but not exclusively via the internet, on professional-consumer relationships in the evolving knowledge society. The research programme has encompassed both qualitative and quantitative approaches with consumers and professionals across the three sectors.

The research reported in this paper draws on data from interviews with professionals and focus groups with consumers. As part of the first phase of the research, semi-structured interviews were conducted with eight professionals in each of the three service sectors studied ($n = 24$). The professionals were not compensated

for their participation. They were identified through the relevant professional associations as representative key opinion formers with an interest in the changing nature of the professional discourse, the impact of the emergence of an informed consumer culture on professional roles, and the nature of that profession in contemporary society. The interviews were structured through use of a standard interview protocol allowing comparison across interviews. Key questions were designed to “lead’ in a direction opposite to that in which [we expected] the answer to lie, thus avoiding the danger of misleadingly confirming [our] expectations” (Hammersley and Atkinson, 1995). This was designed to indicate the range of professional responses to the reported change in consumer behaviour. The interviews were audio-recorded and later transcribed verbatim.

Subsequent to the professional interviews ten focus groups were conducted in six locations: two each in Aberdeen, Bristol, London, and Manchester and one each in Milton Keynes and Glasgow. Participants were recruited and compensated through a specialist fieldwork company with the requirement that each had, within the last 12 months consulted a qualified professional and made related use of the internet in at least one of the three sectors forming the focus of this research. The groups comprised female ($n = 26$) and male ($n = 27$) participants. Their ages ranged from 18 to 61 and from unemployed through clerical to professional occupations. None was employed in legal, financial or primary healthcare services. Participants were asked to relate experiences they had with relevant professionals and in particular their use of information in both addressing the underlying need which prompted the use of the professional and in their subsequent dealing with that professional. Other participants were encouraged to comment on and discuss these experiences (Morgan, 1988) to increase the richness of the data and ensure relevant subjects were covered from the consumers’ perspective (Collis and Hussey, 2003). The geographically located, demographically mixed focus groups lasted between 70 and 90 minutes and were audio-recorded and later transcribed verbatim.

Following transcription both the interview and focus group datasets were analyzed using QSR N6 qualitative data analysis software. For the specific purposes of this paper the datasets were analysed by two researchers for recurring themes as well as contradictions across interviewees and sectors. General data categories derived from the conceptual literature, together with further categories and subcategories developed progressively from the data (Glaser and Strauss, 1967) were used to facilitate analysis. The themes developed, therefore, arise from our categories. The data presented in this paper are those that offer understandings of consumer attitudes to empowerment with reference to the themes drawn from the literature review. As such the data represents a “two-level scheme” (Miles and Huberman, 1994, p. 61) namely specific emic consumer understandings nested in general “etic” analytical themes. To facilitate data tracking the focus group location and number, the participant’s first name and an identifying number follow each data extract presented. As in many cases the extracts illustrate more than one aspect of the issues under discussion, the use of identifying number allows cross-reference.

Influencing empowerment: information, culture and consumers

The professional-client relationship is inherently contested. Consumer challenging of professional authority reflects the intersection of individual values and experiences

with professional subject positions. The debate around consumer empowerment in such contexts has a long pedigree. The socio-economic changes encapsulated in the rise of the risk society and the knowledge economy have intensified the challenging of professional authority and brought the debate around consumer empowerment, and the associated issue of the professional-consumer relationship, to centre stage across professional service settings. However, such generalisations conceal a range of consumer behaviours from compliant thought to consumerist (Laing *et al.*, 2005). The data would suggest two key sets of influences determine consumer positioning on this spectrum. Firstly, the capacity to use available information resources, and secondly, the willingness to use such information to challenge professional power.

Engaging with information: involvement, capacity and empowerment

Professionals' perspectives varied considerably in their conceptualisation of, and attitude towards, the idea of the "informed" consumer (Laing *et al.*, 2005). However, a majority of the professionals interviewed were sceptical of the idea of consumer empowerment, articulating questions which reflected central themes within the critical literature on empowerment:

... the average man in the street, his knowledge of finance is very, very limited. They don't understand, and if you look at it from that level, and then trying to move up a gear to going on the net, and looking at your funds and switching funds, it's a gigantic leap. People think my investment's there, and apart from that I don't want to think about it everyday, I can't be bothered. They're just not interested. They want someone else to do it (Financial: 002).

I refer judgements to clients. I can say to someone, go on the Internet and read the judgement in so-and-so case. That's assuming the client is capable of actually understanding what's being said, and most clients don't ... They are too emotional, they haven't got sufficient objectivity to work out what is actually being said (Lawyer: 006).

They are talking to you as if they regard themselves as an equal in their knowledge and yet their knowledge base isn't there. These are specific things they have gained and whilst what they're saying may be absolutely right or obviously completely wrong, how to use it in the context of the bigger picture or them as a person is the problem (Medical: 001).

In line with Knights *et al.* (1994) the financial adviser reported consumer apathy, along with a lack of technical knowledge as barriers to empowerment; the lawyer echoed MacStavic's (2000) argument that very few clients are mentally prepared to engage with complex technical information; while the medical professional questioned the sophistication of consumers and expressed concerns about the "over confidence" of consumers.

Although there is undoubted veracity in the concerns articulated by professionals regarding consumer technical literacy, Abercrombie (1994) argues this concern as a struggle over the ownership of meanings, and in turn the service encounter. The validity of knowledge and perspectives constituted a recurring theme across both consumers and perspectives. The consumers in the focus groups generally typified their relationship with professionals as a struggle to have their credibility in the field accepted. Specifically, this was normally couched in terms of their ability to utilise the language of the profession:

I think once you've done it for a while, I think like you say, they [the professional adviser] realise that you know a little bit about what you're talking about ... and I think when you talk

to people they do realise, like your solicitor, that you're not, you know, simple. You know a little bit but not quite everything" (Manchester 1, Derek: C05).

Whilst some professionals were portrayed as inadequate to their task (C01), the majority of participants wanted to be understood as having the capacity to make a contribution (see also C22), if not on an entirely equal basis, to the service encounter:

I think there's a degree of healthy cynicism about not necessarily believing everything that you're told first time and going to check out from other sources. But I think if you're starting point is to assume that you know better or to go on the Internet before you have your interface with a GP then I think the individual assumes that they actually know more than the GP. And I don't think that can always be the case (Glasgow 1, Peter: C06).

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Consumers present a broad spectrum of assumptions (to use David's (2001) term) about the right conduct of the service encounter (Laing *et al.*, 2005). However, in the narratives emerging from the focus groups empowerment rarely took the form of consumer dominance over or even parity with the professional. Rather it was assumed that recognition of the consumers' general literacy and possible contribution would be accorded. For a minority of professionals, increasing consumer literacy was viewed as an asset in that it enabled the professional to deliver enhanced value within the encounter with empowerment enriching the professional's role:

... then you can have more of a two way discussion about things and yeah, that would be great actually, as opposed to me telling them what the law is, etc., etc. It would be great if they had a bit more idea because then you could really sort of explore what options they've got and it can cut down on the time as well (Legal: 003).

Looking beyond issues of technical literacy and sophistication, it is argued that empowerment occurs only to the extent that consumers actively engage; empowerment would not develop within services where consumers are indifferent. Given that the focus group participants were selected specifically because of their high involvement in the services which they had utilised, they were unlikely to be passive service recipients. Reflecting such high involvement, participants (C01, C06, C09 and C19) articulated cases of actively delving into technical information and putting a "strong case" (C03/7) to their adviser:

But if you go in there [to consult a medical professional] with a strong case and stand up to them, then there probably is a bit of mutual respect and they tend to listen to you more. (Milton Keynes 1, Richard: C03).

This type of expectation of engagement was common as the range of subsequent extracts confirm. What is interesting, however, is the light these data can shed on the nature of engagement in some fields of knowledge and indifference to others:

If I had a legal problem, I might use the Internet just to get a general clarification and a general understanding of the issues, but I'm sure I'd seek professional advice. I'm fairly sure I wouldn't want to get involved with the legal side myself. I'm not really sure why, but certainly when it comes to a medical matter and if it was quite serious, I wouldn't trust myself, I would want professional input. But from a financial point of view, I'd be entirely happy to make decisions for myself based on data on the Internet. I guess I'm thinking the legal world is so complicated and dull and dry that I really don't want to get involved unless I have to (Bristol 1, Jonathan: C04).

The scope for empowerment, we might argue, occurs for consumers in general where only a certain proportion of the public engage. Therefore, while it might be argued that some professional services are inherently uninteresting (personal finance, for example) this evidence suggests that some consumers actively engage with the detail of the service even where professionals think of their area as inherently uninteresting to consumers and notions of what is and is not interesting varies widely among consumers, with interest appearing to be a product of both situational and personality factors.

Beyond information: cultural capital, taboos and empowerment

Consumers do not just need an interest in the subject and sufficient expertise to interpret that information in order to engage with professionals. Additionally it would appear necessary that they feel they have sufficient cultural capital, that is, an expectation of empowerment, in order to renegotiate the format of the encounter. In the following extract a professional within a focus group, acknowledges that the successful engagement is dependent upon “a positive vibe”:

Eventually, as I say, I feel stronger and stronger and thought, I'm not going to put up with this. And then I'd think, actually, if you go in [to consult a medical professional] with a positive vibe, you get them coming back to you. Whereas if you go in on the defensive, they're the experts, they tend to try to put you down or whatever. But if you go in there with a strong case and stand up to them, then there probably is a bit of mutual respect and they tend to listen to you more (Milton Keynes 1, Richard: C07).

It was common for the participants' narratives to speak of being empowered by some acquired knowledge (C13 medical, C15 legal and C23 financial). This was frequently coupled with issues about respect being accorded them (sometimes grudgingly) by a professional. Implicit in these stories was the notion of breaking the taboo that prevented professional opinion, across these professions, from being questioned:

... if you can put a reasonable argument forward and show [the solicitor] that you're informed about something, then you'd be taken more seriously, and I guess that's also one for the medical side of things as well. If you go in and you obviously know what you're talking about, then you won't get given the brush off (Bristol 1, Phil: C08).

They [solicitor] just wanted everything to be smooth and clean cut but after three years you think to yourself, well hold on a minute here, you've had quite a bit of money. Why should I keep paying money for you basically just sitting there and not even carrying out what I've asked you to do? And when you go with that bit of knowledge its like, well whoa, where did you get that from (Aberdeen 1, Fiona: C09).

I think you need to be very, very clear on your facts and you mustn't waver and I think that's true of a lot, you know, particularly when you're dealing with doctors, GPs, solicitors, you've really got to get down to facts and I feel you are only respected if you can deal with it on that level. You've got to remove all the other stuff that comes with it (Bristol 1, Sally: C10).

It is not just the acquisition of “facts” that can precipitate a challenge to a professional's recommended course of action, values and attitude can also be triggers for consumers challenging professionals (C26). At the extreme of perceived empowerment the consumer becomes the (sometimes acknowledged) expert:

... they've [the NHS] asked me to take part in a research programme now about lay people being advisers for asthma. It's like you said, people who are going through the same thing

will trust someone else who has gone through the same thing more than they will a GP. Most GPs are jacks-of-all-trades and masters of none . . . I'd say I was an expert, yeah. I know my condition inside out and my medication and how to self-treat, because if I didn't I wouldn't be here . . . he rolls his eyes in a sort of "oh here she comes". I've got respect for him, you know, he's a consultant, you have to have some respect, but I think he has a respect for me now as well because I do know (Manchester 1, Julie: C11).

These extracts can be viewed as indicating a perceived shift in consumer-professional relationships on the part of highly involved consumers. Similarities in accounts can be drawn between the financial and medical fields (C02), legal and general professional services (C05), legal and medical fields (C08) and across all three (C10). Again, Jonathan's contribution (C04) is instructive in that it is possible to suggest that such consumers expect to manage the input from professionals relative to their own knowledge acquisition in accordance with their interests and assessment of need.

Realising empowerment: competition, self-service and choice

Whether or not consumers gain power relative to professionals, critical perspectives on empowerment typically view such victories as pyrrhic, disguising the continuance of professional power and dominance. In considering whether consumer empowerment is realised, it is valuable to analyse the focus group data in terms of three prominent criticisms of the notion of growing consumer empowerment. Firstly, consumers only gain power at times when producers are restructuring and competition predominates over monopoly. Secondly, questioning whether it benefits the individual to produce part of the service themselves. Finally, empowerment that mimics the established choices is better considered to be disciplinary rather than empowerment.

Competition versus professionalisation

Competition is argued to open up the possibility for consumer empowerment; monopoly forecloses. Within the public sector setting this is encapsulated in the debate around "choice, voice and exit" as routes to achieving user focused service provision (Clarke and Vidler, 2005). In private sector contexts, the idea that consumers might change to an alternative financial adviser or solicitor in the event of is not unfamiliar, reflecting the market-oriented organisation of both professions (see also C25):

I can't think of an instance where I've had to go back and challenge [my financial adviser]. I think, [...], my personal approach is not one of confrontation, I think if it did come to that, I'd be more likely to switch professionals (Glasgow 1, Peter: C12 emphasis added).

So, anyway, we got rid of the solicitor [handling my mother's divorce], because, in my opinion, she just wasn't good enough. And when I looked into it, her fees were too low . . . which might sound surprising. It sounds odd but you've got to look at somebody like a solicitor and say, well, it's a market out there. You wouldn't get a BMW for a Ford car (Glasgow 1, Rory: C12 a emphasis added).

The introduction of consumerist rhetoric into healthcare, has however, increasingly raised the possibility of the switching of medical professionals, although the scope for switching is structurally limited:

So I got my box of pills, took them home, and I don't normally read the bit of paper that's inside the box, and I sat down and I read it, and it says about various aspects of these pills and I went onto the net and checked it out. I went back to him [the GP], and he said how are

you doing, so I said I'm taking them, and I says, it says here this that and the other, and he says so you're going to take the word of a bit of paper over me. So I said, yeah, he said you're wasting my time then aren't you? So, I said there's the pills and I just walked out. The bit of paper that's in the pills are actually produced by the company that's produced the pills and they've done all their research and it takes how long, ten years, for a pill to be produced, an I thought, well I won't tell you what I thought, but I've since changed my doctor (Bristol 2, Paul: C13 emphasis added).

Some participants in the focus groups did not see their informational empowerment in terms of switching between alternative professionals. Rather it was their knowledge of alternatives that empowered them, with empowerment being exercised through their ability to change professional behaviour and service offerings:

I've gone on the Internet and I came up with a really good rate and I armed myself, got all the print offs, and I sat down with him [my financial adviser] and he was a bit flabbergasted that I'd done this because we normally just sit down and talk about what period of time we want to take the mortgage on and blah blah blah, and he actually went away and came back with an unbelievable rate. So I gave him competition, he came back with 3.5% over two years. I mean it was brilliant (Manchester 2, Alan: C14).

Clearly the possibilities of selecting service professionals or alternative products might foreclose as a result of market consolidation. The development of effective monopoly status is possible in financial and legal services in spite of regulatory safeguards. Professionalisation itself might be seen as closing effective competition. Equally the political rhetoric of choice might wane in the health service. However, a consumer culture generates resistant assumptions of choice. The pressure group "Fathers for Justice", for example, presupposes the availability of a more combative "product" in family law practice than is usually available in the UK. Similarly the demand for alternative healthcare alongside conventional medicine is indicative of the embedding of choice, in particular beyond established subject positions, within professional service settings.

Self-service versus self-serving

One of the key perceived attributes of the internet in empowering consumers is the scope it offers for consumers to make valid comparisons across alternative service and product offerings. A recurrent counterpoint to this contention is that the consumer is in effect accruing work which was formerly undertaken by the service provider. In engaging in such activities consumers are spending more of their time producing the service itself, raising questions as to whether this can realistically be viewed as constituting real empowerment. Some of the consumers in the focus groups clearly articulated this frustration:

I actually found it quite frustrating as well because for many of the [legal] things I'd expected her to give me answers to, I ended up turning to the internet to find them for myself, which deeply distressed me that she was being paid and I had to find it. But it gave me, having the backup of the Internet and the resources that I could have gave me confidence in going to deal with her (Manchester 1, Julie: C15).

Irritation at having to undertake some of the legal research work was, however, tempered in this case by a more self-serving satisfaction about empowerment. Indeed, some of the participants, far from seeing information gathering via the Internet as an added burden seemed to take it as a matter course that they would inform themselves:

I would trust what I was told [by a professional] but I would maybe then go back and seek some sort of confirmation or more information from the Internet. I guess I've been quite fortunate, I haven't had any instances where me or someone in my family has been told A, and then we find out on the internet or from some other source that the information was incorrect. So generally the internet has confirmed what we've already been told (Glasgow 1, Peter: C16).

If he [the GP] says right, I'm going to try you on a certain drug, before I follow the prescription through, I'll probably go home and find the information about this drug, put the point by telephone and say well, could this happen, do you think before I start taking this drug, that you know, this is the better of the two. He might prescribe something else not as strong (Bristol 2, Dave: C17).

In these and other medical cases (C06, C13, C20, C22 and C26) and financial case (C25; consider also C15 as a legal case) there is a sense of vulnerability based on the fallibility of professionals concerned. Conversely, the inadequacy of websites (for example, C23 as a financial resource) was rarely discussed.

In these medical cases the notion of informed collaboration seems to supersede that of concerns about who was responsible for undertaking the research. It is hardly surprising that, having different delivery channels (market/public), the services are viewed differently by consumers. In the following extracts self-service is presented as a social responsibility (C18 and C19) and a personal necessity (C20):

As an illness it's there all the time. I can't be bugging my doctor like everyday. Because there's a symptom there all the time and I've just learnt to live with it now, but I mean sometimes they get worse and I can't always be going back with them to my doctor. So I do self-diagnose a lot. This web site is really helpful, I buy quite a lot of things from there and they've all helped me a lot (London 1, Jessica: C18).

I go very quickly through them and, you know, you have a feeling of guilt if you go over the 15 minutes. Somebody else out there might be dying or in more need than me, so I better quickly get my bits done and head out of there. (Interviewer: so you want to be an efficient consumer?) I do, and I feel that my GP responds to that. I think he says, okay, you don't need to see me again, either put it in writing or give me a call and we can work on this sort of basis. I'm happy with that and he's happy with that and I feel I get the result then. He does listen, mind you, we have a 15, 16 year relationship. I think that plays a part (London 2, Hadlin: C19).

There's always that urge in me to want to understand it in my own way. And remember, the doctor's not my teacher. He's not there to break it down to my satisfaction. It's up to me to make a decision. So I need to take that further. Well, I always go to find out for myself what's really going on (London, 2 Hani: C20).

In one case the benefits of complete self-service were expounded as providing an environment where the consumer is less vulnerable to immediate pressure:

... and everybody [financial advisers] is going to try to sell you something and the thing I like about the net is obviously it's at my leisure, I can see all the [financial] details, I can try and consume it, I can even take a print-off and I can sit and digest it at my leisure without any pressure to buy or accept deals in front of me. I've always found that any time I went to see an adviser, they were just interested in getting me to sign, they would say this is the best deal you can get (Aberdeen 2 Mike: C21).

Concerns about undertaking self-service surfaced among our participants especially with regard to market transactions. Whereas medical cases might be tempered by

concern for the professional's time, legal and financial professionals would in this respect be expected to offer value for money. However, the resulting feeling was never one of simple indignation. What was common in these reports was that most of these particular participants would not question the notion that their inherent vulnerability simply required informed participation in the service encounter.

Consumer appropriation of meaning versus producer choice

Advocates of consumer choice highlight the opportunities afforded by the internet. Detractors suggest that the choices offered by producers ought in the majority of cases to be considered as, in Foucault's (1980) terms, disciplinary. This is in the sense that, while giving the appearance of empowerment (to choose), they channel the consumer to a set of positions that are acceptable within the producers' "regimes of truth". Additionally, under such a perspective the consumer might be seen as ill-prepared to undertake whatever choices they (are forced to) make. The corollary is that with choice goes risk and responsibility.

In some cases participants seemed to operate strictly within the established discourse. In this sense it could be argued that "consumer empowerment" operated in a disciplinary mode. In the following two extracts the consumer's collaboration with the professional seems firmly within the proscribed medical/financial remit:

... and I've even sort of gone to her [the GP] with information of new drugs and things like that, and said do you think it would be worth trying this, and she's looked it up in the BNF [British National Formulary] and said oh yeah, you know, we'll put you on that for a while (Bristol 1, Jonathan: C22).

... although they [internet financial advice sites] may be able to give you different routes to follow, you can't really decipher which route to follow, whereas contact with a professional, you'll be able to get instant information. So I would still talk to the professional, yes, I will be armed with a certain amount of information. I wouldn't throw that information at him, I'd use it as a question (Bristol 2, Jean: C23).

By drawing on pharmaceutical products and the medical regulatory bureaucracy to establish his credibility as a consumer, we could see Jonathan (C22) as implicitly accepting the formulation of illness within the allopathic regime. Similarly we might read Jean's (C23) questioning approach either as submissive to, or management of, the professional understandings. However, in the following examples, one participant (C24) offered a clear articulation of the disciplinary process; another (C25) presented choice as a counteraction to the producers' "selling efforts" and a third reported a service encounter where they had apparently transgressed the established discipline (C26):

... when I actually spoke to another friend of mine who was a divorce lawyer, she isn't anymore, she said that yes, you do have to get involved in the emotional side of it. They have to manoeuvre their customers around to their way of thinking, which is the way of the law, which they have to come down to thinking. So they have to manipulate their client into seeing it as black and white, from seeing it as just a big mess (Glasgow 1, Rory: C24).

... you're confronting them [the financial adviser] about it, that actually you really don't agree with that. If they respect, they will say well, these are my reasons for doing that. These are my reasons and I know that you don't think they're right, and I'm hearing you now, so what would you like? And then the choice should be yours to move on. And I think that

anyone that respects, she needs to listen to you and when they listen and they explain why they've done something then I'll go to them. But if they explain it to me and I don't like it, I'll move on (Glasgow 1, Sandra: C25).

... you need to be firm on what you think maybe the cause of an illness, and if you think the doctor's telling you there's only one way of treating it and you've got an alternative, it's usually confrontational, for instance, my son's asthmatic and I said, you know, I really don't want to have the inhalers right now. I didn't want to have the steroids and there was a bit of conflict going on there and eventually he says, well it's down to you. Sometimes when you bring your opinions it can be a bit like we know best, and I'm thinking well, hold on, it's a convenient quick fix but I tend to look at the Long-term effects (London 1, Ruth: C26).

That some consumer "empowerment" is within the disciplinary structure of the professions is undeniable. These particular consumers regularly consult the established online tomes of knowledge. Equally, however, there are examples of consumers pushing the boundaries or simply engaging beyond the disciplinary boundaries. Ruth (C25), for example, additionally looked at homeopathic medicines of which her GP disapproved. These findings are consistent with those reported in the US by Thompson and Troester (2002). It is for this reason that it is argued that the range of consumer expectations exceeds the range of established professional product offers (Laing *et al.*, 2005).

Discussion: renegotiating the consumer-professional relationship

Whether consumer empowerment in professional service settings is considered to be simply an indicator of consumer liberation or indicative of the development in the disciplinary system, consumer discussion of, and arguments in favour of knowledge based empowerment can be highly sophisticated as the following exchange between focus group participants illustrates:

Debbie: But then I said, I know that nothing will happen from now to then and then there'll have to be an interim hearing and she [my solicitor] said, well, how do you know about that? She really, I thought, didn't like the fact that I knew the terminologies and she went, hold on a minute, I don't know if I like you.

Hani: You put her on the back foot when you threatened to actually, you know, have some semblance of knowledge in that.

Debbie: Well she didn't know if she liked me. I knew I liked her.

Hadlin: You see, I think the difference about liking is that's different from professional service and that's different from her obtaining the right remedies for you.

Debbie: I like her because she knows her stuff and gives me every option.

Hadlin: But that may be because you know the stuff that she knows. You can't know that she knows her stuff unless you know that stuff (London 2: C27).

By learning the "stuff", the substantive content of the professional discourse, the consumer indeed learns more of the discipline, that is, the prevailing subject positions. Simultaneously, however, they develop the potential for informed critical analysis. This process exposes the complex relationship between consumers, professionals and disciplinary bases. Dependence on a professional discipline, as in modern societies, can offer a sense of security. The consumer is dependent on unacknowledged

vulnerabilities within the imperceptibly changing professional practices; the perception of secure truths can be maintained. Conversely, challenging an established discipline reveals those vulnerabilities and at the same time thrusts the decision responsibility onto the consumer. The service encounter is inevitably changed because limits of knowledge are apparent. It is within this complexity that “consumer empowerment” is negotiated.

Consumer narratives of preparatory pre-encounter information gathering, together with post-encounter verification oriented data gathering, can be construed as evidence that consumers saw themselves as managing the relationship with professionals they consulted. The idea of the consumer managing the professional was a recurring theme with consumers anchored in the belief that while the professional might understand the disciplinary choices or subject positions, the consumer understood the value context within which that choice was exercised. Such *de facto* negotiation of disciplinary choices with professionals can be viewed as empowerment. From the consumer perspective the data would suggest, however, that experienced consumers of professional services are more likely to regard their “knowledgeable” engagement as unremarkable, as constituting the norm, rather than any remarkable sense of empowerment. That they are undertaking some of the service themselves can be an occasional irritation but this is mostly tempered by self-interest; where their future was at stake, the unframed question is how could they not want to have a significant input based a position of strength.

In can be argued on the basis of consumer narratives within the focus groups that the prevailing characterisation of empowerment in terms of consumer indifference and discipline is too simplistic. Rather the emergent picture is significantly more complex. What engages one consumer another finds dull. From the perspective of the professional, some consumers seem disciplined while others appear undisciplined. Whether sufficient numbers of consumers within and beyond each of the focal services engage to exploit the empowerment possibilities available to them is a question for further research. Although empowerment might in part be dependent on social class as manifest in perceived cultural capital, the renegotiation of professional consumer relationships within a significant number of service encounter practices must be regarded as contributing to the probability of more general change. That change is partial and unevenly distributed among consumers is nevertheless accepted. What is critical is that any taboo restraining the questioning of professional judgement is largely absent from the assumption of choice and of recognition/respect among the highly involved consumers in the research. This assumption seems sufficiently homogeneous as to make the “empowerment” process seem irreversible. It is inevitable that in the broader consumer market professionals will be required to respond to a complex of consumer assumptions.

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