Making time to care, and caring for time: 'Tricking time' to cope with conflicting temporalities in a child protection agency

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Abstract

Care – concern for and attending to the needs of the particular other we take responsibility – requires enacting time in a way that clashes with the industrial 'clock time' dominating our lives. Ethicists of care have highlighted the tensions between the temporalities involved in caring as a situated, relational and processual practice and the organization of care work according to standardized clock time. Yet, the practice of care work within bureaucratic work organizations seem to reconcile temporal demands of care and clock time. In this article, we build on Barbara Adam's concept of 'timescape' (1995, 2004) to inquire how care workers juggle apparently conflicting temporalities. Through a participant observation study of a child protection agency in France, we discover that care workers 'trick' time by carving out care timescapes that resist the clock – time as continuous, non-standardized, and in the present moment – while utilizing the structure of clock time in the form of 'scheduling work' to negotiate for and safeguard the process time they needed to ensure the provision of appropriate, ethical care. Confirming the centrality of time to ethical practices in organizations, our study further evidences and elucidates the intricate relations between clock time and process time in the ethical practice of care.

Key words: Ethics of care, clock time, timescape, social work, care practices

Introduction

> "Within capitalism time is the key site for attempts to develop legitimacy and agency." (Bear, 2014, p. 19)

Our world as shaped by capitalism and its underlying logics is culturally and materially premised upon and dominated by a reductionist construction of time as an objectively measurable and finite 'resource' from which to extract maximum value (Adam, 2004; Bryson, 2007). Although industrial 'clock time' has long been identified as the predominant temporality shaping organizations and modern societies (Bluedorn & Waller, 2006), however, the persistent prevalence of this temporality is neither absolute nor unresisted. Numerous practices driven by alternative values involving different temporal orientations, persist in spite of and/or alongside the 'tyranny of the clock', whether by directly resisting, eschewing or otherwise circumventing this domination. That organizations are indeed characterized by multiple co-existing temporalities has been confirmed and elucidated in prior research by sociologists of time (Nowotny, 1992). Scholars across disciplines have observed temporal disjunctures whereby "kairos" or event-based process time (Hassard, 2001; Reinecke & Ansari, 2015: 620; Tsoukas & Chia, 2002; Zerubavel, 1987) is suppressed by linear "chronos" or clock time as "an objective and quantifiable measure of motion, events, and actions".

Numerous previous studies have tended to confirm and further highlight the contrast between the strong association of clock time with the management of work according to the capitalistic logic of maximizing output through industrial efficiency (Wrege & Hodgetts, 2000) as opposed to the association of process time with a multiplicity of temporal orientations infused with substantive values and embodied in key social practices such as creativity (Bakken, Holt, & Zundel, 2013), sustainability (Reinecke & Ansari, 2015), and care (Tronto, 2003). Notwithstanding these valuable insights, little attention has yet been paid in this literature to the

temporal conflicts inherent to certain professional activities and tasks. In this paper we set out to shed light on how workers navigate conflicting temporalities, therefore, focusing on care work as a profession which entails process-time orientation as a precondition for its ethical enactment. Specifically, we show how the social workers in our case strove to enact ethical care both in spite of but also by making strategic use of the seemingly antithetical framework of clock-time management (Corradi, Gherardi, & Verzelloni, 2010; Nicolini, 2012).

Professional care work in the sense of salaried labor in formal settings such as healthcare, childcare, clinical care, and care for the elderly furnishes a revelatory case for examining how conflict can arise between the specific temporal demands of caring activities and responsibilities and the clock-time management of work. The adverse outcomes of this clash are evident in our current capitalist carescape (Bowlby & McKie, 2019) in the way care workers have been increasingly made to 'ration' their time in providing care (Hayes & Moore, 2017), to vulnerable people whose complex and evolving needs for care and compassion defy crude quantification (White, 1998). Care work defies such quantification because practicing care does not consist of undertaking a predictable set of discrete actions and decisions reducible to discrete units of clock time but rather care is a process governed by its logic (Mol, 2008) of situated practices emerging in a network of social relations defined by various interdependencies between caregivers and care receivers (Tronto, 2010, 2013). Given that all temporalities embody competing and often conflicting values and priorities, the specific contradictions between the logics of care and the logics of clock-time management would suggest that many of the temporal conflicts arising from the clock-time management of care work are essentially *ethical* conflicts.

Time and effort spent on caring for others has long been economically undervalued and continues to be discounted and largely invisibilized in today's socio-economic conditions of extractivist neoliberal capitalism (for feminist accounts and theorizations of time in relation to

care under capitalism, see: Boushey, 2016; Fraser, 2016; Hochschild, 2001). Care jobs are notoriously underpaid, with much of the labor involved in informal care going unremunerated and unacknowledged. Again this disregard reflects and stems in part at least from a fundamental incompatibility between the market-driven logic of efficiency as measured in quantifiable clock time (Fotaki, 2019, 2022) and the temporally unquantifiable and unpredictable labor of care work in the form of relational practices oriented towards meeting the needs of particular others through attentiveness, competence, and responsiveness (Held, 2006; Noddings, 2003).

To explore how care workers deal in practice with the tensions between hegemonic clock time and the processual time demands of care, we draw on a participant observation study of a social care team in a child protection agency in France. Our investigation of the complex interlinkages between clock time and process time in paid care work in this context builds on fine-grained analyses of different social practices of time and their meaning in work organizations (Adam, 1995, 2004; Orlikowski & Yates, 2002; Zerubavel, 1987). In particular, we draw on Barbara Adam's (2004, p. 143) idea of 'timescapes' in the sense of "a cluster of temporal features" to help conceptualize and convey how these care workers enacted processual understandings of time oriented to the unfolding needs of the children in their charge. Adopting this concept, we show how the workers co-constructed particular 'care timescapes' by which to ensure the continuous performance and provision of an ethics of care in spite of clock-time organization. We reveal how these workers coped with the 'clock time vs. process time' antithesis in part by "tricking time" (Ringel, 2016), including by using 'scheduling work' to carve out and sustain care timescapes consistent with the values and temporalities salient to providing care. The SERV team members repeatedly emphasized the need for continuity by attending to the children's pasts and possible futures while always striving to be situated and 'there for them' in the present moment, all of which examples of care work involve enacting non-standardized temporalities.

Our study makes two key contributions to business ethics literature, and management and organizational scholarship. Firstly, we add to research on the enactment of care ethics in work organizations (Lawrence & Maitlis, 2012; Liedtka, 1996), responding directly to calls in business ethics for a better understanding of the material and symbolic conditions necessary for enacting an ethics of care in work organizations (Antoni, Reinecke, & Fotaki, 2020; Fotaki, 2022; Fotaki et al., 2020; Liedtka, 1996). Our contribution here consists in further evidencing the need to shift from conceptualizations of time as a merely neutral contextual factor in care practice towards an understanding of time as comprising multiple competing and always morally charged temporalities and thus as constituting an integral component of ethical action (Weiskopf & Willmott, 2013) and 'values work' (Gehman et al., 2013; Vaccaro & Palazzo, 2015).

Secondly, our study contributes to an emerging stream of literature on the role of temporality in the workplace (Blagoev & Schreyögg, 2019; Feldman et al., 2020), offering insights from observational data on how temporal conflicts unfold in organizational life (Reinecke & Ansari, 2015, 2017). In contrast to previous research proceeding from the premise that process time and clock time are necessarily antithetical or need to be resolved through "ambitemporality" (Reinecke & Ansari, 2015), our findings reveal the practice of "time-tricking" (Ringel, 2016) as a practice by which multiplex temporalities are carved out distinct from yet embedded in clock time. Our findings thus shed light on how the multiplexity of time (Adam, 2000, 2004) is negotiated in professional practice, with time-tricking constituting a form of temporal work in the sense of individual and collective efforts "to influence, sustain or redirect" temporality (Bansal, Reinecke, Suddaby, & Langley, 2022).

The theoretical foundations of our research are presented in the following section. We then detail the methods and settings of our in-depth qualitative case study before presenting our

findings. The paper concludes with a discussion of the study's implications for research and practice.

Theoretical foundations

> "[O]nce we make problematic what has been assumed natural, the hegemony of the clock-time rhythm crumbles: we recognize its constructed character, appreciate its tie with economic production, and begin to understand why and how some people's times are constituted as the shadow of what is widely assumed to be time *per se*." (Adam, 1995, p. 103)

> "While the compression of time–space might make capitalists richer; it makes human lives of care poorer." (Tronto, 2003, p. 123)

Socially constructed timescapes

Although the hegemony of clock time in the form of discrete and quantifiable units of hours and days and months may convey and largely sustain the illusion that time is objective, universal and homogenous, our experiences of temporality are multifarious and complex in practice, especially in organizational life. Our understanding of the multiplicity of temporalities beyond clock time has been greatly enhanced by the work of Barbara Adam (1995, 2004), whose social analysis of time has highlighted the lack of correspondence and often discordance between the prevailing social construction of clock time and other temporalities that pertain in key aspects and phases of our lives, including time as we experience it in learning or in play, in our relationships with intimate others, and vis-à-vis illness, life and death. This multiplex view of time is encapsulated in Adam's (2004, p. 143) concept of "timescapes" as "cluster[s] of temporal features". By analogy with landscapes and the different perspectives from which they can be viewed, the notion of timescapes helps us comprehend time as comprising multiple

interlinked temporalities. This timescapes metaphor is especially useful because in spite of the centrality of time to our experience, or indeed perhaps on this very account, time is extraordinarily difficult to grasp or articulate beyond the taken-for-granted and externally imposed form of clocks and calendars. Indeed this difficulty in itself may go some way to explain why the "spell of clock time" still dominates our lives in capitalist industrial and post-industrial societies (Adam, 1995; 2004, p. 26; Hassard, 2001; Shipp & Jansen, 2021; Zerubavel, 1982).

Unlike industrial clock time, process time is organized according to the temporal flow of events and processes, wherein time passing equals what has happened, is happening, will happen (Sorokin & Merton, 1937; Tsoukas & Chia, 2002). Process time is inherent to the becoming of activities and processes, including complex and non-linear journeys of innovation (Dougherty et al., 2013), human development processes (Reinecke & Ansari, 2015), and – most importantly for the purpose of this study – caring for others (Tronto, 2010; White, 2016). Put simply, in the process-oriented view, time resides within the event, activity, or task, and is amenable to a world of becoming.

Even though processes at work are predominantly reduced to sets of tasks managed and measured by clock time (Ballard & Seibold, 2003; Reinecke & Ansari, 2017; Zaheer et al., 1999; Zerubavel, 1987), the temporal significance of these processes lies in subjective qualitative experience (Feldman et al., 2020; Hernes & Schultz, 2020; Orlikowki & Yates, 2002; Zerubavel, 1987). Numerous working practices depend on process time, and workers commonly apply processual temporalities to fulfil their tasks. This is especially true in the case of those work tasks that are most meaningful to us, though we also develop alternative temporalities to help endure the monotony or meaninglessness of work by 'breaking up' clock time. In the next section, therefore, we explore the relationship between the control and

disciplining of labour via clock time and the ways in which workers navigate conflicting temporalities by building on, negotiating with, circumventing or resisting clock time.

Time control and the disciplining of labor

The control, commodification and compression of time has been a key feature of industrialization and the rise of capitalism. According to Marx, the controllability and quantifiability of workers' labor time is among "the essential structuring social forms of capitalist society" (Postone, 1993, p. 186). This is because the industrial organization of work to facilitate continuous production and maximum value extraction requires the temporal disciplining of workers and their labor (Taylor, 1911; Wrege & Hodgetts, 2000) insofar as the 'productivity' of labor largely depends on the degree it can be employed for productive purposes, as is explicit in the phrase 'time is money' (Adam, 2004; Federici, 2004). This form of temporal organization according to the abstract units of clock time has since spread far beyond the factory gates to all areas of our lives. Indeed, according to some social historians, perhaps most famously in E. P. Thompson's (1967) account of time and work-discipline in industrial capitalism, "the imposition of a new system of time-discipline coming with the factory system [constituted] the single most important factor in changing people's attitudes towards and experience of social times" (May and Thrift, 2001, p. 14)). While multiple alternative temporalities persist, employment relations under capitalism are thus underpinned by the pervasive logic of clock-time hegemony (Adam, 1995; Bear, 2014; Federici, 2004).

Within management practice, and especially in 'scientific' management as first expounded by F. W. Taylor (1911), clock time represents a specific form of quantification of time (and hence of labor) applied for the purpose of maximizing value extraction and profitability, i.e. this temporality is a social convention "perpetuated by social requirements" such as the coordination and control of work aimed at optimizing productivity (Sorokin & Merton, 1937, p. 615; Zerubavel, 1981; Wrege & Hodgetts, 2000). The centrality of clock-time

to the structuring of modern organizations and our experience of work is abundantly evident in contemporary workplace settings, including in office scheduling systems, Gantt charts, and myriad other time-management tools. Yet, the effects of industrial clock time on workers and organizations are far from uniform or straightforward. Not only do individual workers strive to juggle multiple and often contradictory demands on their time (Feldman et al., 2020; Kremser & Blagoev, 2021) but organizations too are comprised of competing temporal orientations that often prove a source of tensions across and between hierarchies, departments, professions and task orientations, including the most basic conflict between work and home time (Hochschild & Machung, 2012). Such temporal disjunctures between clock time and process-time often become endemic when organizations seek to impose clock-time-based structures on the management of complex non-linear processes and work tasks that "cannot be necessarily scheduled by the clock" (Reinecke & Ansari, 2017, p. 10), including creative work and care work. Breaking the "spell of clock time" (Adam, 1995, p. 26) in our own understandings is thus a necessary first step to recognize how and why other values are not associated economically with 'productive' work (Eisler, 2008), including those entailed in care and caring.

Care as labor: The clash between clock time and the ethics of care

To begin with the most obvious contrast and tension between clock time and care, clock time is wholly impersonal whereas care is first and foremost – and arguably nothing if not – personal. As epitomized in the (ideal) parent–child relationship (Noddings, 2003), care does not originate in or ensue from abstract ethical principles focused on rights— but rather from concern for a particular other (Gilligan, 1982; Liedtka, 1996). Primarily a *relational* practice (Fisher & Tronto, 1990; Held, 2006; Tronto, 1993), care is situated and provided in response to others' often unpredictable and evolving needs. In this sense, care has been aptly defined as an always "emerging competence of a professional, organizational, and social system" (Gherardi & Rodeschini, 2016, p. 281). As such, care work is enacted within and in response to unfolding

processes calling for different and often conflicting temporal orientations on the part of carers and organizers of care. The key source of this conflict may lie in a clash between the values underlying care and the market logic of efficiency and optimization behind the clock-time control of labor, the tensions ensuing from this conflict manifest in many aspects of care work performed in professional settings, including in daily struggles to 'make time' for tasks requiring processual temporal orientations within the structures of clock-time management. Further complicating the neat organization of care and the optimization of its provision according to clock-time schedules, care typically involves feelings. Hence, efforts to quantify care work by clock-time without consideration for feelings and emotional temporalities are just as likely to fail as attempts to commodify, itemize and schedule love. As Kathleen Lynch (2007, p. 566), building on Badgett and Folbre (1999, p. 318), concludes in her work on "love labour" as a "non-commodifiable form of care labour":

> If we go the McWorld route in caring what we will get is not care but 'pre-packaged units of supervision', feeding, attending without intimacy or personal interest in the welfare of others.

While extant studies have effectively identified key conflicts between time and care, however, such research would benefit from a greater understanding of the clash between different temporalities in relation to care. For proponents of an ethics of care, recognizing the multiple temporalities involved in caregiving and the tensions that can arise between the values and priorities of care and the dominance of clock-time calculations is crucial (Chatzidakis et al., 2020; Tronto, 2003). For example, research in this stream has offered valuable insights into the temporal conflict arising from the double burden – almost invariably borne by women – of combining paid work with a "second shift" of caring responsibilities at home for children and other vulnerable dependents (Hochschild & Machung, 2012; Maher et al., 2010; McKie et al., 2002). In seeking to explain this conflict primarily in terms of the limited quantity of time

available, however, including issues arising from inflexible work scheduling and/or the cognitive strain imposed on caregivers, such accounts commonly assume and mobilize the dominant construction of time as quantifiable, thereby implicitly treating time as a resource to "use" (Feldman et al., 2020). As we have seen, this construction is not adequate to capture all the sources of tension that stem from the multiple temporalities entailed in enacting care. To capture these causal factors, it is helpful to draw a distinction between care performed at home and care performed as work. When care and work occur simultaneously the temporal tensions are by no means removed but rather take different forms.

As ethicists of care have long highlighted, the undervaluation of care constitutes a central and unsustainable paradox of capitalism. For while care is essential for all human survival and flourishing (Elley-Brown et al., 2021; Noddings, 2003) and hence for sustaining and reproducing any socio-economic system, the bulk of care goes unpaid and largely disregarded in capitalist economies, performed overwhelmingly by women in the form of 'domestic labor' that contributes vitally but silently to capitalist accumulation (Federici, 2004). The invisibilization of women's unpaid care thus persists and extends to care as paid work in most societies today, as manifest most obviously in the low wages paid to carers but also in attempts to organize care provision according to clock-time regimes that ascribe no value and hence take no account of unquantifiable labor and time. When work takes the form of care work, care as a practice almost invariably becomes subject to clock-time discipline as "the inseparable backdrop against which care takes place" (Hayes & Moore, 2017, p. 330). Performed as waged labour in formal settings such as nursing (see Bowden, 2001), healthcare (Fotaki, 2019) and social work (Sevenhuijsen, 2000), paid care work is predominantly measured, controlled and paid for in accordance with clock time. This is not to claim that time is any less inextricably bound up with values (Bansal et al., 2022). Indeed our starting point is that all temporal structures are shaped by and shape social values, as is self-evident insofar as

'making time' for any socially meaningful activity requires prioritizing between activities to which we assign different social values (Zerubavel, 1987). What we wish to highlight here rather is how the economic undervaluation of time "spent" on care (Eisler, 2008; Federici, 2004; Nelson, 2001) reflects the predominant capitalist logic and construal of time as another finite resource from which to extract maximum value into discrete units that can be scheduled within programmes of work.

The adverse implications of subjecting the management of care work to clock-time regimes that take no account of the temporal needs of care workers and those for whom they care have been amply evidenced in prior research. In her study of "time, temporality and child welfare" in the UK, for example, Susan White (1998, p. 64) has shown how clock time constrains the meaning of care work, concluding from her findings that the rationing of care in the form of materially finite hours is "morally tainted". As such evidence indicates, the extent to which care workers are able to provide care and respond adequately to the needs of those in their care is directly related to and entwined with moral values – or lack thereof – at collective and societal level(Alacovska & Bissonnette, 2021; Held, 2006; Tronto, 1993, 2013). Thus, our aim in this study is specifically to explore how care workers deal in practice with the tensions between hegemonic clock time and the processual time demands of care.

Methods

To explore the hows and whys of temporal work aimed at facilitating the enactment of care in professional settings governed by clock-time, we draw on an in-depth qualitative single case study of a child protection service in France. This service constitutes an "extreme case" (Flyvbjerg, 2006; Yin, 2014) in that it reveals the complex workings of time when care is labour (Gherardi & Rodeschini, 2016; White, 1998). The question of conflicting temporalities (Adam, 1995; Reinecke & Ansari, 2015), concerned with care provision for complex, diverse individual

needs in a time constrained environment, emerged as a critical theoretical perspective to understand the struggle of SERV staff to enact care as part of their job.

The workers we studied formed a team, pseudonymized here as 'SERV', within a child protection service (*aide sociale à l'enfance*) run by a local French *département*. Children are placed in SERV's care based on the decision of a judge. The judge's first placement decision is usually based on an initial assessment of the child's situation by a child protection service such as SERV. The members of the SERV team are then responsible for organizing foster placements and care plans in accordance with the judge's orders and for working with foster families and other foster accommodation providers, as well as parents, police, health services and other partners, to ensure the welfare of the children in their charge. The team are also responsible for submitting regular reports to the judge on the child's 'situation', based on which the judge may adjust the foster placement and care plans.

Operating from offices on the first floor of a small administrative building in a small town in rural area, the SERV team is reported to be the smallest child protection team in the local authority, comprising only 12 members (including the head of the service), while also covering the largest geographical area. This means the social workers must regularly travel to visit various children, foster families, and foster accommodation services. At the time of the observation, the staff had been in post for between three and 30 years, with the exception of an intern who had been working with SERV for only six months. During the research period, two members of the team took maternity leave and were replaced by staff on short-term contracts, thus increasing by two the number of people observed during the study. SERV team comprised the head of the service, six social workers, an intern, a psychologist, and three secretaries.[i] Eight of these staff worked full-time while six members worked part-time (four at a time, since two part-time social workers temporarily replaced the workers on maternity leave). Reflecting the

highly gendered nature of care work (Hayes & Moore, 2017; Tronto, 1993), all but one of the SERV staff were women.

Research design and data collection

To build our theory of how different temporalities are negotiated in care work, we based our analysis on three different types of data: semi-structured interviews (13); participant observations (118 hours in five visits spanning over 20 months); and audio/video recordings of five meetings (amounting to more than 11 hours). While all three types of data relate to the work activities of SERV from August 2014 to March 2016, each different type of data provided a specific viewpoint on the inherent tensions between management by clock time and the process time underlying care, enabling us to address our research question on how care workers deal in practice with these tensions from slightly different angles.

The first author's fieldnotes from her participatory observation formed the backbone around which we built our analysis and arranged all our empirical data. Because the first author was involved in observations and interviews, interviewees could share with her their analysis of what had happened in different situations. Based on the observations, the first author determined that scheduled meetings were relevant events for recording in order to be able to zoom in later on the care endeavor, and the analysis of particular situations[ii]. This provided a comprehensive view of the role of the staff group in the construction of or resistance to the clock time enabling care.

Data analysis and theory building

Our research approach can be characterized as abductive (Mantere & Ketokivi, 2013) in that we analyzed our data and contrasted emerging findings with the literature in an iterative process (Golden-Biddle & Locke, 2007). All empirical data were systematically coded using NVivo in an open-ended iterative process (Strauss & Corbin, 1990). Although this first round of analysis was exploited for the purpose of an original project on work relationships, in the course of this

analysis we became intrigued by an important theme that emerged from our initial observations of interactions, i.e. the theme of 'temporal organizing'.

Among the first codes we derived that related directly to temporal organizing, we included 'coordinating', 'managing work hours', 'obtaining holidays', 'different work hours', 'time scale', and 'calendar/timetable'. To explore how far these initial empirical findings resonated with prior research, we revisited the literature on time, processes and temporality, in particular on time in relation to the workplace. We also studied the literature on the multiple forms of time identified in organizations (Ballard & Seibold, 2003; Butler, 1995; Feldman et al., 2020; Zerubavel, 1987), including objective versus subjective time, clock time versus event time, measured time versus experienced time, *chronos* versus *kairos*, etc. Here the insights of Barbara Adam's (2004) work on the social analysis of time proved especially valuable in helping us to formulate and engage with our research question. Informed by these and other concepts and findings on time and work, we started a new round of coding in NVivo with the concept of timescapes in mind. In this second phase of analysis, this theme was problematized in relation to another theme that emerged from the data, i.e. the theme of care as a central concern of the care workers in our case and an informal organizing principle of their work in the SERV organization.

Although SERV had initially been selected as being representative of a traditional bureaucratic work organization, the specific remit of the agency's work, i.e. the protection of children in the care of the social services, emerged as a critical feature. From our first round of coding it soon became obvious that the SERV employees were struggling to provide the care they wanted to give to the children for whom they were responsible, as evident in the emergence of codes such as 'difficult/struggling', 'complaining', 'criticizing', 'harshness (of situations)', 'negative feelings', and 'responsibility for others'. In the second phase of our analysis, therefore, we sought to ascertain and understand the organizational factors that either facilitated

or hindered the workers' efforts to enact an ethics of care for the children in their charge. Turning again to the literature, we found valuable insights into the relations between care and time in the scholarship on the ethics of care. From care ethicists' accounts detailing the peculiar characteristics of care work, including the foundation of this work in relationships with a particular other (Gilligan, 1982; Noddings, 2003) as well as the more general undervaluing of (gendered) care and its confinement to the private sphere (Tronto, 1993), our attention was drawn to the antagonism between formal clock time and the processual nature of care (Held, 2006; Tronto, 2003).

With our focus now fixed on the tensions arising from clock time versus process time, we analyzed the data again, coding the entire dataset from a completely new perspective, scrutinizing the fieldnotes, interviews, and audio- and video-recordings of meetings for evidence of these tensions and how the members of SERV navigated between the process time needed for caring and the clock time by which their activities were formally organized. This newly informed reading yielded 64 codes related to time and care and their interplay in the work of SERV and its members. While some codes were the result of cross-analysis between time and care (e.g. 'moment for care', 'available', and 'experience'), all of the codes related in one way or another to themes we identified in the literatures on time (e.g. 'schedule', 'event', 'future', 'having the time', 'pace', 'past', 'period', 'taking the time', 'time as quantity', and 'unfolding') and care (e.g. 'distance for care', 'one-to-one relationship', 'struggle to give care', 'talking', 'suffering', 'material for care', 'skill for care', 'attentiveness', and 'moral emotion'). By shifting back and forth between data and theory in this way, we abductively built a theory (Mantere & Ketokivi, 2013) capable of explaining which factors serve to impede or facilitate the endeavours of care workers to provide adequate care in spite of the constraints of clock-time management. Surprisingly, we discovered that many of the factors facilitating ethical care included 'leaning on' rather than outright resisting the structures of clock time, as well as

deliberate efforts by the workers to work on clock time in order to make time for care. We theorize how different temporalities are negotiated in care work through the notion of "time-tricking" that Felix Ringel (2016, pp. 24–25) defines as epistemic practices by which we "manipulate, coordinate, structure, or reorder knowledge about temporal processes" as well as "work actually done *on* time" in an endeavor "to subject the future content of the progression of time to our agency."

Findings: Tricking clock to make time for care

> "What is at stake in foster care is so complex that if we don't try to make sense of it and analyse it, well, we'd react a bit like…'Here's a problem and here's the solution and that's it! It has to be efficient and that's it!' But then I don't think we'd be asking ourselves the right questions." (Christine)

As is evident from the quotation above, Christine and the other SERV team members understood care work as involving priorities and values and temporal orientations proceeding from a logic very different than the means-end rationality behind clock-time regimes aimed at maximizing an unquestioned notion of efficiency. Although these workers were fully engaged in the complexity of caring for particular children and their specific issues, however, in their everyday work practices they also had to comply with a simplistic 'input-output' framework (with clock time as the input and 'completed' care work the output). The reductive logic behind this framework for quantifying and controlling time and care work was especially blatant in the crude measure applied in allocating working hours per child. This allocation of time to SERV staff was calculated by aggregating hours of care work as if all children and their care needs were equivalent and as if the kinds of care provided in response to the particular needs of each child were essentially the same and thus quantifiable in clock time.

Vignette 1 below illustrates the extent to which the measurement of care work by clock time dominated the everyday working lives of the SERV team members. This vignette involves two actors: the service head, Gilles, with almost thirty years of experience in social work and a strong commitment to providing care to the children referred to the agency; and a young social worker, Sabine, who had been working for SERV at this time for a year and a half on a precarious temporary contract with no opportunity to work full time.

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VIGNETTE 1

When I arrive in Gilles's office and ask him how things are going, he replies that they've had 12 new child placements in one month and the team is close to meltdown. I ask if they can hire new people when it's like this, but it doesn't seem quite so simple. Gilles says they already have compensation for part-time workers in the form of Sabine's contract. Later at lunchtime with members of the team (without Gilles), I bring this topic up in the conversation. The social workers tell me that it doesn't work exactly like that because not all placements have yet been formally transferred to SERV and so they don't all show up in the official workload figures.

It seems that the workload allocated to each worker, calculated in the simple form of the number of children in SERV's care per social worker, is a very important statistic for the team and for the wider SERV organization. For example, different teams compare their respective workloads as a way of checking whether they have their fair share of resources.

(Fieldnotes, 22nd September 2014)

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The measurement and control of SERV's workload through the allocation of abstract and discrete units of time to perform diverse activities was reflected in the importance ascribed to scheduling work by the members and the head of the team. In first analyzing our data on SERV's day-to-day practices, we were struck by the frequency and repetition of interactions related to scheduling meetings and appointments. The social workers evidently devoted a great deal of their efforts to consulting calendars and finding common slots for team meetings between their numerous appointments with children and foster families amongst their other duties. At first glance, the sheer scale of this engagement in scheduling suggested the SERV team members had completely surrendered to the clock-time management of their work.

On closer inspection, however, what had initially seemed a somewhat bizarre feature of the SERV team's approach to care work turned out to be driven by motives, values and considerations for temporal orientations very different from those of clock time. Zooming in on this temporal work of the team in their scheduling interactions, it became clear that SERV workers were by no means merely enacting clock time in their social care tasks but instead were employing various tactics to resist the wholesale imposition of clock-time organization. These tactics fell into one or other of two seemingly contradictory strategies for 'tricking the clock' to make time for care: (i) efforts aimed at crafting care timescapes distinct from clock time; and (ii) efforts aimed at utilizing clock time for care work.

In the following section we first describe how SERV workers actively 'wrestled' with scheduling as an essential task and duty of care in their everyday activities. We then show how workers carved out and safeguarded 'care timescapes' that were processual, non-standardized, and 'in the moment'. Finally, we describe how SERV workers were able to exploit clock time by making use of collective sense-making and sharing temporal resources within the framework of 'scheduling work' to support their own and the agency's shared caring endeavor.

Wrestling with scheduling

The extent to which the care workers in our case struggled with scheduling on a daily basis is illustrated in Vignette 2 (below). This vignette depicts a video-recorded SERV team meeting representative of many such meetings we observed, with actors negotiating times and dates of future meetings at quite remarkable length while tacitly prioritizing and allowing for the prioritization of other tasks in favour of suggested dates. Quite typically, the social workers in this meeting had certain specific time constraints: Nathalie and Maelle were working part-time and had young children at home; and while Alexia, Gilles and Christine did not have such personal constraints, this meant they tended to take on or end up being given all the extra tasks the part-timers could not accommodate in their schedules.

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VIGNETTE 2

Gilles comes back to finding dates for the project of elaborating the 'service proposal' [an extra assignment they need to conduct as a team]. Everybody laughs about the lack of time available (so typical!). Gilles asks Nathalie for her opinion on the frequency of the meetings. She suggests once a month. Several people say this is a lot. Somebody proposes meeting every other month, but Gilles replies that if they begin with every other month it will take three years to finish the task. Laura and Maelle laugh at this. Alexia sighs.

Gilles wants to move the topic forward: "Come on!" he says, "Dates!" And the discussion on finding dates starts again. They first try to find a recurring slot (every last Tuesday in the month) but soon abandon this as it just won't work. So now they're only looking for one date, but that still takes time: the 16th of October. Nathalie asks how much time per meeting and Gilles replies they should aim for at least two hours otherwise there's no point. Then they decide to go on and try to book a second date. Christine sighs heavily.

In the end they don't manage to find a date in December and so they move on to January. Alexia tries to move things forward: "So! The 6th, 13th, 20th or 27th?" Then they set a date in February. And in March. They continue until September of the following year.

Finally, Gilles asks Arlette to record the dates and tries to move on: "Good!"

(Notes on videorecorded meeting, 25th September 2014)

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The social workers at SERV never seemed to miss an opportunity to stress how much they were constantly struggling for time. They filled out their individual calendars with meetings, appointments and deadlines. Besides weekly team meetings and monthly meetings per child, the care workers' diaries were crammed with appointments not only with children in care and with parents and foster parents but also with teachers, psychologists, medical staff and other professionals responsible for children.

Our interview data further confirmed that workers' perceptions of time seemed more aligned with and confined to the industrial construction of time as a scarce resource whose expenditure must be tightly controlled to avoid its being 'wasted'. For example, Amandine recognized that the SERV team members "sometimes can't find the time" to help each other on the job. Wrestling with scheduling was also linked with the struggle experienced by many

SERV workers to fulfil their own personal caring responsibilities in any 'free' time they had away from their official care work as they experienced feeling guilty "spending more time with other kids than your own" (Laura). Negotiating time off to care for their own children rather than those in SERV's care was thus a major priority for many workers and a potential source of tension, especially given the need for the agency to provide continuity of care:

> Everyone wants Christmas off and everyone wants New Year's Eve off because it's a holiday for everyone. In general, everyone wants to have a vacation at that time ... It's a bit of a 'war' - in quotation marks! (Alexia).

Creating care timescapes

Although SERV workers were thus deeply embedded in the temporal structure and constraints of clock time, as carers the workers also explicitly pushed back against the clock time paradigm. While on the one hand they seemed to accept clock-time constraints, focusing on scheduling appointments with children and parents and closely managing their work time, on the other hand they constantly asserted their discretion to decide how to give care to the children referred to the service. Importantly, in estimating the care needs of these children, the workers implicitly recognized that responding to these needs cannot be enacted appropriately within the abstract units of clock time typical of bureaucratic organizations. This shared prioritization of safeguarding adequate time for care reflected a recognition that care work is made up of moments, events, experiences and particular relations and thus requires forms of process time that can neither be easily audited nor strictly controlled. And since care constituted the core of all SERV's work, the needs of care and its particular temporal and ethical requirements not only outweighed clock-time considerations but informed all of their temporal work, including their insistence on making time to care.

Continuous and processual time. A common aspect of care and care work is how the needs of those cared for change over time, hence enacting an ethics of care entails attending to multiple

possible pasts and futures in the present. For all their carefully scheduled meetings, appointments and deadlines, the care workers we observed nonetheless repeatedly emphasized that childcare is a *process* of responding to children's continuously evolving needs while constantly monitoring how each child is developing. An essential part of their care work thus consisted of reflecting on and anticipating the possible impacts of their actions on the psychological trajectories of the children in their charge based on their analysis of the child's past. Vignette 3 below illustrates the enactment of time as continuous and processual.

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VIGNETTE 3

In a 'work time' meeting, the social worker in charge of the case at hand, together with the head of the service, the psychologist, and the secretary, are discussing the attitude of Mrs P and what this means for her children. Her two toddlers, brother and sister, have been put in the care of SERV since Mrs P was convicted of negligence that led to the little girl being seriously injured. The mother has lost custody of her children for now but has been granted the right to have them visit her at her home. The problem that has triggered today's discussion is that the mother is never available. They have adjusted the visits to her work schedule and arranged to bring the children to her home one at a time because she thinks having the two together would be too difficult for her. Despite all this, she keeps cancelling the visits at the last minute. After considering this history, they try to make sense of the current situation:

Gilles: So, we can't 'work' the reality of her difficulty in being there for her children, in being a mother, because we keep on putting things in place to make allowance for this. ... We've been setting up a system for months, a whole year even, to allow her to see her kids in some limited way, even though two years ago she demanded they go back home to live with her.

Nathalie: Yes, Marie-Claire was also saying this the other day. So each time we adapt the visits and everything to the mother's schedule, to suit her timetable, we make adjustments, we make sure she can see them. We approve of this [letting the mother dictate their actions] as a result.
…
Gilles: And so we're... she's managed to drag us down to a level that makes us, yes, we are a nanny, and we aren't 'working' anything anymore. ... So I don't know how to do it but I think we have to shake things up a bit.

Then they start discussing the concrete actions they're going to take, which include setting new rules for visits and devising the questions the mother will have to answer if she cancels. She will have to say why she has cancelled and then they will make sense of these 'whys' for the children. They will try to articulate the contradictions of the mother and give the children an understanding of the position of their mother, her difficulties, the role of the care arrangement, and of the different adults that take care of them.

(Notes on videorecorded meeting, 28th August 2014)

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From this vignette it can clearly be seen that the work of the SERV team involved constant efforts to navigate and make sense of the causal relationships between the pasts, presents and possible futures of the children in their charge. In order to enact appropriate and ethical care, the care workers at SERV first needed to consider how the past had led to the current situation and how they should address this situation so as to redirect and improve the current trajectory of the children's relationship with their mother. In seeking to identify the stable aspects of the situation, the care workers looked for repeated patterns in the relationship between the mother and her children and considered the impacts such behavior could have on her children. In this case, the issue was the capacity of the mother to act as a mother – a notion tacitly shared at SERV. What was at issue here for the SERV team – and what they needed to make collective sense of – was the extent to which the mother was genuinely committed to visits from her children. For while she had consistently signaled her care for her children and claimed to be thwarted in caring for them by external constraints, in practice she had consistently avoided taking care of them despite all the efforts of the SERV care workers to accommodate for these constraints. The team interpreted this behavior as a psychological deceit that could be highly detrimental for the children, who could hardly be expected to thrive when they were emotionally and psychologically reliant on what was merely an illusory signaling of care. Having identified and made shared sense of this pattern of behavior, they now resolved to break the vicious cycle for the sake of the children. Specifically, they aimed to put an end to the mother's constant re-enactments of broken promises, to allow the current situation with the children and their foster parent to evolve again. Identifying and intervening in such vicious cycles to protect children from the potentially severe impacts of such behavior was thus a crucial part of the care work provided by SERV. The danger of not intervening to prevent such

'cyclicality' was stressed by Gilles in the following comment on another case: "When it becomes physical violence, the archetype is being replayed. But it's always a shock."

In constantly striving to make sense of the futures of the children in their care based on present observations, the care workers at SERV were enacting time as continuous and processual. Indeed this temporal orientation was evident throughout our data in discussions as to whether a certain child would "grow up well" and in decision-making based on future uncertainties, as for example in Marie-Claire's decision that they would still need to "monitor [a child] for a certain length of time" before reaching a particular judgement. Ascertaining and making sense of the histories of the children in their charge was commonly understood as the sine qua non of providing proper care for such vulnerable children, as Alexia explained: "At minimum I've got to work out the parents' history to know what's been passed down through them to their daughter."

Non-standard and particularized time. Our analysis indicates that the care workers at SERV resisted the standardization of time typical of bureaucratic organizations to the extent that they regarded it as incompatible with certain modes of care. In their practices, they acted on the basis that each type and instance of care requires its own pace, timing and temporal horizon. Vignette 4 illustrates how the care workers viewed deviations from standard procedures as acceptable and appropriate in the interests of providing particularized care.

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VIGNETTE 4

In a team meeting focused on reflecting on situations and how to deal with them, Gilles tells the story of a teenager who had run away at night from his foster care accommodation. Despite Gilles not being on call that night, he had taken charge of the situation anyway, explaining to us that "Since I knew the kid, I wasn't going to let him down." So Gilles called the police officer who was already in charge of the case (since the foster care accommodation had already called the police) and together they decided on a course of action that didn't involve going after the teenager. Gilles stresses that they both shared responsibility for the decision and he was happy that the officer was able to be flexible in not following standard procedures. Indeed, Gilles' analysis of the situation led him to think that the boy needed to decide by himself to come back

to the foster care accommodation. In the end, this is what happened: the runaway came back on his own, unharmed. Gilles concedes that he'd spent an anxious night worrying about the child but is confident he did the right thing.

(Fieldnotes, 26th August 2014)

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The episode recounted by Gilles and the rationale he confidently offered his colleagues for departing from standard procedures and the strict timeframes these stipulate for different actors in particular situations is representative of a general perception we observed among the SERV team that deviations from formal clock-time protocols are entirely acceptable in the interests of care. Moreover, the incident itself illustrates several ways in which Gilles prioritized the temporalities demanded by an ethics of care over clock-time constraints and regulations. First, Gilles took charge of the problem despite it arising outside of his working hours and despite the fact he was not the person legally responsible for the teenager at that time. Second, he took it upon himself (with the support of the police officer who accepted Gilles's proposal) not to start searching for the teenager immediately. He thought care for the teenager at this moment would be to let him experience defying the rules by running away and 'give him the time' to realize for himself that he needed to return in the morning.

As employees of a formal organization, the care workers at SERV were obviously expected to submit to traditional hierarchical control. In line with their ethical prioritization of a particularized approach to care, however, the SERV workers persistently strove to maintain and develop their autonomy as professionals. This cultivation of autonomy was observable in the way they insisted on organizing their work tasks as far as possible according to their care priorities, including by sometimes not attending administrative meetings that were not directly related to the children in their care. According to one team member (Laura), some cultivated this autonomy from central management because they wanted "to stay off the radar", while Christine openly laughed at the suggestion that she or any other care workers at SERV might need to justify their working hours to a higher authority. By collectively insisting on this way

of working, the social workers were able to exercise discretion in implementing particularism and developing person-to-person relationships with the children for whom they were responsible.

'Being in the moment'. The care timescapes crafted by the social workers at SERV also incorporated the need for 'being in the moment' in their care for children. This processual temporal orientation was needed not just in face-to-face meetings with children but also, as illustrated in Vignette 5, when discussing the cases or 'situations' of children with colleagues and managers at SERV. This was crucial because anything said about a child *in the moment* and any meaning thereby attributed to temporally situated actions could have important consequences for the psychological development and future lives of this child:

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VIGNETTE 5

Gilles: E [the child], we're not talking about this kid.
Alexia: Oh well, I see her every week.
Gilles: Alright, I don't doubt that, but we are not *talking* about her [as part of our work].

(Notes on videorecorded meeting, 22nd September 2014)
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For the care workers we observed, as this short dialogue shows, talking or not talking about a particular child at work signified whether or not that child was presently in their thoughts when discussing situations, i.e. whether the case of a particular child was being taken care of or not through talking. Gilles and Alexia both implicitly understood the activity of 'talking about' a child as an instance of performing care. The epistemic framework in which the care workers operated was broadly that of psychoanalytic psychotherapy or clinical psychology. From this perspective, a crucial element of care work entails revisiting, reinterpreting, and reconstructing the past of the person cared for, including how they have experienced certain episodes and what this means for who they are now and how they feel and act.

The priority placed by the care workers at SERV on being in the moment and remaining attentive to the potential impacts of their every word and action for each child in their charge was instantiated in practices observed throughout our data. As a case in point, when preparing for a first meeting with a teenage girl referred to SERV, her parents, and two nurses from the psychiatric hospital where she was currently residing, the care workers emphasized the significance of what would be said about the situation in this particular moment, with Gilles stressing that "We have to talk about things *calmly*." And later, after the adults had talked about the situation and negotiated its meaning, the girl was asked to articulate her own experience of what was happening in the moment, saying "What's being said is a little intense." Attending to everything being said about the situation here and now in the presence of the parents, the child, and those responsible for her protection, was thus considered critical, including in allowing time for intra-psychic work and for letting each situation evolve, as the previous example of not going after a runaway teenager demonstrates. The care workers considered the activity of 'reconstructing' the past as crucial for taking account of and addressing past sufferings of the children in their charge. From this intense concern with the conduct of meetings and every word spoken in such meetings it is clear that all the carefully planned team meetings, case meetings, mediated visits, and foster family visits that filled the care workers' calendars were by no means regarded as mere indicators for measuring 'production' but were seen as potential *moments* for providing care. These moments in the presence of children and their parents and other care workers, including all the interactions among these actors in these moments, constituted the very core and heart of the care work undertaken by the members of the SERV team we observed.

The importance the care workers attached to the temporal orientation of 'being in the here and now' at such moments was evident also in their emphasis on the need to be *available* for care. For example, Léa described the caring endeavor as being "all-consuming", not least

because they always had “to handle the now”, while Alexia stressed the importance of everyone being “in the right place” in the sense of everyone needing to embody the correct symbolic position to provide appropriate care – e.g. parent, foster carer, child. This dedication to ‘being present’ could also be observed in the value the care workers placed on reflective practices, including working on themselves personally to support their care endeavor by preserving their physical, mental and emotional health. For Laura, the benefits of such self-examination and self-preservation included accepting that nobody can feel good all the time: “I allow myself to say ‘today just isn’t a good day’.”

Scheduling work: Using the clock

Our analysis has so far identified and elucidated two contradictory features within the timescapes in which the care workers at SERV were operating. On the one hand, they were actively wrestling with schedules and thus enacting clock time; on the other, they were pushing back against the clock time of bureaucracy to carve out timescapes appropriate to care as a process. While our account thus far has documented the tensions at work between the process time of care and clock time, we also discovered that SERV workers utilized clock time to organize care. Our analysis reveals that this utilization occurred through scheduling along two dimensions: values work and solidarity.

Scheduling as values work. Scheduling at SERV facilitated the allocation of time to activities according to their perceived importance. In this sense, ‘making time’ through scheduling indicated the relative value accorded to each activity. Scheduling also provided an opportunity for the care workers to negotiate, prioritize and carve out for themselves the particular temporal resources they needed for care activities as opposed to other administrative duties within their care work. At scheduling meetings, for example, they would typically resist attempts to make them commit to any tasks not directly related to the development of the children in their charge. Vignette 6 provides an example of an awkward moment at such a meeting when the SERV team

members resisted the imposition of a particular task they deemed unimportant for the children by persistently and collectively not finding time for this task in their schedules.

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VIGNETTE 6

Gilles asks for people to volunteer to organize a series of seminars with foster families … Everybody looks down at their diaries or browses the pages. After a few seconds, Gilles mocks this silence: "OK…Hello? Hello Earth?" There are a few side comments but nobody takes the floor. So then Gilles asks whether the silent refusal is due to having too many other things to do. At this question everyone jumps in to point out that the problem is their lack of time.

Gilles does not outright impose his authority to force agreement but keeps pushing: "We won't give up on this theme." Some members of the team agree with him, saying "Yes, you're right!" and "It's true they [the seminars] are really at the heart of our work."

But still everybody looks down. There is silence. Somebody starts joking about a different topic. So then Gilles takes the floor again to reiterate why it's so important.

Finally, Alexia speaks up to recall the history of why they have reached an impasse: "Because when we talked about it [previously] we weren't all there, so you said 'Well, it would be good to talk about it again when everyone is here'. Gilles responds by saying "Yes, well, everyone is here now." Alexia continues with a sarcastic smile on her face: "Let's see who wants to commit to it then!" The self-evident answer is that nobody does.

Gilles starts nominating people: "Sabine, you're not interested?"
Sabine answers: "Well, for me it's a question of time."
Gilles acknowledges this ("Yeah, you're right, you're right.") since Sabine only works part time.

Again everybody looks down. After a few seconds, Alexia looks at Gilles and says, ironically, "Well, I'll do it then, since indeed I'm here full time. I have time."

(Notes on videorecorded meeting, 25th September 2014)

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Not untypically, the outcome of the meeting in this vignette was that the 'extra' task of providing seminars for foster families was taken on by a member of the team who worked full time, i.e. Alexia, who indeed emphasized this difference in treatment. Indeed the extent to which any members were permitted not to engage in specific tasks was frequently related to how many hours they worked, and this was even more salient for workers who were restricted to working part-time when they wanted to work full-time. Such part-time staff would frequently

assert their right not to take on 'extra' work duties on the basis of the number of hours by which their contracts fell short of a full-time contract. This was the case with Raphaelle, for example, who was working on 70 percent hours and explicitly pointed this out in reasoning that "seventy percent is already not much, so it [the proposed task] had better be worth it".

While recognizing that the highly regulated imposition of formal quantitative time could act as a severe constraint on their capacity to provide care, the SERV workers thus also made use of this formal quantification of time in a normative way to highlight the value of their caring duties and to negotiate for and ring-fence more of the temporal resources they needed to enact care.

Scheduling as solidarity. The collective organizing and planning facilitated by clock-time bureaucracy also provided the care workers an opportunity for sharing their temporal resources for children in care, and for carving out time for self-care. Such collective organizing was especially important given that, despite each particular child being assigned to a specific social worker, all of the team members shared a certain amount of responsibility for every child in SERV's charge.

Vignette 7 illustrates how the numerous meetings that the SERV team were required to attend and which comprised much of their 'wrestling with scheduling' in fact also provided crucial opportunities for the *collective deliberation and sense-making* of situations that were essential for them to fulfil their duties of care. In this vignette, a meeting with the head of the service and other social workers enabled the team to make collective sense of how a certain child (T) was faring since being separated from his mother and whether a particular foster family (Mr. A) was the right placement for the boy.

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VIGNETTE 7

Laura: So I saw T [child] yesterday... I wanted to inform him that his mother kept 'wanting' to see him again but that it was complicated in practice. Each time she says she was sick or forgot or never received the mail.
Gilles: Hmm.
Laura: So here it is, it was a little…
Gilles: How long has it been since she's seen him?
Laura: It's been...well, since... March.
Gilles: March?
Laura: Yes. So, ...
Alexia: He's over one year old?
Laura: He's over one year old. He turned one in July. And so... I think he's growing up well, he's doing well. The attachment to Mr. A [foster family] is becoming strong. I find that since Mrs. B [mother] has been on vacation, and I told him, that he has been doing great! [laughs]
Alexia: You said he [Mr. A] was going to 'wake up'.
Laura: Yes, frankly, he was more present with the children.
Gilles: Did you say that he understood less and less about S [another child in the care of Mr. A]?
Laura: Yes, but with S something is off.
Nathalie: No, but he doesn't understand yet. Yesterday was the first time I saw him [Mr. A] in session with S.
...
Laura: And so I asked him [Mr. A] for initial feedback on how my words had affected T. So he called me back this morning and he told me, "Well, listen, he never hugged me so much. He moaned a little but he... I repeated what you said so that reassured him, he was really asking to be in my arms, to be protected." And he told me that T had had a great night, though Mr. A was afraid that he would get agitated. So we'll have to have another appointment with his mother to tell her to give him some space!
Gilles: Yeah, we'll tell her we've got this.

(Notes on videorecorded meeting, 25th September 2014)
……..……

The team's frequent scheduling meetings and other traditional forms of bureaucratic time management did indeed support the team's collective caring endeavor. This is because dealing 'care-fully' with each child's case or 'situation' entails making sense of that child's situation, why specific actions were taken and what they mean for the child's situation.

The cognitive efforts undertaken by the care workers in addressing these questions were fundamental to their processes of deciding what they should or could do next to improve the situation in each child's case. For example, Alexia described how at a case meeting focused on a particular child they had talked about their "perceptions of the parents" and tried to make sense of "the symptoms that she [the mother] displays", while Amandine told us how she had

"questions that keep coming back" on the behavior of a suffering child and his parents, emphasizing that meetings with colleagues enabled her to "take stock regularly" and "to know which decision to take". For Maelle, this cognitive work based on collaboration with the team was absolutely essential: "I think it is *very* important to share with your colleagues – in fact it's the basis."

Importantly, scheduling work was also used by the care workers at SERV to *share temporal resources* as a crucial means of coping with, circumventing and resisting the crude allocation of fixed working hours per child in order to provide continuity of care for all the children in their charge. The team made use of multiple temporalities, including the stability and safety of routines, as well as long-term planning, to ensure continuity and stability for all the children in their charge.. For example, an informal rule at SERV was that if several consecutive judicial hearings were to be attended in a row then a single member of the team would attend all of the hearings even when they were not personally in charge of all the cases in order to save other members the trouble of the nearly one-hour drive to the court. Scheduling was thus an important practice for ensuring that no individual social worker was solely responsible for a case but shared this responsibility with other workers. By contrast with the bureaucratic assignment of tasks to individuals, solidarity was constantly reaffirmed at SERV by facilitating and encouraging the efforts of staff members to support their colleagues and enable them to perform care appropriately in the face of shared and individual constraints and difficulties.

Last but not least, scheduling in accordance with clock-time also provided important *temporal resources for SERV workers personally*. Above all, the clock-time-regulated boundary between 'work' and 'home' enabled and entitled the care workers *not* to have to care for the children in SERV's charge for substantial periods at a time. Many of our interviewees emphasized the importance of this *scheduled* time off from formal care work responsibilities,

freeing them to care for others in their personal lives, including their own children in some cases, and to administer vital 'self-care' to themselves. As a processual practice involving multiple temporalities and responsibilities, care work never starts and finishes at certain fixed times of day, meaning care workers can find it especially difficult to maintain a life-work balance. This risk was recognized by the SERV workers we observed and interviewed, who stressed that scheduling self-care was essential to make them good carers since they needed to "be well" to care for others. Without such non-work time, Maelle argued, each worker's capacity for "listening would be of lower quality". Amandine explained she needed her ten-minute walk home to "cut off" from work, though even then she acknowledged that "it's hard to move on to something else" because of the challenging situations forever unfolding in their professional care.

Discussion

Care requires a type and degree of attentiveness, competence and responsiveness (Held, 2006) that cannot be paced by clock time (Adam, 1995; Tronto, 2003). When care is provided through social services in capitalist economies (Hay, 2019; White, 1998), however, it becomes subject to the same clock time that dominates the industrial organization of work (Adam, 2004; Bear, 2014). Subjected to the dominant logic of attaining efficiency through time management, services such as caring for children from troubled families and/or placing them in foster care are organized in much the same way as the production of goods in a factory. The tensions ensuing from this organization of care in accordance with the controlled and commodified clock time of industrial organization have been highlighted in previous research, with scholars identifying an intrinsic conflict between this form of time control and the temporal demands of care (Brannen, 2005; Sabelis, 2001; Tronto, 2003). Building on these findings, this article has explored how care workers in practice navigate both clock time hegemonic in work organizations and process time necessary for care. With our in-depth case study and analysis of

a public sector social care service, we contribute to a more nuanced understanding of the complex interlinkage between practices of time and care by shedding light on two distinct aspects of this relationship.

Firstly, our study confirms and further elucidates why care practices defy the uniform imposition of clock-time. It contributes to the literature by showing how this incompatibility requires care workers to manipulate attempts to impose such industrial organization by carving out 'care timescapes'(Adam, 1995, 2004) to ensure the appropriate enactment of care. We highlighted how caring time is carved out from within the industrial time and how SERV social workers provided continuity of care by being there as needed. Secondly, we nuance interpretations of how care workers cope with the tensions between clock time and the process time needed for care by showing how the care workers in our case neither completely surrendered to nor completely abandoned clock time but rather made use of clock time in the management of certain tasks while also exploiting features of clock-time management such as 'scheduling work' to prioritize and safeguard the needs of caring. Both of these observed practices can best be described as ways of 'working on' formal time, i.e. 'tricking time' (Ringel, 2016).

In this final section we discuss the implications of our findings for theory, the specificity of our case and possible avenues for future research, concluding by highlighting the implications of our study for practice and practitioners of care.

Time and care within capitalist workplaces

Our research nuances prevailing understandings of the complex role of time and temporalities in the provision of care work in capitalist systems by applying a practice perspective (Corradi et al., 2010) to reveal how different temporalities in our case were navigated, negotiated and interweaved to enact care for the children in charge of care workers. Through this temporal work, driven by the priorities of an ethics of care, the SERV team collectively constructed and

operated according to ‘care timescapes’ that incorporated the need to provide the children in their charge with continuity, non-standardized process time, and ‘being there for them’ in the present moment.

The SERV team constructed these care timescapes specifically because care and the appropriate provision of care as paid work in formal organizations is highly vulnerable to the consequences of imposing the dominant time perspective applied in business and management. This vulnerability stems from the standardized organization of activities in simplified sequences of ‘before’ and ‘after’ and its underlying logic of maximizing efficiency by expediting tasks through their compression into predictable work programmes. It was only by pushing against the constant demand to reduce caring to a set of discrete tasks to be undertaken within finite units of time on the model of assembly-line production that the care workers in our case were able to care for the needs of the children in their charge.

From this the question arises as to whether creating care timescapes incorporating alternative temporalities constitutes a form of direct and outright opposition to the imposition of clock-time management and its underlying logic of maximizing efficiency. Our findings suggest the need for a somewhat less dichotomous interpretation of this temporal work aimed at making time for care. The interpretation we offer builds on and extends the work of scholars and ethicists of care who have highlighted the extent to which care is undermined and marginalized by the logic of individualism and utility maximization in neoliberal capitalism that dominate public discourses and politics (Held, 2006; Tronto, 1993, 2010, 2013). As Kathleen Lynch (2007) has shown in her research on care and affective relations, these prevailing discourses institutionalize and thus legitimize forms of competitive self-interest that jettison social justice values and are thus deeply antithetical to love, care, and solidarity. Studies by Linda McKie and Sophie Bowlby have further detailed how our resources and capabilities for care are severely restrained by many of the political, social, geographical, temporal and

cultural aspects of contemporary life (Bowlby & McKie, 2019; McKie et al., 2002). These authors have developed the notion of a 'care ecology' to highlight the complex ways in which socio-economic factors affect people's individual 'caringscapes', i.e. the informal caring practices we perform for others in our personal lives, and how care is provided at societal level. In sum, a care ecology approach recognizes that wider socio-economic developments and corresponding changes in the provision of formal care have complex effects on informal caregiving and vice versa.

Acknowledging the usefulness of this holistic approach for studying care in general and care as work in relation to time, we show that to be able to enact care as a relational process in a carescape and immediate context dominated by clock time, the social workers at SERV had to 'trick time'. Itself a significant form of care work, such trickery was aimed at accommodating the logic and demands of working according to clock time in a bureaucratic organization (Du Gay, 2000) within the different logic and demands of enacting care ethically as a process (Mol, 2008). Through these efforts, the SERV team 'made time to care' within the framework of – but beyond the strict control and quantifying logic of – their organization's clock-time regime. This finding resonates with the account given by Barbara Adam (2004) of care work as enacted in embodied material practices performed within 'intermissions' of the industrial timescape. Such intermissions in clock time are necessary not only for the immediate performance of care work itself but to provide essential respite for the bodies and lives of care workers and thus also for sustaining their long-term capacity for care. As Lauren Berlant (2007) has argued, this respite is needed not only to recover from "the pressures of coordinating one's pacing with the pace of the working day" but also to rejuvenate ourselves through "interrupting the liberal and capitalist subject called to consciousness, intentionality, and effective will" (p. 779).

Shedding new light on the intricate interrelationships between 'time' and care as an ethical practice is the first contribution of our study. With this we add to evidence from prior

research of the centrality of time in the intersubjective construction of ethical practices, including in fostering relational influence (DiBenigno, 2020) and as a key component of storytelling in organizational ethics (Rhodes et al., 2010). Further evidencing the centrality of time in shaping ethical practices in organizations, our study also confirms previous research findings on the importance of process time for enabling values work to unfold (Gehman et al., 2013), for enabling people to learn to take responsibility (Kim et al., 2019), and for members of organizations to make sense of– or indeed to 'process' – sequences of events in accordance with organizational ethics (Deroy & Clegg, 2011).

For while it may be possible for care workers in bureaucratic public sector care settings such as SERV to construct care timescapes by "questioning and problematizing moral orders and the moral rules-in-use in organizational contexts" (Weiskopf & Willmott, 2013, p. 471), the logic of clock-time management is essentially about control in line with a very narrow understanding of freedom (Bloom & Śliwa, 2022). The unsustainability of imposing this crude construction of time on the organization of assembly-line factory work, let alone care work, was demonstrated over a century ago in 1899 by the leading advocate of time management himself, F. W. Taylor, when his famous experiments in the strict scheduling of work tasks ended in failure on account of overly limiting workers' freedom, compelling them to adopt an inflexible regular rhythm when a more flexible pace of work, including time to process and intermissions for respite, would have been more appropriate and efficient (Wrege & Hodgetts, 2000). In the face of persistent efforts to impose such impersonal management on the organization of care work, we align with Virginia Held (2006) in arguing that "we need an *ethics* of care, not just care itself" (p. 11). Our findings support this case and inform the ethics of care debate by evidencing the importance of material clock-time resources to enact an ethics of care in social care services (Hayes & Moore, 2017; White, 1998).

While we have shown that care workers need some degree of resisting the clock to enact care as a process, we do not presume that an apprehension of time as purely processual (Tsoukas & Chia, 2002) would be necessarily conductive to care. Care needs respite from a colonizing means-end rationality (Tronto, 2003). Our study shows workers exercising agency by carving out a space where they tactically manipulate clock time to allow proper care. Yet, can care or any collaborative human achievement be conducted without a degree of concern for efficiency (Bakken et al, 2013)? After all, care is not without orientation, being concerned with addressing the needs of concrete particular others (Held, 2006; Tronto, 1993). Hence, we do not assert that process time in itself is necessarily a medium of care. We suggest future research may inquire whether process time alone can be conducive of care, in particular by studying care in fluid organizations that would feature reduced concern for efficiency.

The practice of time in organizations

Our findings also contribute to research on the 'multiplexity' of temporal practices in organizations (Bansal et al., 2022; Feldman et al., 2020; Hernes & Schultz, 2020; Orlikowski & Yates, 2002; Reinecke & Ansari, 2015). A common premise of this research is that "while people's actions may sometimes be shaped by structural conditions beyond their control, they have an active role in shaping the temporal contours of their lives, for example, by enacting different social practices" (Johnsen et al., 2019, p. 4). From this starting point, scholars have explored how workers cope with, resist and endure the dehumanizing effects of clock-time work in industrial work by machine operators (Roy, 1959), and services provided by management consultants (Perlow and Porter, 2009; Blagoev and Schreyögg, 2019). Notwithstanding the constraints imposed by clock time and the need for variation in temporalities, empirical studies in this stream of research have also demonstrated that some form of clock-time scheduling can nonetheless prove beneficial even in complex and non-schedulable innovation processes,

including 3M's '15% rule' whereby employees are induced to utilize this percentage of their working time pursuing innovative ideas (Garud et al., 2013).

Our analysis confirms that the workers in our case combined multiple temporalities to enact care. Thus, on the one hand these workers performed certain tasks as part of their care work with a focus on quantifiable outcomes such as the number of children they saw each month or the number of children placed in foster care by the team as a whole. On the other hand, and often simultaneously, they also performed types of care work practices with a very different focus and temporal orientation in responding to the immediate and evolving needs of the children in their care. A key difference in our case with the empirical findings of these studies, however, is that the actors observed in these prior studies reproduced the dominant temporal structures of their settings while simultaneously transforming these structures to allow for and safeguard different subjective experiences of time (Hernes & Schultz, 2020). In our study, by contrast, the SERV workers needed to create and safeguard alternative timescapes not only to 'cope' with their work but as a necessary precondition for providing ethical care as the core of all their work. The care workers we observed were able to trick time (Ringel, 2016) by simultaneously enacting and reproducing the emptiness of clock time through such practices as 'trading' hours while also 'filling' this emptiness with care timescapes imbued with process time, emphasizing continuity, non-standardization, and being in the present moment.

By unpacking the complex interactions between clock time and other temporalities, our article contributes to scholarly efforts to extend beyond what Shipp and Jansen (2021, p. 324) have described as "the 'murky middle' of the objective-subjective continuum of time". Therefore, a second and closely related contribution is to the literature on organizational temporality. In particular, our research demonstrates that the objective and quantitative apprehension of time-use (Feldman et al., 2020) can in practice be combined and intertwined with processual understandings of time (Tsoukas & Chia, 2002; Reinecke & Ansari, 2017).

Reflections on the specificity of our case study and suggestions for future research

The child protection agency we studied represents a specific type of social care service on account of its relatively small size, its physical distance from central services, and the particular personality, expertise and experience of the head of the SERV team. These features enabled and emboldened the staff to forcefully and often explicitly challenge the clock time in which they were implicated and embedded. Given these specificities, we do not claim our findings are typical of all social care services, acknowledging that the somewhat unusual circumstances of this "extreme case" (Flyvbjerg, 2006) were critical in affording us the access to observe and the opportunity to build our theory on time-tricking as a strategy of 'making time for care'.

Here it is important to note that the material resources at the disposal of the SERV team were if anything slightly more abundant than in most child protection services in the Global North. Even though the welfare state in France has been cut back since the 1980s in line with many countries worldwide, including 'austerity' measures implemented following the 2008 financial crisis, the hours available to the members of SERV at the time of our observation were superior to those of social services in many other countries. Hayes and Moore's (2017), provide a contrasting example of 'care in a time of austerity' shedding a harsh light on care for the elderly in the UK; see also Davies (2004) on budget cuts in childcare in Sweden. One reason for SERV's comparative wealth of resources is that child protection services in France are closely regulated by the judiciary and thus less vulnerable to budget cuts. Accordingly, the struggles for time we observed at SERV were not related so directly to insufficient resources as might be the case in other settings. As such, these struggles exemplify tensions and coping strategies related to the conflict between clock-time and care practices rather than the perennial struggle for care resources in capitalist carescapes (Bowlby & McKie, 2019; Hayes & Moore, 2017).

An important limitation of our study is that we neither set out to nor were able to evaluate the quality of care provided from the perspective of care-receivers, viz. in this case the children in SERV's charge. Instead we deliberately took the perspective of SERV workers as to what constitutes 'good care' in examining their struggles to make time for providing such care. Since the quality of the provision of care is defined by its reception and not merely by actions taken (Tronto, 1993), future research could usefully build on our theorization of how care workers trick clock time to provide care in order to evaluate the extent to which such care is actually received in different cases.

Implications for policy-making: The material and symbolic conditions for care work

Our study highlights the potential benefits of integrating considerations of multiplex temporalities in policymaking in accordance with the ethics of care (Held, 2006; Tronto, 1993, 2010). As we hope to have shown, clock time itself is not the implacable enemy of care. All social workers invariably operate within a limited range of possibilities for providing appropriate care, often in the face of harsh constraints imposed by 'austerity' measures and similar neoliberal policies (Hay, 2019; Hayes & Moore, 2017; White, 1998). By revealing how a specific group of care workers coped with some of these constraints, our study shows that while clock-time management undoubtedly generates tensions in care work it can also be used and tricked as a resource to extend "the repertoire of human possibilities" (Du Gay, 2000, p. 245) available to care workers to deliver various types of care.

Yet, this entails an approach to management that both allows for solidarity to emerge and grow among care workers and actively facilitates explicit and inclusive deliberation, including in discussions of scheduling but also in collective enhancing of shared understandings and ethical values (Antoni et al., 2020). Creating these conditions at organization level also depends on material resources allotted to each care worker and the quality of professional skills available within the organization. In sum, we conclude that care workers can cope with temporal

conflicts and even make use of clock-time management tools if – but *only* if – they are afforded sufficient autonomy vis-à-vis the management of their work to carve out the care timescapes needed to enact an ethics of care.

[i] All names have been changed to protect the identity of participants.
[ii] The term 'situation' is used to designate the case of a child in the care of SERV, reproducing here the very words of SERV workers, since *situation* in French translates as 'situation' in English.

Compliance with Ethical Standards

The authors have identified no conflict of interests. This research has been found compliant with the research ethics policy of Warwick Business School. The participants were informed of the research purpose of the study and consented to participate.

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