

SEEKING SCIENTIFIC SENSE AND DEMOCRATIC SENSIBILITY:

THE QUEST FOR RATIONALITY IN PUBLIC POLICY AND

PRAGMATIST PHILOSOPHY

(OR: JOHN DEWEY AND THE CASE OF ELUSIVE RATIONALITY IN

DEMOCRATIC PRACTICE: A BRIEF FOR HEALTH POLICY)

A thesis submitted to the University of London, in partial fulfilment of the requirements for the degree of Doctor of Philosophy and the Diploma of the London School of Hygiene and Tropical Medicine.

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DECLARATION

Candidate

I hereby declare that this is a valid account of my PhD research process and analysis. The thesis represents my own work, including on collaborative projects, and has not been previously submitted to this or any other institution for any degree, diploma or qualification.

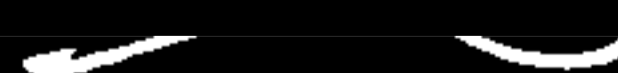
Shyama Kuruvilla



Supervisor

I confirm that the account given in the thesis of how the research process and analysis were developed is accurate and demonstrates that the thesis conforms to the accepted tests of authorship. The candidate was justifiably either first or second author on papers published in different collaborative projects during the period of the PhD, making a major contribution on all occasions, and was entirely responsible for bringing these and other strands of work together to form an original thesis.

Professor Nicholas Mays



ABSTRACT

People who participate in policy-making, from government, academia, industry and civil society, would all prefer their perspectives be regarded as rational. There is little agreement, however, on what comprises rationality, with conflicting claims of 'scientific sense' and 'democratic sensibility', and disagreement on whether moral considerations are part of rational decision-making.

Pragmatist philosopher John Dewey drew from the natural and social sciences, as well as his international political experience, to describe rationality as a characteristic of human agency. He posited that rationality should comprise scientific sense, democratic sensibility and moral imagination in order to resolve problematic situations and support individual and social flourishing.

In instituting contemporary policy science, Harold Lasswell considered pragmatist philosophy to be its foundation. However, this pragmatist perspective has since been overlooked. Policy science developed with a primarily empirical focus on discrete aspects of policy-making. There is now an identified need for more integrative and normative theories to better understand and guide public policy.

The primary goal of this thesis is to demonstrate that rationality, as defined in pragmatist philosophy, can integrate diverse considerations of policy theory and public participation. In order to make the philosophical concepts more operative, a new theory of policy-making – the *Decision Cell*

model – is developed. This model is structured according to key ‘pillars’ of pragmatist philosophy and shaped by contemporary theoretical and empirical analyses, particularly of health policy. Primary research on the impact of health services and policy research at LSHTM, and on UNICEF-civil society organisation partnerships with respect to children’s rights, further informs the development and application of this model.

The Decision Cell model also allows for a comparative analysis of normative frameworks for health policy. Mechanisms to facilitate adopting a pragmatist approach to rational policy-making are highlighted, as are the potential advantages and challenges of doing so.

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TABLE OF CONTENTS

| | |
|----------------------------------------------------------------------------------------------------------------------|-----|
| Chapter 1. Introduction: background & approach | 9 |
| Chapter 2. There is no 'point' in decision-making: rethinking rationality in policy processes & participation..... | 50 |
| Chapter 3. A pragmatist reconstruction of rationality | 101 |
| Chapter 4. The Decision Cell Model (I): dealing with indeterminate situations and coordinating rational agency | 178 |
| Chapter 5. The Decision Cell Model (II): the decision activities of <i>Define, Design and Realise</i> | 239 |
| Chapter 6. The Decision Cell Model (III): <i>Deliberation</i> and 'good' policy theory | 286 |
| Chapter 7. Comparing norms and ethics for health policy | 344 |
| Chapter 8. Conclusion: advantages, challenges & looking forward | 410 |
| Bibliography and references | 441 |

LIST OF FIGURES

| | |
|--------------------------------------------------------------------------|-----|
| Figure 1. John Dewey | 25 |
| Figure 2. A multi-grounded approach to theory development | 34 |
| Figure 3. A linear instrumental model of rational decision-making | 52 |
| Figure 4. Pragmatist pillars for public policy | 103 |
| Figure 5. The rhythm of situations outlined | 114 |
| Figure 6. The Decision Cell: an integrative model of policy-making | 182 |
| Figure 7. Modes of partnership | 209 |
| Figure 8. Partnership location grid | 210 |
| Figure 9. The public involvement matrix | 217 |
| Figure 10. The Independent/Bosch Technology Horizons Award | 228 |
| Figure 11. The Decision Cell model: a reminder | 421 |

LIST OF TABLES

| | |
|---------------------------------------------------------------------------|-----|
| Table 1. Research on communication | 78 |
| Table 2. The Research Impact Framework | 266 |
| Table 3. Coverage of pragmatist criteria for rational policy-making | 405 |

Chapter 1. Introduction: background & approach

CHAPTER OUTLINE

| | |
|------------------------------------------------------------------------|----|
| Introduction: background & approach | 10 |
| Policy science: integrative, problem oriented & normative?..... | 11 |
| Historical inks between pragmatist philosophy and policy science | 16 |
| A brief biography of John Dewey..... | 17 |
| Losing and reclaiming Deweyan pragmatism in public policy | 20 |
| The PhD approach: a personal preface | 26 |
| Methods and 'Muße' | 32 |
| On developing explanatory and normative theory | 32 |
| Multi-disciplinary collaborations and Muße | 36 |
| Empirical work..... | 42 |
| Limitations of scope and sectoral focus | 45 |
| Developing a thesis outline..... | 46 |

Introduction: background & approach

There has been, roughly speaking, a coincidence in the development of modern experimental science and of democracy ... does nature itself, as uncovered and understood by our best contemporaneous knowledge, sustain and support our democratic hopes and aspirations? Or if we choose to begin arbitrarily at the other end ... how shall we read reality (that is to say the world of existence accessible to verifiable inquiry) so that we may essay our deepest political and social problems with a conviction that they are to a reasonable extent sanctioned and sustained by the nature of things?

John Dewey, 1919, Philosophy and Democracy

The policy sciences were initially conceived by Harold Lasswell (1951) and others ... as a means of improving the governmental decision process. They were designed to be problem oriented, multidisciplinary and explicitly normative (i.e., explicitly considering values) in their approach ... and "directed towards knowledge to improve the practice of democracy."

DeLeon & Longobardi, 2002, Policy Analysis in the Good Society

This introductory chapter serves as a backdrop for the thesis. First, the need for policy theories that provide holistic, problem-solving and normative perspectives on policy-making is discussed. The historical links between pragmatist philosophy (which arguably provides such an integrated, problem-solving and normative perspective) and policy science are reviewed. This relationship is further examined in light of a brief biography of pragmatist philosopher John Dewey, whose work provides the conceptual foundation for this thesis. A personal preface then

sets out the PhD process, including the methods and approaches used.

Finally, a synopsis of the succeeding chapters serves as a framework, or roadmap, of the organisation and development of the thesis.

Policy science: integrative, problem oriented & normative?

In the mid-20th century, Harold Lasswell and others instituted the policy sciences as an integrative, multi-disciplinary nexus between the social sciences, public policy and democratic practice (DeLeon & Longobardi, 2002; Lasswell, 1951). The aim was to draw on insights across related disciplines – including law, sociology, psychology and political philosophy – in order to help understand public policy-making and inform public policy-makers. There was also an expectation that policy science would help develop knowledge and values to guide democratic practice and promote individual and societal flourishing (Ham & Hill, 1993; John, 1998; Sabatier, 1999). Policy science was thus expected to be integrative, problem-oriented and normative, but these expectations were not met (DeLeon & Longobardi, 2002; Lasswell, 1951).

Rather than continuing to be a meeting point for advances across related disciplines, policy science became a discipline in its own right. The seemingly intractable nature of some policy problems and the often long-term nature of expected policy outcomes, often extending beyond government and electoral cycles, meant that the problem-solving aspect of policy science was not seen to be of much relevance (Elster, 1989; Parsons,

1995). The advisory and normative role of policy science was constrained by the resistance of bureaucrats and politicians to direction or criticism from academics and technical experts (Howlett & Ramesh, 2003; Parsons, 1995).

Additionally, a heavily quantitative turn in the discipline meant that policy science increasingly focussed on the technical aspects of decision-making – including operations research, strategic modelling, social choice approaches and cost-effectiveness analysis (DeLeon, 1988; Fischer, 2003; Garrison, 2000). As a result, relatively incommensurable considerations, such as values, ethics and cultural contexts, were largely ignored. Some commentators also saw that the increasingly technical focus in policy science brought, “ever more rigorous quantitative analysis to bear on topics of narrower and narrower import” (Fischer, 2003, p. xi).

In light of all these changes, the focus of policy science shifted from informing what governments should do, to explaining what governments do (Parsons, 1995). On the positive side, the analytical and descriptive focus in policy science led to the development of in-depth theoretical and empirical understandings of different aspects of policy-making. For example, there is now considerable knowledge of policy agenda setting (Kingdon, 1995) and implementation (Pressman & Wildavsky, 1984), on the allocation of goods and services (Ham & Hill, 1993) and on policy networks (Hecl, 1978) and institutions (Ostrom, 1999). However, the in-

depth focus on discrete aspects of the policy process has made it increasingly difficult to form a more integrated, or comprehensive, view of public policy processes. Such an overview is required so policy-making, as a whole, may better be understood, designed, managed and evaluated (deHaven-Smith, 1988; Ham & Hill, 1993; John, 1998; Sabatier, 1999).

Descriptive and historical approaches to policy analyses limited its application to problem-solving and the management of policy change and consequences. Further, the focus in the policy sciences on describing the behaviour of governments meant that less attention was paid to the range of other actors who influence and, in turn, are affected by, policy (Buse, Mays & Walt, 2005; Fischer, 2003; Parsons, 1995). Other actors who are engaged with policy processes include scientists, corporations, civil society organisations, service providers and citizens. Walt and Gilson (1994) highlight the misplaced focus of policy analysis in health sector reform and caution that,

Much health policy wrongly focuses attention on the *content* of reform, and neglects the *actors* involved in policy reform (at the international, national sub-national levels), the *processes* contingent on developing and implementing change and the *context* within which policy is developed. Focus on policy content diverts attention from understanding the processes which explain why desired policy outcomes fail to emerge (Walt & Gilson, 1994, p. 354).

There is also the view, held by some analysts, that policy science protects the status quo by reflecting government priorities and institutional

agendas and by focusing on the work of unelected bureaucracies - such as civil services (DeLeon & Longobardi, 2002; Dryzek, 1989; Garrison, 2000; Richardson, 2002). Additionally, a focus in policy-making (catalysed by considerations of war and defence) on technological development and the arms race meant that less attention was paid to the wider range of socio-political concerns and values in policy-making (DeLeon & Longobardi, 2002; Fischer, 2003; Richardson, 2002; Snider, 2000a). As a result, the field has been viewed as turning into "*the policy sciences of tyranny*" (Dryzek, 1989, p. 98).

As for policy science providing a normative orientation to decision-making, there is a growing realisation that value-neutral expertise is impracticable, that foundational accord is rare - as even experts disagree in making policy arguments, and that scientific findings are just one among many constitutive factors in socio-political deliberations (Kuruvilla & Mays, 2005; Majone, 1989; Wynne, 2003). Further, the forced separation of technical and value considerations in policy-making is considered both untenable and unreliable as a guide for democratic practice (DeLeon & Longobardi, 2002; Dryzek, 1989; Garrison, 2000).

Policy analysts increasingly emphasise the need to develop more *integrative* policy theory to better understand and guide policy-making as a whole and to inform the participation of different groups in this process (deHaven-Smith, 1988; John, 1998; Sabatier, 1999). There is also an

identified need for policy theory to be more *explanatory* (rather than only descriptive) to help understand why, when and how policy variations and change occur, and to help manage the same (John, 1998; Sabatier, 1999). Finally, there is an identified need to develop *normative* theories of public policy to promote the development of values that to guide democratic practice and support individual and societal flourishing (DeLeon & Longobardi, 2002; Fischer, 2003; Lasswell, 1971; Parsons, 1995).

The challenge to develop more integrative, explanatory and normative policy theory is less daunting than it may first seem, as giants have already lent their shoulders to this endeavour. In particular, Lasswell (1971, p. xiv), in founding the contemporary policy sciences acknowledged that,

The policy sciences are a contemporary policy adaptation of the general approach to public policy that was recommended by John Dewey and his colleagues in the development of American pragmatism.

Thus, pragmatist philosophy, arguably, already provides an overarching epistemology for policy science.

The primary goal of this thesis is to demonstrate that pragmatist philosophy is still an empirically congruent and normative foundation for both public policy-making and democratic practice overall. It further aims to show that rationality, as defined in pragmatist philosophy, provides

common ground on which one may build policy theory that is integrative, problem-solving and normative.

Historical inks between pragmatist philosophy and policy science

There have been strong historical links between policy science and pragmatist philosophy that are now being reclaimed. As mentioned earlier, Lasswell (1971) affirmed that the modern policy sciences were founded on pragmatist philosophy, with particular reference to John Dewey's work. Related disciplines, including political philosophy, psychology, sociology, planning and organisational theory, education, art and architecture, also make reference to John Dewey's pragmatist philosophy (Collier, 2006; Friedman, 1987; Joas, 1993; Senge, Kleiner, Roberts, Ross et al., 1999). For example, in the management field, Senge et al. (1999) in setting out a 'timeline of learning organisation concepts', begin with the publication of John Dewey's (1938/ 1997) book, *Experience and education*. Dewey's treatise on *Art as experience* (1934/ 1980) and his emphasis on the integrated nature of aesthetics, functionality and ethics (Dewey, 1922/ 2002) has found application in art and architecture (Collier, 2006), as will be discussed in following chapters.

In psychology, various schools claimed sanction from Dewey's work; however, this was not always justifiable. For example, Dewey's emphasis on the use of scientific method and inquiry has been likened to experimental methods in psychology. While this is partially true,

contemporary scholars have recognised that the connotation of *experimental* does not capture Dewey's integrated approach to inquiry and experience; as Manicas (2002, p. 268) explains,

Dewey continued to argue that "the nature of all objects of philosophical inquiry is to be fixed by finding out what experience has to say about them," instead of getting answers from "scientific psychology," the problems he was interested in addressing would respond to a new conception of inquiry, work which culminated in his 1938 *Logic: The Theory of Inquiry*. This profound shift is missed primarily because Dewey's theory of inquiry is so fundamentally in opposition to the dominating logical empiricist theory of science, which had by then captured psychology, that it was misunderstood and then ignored.

There are various reasons as to why there was a divergence from, and misunderstanding of, pragmatist philosophy as related to policy science as well. Accordingly, this introductory chapter continues with a brief biography of John Dewey that serves as a backdrop for his work and for a discussion on why pragmatist philosophy was, for a while – lost, and is now being reclaimed in policy science and public administration.

A brief biography of John Dewey

John Dewey along with Charles Sanders Peirce and William James are considered the founding triumvirate of classical pragmatist philosophy (Center for Dewey Studies, 1961 - current; Ryan, 1995; Westbrook, 1991). However, there were several others who contributed to the development of pragmatist philosophy, including Jane Addams, James H. Tufts and

George Herbert Mead. Dewey was a professor of philosophy and was also one of the most influential political voices of his time, both in the US and internationally (Evans, 2000; Ryan, 1995; Schilpp & Hahn, 1939/ 1989).

He was born just before the American Civil War and died during the Cold War (Ryan, 1995). He advised the US government in both World Wars.

However, Dewey was criticised both for not immediately recommending the US join the wars and for recommending that it did, when it seemed to be the lesser of two evils, considering the rising totalitarian and militaristic conflict (Bullert, 1989; Schilpp & Hahn, 1939/ 1989). Dewey emphasised the need to continually clarify the aims of war and the importance of academic freedom and democratic process through those times. Dewey's involvement in public service also extended to him chairing, at the age of 78, the commission in Mexico that found Leon Trotsky 'not guilty' of the crimes alleged by Stalin.

He engaged in extensive philosophical deliberations and debates on political philosophy and public policy with the leading minds of his generation, including commenting on the works of John Stuart Mill, Marx, Hegel, Darwin, T.H. Green and Bertrand Russell among others. While Dewey strongly disagreed with Russell on points of philosophy, as will be discussed in later chapters, "he sponsored Bertrand Russell's defence after Russell was dismissed from City College of New York for his "atheism" and "hedonism"" (Bullert, 1989, p. 79).

Dewey was known internationally for his work on governance and education, including in Japan, Turkey, Mexico, South Africa and Russia (Ryan, 1995; Schilpp & Hahn, 1939/ 1989; Westbrook, 1991). In China he was even considered a 'second Confucius' (Ryan, 1995; Westbrook, 1991). In a New York Times book review, Rorty (2003) retells one example of Dewey's influence in China,

Dewey's prestige in China was such that the State Department, in 1942, asked Dewey to write a message to be dropped from airplanes, encouraging the Chinese to keep on resisting the Japanese.

Throughout his work, Dewey was concerned with, and committed to, studying how different individuals and cultural groups could realise their unique potential and collectively contribute to building society (Ryan, 1995; Schilpp & Hahn, 1939/ 1989; Westbrook, 1991). He saw this pluralistic approach to democratic development as imperative in the US of the early 20th century, where unemployment was high, economic conditions were precarious, immigration was increasing, racial tensions were rising, and cities were rapidly expanding. Living in Chicago in the aftermath of the great fire of 1871, Dewey was familiar with both the logistics and aesthetics of city planning - especially the capacity of art and design to reflect and develop cultural sensibilities (Ryan, 2000). He was also an active participant in a range of professional associations, including unions and civil rights groups (Caspary, 2000; Westbrook, 1991).

Dewey saw his philosophy as practical; this was reflected in his engagement with society. He acknowledged as an important source of inspiration in his work, his collaboration with Jane Addams at the Hull House – one of the first resettlement homes for women in the US, focusing on social policy reform and providing services, including education and work programmes for underserved communities (Shields, 2003). As another example of Dewey's practical orientation, Ryan (2000, p. 168) recounts how Dewey had a small farm on Long Island where he kept hens. At one local reception, where Dewey was the guest of honour, a lady was heard to exclaim in surprise, "My goodness, it's the egg man."

Losing and reclaiming Deweyan pragmatism in public policy

As is evident from even a brief synopsis of his life, Dewey was an influential and active citizen in his world and times. Upon his death in June 1952, he left behind a body of work including over 400 journal articles and 40 books (Center for Dewey Studies, 1961 - current). Dewey had also given public speeches and invited lectures, and had written essays, policy briefs, letters and articles in popular magazines and newspapers, including the New Republic and New York Times.

Given this volume of work, it can be difficult to apprehend the scope, detail and progression of Dewey's philosophy. As a result, Dewey was, and often is, subject to criticism based on incomplete readings of his work

(Garrison, 2000; Ryan, 1995; Snider, 2000b). Snider (2000b, p. 489) cautions against a piecemeal approach to reading and applying pragmatist philosophy, saying,

Peirce, James, and Dewey were not satisfied with proclaiming only a few of pragmatism's points. Rather, they went to great lengths to develop pragmatism as a comprehensive and integrated theory of thought.

Others note that Dewey's detailed and dense writing style did not make matters easier in terms of facilitating the understanding and use of his work. Famously, US Supreme Court Justice, Oliver Wendell Holmes is quoted (Westbrook, 1991, p. 341) as saying that,

Dewey wrote as God would have spoken had He been inarticulate but keenly desirous to tell you how it was.

Perhaps this was a reflection of the academic writing style of his time, or the expository nature of philosophical analysis in general. For my part, while getting acculturated to the language and logic of philosophy was challenging, reading John Dewey is a most rewarding experience. His insights are profound and well-founded, there are eminently quotable passages in his work, some of which are used in this thesis, and there are points where Dewey's writing can be laugh-out-loud funny; there is in fact a book titled, 'The Wit and Wisdom of John Dewey' (Johnson, 1949).

There were also far reaching changes in the worlds of politics, policy

science and philosophy that for a while distanced and alienated pragmatist philosophy from public policy-making. In US politics, these alienating factors included McCarthyism and the Cold War. The focus on war led to an emphasis in education and policy-making on building a scientific and technological elite. Governance shifted from coordinating societal planning to developing centralised leadership and focusing on technological 'fixes' (Snider, 2000a). This also led to increasingly reductionist, empiricist foci in public administration and its accompanying analysis (DeLeon, 1988; Fischer, 2003; Garrison, 2000; Parsons, 1995). All these factors contributed to policy science diverging from pragmatist philosophy in the latter half of the 20th century.

One notable illustration of how policy science moved away from pragmatist philosophy is contained within the work of Herbert Simon. To address the lack of theoretical underpinnings in public administration, Simon (1957) developed his thesis on *Administrative Behavior*. At the time, Simon's approach was strongly influenced by 'logical positivism' that by then had achieved hegemony in the social sciences (Snider, 2000a). In this context, Simon developed a theory of rational decision-making that was 'technical' in that it excluded value considerations and took an instrumental view of how to find efficient means to achieve pre-determined political ends. He also considered the determination and evaluation of these ends as outside the remit of rationality (Simon, 1957, 1983). Thus, even though he extensively cited both James and Dewey and

claimed congruence between his thesis and Dewey's, Simon's approach was incompatible with central traits of pragmatist philosophy as regards rationality, such as the mutually constitutive nature of means and ends and the integrity of facts and values (discussed in Chapter 3). Thus Snider (2000a, p. 346) notes that,

It is ironic that Simon, in a work in which he claimed the sanction of James and Dewey, may actually have moved public administration even further from their pragmatism.

Now, at the turn of the 21st century the value of classical Deweyan pragmatism is being rediscovered. There are also rich sources of empirical evidence regarding policy-making that are congruent with pragmatist philosophy; this evidence will be drawn on in following chapters. For example, there is a series of articles on the links between pragmatist philosophy and public administration in *Administration and Society* (Evans, 2000; Garrison, 2000; Snider, 2000b). Papers in the *Journal of Economic Methodology* focussed on the relative value of pragmatist philosophy to other theories, for example, to better understand consumer behaviour and entrepreneurship (Mousavi & Garrison, 2003; Shook, 2003). Overall, Evans (2000, p. 309) notes a contemporary move toward "reclaiming the work of John Dewey as a frame for theorizing about public administration and public management."

In turn, Dewey's work is now more accessible. For instance, reprints of his work, e.g. *the Public and its Problems* (Dewey, 1954/ 1927) and *Freedom and Culture* (Dewey, 1939/ 1989a), are increasingly available. There are also biographies, anthologies, articles and various other literature sources that are referenced throughout this thesis. As an introduction to Dewey's work, Alan Ryan (Warden of New College, Oxford University), a British political philosopher and self-confessed fan of Dewey, provides an informative and entertaining overview of Deweyan pragmatism (Ryan, 1995). James Gouinlock edited a collection of Dewey's moral writings, which makes a very handy reference on this topic (Dewey, 1994). There are also anthologies of classical pragmatist writing; for example, there is a book edited by Thayer (1982) that includes key works by Charles Sanders Peirce, William James, John Dewey and George Herbert Mead.

A range of electronic resources also catalogue and collate Dewey's works; most notably, the Center for Dewey Studies (Center for Dewey Studies, 1961 - current) has compiled a thirty-seven-volume edition of Dewey's complete writings. *The Collected Works of John Dewey, 1882-1953*, published by the Southern Illinois University Press is divided into three series - Early, Middle, and Later Works; citations of EW, MW, and LW in the text refer to these sources. In cooperation with the IntelLex Corporation, the Center for Dewey studies has also published a related *Collected Works of John Dewey on CD-ROM* (Boydston & Hickman, 1882-1953/ 1999). The ability to search Dewey's work by key words, highlight

sections and annotate, makes the CD-ROM an invaluable tool for research on Dewey and on pragmatist philosophy.

As an aside - in the course of this PhD, I came across the website of artist Antony Hare¹ who had drawn a sketch of Dewey; not coincidentally, Hare's father is a professor of education and a Dewey scholar. Hare kindly allowed his sketch, with a slogan, to be printed on T-shirts, which have since been worn by colleagues working on Dewey related topics. The sketch and slogan, (Figure 1), provided an entertaining excuse to get back to work on respective PhDs and also served to convey, at least symbolically and with a smile, a sense of solidarity with Dewey's work.



Figure 1. John Dewey
© Antony Hare

¹ www.siteway.com

The PhD approach: a personal preface

At the conclusion of this PhD, I am left both humbled and exhilarated: humbled from the realisation that through the process of academic inquiry, I have engaged with just a minuscule part of the vast resources of human knowledge and understanding; humbled also upon realising that there is still much left to learn, particularly on how public policy can contribute to a way of life that supports individual and societal flourishing.

There is also a sense of exhilaration from having seen the world from a viewpoint that I did not previously have access to - from the privileged position of one 'standing on the shoulders of giants', and from sharing in the perspectives of colleagues. There is exhilaration also on realising that, as does every individual, I have a unique vantage point that can be focused, refined and ultimately compiled in a way that contributes to the world of knowledge.

The quest referred to in the title of this PhD is by its very nature one undertaken with reference to the academic literature. However, personal experiences, choices and events led to this quest and influenced the decisions taken en route. Recounting the entirety of my PhD experience would be impracticable, but saying that it was innately personal does correctly characterise the process.

First, I will speak to the tension between scientific and democratic considerations in policy-making that initiated this academic quest. Before joining the PhD programme at the London School of Hygiene and Tropical Medicine, I worked at the World Health Organization (WHO). At WHO, I regularly interacted with policy-makers, scientists, health care providers, civil society groups, media professionals, private corporations and citizens across a range of projects and countries. Increasingly it became clear that, at least in health policy-making, opinions on how to reconcile scientific considerations and democratic sensibilities were, to say the least - polarised. Science without democratic sensibility was criticised for being removed from people's needs and values; democratic propositions made without scientific sense were eschewed as ideological; and public policy-making was seen as compromising both scientific sense and democratic sensibility. These different considerations did, on occasion, come together. When different groups were able to share perspectives, develop understandings and coordinate on action significant policy advances could be made. One reason I decided to do a PhD was to learn about how to more systematically facilitate this type of inclusive and results-oriented participation in policy-making.

For example, reflecting on the Framework Convention on Tobacco Control as one of the most successful and far-reaching public health policy negotiations in history, the then WHO Director General noted that,

Social scientists, economists, public health experts, women's groups and lawyers have worked with us for the last three years delivering accurate information to the treaty-making process, and taken public health science and research into the highest levels of political decision making (Brundtland, 2001).

In other instances, however, different groups were not as well aligned. In my experience at WHO, policy-makers and experts expressed concerns about the basis on which different civil society organisations (CSOs) attended WHO meetings and the legitimacy of their agendas. Policy-makers, civil society organisations and academics raised concerns over WHO's judgements, for example in the World Health Report 2000 on what constituted 'goodness' and 'fairness' as desired qualities of health systems, and the basis on which decisions were made to compare countries.

As for the involvement of the general public in decisions that affected their lives, the WHO Constitution (1946) states that,

An informed opinion and active co-operation on the part of the public are of the utmost importance in the improvement of the health of the people.

How exactly this type of cooperation is to be achieved, however, was not clear. There was little agreement on strategies for participation or on the evidence on the costs and effectiveness of these strategies. There was also growing concern about the systemic spread of poorly articulated and uncritically adopted normative prescriptions for participation in policy-

making (Abelson, Forest, Eyles, Smith et al., 2003; Cooke & Kothari, 2001; Crawford, Rutter, Manley, Weaver et al., 2002).

The private sector was often vilified, particularly as related to pharmaceutical firms' involvement in academic research and in policy lobbies on tobacco-related issues. However, in other instances, Public Private Partnerships (PPPs) were considered an innovative mode of health research and policy implementation (Buse, Mays & Walt, 2005). I was closely involved with a project, the Health InterNetwork, which was explicitly set up as a PPP in the UN Millennium Development Initiative (Kuruvilla, Dzenowagis, Pleasant, Dwivedi et al., 2004). This project aimed to make best use of both public and private sector resources to support health systems by facilitating more equitable access to communication technologies and sources of health information.

There was also dissension with respect to the conduct and utilisation of health research; for instance, 'science wars' (Jasanoff, 2000) between researchers espousing different worldviews or using quantitative or qualitative methodologies. Another project I was involved with at the WHO set out to understand how research evidence was utilised by policy-makers, health care providers, the mass media and the general public. The observed trend that spurred this work was that despite established evidence of cost-effective health interventions that could significantly prevent morbidity and mortality around the world, these interventions

were often not adequately taken up in policy and practice (Haines, Kuruvilla & Borchert, 2004). How to better understand and improve the linkages between science and wider society was another question I wanted to address in the PhD.

Then, of course, there were ethical concerns related to policy-making. Ethics are a formal consideration in research proposals, institutional review processes and medico-legal decisions. However, the extent to which ethical and moral considerations were explicitly incorporated into the wider range of decisions made in health policy was less clear.

Through these experiences and the accompanying questions that they raised, I was struck by how diverse perspectives need to be taken into account in order to make policies 'work'; rather than privileging any one perspective over another.

Towards the middle of 2003, with the different projects that I was working on coming to a close, a new WHO Director General elected, organisational restructuring imminent, and my having more questions than answers on the theory and practice of policy-making, the time seemed right to leave for a PhD.

One of my options was to wait a year to apply for grants, and another alternative was to figure out a work-study approach. However, by the end

of 2003, armed with some savings, I decided to start a PhD; a decision that I have since said has been excellent for my perspective, even if it wasn't so good for my purse. Methodologically, this gave me more flexibility; I was able to explore and chart an exploratory and developmental research course, something not always possible with a grant for a specific research project. I was also very fortunate to be able to work on projects and consultancies closely related to my thesis during this PhD, including for the Overseas Development Institute (ODI), the United Nations Children's Fund (UNICEF) and as a Research Fellow at the London School of Hygiene and Tropical Medicine (LSHTM). These projects informed the development of this PhD, and vice versa.

I was also most fortunate with regards to my supervisor, Nick Mays, with whom I found common ground early on in a shared repudiation of an elitist version of the 'two communities' approach in policy-making, particularly with respect to scientists' evidence-based 'prescriptions' for the same. These early discussions led to a commentary that we were commissioned to write for *The Lancet*; in it, we argued that,

Although science provides a reliable source of knowledge in society, the dichotomy between the rational, or scientific, and the social is untenable. Science is a social enterprise with social implications, and social processes have rationality – e.g., in setting standards to evaluate success and guide practice (Kuruvilla & Mays, 2005, pp. 1417-1418).

This view of rationality - as a shared characteristic across the spheres of state, science and society, laid the foundation upon which this thesis was built.

Methods and 'Muße'

This PhD was informed and developed by a range of methods, including primary research, multi-disciplinary collaborative work and iterative conceptual development. As discussed in preceding sections, one of the main objectives of this thesis was to address the need for more holistic, explanatory and normative theories of policy-making. Questions were occasionally raised during the PhD, on the extent to which theories could be both explanatory and normative. The following discussion on the philosophical and methodological foundations for building such integrative theory helps establish the basis on which such an endeavour was undertaken in this PhD.

On developing explanatory and normative theory

In the *International Encyclopedia of the Social & Behavioral Sciences*, Bohman (2001) describes the nature of critical theory, and critical social inquiry in general, as necessarily comprising both explanatory and normative dimensions.

Critical social theorists generally aim at constructing social theories that link explanation and criticism and thus have both normative and previous explanatory features. Furthermore, such previous theories must

also be 'practical,' in the specific sense that they are oriented to human emancipation. As such, the best such works employ a variety of methods and styles of explanation and are often interdisciplinary in their mode of research. While thus methodologically and theoretically pluralistic in orientation, critical theorists provide two general answers to the question of what makes a form of social inquiry or a previous theory critical. The first is that it employs a distinctive comprehensive previous theory that unifies such diverse approaches and explanations and underwrites the epistemic authority of the critic. The second is practical...critical inquiry aims at creating the reflective conditions necessary for its own public and practical verification. As new forms of critical previous theory emerge related to racism, sexism and colonialism, reflective social agents test and transform even democratic ideals and practices in the interest of increasing human freedom and emancipation.

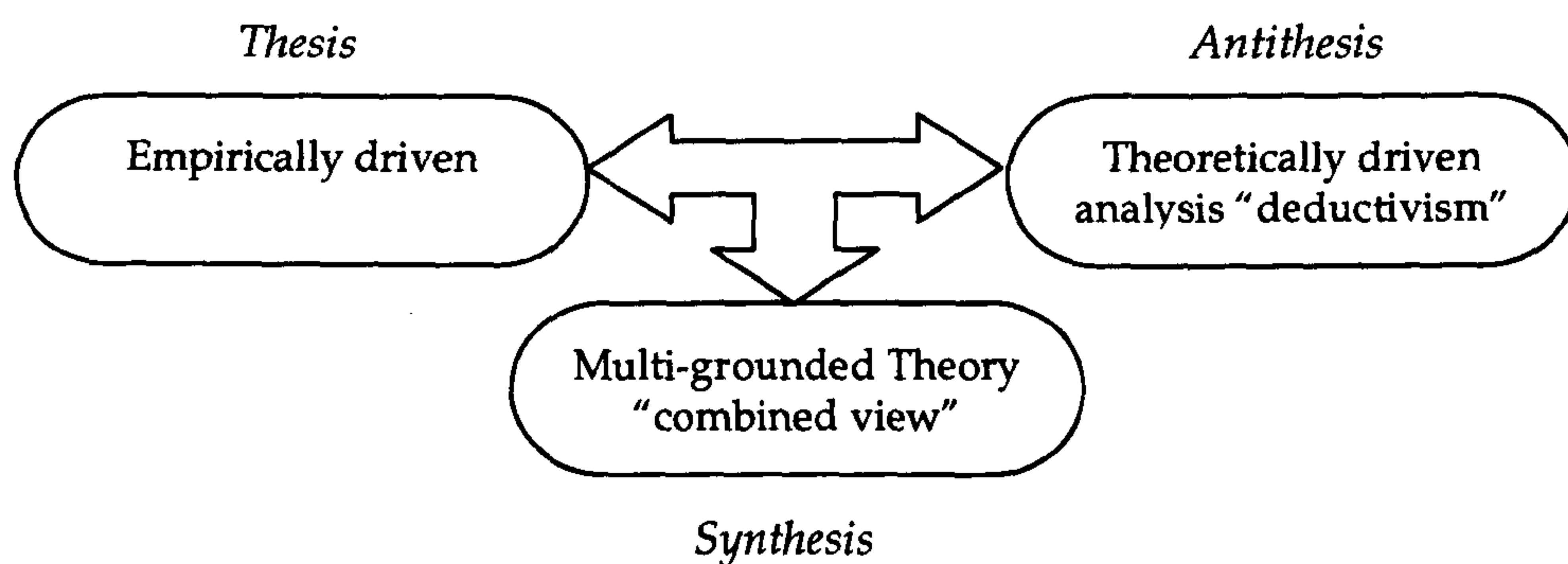
This view on critical social inquiry is closely aligned with John Dewey's philosophical stance on empiricism and theoretical development.

Pragmatism is an extension of historical empiricism with this fundamental difference, that it does not insist on antecedent phenomena, but on consequent phenomena, not upon precedents, but upon the possibilities of action. And this change in point of view is almost revolutionary in its consequences. An empiricism which is content with repeating facts already past has no place for possibility and for liberty (Dewey, 1925/1999, p. LW.2.13).

Goldkuhl and Cronholm (2003) discuss a 'multi-grounded methodology' for theory development that addresses the limitations of inductive or deductive approaches alone. Deductive approaches apply established theories to analyse new situations; however, one problem with this approach is that new characteristics of situations may not be taken into

account or may be made to 'fit' within existing theoretical frameworks. Inductive approaches develop theory through analysis of empirical data in a particular context (c.f. (Glaser & Strauss, 1967). Inductive, or grounded, theory has also been criticised, but for being too 'introverted' and failing to contextualise new theoretical developments with existing theories. Multi-grounded theory development is an iterative approach of developing theory through the synthesis of related inductive and deductive perspectives (Figure 2) [which probably reflects social scientists' practice in the round].

Figure 2. A multi-grounded approach to theory development



(Goldkuhl & Cronholm, 2003)

With respect to inductive or grounded theory, Glaser and Strauss (1967, p. 65) introduced the concept of *theoretical saturation*, which is achieved when:

No additional data are being found whereby the (researcher) can develop properties of the category. As he sees similar instances over and over

again, the researcher becomes empirically confident that a category is saturated.

The concept of theoretical saturation could be usefully extended to the *synthesis* level of multi-grounded theory development, as was the case in this thesis.

A related approach to multi-grounded theory, the *realist review*, underpinned the research proposal for this thesis (as presented in an 'upgrading document' to the thesis advisory committee - constituted by a sociologist, a political scientist, a health services researcher/ geographer and a social scientist/ health policy expert.).

The realist review has its roots in both philosophy and social science and is positioned in the middle of the spectrum between relativist and positivist approaches to research synthesis (Pawson, Greenhalgh, Harvey & Walshe, 2005; Pawson & Tilley, 1997). It seeks to explicate the theories and assumptions that underlie complex social interactions and policy interventions. The realist review is useful to help develop a meta-theory, or overarching framework, that pulls together explanations from different disciplines and contexts. Other research synthesis methods, such as the systematic review used in health research, focus on analysing specific factors that influence specific health interventions across contexts and times, an approach that may not usefully translate to understanding what works (or does not) in complex social and policy interventions.

The realist review recognises that complex social and policy interventions rarely can be repeated in exactly the same circumstances, in the same way, and to the same effect. So rather than focussing on the question: 'Does it work?' the realist review tries to answer the question: 'What works for whom, how, and in what circumstances?' The realist review aims to synthesise both qualitative and quantitative evidence to identify the overarching mechanisms that explain the success or failure of social and policy interventions; for example on facilitating scientist and civil society participation in health policy-making. The principles thus generated can guide future implementation and be further tested through research (Pawson, Greenhalgh, Harvey & Walshe, 2005; Pawson & Tilley, 1997).

Revisiting the thesis methods at the conclusion of the PhD, particularly in relation to theory development, elements of critical social inquiry, multi-grounded theory and realist review were all incorporated, both at the stage of the thesis research proposal and as analysed in an ex-post descriptive sense.

Multi-disciplinary collaborations and Muße

My thinking has been influenced by a range of colleagues and projects during this PhD.

John Dewey asserted that,

Ideas which are not communicated, shared and reborn in expression are but soliloquy, and soliloquy is but broken and imperfect thought. It, like the acquisition of material wealth, marks a diversion of the wealth created by associated endeavour and exchange to private ends. It is more genteel, and it is called more noble. But there is no difference in kind (Dewey, 1954/ 1927, p. 218).

I sincerely hope that the communication, compilation and expression of ideas in this thesis sufficiently acknowledges the diverse perspectives from colleagues, and in the literature, that have influenced my thinking during the PhD process. It is also hoped that my synthesis of these ideas and experiences and the resultant analysis can contribute something useful to the world of knowledge.

With reference to method, the general approach in this PhD could be described as one of *Muße* (pronounced 'mooz-uh'), which is a German concept with apparently no accurate translation in English. It involves having the leisure to experience and explore, before formalising thought (which in this case, was a kind of immersion in a primordial soup of academic ideas and interactions). At times, this is very much what this PhD felt like, with no clear indication, or guarantee, of the final form it would take. This approach was a little disconcerting, and much more challenging to describe than the more traditionally described process of moving from a research question, through methods, data collection and analysis and finally to a write-up. However, this developmental approach allowed for greater openness to exploration in the 'old-fashioned' sense of

scholarship, and also demanded some creativity and innovation in the synthesis of diverse ideas and perspectives.

Looking back, developing an integrative concept of rationality without reference to John Dewey's work seems unthinkable. Yet being introduced to his work was serendipitous; though I prefer to view this as a case of being academically prepared, as in Pasteur's aphorism that "*Chance favours the prepared mind*". The introduction to Dewey came via a pile of books in the Goodenough College² library with titles that corresponded closely to topics I was working on, but by authors with whom I was not familiar.

These books belonged to Philipp Dorstewitz, who was doing his PhD in Philosophy at the London School of Economics (LSE). His PhD focused on developing John Dewey's work as an epistemological foundation for agency and planning. We started talking and soon saw that philosophical and policy analyses could be mutually informative on the topic of rational agency. We collaborated on a paper, "Reviewing rationality: a pragmatist perspective on policy and planning processes". This paper was presented at a conference on philosophy and management in Oxford on the 8th of July 2005. This was one day after the London bombings, which lent a sense of import to discussions at the conference regarding the need for an integrative and normative approach to rational decision-making. This

² A multidisciplinary residence hall for post-graduates in Bloomsbury, London.

paper, which introduced an early version of the Decision Cell model, was also favourably peer reviewed and published (Dorstewitz & Kuruvilla, 2007). This collaboration, and ongoing dialogue, on rationality and pragmatism, provided the philosophical and epistemological foundation for this thesis.

This new pragmatist theory of rational agency was applied to health policy in order to make the philosophical framework operative³ in this context and to test the Decision Cell model against contemporary theoretical and empirical policy analyses. This process of application and testing led to further development of the theory, as did the other conceptual and empirical work undertaken during the course of this PhD, including further primary readings of pragmatist philosophy. The main projects and collaborations undertaken during this PhD, that informed the development of the Decision Cell model, are described below.

Many of the operative examples discussed in relation to the health policy and the key pragmatist tenets in this thesis, were identified in a review I was commissioned to do by the Overseas Development Institute (ODI). The Research and Policy in Development (RAPID) coordinates the Civil Society Partnerships Programme at ODI, funded by DFID, which aims to

³ The word 'operative', rather than 'practical' or 'operational', is used here based on the Oxford English Dictionary (<http://dictionary.oed.com>) definition of operative as "having the power to produce effects; productive of something. (Law) ... that which expresses the intention to effect the transaction concerned.

improve the capacity of civil society organizations to influence pro-poor policy. As part of the ODI Working Paper series, I wrote a paper on how civil society can participate in, and influence, health research and policy (Kuruvilla, 2005). I worked with Julius Court at ODI, and with peer reviewers, to develop this paper. An earlier version of the Decision Cell model was also published in this working paper and readers provided valuable feedback that informed the further development of the model. The ODI work also included compiling an annotated bibliography on 'methods, mechanisms and measures of civil society participation in health research and policy,' highlighting experiences across a range of high, mid and lower income countries (Efthymiades & Kuruvilla, 2005).

Another collaboration undertaken in this thesis was with respect to explicating standards for participation and accountability in policy-making, which was done from the perspective of human rights and international law. An early concern in this PhD, as previously discussed, was the widespread dissension on the definition of, and requirements for, participation in policy-making. To address this issue, it made sense to start with established definitions and standards on participation as set out in human rights treaties, particularly since a majority of countries had ratified these in international law. To explicate and synthesise these standards, I collaborated with Amarjit Singh, from the Department of Law at the LSE. Human rights standards and other normative frameworks for policy-making, such as the Accountability for Reasonableness framework

(Daniels & Sabin, 1998), are analysed in Chapter 7 with reference to the new model of rational policy-making developed in this thesis.

In addition to the projects and collaborations discussed so far, I was also invited as an observer to a Swiss government *publiforum*, a mechanism being developed and tested by the Swiss government where citizens, scientists and policy-makers deliberate on the policy implications of various issues, in this case biotechnology and “research on humans”.

Sergio Bellucci, Director of the Swiss Technology Assessment programme, coordinated this project. I also worked with Johan Siebel a manager at Shell Corporation, who was trained as a philosopher, on looking at the application of management techniques to public sector decision-making, including scenario development, which is discussed in Chapter 6 of this thesis.

Some of the thesis influences were also dialogical. Nick Goodwin and Justin Parkhurst, respectively senior lecturer and lecturer at LSHTM, who were on my thesis advisory committee, provided strategic advice on the PhD process and valuable feedback on drafts of this thesis, which shaped its final form. Similarly, conversations with Steve Hanney, Senior Research Fellow at the Health Economics Group in Brunel University also influenced the thinking in this thesis, particularly as related to the organisation of health research systems and analysis of research

utilisation. Steve also provided constructive feedback on earlier drafts of this thesis.

Empirical work

In addition to the literature review, conceptual and theoretical work, there were also two main pieces of empirical analysis, or primary research, conducted during this PhD. One study was an analysis of the impact of health services and policy research conducted at LSHTM. As a Research Fellow, I collaborated with Nick Mays, Professor of Health Policy, and Gill Walt, then Head of the Department of Public Health and Policy, on this analysis (Kuruvilla, Mays & Walt, 2007). There were two publications from this project and the paper on developing a Research Impact Framework (Kuruvilla, Mays, Pleasant & Walt, 2006), additionally included collaboration with Andrew Pleasant, Assistant Professor at Rutgers University, particularly as related to health literacy and science communication.

The second project was a review of UNICEF and civil society organisation (CSO) partnerships. I was one of two external consultants on this review, along with Anne Bernard, a consultant from Canada. This project was developed in collaboration with Peter Crowley, Director of the Office of Public Partnerships at UNICEF, Simon Lawry-White and Xavier Foulquier at the UNICEF Evaluation Office, and the Review Steering Group that

comprised senior management at UNICEF Headquarters and Country Offices (Bernard & Kuruvilla, 2007).

The research proposal for this PhD included seeking grants to undertake both the conceptual development and related empirical work. A couple of grant proposals submitted for an overarching project were unsuccessful, given the largely exploratory and theoretical approach of the project, which is relatively uncommon in the health field. Funding for individual 'bits' of the project was easier to acquire, for example, explicitly based on a presentation of my thesis work, I was contacted by ODI to do a literature review and develop a working paper on civil society participation related to health research and policy.

In this context, the thesis advisory committee recommended applying for grants for empirical studies on civil society organisation and scientist links with policy-making. It was clear that in the course of a PhD, no single study would, or could, cover all the aspects of this thesis. Nevertheless it was thought that any studies on the general topic of different groups' interactions with policy-making would provide opportunities to analyse, test and inform the key aspects of the conceptual development in the thesis.

Around this time, UNICEF put out a call for proposals to analyse the organisation's partnerships with CSOs. I submitted a concept note, as

required, based on the thesis framework completed till that point (including an earlier version of the Decision Cell model that was published in the ODI working paper). I also requested that the UNICEF analysis could be used in my PhD; this proposal was accepted.

With the LSHTM study on 'scoping' the impact of health policy research, again I was contacted explicitly because I was working on this topic in my PhD. The LSHTM Ethics Committee and the LSHTM Senior Management Team reviewed the project proposal. Further, I explicitly sought permission from the ethics committee and the project respondents to use the analysis in my thesis.

Similarly the opportunity to discuss private perspectives arose from thesis work as well. For instance, the opportunity to discuss scenario development and Corporate Social Responsibility initiatives with Johan Siebel from Shell Corporation arose as a result of the presentation on pragmatist rationality at Oxford University (Dorstewitz & Kuruvilla, 2005b).

Thus the projects undertaken in this PhD were explicitly done so in relation to the thesis. Empirical studies are sometimes undertaken to test aspects of a previously established theory. However, at other times a theoretical model develops as a *product* of literature reviews, empirical work and conceptual analysis (Glaser & Strauss, 1967; Goldkuhl &

Cronholm, 2003; Yin, 1994); in the case of this thesis, these studies both informed, and were informed by, the ongoing theoretical development in an iterative process.

Limitations of scope and sectoral focus

Given the range of conceptual ground covered in this thesis, beyond policy science, pragmatist philosophy and health policy, the extent to which the literature from other fields is drawn on is necessarily limited, for example with reference to political science, decision studies, development studies, participation literature and feminist critiques of the same, sociology, the sociology of scientific knowledge etc. References to other fields are made to indicate areas of congruence or dissension, and to highlight potential linkages for further multidisciplinary work.

The scope of this thesis is further limited in that analytical examples are primarily drawn from health policy. John (1998, pp. 7-8) notes that a key development in policy analysis arose from Lowi's sectoral focus on policy-making.

However, it is not the exact application of Lowi's typology that is important, but the idea that each policy sector should be studied in its own right and that it has a unique politics of its own. The change today is that ... books on education, crime and the economy [now include] studies on the politics of education and crime and managing the economy ... Each sector has a unique combination of technological attributes; problems to be solved; demands of managing the policy; and the

combinations of producer and consumer interests groups that conflict or cooperate to achieve common or group-based goals. There is also variation caused by the history of past decisions and programmes that affect current policy choices.

For instance with respect to private sector considerations discussed in this thesis, Public Private Partnerships, Corporate Social Responsibility, the implication of growing corporate influence, and the changing nature of production may be relevant across social policy fields. However, issues related to private sector involvement in health care, for example through Health Maintenance Organisations (HMOs) in the US, or with respect to the need for the public sector to mitigate externalities in health services provision, or with respect to the role of the pharmaceutical industry, are issues that are more specific to health policy.

Developing a thesis outline

To regroup, this thesis proposes that the concept of rationality, as defined in pragmatist philosophy, provides common ground to develop an integrative theory of policy-making and that pragmatist philosophy provides an empirically congruent, normative and operative foundation for this purpose.

A range of different projects and perspectives informed the development of this thesis. Deciding how to write the thesis in a cohesive way was therefore a challenge. Given the range of philosophical and theoretical

issues covered, no single empirical study was sufficient to address all of the issues raised, therefore, a range of resources in the literature, from health policy, political philosophy, policy science and sociology, had to be drawn on to inform, illustrate and help develop key concepts. During the course of this PhD, papers on some of the individual studies and projects were published. This presented the opportunity to draw on these analyses as additional sources in the literature. Ultimately, the new model of rational public policy developed in this thesis, the *Decision Cell* model, served as framework to bring together the individual strands of conceptual and empirical work.

The following chapter outline serves as a 'roadmap' to the development and organisation of the thesis:

- *Chapter 2. There is no 'point' in decision-making: rethinking rationality in policy processes & participation.* Chapter 2 reviews the notion of 'rationality' in policy processes and participation, and highlights the need for a 'rethink' in policy theory and practice. The main proposition that rationality provides common ground to build a more integrative and normative theory of policy-making is also established.
- *Chapter 3. A pragmatist reconstruction of rationality.* In Chapter 3, the concept of rationality is reconstructed and redefined based on key

tenets of pragmatist philosophy, drawing particularly on John Dewey's work.

Building on this reconstructed concept of rationality and to make the philosophical concepts more operative, a new model of policy-making – the Decision Cell model – is developed over the course of three chapters. Mechanisms and methods, related to health policy-making, that correspond to key concepts in the model, are also highlighted.

- *Chapter 4. The Decision Cell Model (I): dealing with indeterminate situations & coordinating rational agency.*
- *Chapter 5. The Decision Cell Model (II): the decision activities of Define, Design & Realise.*
- *Chapter 6. The Decision Cell Model (III): Deliberation and 'good' policy theory.* The focus in this chapter is on the role of deliberation, norms and moral imagination in policy-making, which lie at the core of the Decision Cell model. In this chapter, the Decision Cell model is also analysed with reference to the feminist critiques of deliberative theories and criteria for 'good policy theory' set out by Lasswell (1951), Sabatier (1999) and Fischer (2003).
- *Chapter 7. Comparing norms and ethics for health policy.* Chapter 7 uses the Decision Cell model to structure an analysis of key normative and ethics frameworks related to health policy-making, including Accountability for Reasonableness (Daniels & Sabin, 1998), the UK

Cabinet Office's Professional Decision-making Competencies (Cabinet Office, 1999), the Capability and Health Account (Ruger, 2006), the Ethics Framework for Public Health (Kass, 2001), Good Decisions Criteria reviewed in the context of environmental policy (Dietz, 2003), and Human Rights standards on participation and accountability in public affairs (UNHCHR, 1996 - 2007).

- *Chapter 8. Conclusion: advantages, challenges & looking forward.* The concluding chapter of this thesis discusses the advantages and challenges likely to be faced in applying the Decision Cell model and highlights examples where a pragmatist approach to rational policy-making has been successfully applied.

**Chapter 2. There is no 'point' in decision-making:
rethinking rationality in policy processes & participation**

CHAPTER OUTLINE

There is no 'point' in decision-making: rethinking rationality in policy processes & participation.....51

Problems with linear instrumental or means-ends rationality54

Rationality in policy theory.....60

Linking policy theory and rationality64

Participation in policy-making71

 Evidence and policy 72

 Participation: citizens, consumers and civil society organizations..... 80

 Privatisation..... 91

Approaches to rational participation in policy-making95

There is no 'point' in decision-making: rethinking rationality in policy processes & participation

The relationship between science and society should not be about the search for universal solutions and institutional fixes, but rather the development of an open and critical discussion between researchers, policymakers and citizens.

*Alan Irwin, 2001, Constructing the scientific citizen:
Science and democracy in the biosciences*

In decision-centered models, the climax of the entire process is a dramatic moment of political decision.

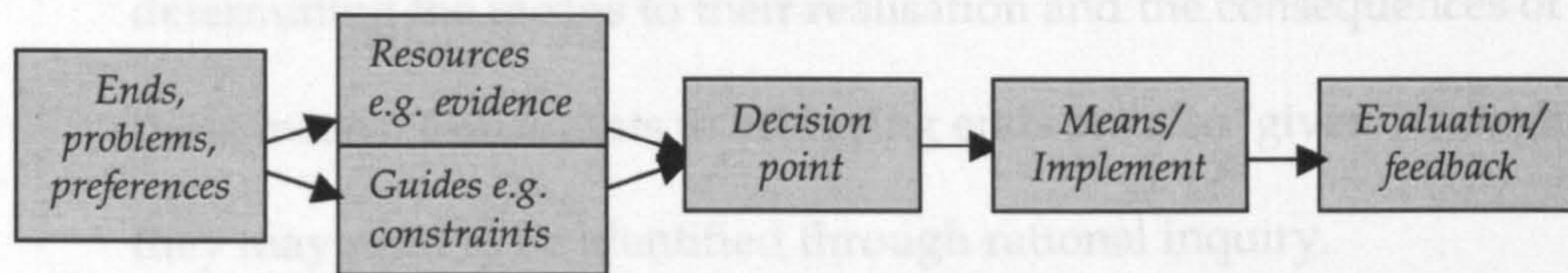
John Friedman, 1973, Retracking America: a theory of transactive planning

All those who participate in policy-making, from the spheres of state, science, civil society and the private sector, would prefer that their requirements and contributions be considered rational, rather than irrational. Rationality can thus provide a common plane for policy interaction. However, when different socio-political spheres interact, rather than resonate, as with the Pythagorean music of the spheres, there is often discord. Conflicting claims of 'scientific sense' and 'democratic sensibility' are made and there is further disagreement on whether morality should feature in rational decision-making.

The predominant conception of rationality in policy-making is an intellectual approach employed to determine the best means to address

identified problems and meet defined goals or ends. This 'means-ends' or 'linear instrumental' concept of rationality is outlined in Figure 3.

Figure 3. A linear instrumental model of rational decision-making



The 'linear instrumental', means-ends, model of rationality is rooted in the Humean or 'folk psychology' model of rational agency. Hume (1739-40/1994) considered that 'passion' was "an original existence". He posited that actions were purely initiated or driven by passions, not by reason, therefore,

Reason is, and ought only to be the slave of the passions, and can never pretend to any other office than to serve and obey them (Hume, 1739-40/1994, p. 119).

This 'Humean', linear instrumental, understanding of rational agency has been taken up in various forms, including in 'stages' models of policy-making, utility maximising models in economics and ethics, and in technical, or procedural, rationality models of policy-making (Mousavi & Garrison, 2003; Sabatier, 1999; Simon, 1957; Singer, 1994).

The linear instrumental approach to rationality can be summarised as being based on four main intuitions (Dorstewitz & Kuruvilla, 2007):

- i. Passions, preferences and 'ends' precede and initiate rational agency. They are therefore established and defined *before* determining the means to their realisation and the consequences of these means. Constraints to achieving ends are also 'given', though they may need to be identified through rational inquiry.
- ii. Rationality does not influence what ends, passions and purposes are pursued. It only informs what *means* should be employed to attain them. In this scenario, 'values' are associated with ends and 'facts' are associated with means; thus, facts and values are considered independent of each other, as in the 'fact-value' dichotomy.
- iii. In a linear instrumental approach to rationality, agents (and offices) can be separated according to the demands of different stages or tasks. For example, policy problems and preferences, which are outside the remit of rationality in this model, are identified by politicians or citizens' preferences. Scientists and experts employ rational methods to examine evidence, constraints and the feasibility of addressing these problems and preferences. Policy-makers, at some authoritative decision point, select suitable policy 'means', which are then implemented by bureaucrats and implementing agencies in order to meet the pre-defined 'ends'.

- iv. A central decision point distinguishes earlier perceptual and preparatory stages (where problems and purposes are identified and strategies considered) from later action, implementation and evaluation stages. This progression imputes a transition from passive orientation to a problem to active implementation to resolve it.

Problems with linear instrumental or means-ends rationality

The linear instrumental view of rationality is far removed from much contemporary philosophical, theoretical and empirical understanding. So much so, that 'rationality bashing' has become a popular sport.

Academics, from different disciplines, attack different aspects of rationality and provide alternative empirical explanations and normative positions. Politicians and civil society groups put forward alternative, rational views that include practical, political and moral considerations. Examples of this type of dissension are seen in making the case for, or against, going to war or policy debates on climate change.

A first step in building a more integrative and empirically congruent and morally oriented model of rational policy-making, is to review the main problems with the predominant linear instrumental model. A pragmatist reconstruction of rationality can then help integrate those aspects of linear instrumental rationality that remain standing, as well as build on the abundance of theoretical and empirical insights that have been developed

as alternatives. Some of the main problems with the linear instrumental model of rationality are discussed below, building on a related discussion in the paper on reconstructing rationality (Dorstewitz & Kuruvilla, 2007).

i. Ends as external to rationality. In linear instrumental rationality, ends are set apart, or external, to rational deliberation. Evaluating the nature and worth of 'ends' themselves is not considered to be part of reasoning, or rationality; notably, this position was held by both Bertrand Russell (1954) and Herbert Simon (1983),

Reason has a perfectly clear and precise meaning. It signifies the choice of the right means to an end that you wish to achieve. It has nothing whatever to do with the choice of ends (Russell, 1954, p. viii).

Reason is wholly instrumental. It cannot tell us where to go; at best it can tell us how to get there. It is a gun for hire that can be employed in the service of any goals we have, good or bad (Simon, 1983, pp. 7-8).

Elster (1991) discusses how ends and desires that are not subject to rational deliberation can be perverse, as they are not based on assessing the merits of these desires. To illustrate this point, he recounts the fable of Aesop's fox who, upon unsuccessfully trying to reach a much desired bunch of grapes, mitigated his disappointment by deciding that the "*grapes were sour*". Conversely the "*grass is greener on the other side of the fence*" syndrome is continually associated with desires that are always beyond reach (Elster, 1991). There are thus serious implications of using decision models based on linear instrumental rationality, where ends and

preferences are taken as given, a common practice in economics. If 'given' and unexamined desires can be perverse, finding ways to gratify them, may neither be in anyone's interest nor a rational exercise according to a wider view of rationality.

Ends also evolve, and to keep with the phraseology of 'the grapes must have been sour' and 'the grass is greener on the other side of the fence', one could term this concept of ends as '*getting to like foreign food*'. While the idea of trying sushi, or a hamburger, may at first seem abhorrent to some people, it is often the case that on trying these foods, people can develop an appreciation and taste for them. Here again, ends cannot be taken as 'given' or 'fixed'.

Dewey (1994) referred to evolving ends as "ends-in-view" (further discussed in Chapter 3). To explain this concept, Dewey used the example of having the 'end' of meeting a romantic partner. Finding a partner, or getting married, however, then becomes a means to some other ends, perhaps of having children or a particular type of home life. Thus, for the purposes of the current discussion, the concept of 'ends-in-view' could be characterised, in a somewhat politically incorrect turn of phrase, as, '*Got the guy/gal, now what?*'

ii. *The fact-value/ objective-subjective divide.* The distinction between 'value-driven, irrational' political stages and 'value-free, rational' technical stages

of policy-making drawn in linear instrumental models is another problem. The impracticability and implications of trying to separate facts and values are highlighted in de Leon's (1988) analysis of US policy-making failures during the Vietnam War. The 1960s were considered the epitome of 'rational' decision-making in the United States. The 'objective' nature of the logistical or strategic modelling concealed the 'subjective', political and social assumptions that shaped these exercises. This approach also failed to take into account less commensurable, 'subjective' differences in socio-political values and cultural norms between the US and Vietnam and this, in part, contributed to the strategic defeat of the US in this war. Further, the widespread protests against the Vietnam War were primarily based on moral objections, a further 'value' dimension that had not figured in the strategic calculations. In this context, the notion of rationality as the 'value-free and technical' pursuit of ends led Garrison (2000) to observe that,

The separation of means from ends in the name of more scientific management is a moral disaster from which the United States, along with most other Western democracies, has yet to recover (Garrison, 2000, pp. 468-469).

iii. Pre-allocation of specific actors to stages. Linear instrumental models tend to allocate specific actors to different policy stages. This detracts attention from the wide range of actors and their interactions across a spectrum of policy-making processes, from setting policy agendas to influencing policy formulation, carrying out implementation and effecting and

evaluating societal change (Buse, Mays & Walt, 2005; Ham & Hill, 1993).

Further, the roles, interests and nature of involvement of actors may change during policy processes. For example: someone may be an expert in one policy area, but not another; or, actors' affiliations may change when new information becomes available.

iv. Central decision point. The focus on a single, central decision point further distorts an understanding of policy-making, which comprises a series of decisions made throughout the process. For example, policy research clearly shows that the formulation of policy ends and the implementation of means cannot be taken as given or automatic, as these stages also involve appraisal, negotiation and decision-making by a range of agents (Kingdon, 1995; Pressman & Wildavsky, 1984). For example, 'non-scientist' groups (politicians, citizens and bureaucrats) would reject the notion that their requirements are somehow 'pre-rational' or that policy implementation is somehow 'post-rational' – against the view that only expert deliberation on means leading to a central decision point involves rationality (Kuruvilla & Mays, 2005; Wynne, 2003).

v. Dichotomies of intellect and emotion, mind and body, science and morals.

Finally, by primarily focusing on the intellectual aspects of rational agency, the physical, emotional and socio-political dimensions of rational agency are neglected. In the book "Descartes' error", Antonio Damasio (2006), a professor of neuroscience, neurology and psychology, draws on a

range of empirical research to emphasise the integrated nature of human experience and rational agency. Mind cannot exist or operate without body and the survival of the body, in turn, depends on the mind.

Rationality and emotion, rather than being discrete, separate forces, are both integrated in, and integral to, decision-making. Damasio discusses a case where a person with the frontal lobe of his brain removed, an area of the brain associated with emotion, was unable to make reasoned decisions.

Damasio (2006) also takes an evolutionary perspective on rationality in which humans initially relied on biological regulation and instinct to guide action, and then considered more complex environmental, emotional and intellectual processes as their concerns extended to more distal and complex problems and prospects. These considerations included those of social life and meeting the challenges of living in complex, interconnected and changing environments. Failure to appreciate the integrated nature of rational agency and the interplay between mind and body, passion and reason, Damasio says, was Descartes' error (an error also made by Plato, Hume, Russell, Simon and several others since then who have propagated dichotomies and reductionism that lead to fragmented understandings of human experience and agency).

By contrast, John Dewey's work was an overarching project in the reconstruction of philosophy to integrate understandings of different facets of human experience (Dewey, 1939/1989b). He explicitly recognised that both knowledge and emotion were involved in rational agency. He also emphasised that agency had moral implications, in that it had consequences and influenced human flourishing. He recommended that philosophy should employ a more scientific approach to developing knowledge, that science should be guided by a philosophical understanding of human nature, and that moral development was integral to both philosophy and science. Dewey saw that it was only through an appreciation of the integrated nature of experience that human beings could successfully act with integrity, and ensure the flourishing of individuals, societies and the world itself.

Rationality in policy theory

In policy theory, one manifestation of the linear instrumental concept of rationality is the seemingly ubiquitous linear 'stages' model or heuristic. Policy-making is commonly depicted as comprising distinct stages of policy agenda setting, formulation, decision-making, implementation and evaluation (Howlett & Ramesh, 2003; Sabatier, 1999). Central to the stages models is a climactic decision 'point', to, and from which, all-else flows. Friedman (1973, p. 68) describes decision-centred models as entailing three basic activities: Diagnosis & study of alternatives and consequences, Decision-making and Implementation. These three policy activities are

respectively attributed to three institutionalised bodies of agency:

Planning, Politics and Administration. 'Preferences' of different groups and technical plans made by experts are subject to definitive and authoritative judgements by 'political' agents. Implementation is then mainly a matter of administering policies as per political directives and may also include evaluative activities (Friedman, 1973 p.69). The point or moment of decision-making by the political agent thus gains an almost autonomous status in these models.

Much contemporary policy theory and empirical analysis explicitly repudiates the linear instrumental or stages model of policy-making. For example, analyses show that policy agenda setting, rather than getting predefined 'ends' and problems into policy-making, involves a range of decisions, such as on how issues are framed, and this has implications for other related processes in policy-making (Kingdon, 1995; Roth, Dunsby & Bero, 2003). US policy-making on facilitating access for people with disabilities to buildings and public spaces is an apt illustration; this issue had at least two policy 'frames', as a transportation problem and as a civil rights problem (Kingdon, 1995; Richardson, 2002). These different frames had very different implications for related policy processes, participation and outcomes.

The idea that implementation follows from a central decision-point without further decision-making is also untenable. The now classic 1960s

and 70s studies of bureaucrats' and managers' interactions at 'street-level' establish that there is ongoing, discretionary decision-making in implementing or administering policies and programs (Lipsky, 1976; Pressman & Wildavsky, 1984). Discretionary decisions can render policy processes and outcomes quite different to those envisaged at some political 'decision point'.

Policy-making activities may also occur concurrently rather than in stages. For example, in Kingdon's (1995) analysis of policy-making in US health and transport sectors, he observed that policy-making occurred in concurrent streams of activity related to 'problem', 'policy' and 'politics' that intersected through 'windows of opportunity' leading to policy change. Even if policy-making activities or stages do occur separately, they may not necessarily follow a linear chronological sequence. For example, policy formulation may precede policy agenda setting when 'solutions seek problems' to which they can be applied, as in the 'garbage-can' model of policy-making (Cohen, March & Olsen, 1972; Kingdon, 1995).

Policy formulation may also be a *post hoc* formalisation of a range of policy-related processes and practice. An analysis of tuberculosis control strategies in different countries indicated that concepts and strategies that were finally codified in international health policy had been developed and adopted in practice prior to that point (Cliff, Walt & Nhatave, 2004).

Related practice had been developed through formal and informal networks of health researchers, policy-makers, practitioners and a range of other actors from the private and public sectors communicating within and across countries. Policy changes thus evolved from activities across a range of policy-related processes and networks rather than stemming from a central decision point or agent.

The idea of a central 'point' decision taken by a political office thus detracts attention from the range of decisions made by a range of actors in the course of policy-making. This also inhibits analysis and coordination of issues of power and participation across policy processes, including 'non decision-making', where certain social issues or problems are systematically kept off policy agendas (Bachrach & Baratz, 1962; Crenson, 1971), as will be further discussed in Chapter 4.

This linear instrumental, or stages, model of policy-making is associated with several other pitfalls of linear instrumental rationality. There is an inbuilt idea in the stages models that policy ends or agendas need to be either fixed or have to be pre-defined to initiate policy-making. This contrasts with the pragmatist approach where indeterminate situations initiate the formation of rational agency, and problems and ends are defined through rational inquiry and informed by implementation. As Garrison (2000, p. 473) notes,

Astute administrators see their ends clearly and revise them as necessary; only a fool would bypass a greater good merely to execute the original plan, although that is what linear, detached instrumentalism will often require the administrator to do.

One caveat on discretionary decisions and revising ends in policy-making, is that the process by which ends are revised in should also be subject to rational deliberation. Otherwise, changes may be made in an autocratic, undemocratic or arbitrary manner (Richardson, 2002). For rational deliberation on the ends of policy, morality and values related to these ends need to be explicitly addressed (DeLeon & Longobardi, 2002; Garrison, 2000; Richardson, 2002).

A further problem in linear instrumental models is the artificial separation of political values from technical facts or of preferences from plans. Values and morals need to be explicitly addressed in policy theory and analysis. This would serve not only to develop normative guides for policy-making, but also help make the policy sciences relevant to socio-political deliberations and decisions that are based on values, whether explicitly or implicitly (DeLeon & Longobardi, 2002; Garrison, 2000; Richardson, 2002).

Linking policy theory and rationality

There are several textbooks on public policy that discuss an abundance of contemporary policy theories (Buse, Mays & Walt, 2005; Ham & Hill, 1993; John, 1998; Parsons, 1995; Sabatier, 1999). Providing an overview of these

theories, Peter John (1998) organises policy theories into ten broad categories of discrete and synthetic approaches. The first set of theoretical approaches described below focuses on discrete aspects of policy-making.

1. *Stages theories* focus on discrete phases of policy-making, such as policy agenda setting, policy formulation and implementation. These stages may be described sequentially or separately (Pressman & Wildavsky, 1984; Sabatier & Jenkins-Smith, 1993). Each involves distinct sets of policy actors and issues; for example, politicians and the media in agenda-setting, experts in analysing facts and proposing solutions, policy-makers in formulating policies and making authoritative decisions, and bureaucrats in implementing policies (Friedman, 1973).
2. *Incrementalist theories* move away from the sequential and hierarchical schema of stages models. Incrementalism describes how a wide range of policy-makers make, and negotiate, ongoing adjustments to policy processes, leading to small changes in policy (Lindblom, 1979; Wildavsky, 1979) e.g. in budgeting systems. Policy change thus comprises minor variations to ongoing processes.
3. *Institutional theories* examine how public organisations (such as parliaments, legal systems and bureaucracies) influence policy-making through their structure and rules, norms and processes.

Institutional factors differ across political systems and thus lead to variations in policy-making (Ostrom, 1986).

4. *Group and network theories* consider how formal and informal relationships, within and outside policy institutions, shape policy decisions and outcomes (Heclo, 1978; Sabatier, 1988). Patterns of association, strength of relationships and the openness of networks to new ideas and membership are used to explain policy stability and variation.
5. *Socio-economic theories* look at how resources are allocated and distributed and at how socio-economic factors influence the decisions of public actors. Analyses focus on regulation, socio-economic constraints and ideologies related to decision-making on resources, for example as influenced by Marxist or market perspectives (Ham & Hill, 1993).
6. *Rational choice or social choice theories* typically view decision-making as being driven by a priori preferences of individual actors. Actors then engage in a 'series of games' or bargains and trade-offs against their preferences, given different constraints in different contexts (Heap, Hollis, Lyons, Sugden & Weale, 1992).

7. *Knowledge-based theories* consider that knowledge and ideas have a life of their own and can be analysed independently of other factors in the policy process; for example, in the literature on evidence-based policy, research utilisation and knowledge translation (Lavis, Robertson, Woodside, McLeod et al., 2003; Weiss, 1979).

John (1998, pp. 194-195) also highlights three main synthetic approaches in the policy literature that incorporate various elements of the more discrete theoretical approaches described above:

8. *Policy advocacy coalition* theory discusses how formal and informal networks influence policy-making and how these networks in turn are influenced by socio-economic factors and external events (Sabatier, 1988).
9. *Policy streams* theory describes how ongoing activity in problem, policy, and politics 'streams' converge and open policy 'windows' at various points and lead to policy change (Kingdon, 1995).
10. *Punctuated equilibrium* theory describes the shifts between periods of stability and instability in policy-making, for example as applied to changes in policy agendas (Baumgartner & Jones, 1991).

These theoretical approaches offer compelling accounts of different aspects of policy-making that have been supported by empirical analyses.

There are also extensive analyses in the literature of the advantages and disadvantages of different policy theories (Ham & Hill, 1993; John, 1998; Parsons, 1995; Sabatier, 1999). Rather than summarise these comparative analyses here, the advantages and disadvantages of different policy theories will be discussed when relevant in the thesis; specifically, as related to reconstructing rationality for policy-making in order to build a more integrative, explanatory and normative theory.

To begin the task of integrating policy theory, it is important to see how the different contemporary policy theories relate to each other. As a first step towards developing a more holistic and integrative theory of policy-making, some common ground can be found by interpreting many contemporary policy theories as being united by a 'common enemy': *linear instrumental rationality*. To briefly revisit this concept, the linear instrumental model of rationality, starts with specific ends or desires; then, options to meet these ends are rationally deliberated and decided upon, particularly with respect to how efficient they would be at achieving the given end; finally, action, or implementation towards the defined end, is instituted. Linear instrumental models contain a central decision point where a specific means is selected; this separates initial 'perceptual', or preparatory, stages where options are developed from later 'active' stages where means are implemented. Further, in this linear instrumental view of rationality, the ends themselves, be they good or

bad, are not subject to rational deliberation (Richardson, 2002; Russell, 1954; Simon, 1983).

Much contemporary policy theory and empirical analysis explicitly repudiates the idea that political, policy and administrative offices and policy-making activities can be neatly distinguished along these temporally and logically distinct stages, either for heuristic or for normative purposes.

Contemporary theoretical and empirical analyses provide a vivid assortment of images to counteract linear instrumental models in policy-making: 'the layered formation of a pearl' (Weiss, 1980), 'cubist paintings' and 'mosaics' (Shields, 1996), 'garbage cans' (Cohen, March & Olsen, 1972), 'concurrent streams of policy, politics and problems' and 'windows of opportunity' (Kingdon, 1995). If these authors are right, then policy-making has little in common with the linear instrumental concept of rationality. In an ex post descriptive sense this is rarely in doubt, but the idea that linear instrumental rationality could serve as a normative guide also becomes questionable when empirical practice and guiding norm are too disparate. Thus in terms of guiding practice the normative model of linear stages rationality may be as useful as a recipe for cup cakes when one has the ingredients for a T-bone steak (Dorstewitz & Kuruvilla, 2007).

However, philosophical, theoretical and empirical understandings that contradict the linear instrumental model have not fully counteracted its use, either in theory or practice (deHaven-Smith, 1988; Howlett & Ramesh, 2003; John, 1998). One of the main reasons for this lack of translation, as deHaven Smith (1988, p. 126) asserts in *Philosophical critiques of policy analysis*, is that related theories and analyses have tended to focus on

discrete aspects of policy-making with no overarching framework to integrate these understandings:

The facts confront us like pebbles in a kaleidoscope, capable of being rearranged and reinterpreted with a twist of the theoretical lens. It is time to discard this fruitless approach to policy analysis and to explore alternatives grounded in comprehensive social and political theory.

As highlighted in the introductory chapter, policy analysts have increasingly recognised the need for more integrative policy theory in order to better understand and guide policy-making as a whole (DeLeon & Longobardi, 2002; Ham & Hill, 1993; John, 1998; Parsons, 1995; Sabatier, 1999).

Though it is possible to use the [different policy theories and] approaches as useful tools to investigate the policy process, especially if a particular set of relationships are prominent in one context, only an integrated framework of all the approaches, can fully explain the variety and complexity of the practice of policy-making and implementation. The approaches and theories are not rivals; they can complement each other, and be part of an overall explanation (John, 1998, pp. 17-18).

This thesis proposes that rationality provides common ground on which to build an integrative theory of policy-making, with pragmatist philosophy providing an empirically congruent, normative and operative foundation.

Participation in policy-making

In addition to being an integrative factor for policy theory, rationality also provides common ground for different groups, who would all consider themselves rational, to participate in policy-making. However, it is often difficult to find common ground with regards to who should participate in policy-making, and how.

From a policy science perspective, the 'who', as in who should participate in policy-making, is a contentious issue (DeLeon & Longobardi, 2002; Parsons, 1995). Those aligned with Lippman (1927/ 1993) posit that the public does not have sufficient knowledge or skill for self governance and that policies are best made by the intellectual elite. However, others who are more aligned with Lasswell (1951), see policy-making as a more inclusive, social learning and problem-solving process. Finally, those taking a more contingent position agree with Hogwood and Gunn (1984, p. 62) that,

Some issues will always require a highly political, pluralist, bargaining, and incremental approach. But some other issues ... will both require and lend themselves to a much more planned and analytical approach ... there is no 'one best way' of making decisions.

Tensions also arise as a result of seemingly conflicting considerations of scientific sense and democratic sensibility. As Nelkin (1975, p. 37) notes,

The complexity of public decisions seems to require highly specialized and esoteric knowledge, and those who control this knowledge have

considerable power. Yet democratic ideology suggests that people must be able to influence policy decisions that affect their lives.

With respect to health policy, there are currently at least three particularly notable streams of thinking that influence different groups' participation in policy-making: imperatives for evidence-based policy, public participation initiatives, and privatisation or market factors in health care.

Evidence and policy

While many people assume that research evidence can be regarded as fact, the nature and role of evidence in policy-making is not fully understood (Black, 2001). The use of evidence in policy-making involves the selection, interpretation and framing of data, as well as argumentation (Fischer, 2003; Majone, 1989). There may not always be agreement on whether the available evidence is sufficient to guide policy-making, or that the evidence is appropriate with respect to particular problems and different socio-political contexts (Black, 2001). Further, considerations when framing evidence in policy-making go beyond technical considerations and extend to considerations of the meaning, risks and consequences (Wynne, 2003). Whereas physical sciences rely solely on causal analysis, analysis in the social sciences also requires explanations of people's motivations, capabilities and behaviour, which may not always be explicit, or elicited, in research studies (Elster, 1991; Heap, Hollis, Lyons, Sugden & Weale, 1992; Wynne, 2003).

Much of the focus in evidence-based policy analyses is on communicating research evidence to influence health policy and practice. Paradoxically, when health researchers communicate their findings to influence policy, they do not seem to base their strategies on evidence⁴. Eccles et al. (2005, p. 117) concluded from a “review of 235 evaluations of guideline dissemination and implementation strategies conducted over 25 years ... that few authors gave any rationale for their choice of interventions and presumably used their common sense to choose the interventions”.

The lack of a strong empirical and theoretical base for health research communication, risks duplication of efforts, propagates ineffective strategies, hinders evaluation and learning, and provides little guidance for further research, policy, and practice (Eccles, Grimshaw, Walker, Johnston & Pitts, 2005; Figueroa, Kincaid, Manju & Lewis, 2002). Yet, communication and policy studies, and the philosophy and sociology of science have long focused on the complex relationships and multidirectional influences between science, the state, and society at large (Buse, Mays & Walt, 2005; Dewey, 1939/ 1989b; Figueroa, Kincaid, Manju & Lewis, 2002; Irwin & Wynne, 1996; Kogan, Henkel & Hanney, 2006; Longino, 2002; Salwen & Stacks, 1996). In short, health research

⁴ This section on evidence and policy is drawn from a commissioned commentary written for *The Lancet* on *Reorienting Health Research Communication* (Kuruvilla & Mays, 2005).

communication would benefit greatly from consistently consulting this multi-disciplinary, theoretical and empirical base.

Like their religious forebears, the 'high priests' of medical research and other health sciences typically issue 'messages' that are stated as if those who hear these 'decrees' should unquestioningly accept them; that society will be automatically transformed as a result of these messages is a further assumption. While there are exceptions to this characterisation of health research communication, the overall tenor tends to be dogmatic and, therefore, anachronistic. Aware of this tendency, Lord Winston - an eminent UK health scientist, called for a re-evaluation of the role of scientists in society in a June 2005 BBC interview (Winston, 2005). He cited the drop in infant immunisation rates after the MMR vaccine controversy as one example of research communication failures and of declining social trust in science (Winston, 2005).

The broader context for these observations is that around the world, cost-effective health interventions are underutilised or misused resulting in significant costs to societies, including the loss of lives (Haines, Kuruvilla & Borchert, 2004). Responses to contemporary health problems are increasingly dependent on the involvement of those who need to adhere to treatment regimens and change behaviours and lifestyles. At the same time, people are less deferential and more demanding of health research, policies, and services (Irwin, 2001; Sabin & Daniels, 2001).

There is also scepticism about authoritative claims and the 'truthfulness' of scientific messages (Irwin, 2001; Longino, 2002); this is due in part to orthodoxies being periodically overturned. A striking example of such change was the shift in eighteenth century medical science from the concept of 'humours' to the constructs of anatomy and physiology (Foucault, 1973/ 1963). There are more everyday examples of knowledge shifts, , for example, related to revelations about the side effects of drugs in the long-term. Additionally, it is clear that there are uncertainties in science; for instance, the public's confusion with available evidence regarding BSE in the UK was in part due to contradictory messages from scientists (Irwin, 2001). Experts can, and do, interpret evidence differently and, indeed, use evidence to lobby for different policies and interests, or to support different positions, as in a court of law (Irwin, 2001; Longino, 2002; Salwen & Stacks, 1996; Smith, 1989). Ultimately, what is at stake in failures of health research communication is not only the support for and utilisation of research, but also more generally, social trust and wellbeing.

While there may be considerations unique to health research communication, building on (rather than rebuilding) theoretical and empirical advances in communication research would seem prudent; however, this is often not the case. For example, an ostensibly state-of-the-art 'knowledge transfer' approach recently proposed by Lavis et al. (2003), and taken up in WHO's World Report on Knowledge for Better Health

(World Health Organisation, 2004), in effect restates a communication model set out by Harold Lasswell in 1948 which focused on, "Who says what to whom in which channel with what effect?" (Lasswell, 1948).

Today, such 'input-output' models occupy just one chapter in communication texts. Advances in communication research, policy science, and science studies offer an extensive range of other theoretical and empirical perspectives to draw on (Buse, Mays & Walt, 2005; Figueroa, Kincaid, Manju & Lewis, 2002; Irwin, 2001; Longino, 2002; Salwen & Stacks, 1996).

In line with this multidisciplinary thinking, Bowen and Zwi (2005) usefully draw on the theories of diffusion of innovations, and of epistemic communities and networks to develop their action framework for "evidence-informed" policy and practice. However, there is still a need to draw more deeply on current understandings in communication research. For instance, diffusion of innovations theory has been extensively criticised for promoting a pro-innovation bias, wherein the adoption of a particular innovation is considered an end in itself without taking into account alternative approaches that may be more appropriate in different contexts; this also has consequences for social equity as related to the definition of social problems and deployment of solutions (Figueroa, Kincaid, Manju & Lewis, 2002). Figueroa et al. (2002) address these criticisms and draw on theories of communication, dialogue and collective action to develop their "integrated model of social change".

Theories of epistemic communities and networks also show promise as a framework to understand the dynamics of health research communication and of how different actors influence, and are influenced by, policy-making (6, Goodwin, Peck & Freeman, 2006; Bowen & Zwi, 2005). There are several other perspectives that could usefully inform different aspects and contexts of health research communication, including theories and analyses of science, political, organizational, risk, and mass communication (Andreason, 1995; Figueroa, Kincaid, Manju & Lewis, 2002; Irwin & Wynne, 1996; Isaacs, 1999; Salwen & Stacks, 1996); see Table 1 for examples of multidisciplinary theories and perspectives on communication.

There is now increasing recognition also of the value of 'knowledge brokers' to mediate communication and collaboration between health researchers and potential research users (Kogan, Henkel & Hanney, 2006; Lavis, Robertson, Woodside, McLeod et al., 2003; World Health Organisation, 2004). This idea of brokerage and collaboration could profitably extend to the theory, design, and evaluation of health research communication strategies.

Table 1. Research on communication

| Examples of multidisciplinary perspectives on communication | |
|--------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|
| Science communication | Deficit model, Contextual model, Epistemic communities... |
| Political communication | Policy networks and coalitions, Public opinion and the Spiral of silence, Deliberative democracy... |
| Organizational communication | Theory of Bureaucracy, Organizational assimilation/ socialisation, Structuration... |
| Persuasion and communication | Belief congruency, Elaboration Likelihood Model, Attribution theory... |
| Risk communication | Protection motivation, Uncertainty reduction, Risk perception theory... |
| Health communication | Health Belief Model, Theory of Reasoned Action, Subjective expected utility... |
| Development communication | Diffusion of innovations, Participation theories, Social marketing... |
| Intrapersonal communication | Perception and thought, Linguistic determinism and relativism, Gestalt psychology... |
| Interpersonal communication | Relational dialectics, Social exchange, Coordinated management of meaning... |
| Group communication | Personality and interpersonal behaviour, Groupthink, Symbolic convergence theory... |
| Mass communication | Media agenda setting, Gate-keeping, Cultivation theory... |
| Intercultural communication | Critical theory, Cultural/ anthropological approach, Nonverbal typologies... |
| Information and chaos theories | Cybernetics, Information processing theory, Chaos and communication... |
| Social marketing and consumer behaviour | Behaviour segmentation, Branding and brand loyalty, Symbolic meaning of goods... |

Much 'high priestly' health research communication still unconsciously perpetuates a version of the 'two communities' notion wherein scientists are an elite, conscientious community disseminating wisdom to other (less able and less concerned) communities (e.g. policy-makers). This elitist position is difficult to defend, especially when one realises that the academic/scientific community is not the only community to hold these

attributes. Other communities are concerned about societal wellbeing, possess specialised knowledge and expertise, and differ from scientists mainly in terms of their roles and responsibilities (Buse, Mays & Walt, 2005; Dewey, 1939/ 1989b; Kogan, Henkel & Hanney, 2006). In fact, the contractual nature of much funded research implies that scientists could be viewed as “servants” of these other communities (Winston, 2005).

Philosophers and sociologists of science have argued that the dichotomy between the ‘rational’ or scientific and the ‘social’ is untenable (Dewey, 1939/ 1989b; Longino, 2002). As noted in Chapter 1, science involves social deliberation and has social implications, and social processes rely on rationality, for example, to evaluate evidence and address problems (Dewey, 1939/ 1989b; Longino, 2002).

To move beyond the hierarchies and dichotomies between science and society, better opportunities for regular discussion between diverse groups in society (journalists, scientists, business leaders, government policy-makers, health service providers, patients and civil society organisations) are required in order to develop a mutual understanding of differing roles, ideas and values (Bowen & Zwi, 2005; Buse, Mays & Walt, 2005; Dewey, 1939/ 1989b; Irwin, 2001; Kogan, Henkel & Hanney, 2006; Longino, 2002).

Given the ever-changing nature of both science and society, deliberations on evidence need to be continuous and integrated across a range of science and socio-political 'interfaces', including educational curricula development and research, policy and programme deliberations (Dewey, 1939/ 1989b; Haines, Kuruvilla & Borchert, 2004; Irwin, 2001; Kogan, Henkel & Hanney, 2006; Longino, 2002; Winston, 2005). Such communication opportunities would facilitate building networks and 'communities of practice', which can be a powerful way of integrating diverse perspectives and resources in order to meet complex health challenges (6, Goodwin, Peck & Freeman, 2006; Bowen & Zwi, 2005; Buse, Mays & Walt, 2005).

Participation: citizens, consumers and civil society organizations

The public's participation in health policy was in part catalysed by changes that occurred at a global level. The mid-20th century saw a formalisation of the normative view, for example in Human Rights treaties, that all citizens should have the right to participate in decision-making that influences their lives (UNDP, 2002; UNHCHR, 1996 - 2007).

Disease patterns also changed, and in the 21st century it is recognized that the prevention and treatment of disease increasingly depended on lifestyle and behaviour change (Nutbeam, 1998; Wanless, 2002). Vertical immunisation campaigns and the prescriptive approach to medical care, for example with respect to antibiotic use, were effective against the major

killers of the previous century - infectious diseases. Prevention and treatment of illnesses linked to health behaviours and lifestyle, however, need the informed and active participation of the people who have to adhere to treatment regimens and make the required behaviour changes and lifestyle choices.

The information revolution and education campaigns of the latter half of the 20th century also resulted in better public access to a range of information sources on health, albeit of varying reliability. Publics⁵ are also seen to be increasingly less deferential and more critical and demanding of the quality and accountability of research, policies, and services (Abelson, Forest, Eyles, Smith et al., 2003; Irwin, 2001; Sabin & Daniels, 2001).

Contemporary publics are also more openly engaged in deliberations on values, risks and opportunities they face in everyday life (Fischer, 2003; Irwin, 2001). Sociological analyses discuss the phenomenon of 'detraditionalisation', where established beliefs and habits are increasingly called into question (Beck, Giddens & Lash, 1994). This happens when societies need to continually respond to new and changing risks and opportunities, and cannot solely rely on established traditions and ways of life. Defining and dealing with new and continually changing risks and

⁵ 'Publics' is a deliberate plural given the pluralistic nature of individuals' roles and perspectives with respect to different policy issues. This idea is further discussed in Chapters 3 and 4.

opportunities requires new and more flexible ways of thinking, and ongoing deliberation and negotiation, rather than unquestioning adherence to fixed rules and traditions (Beck, Giddens & Lash, 1994). Informed socio-political participation is therefore not merely a matter of filling a societal deficit with 'objective' scientific fact, but involves ongoing interaction to build shared understanding on risks and opportunities in society (Irwin, 2001; Jasanoff, 1996).

Civil society organisations (CSOs) play a key role in facilitating public engagement with health policy and services. Civil society can be defined as "people organizing to influence their world " through political means (Glasius, 2005, p. 240). The political dimension of their work distinguishes CSOs from non-governmental organisation (NGOs).

A civil society organization is a non-governmental organisation (NGO) that has as one of its primary purposes, influencing policy. Thus not all CSOs are NGOs ... A purely service oriented NGO (say, in the health sector) could become a CSO if it added policy advocacy to its agenda, and by the same token a CSO could become an NGO if it dropped its advocacy activities to concentrate solely on service delivery (Blair, 1997, p. 24).

This is an important distinction. In the UNICEF civil society partnership review (described in Chapter 1) it was ascertained that in the politically repressive environment of Zimbabwe, NGOs were allowed to operate, but not CSOs (Bernard & Kuruvilla, 2007). Thus while the general definition of NGOs and CSOs may be understood, their specific structure and role can

significantly vary across political and cultural contexts (Glasius, Lewis & Seckinelgin, 2004). Some resource-strapped and capability-strapped countries depend on civil society organisations to supplement government health services. In Kenya, 87 percent of the clinics and hospitals are run by civil society organisations (World Resources, 2004). Another role of CSOs is to demand accountability from policy-makers, as seen in protests at forums such as the World Economic Forum (Glasius, 2005). However, assigning CSOs the role of ensuring state and market accountability could detract from the role civil society could play in defining what the state and market should be (Howell & Pearce, 2001).

While civil society participation is seen as instrumental to encouraging political responsiveness and accountability, it is not clear to whom, or for what, civil society groups are accountable. Chinkin (2000, p. 144) raises concerns about civil society organisations' participation in the context of international law,

[CSOs] are often non-democratic, self-appointed, may consist of only a handful of people, and determine their own agendas and priorities with a missionary-like or elitist zeal. Their own decision-making processes may not be transparent and are concealed behind a deluge of information. They do not have to address the full range of options that must be considered by State elites, but can limit themselves to their own concerns. The other side of the coin of representation is accountability. [CSOs] are acquiring a measure of international legal personality through procedural rights of access and standing, but their accountability has barely been addressed.

In addition to participation in policy-making, civil society participation is also increasingly seen in collaborative research, or action research (Kuruvilla, 2005). Analysts note how consumers' and civil society's participation in health research and policy has led to the generation of new data sources, more sensitised, knowledgeable and empowered stakeholders, and more grounded and sustainable programmes (Innes, 1998; Khilnani, 2001). However, while localised and lay perspectives are valuable in research, there are also cautions against a 'neoromantic construction of the social actor' (Atkinson, 1997).

Local perspectives may be 'partial', constructed from positions of cognitive and material deprivation, and constrained within existing social structures and power dynamics (Atkinson, 1997; Narayan, 1997). Thus, research generated from participatory research and local narratives should be subject to the same rigorous analysis as other forms of research.

Further, it is important to recognise that different imperatives and 'ways of knowing' in society – experiential, cultural, faith-based, scientific, or creative – could be incompatible with each other and lead to conflict, unless they can be channelled into critical debates that inform public decision-making (Gould, 2003; Innes, 1998; Leach, Scoones & Thompson, 2002; Nelkin, 1975; Wertheim, 1996).

Initiatives by national health services and research bodies to incorporate greater interaction with the public in their internal advisory and review

processes are generally well-received (Leshner, 2003; U.S. Department of Health and Human Services, 2000). However, it is not clear how effective or efficient these initiatives are. In the UK, a study showed that 42% of NHS providers reported that they had involved consumers in some way in their R&D activities, but there was some confusion about what this entailed, as well as a lack of awareness about National Health Service (NHS) performance indicators for consumer involvement (Buckland & Gorin, 2001). A systematic review on consumer involvement in health research agenda-setting showed that ongoing collaboration had the greatest impact compared with one-off consultations (Oliver, Clarke-Jones, Rees, Milne et al., 2004, p. 102), but concluded that,

What we know about the advantages and disadvantages of methods involving consumers in agenda setting rests on weak short-term evidence and almost entirely speculative long-term evidence.

Similarly, a systematic review of studies on deliberation methods in health, "identified only one systematic attempt to evaluate a particular method – the citizen's jury – using pre-defined evaluation criteria." (Abelson, Forest, Eyles, Smith et al., 2003, p. 243) Logistics related to the design and management of participation initiatives also need to be ironed-out. For example, one of the problems with the 1993-94 health care reform initiative in the United States, is that only certain demographic groups and those with a previous interest in the issue participated, thus skewing the results (Brodie, 1996).

There are growing concerns about recommendations to increase public participation and consultation in decision-making without evaluating the effects and costs of doing so. Empirical evidence regarding the cost-effectiveness of additional participation is difficult to come by; this is in part due to the lack of poorly-defined evaluation criteria (Abelson, Forest, Eyles, Smith et al., 2003; Crawford, Rutter, Manley, Weaver et al., 2002). Given the lack of evaluation, the systemic spread of poorly articulated and uncritically adopted normative prescriptions for civil society participation is considered by some to be a 'New Tyranny' (Cooke & Kothari, 2001).

However, while the general perception, particularly with respect to health research and policy, seems to be that there is little evidence on the costs and consequences of participation, there is, increasingly, a range of evidence demonstrating the value of public participation for health, as the following examples show. Leichter and Tyrens (2002) set out to answer two questions in relation to the Oregon Benchmark experience, one of the more commonly cited participation initiatives in health care decision-making.

First we asked, "Are Oregonians healthier than they would otherwise be as a result of the Oregon benchmarks?" Our conclusion is "probably not, although we cannot be certain." During the past decade, Oregon has done better than the national average on some health outcomes but worse on others...We believe, however, that systemic changes that are slowly taking shape should eventually lead to better health for Oregonians.

Second we asked, "Is the public health community better off because of the Oregon benchmarks?" Our conclusion is "yes." The increased visibility that the benchmarks have brought to public health issues is universally recognized as beneficial. Even the controversial grades assigned by the Progress Board have drawn attention to issues that might otherwise have been overlooked.

Compelling links between participation and improved health services and health outcomes also have been established. Importantly, findings from one of the first randomised control trials of participation showed that there were significant improvements in birth outcomes in a poor rural population in Nepal as a result of a low-cost community-based participatory intervention with women's groups (Manandhar, Osrin, Shrestha, Mesko et al., 2004).

Likewise, researchers in the LSHTM study on research impact discussed how, traditionally, malaria control strategies rely on the free distribution of insecticide treated bed nets through public health and donor agencies (Kuruvilla, Mays, Pleasant & Walt, 2006). However, the evidence shows that the more cost-effective methods are those that raise awareness in communities about the causes and prevention of malaria and promote community skills and capacities to purchase and treat bed nets on their own. This participatory approach to malaria control is also found to be a sustainable and equitable method that can significantly improve health outcomes (DFID Malaria Knowledge Programme, 2006; Oommen, Henry & Pidikaka, 1999).

A strong case for increased public participation is also made in the Wanless Report (2002), which is considered the first evidence-based assessment of the long-term resource requirements for the National Health Service (NHS) in the UK. Wanless (2002) projected three possible scenarios for improving health services and promoting health in the UK, by 2020:

- *Slow uptake* – there is no change in the level of public engagement, health services lack responsiveness to new technologies and productivity is low, and there is little change or deterioration in health status.
- *Solid progress* – people are more engaged with their health and appropriately use primary care services. Health services appropriately use technology and are more efficient.
- *Fully engaged* – there are high levels of public engagement with confidence in, and demand for, high quality health services. Health services are technologically proficient and efficient and there are dramatic improvements in health status.

By these projections, there would be over £ 30 billion savings in health care spending in the fully engaged scenario compared with the slow uptake scenario; smoking prevalence would be 10 percent less and there would be an increase of at least 2 years in life expectancy (Wanless, 2002). The challenge for the UK government, and for the NHS, is to ensure that

the country moves forward on the 'fully engaged' track to better health services and health. Barriers to realising this scenario include the lack of information about preventive care in the population, increasing social and health inequalities and the need to improve the evidence base and management skills in health services (Wanless, 2004).

Another classic example of the effectiveness of public participation in health is Project Piaxtla, based in rural Mexico. In the 1960s, villages in the foothills of Mexico's Sierra Madre Mountains were not served by government health services. In establishing a village-based health programme in Piaxtla, David Werner (2002) trained local health workers and health promoters, worked with the local community to communicate health information in easy-to-understand language and pictures, and adapted health technologies using locally available resources. This collaborative process helped people diagnose their health needs and work together to overcome them. Over the next two decades in Piaxtla, people's health dramatically improved. For example, there was an 80 percent reduction in childhood deaths in the villages (Werner, 2002)⁶.

The initial focus of the Project Piaxtla was on curative and preventive healthcare. However, through the process of 'community diagnosis' – a method inspired by the 'education for liberation' approach of Brazilian lawyer and educator Paulo Freire, villagers identified a major cause of

⁶ www.healthwrights.org

their ill health - poverty (Werner, 2002). Furthermore, they identified a major cause of their poverty - land ownership; instead of owning land, most citizens work for meagre wages on farmland unconstitutionally appropriated by a few powerful landholders.

The villagers organised themselves in order to demand their constitutional land rights. This process included farm invasions and violent confrontations with the landowners and police. The government and the landowners eventually made changes; 55 percent of fertile riverside land was redistributed to landless farmers. This example's message is clear: community participation is a powerful catalyst of social change. However, is it possible for change to be managed constructively, through participation in policy-making, for example, rather than through violent means?

This is a key challenge for public policy, and for social development in general.

The backdrop for public engagement with health policy is thus one of myriad and compelling imperatives, but with mixed reviews on the mechanisms, costs and consequences of related initiatives. Constructively managing conflicting needs, knowledge and approaches is an additional challenge in the management of participation in policy-making.

Privatisation

None of the groups in this discussion particularly emerges as a knight that saves the day. However, if there were to be a 'knave' in this plot, this role would traditionally go to the private sector (Le Grand, 2003; Titmuss, 1968). The private sector is primarily profit-driven and, therefore, ridden with conflicts of interest when providing public goods, such as health information and services. Ongoing confrontations between public health researchers and the tobacco industry typify this conflict.

However, around the world, the private sector plays an important role in health, from conducting research on drugs, to providing health care services and insurance coverage. In fact, it was both the pervasive influence of capitalist economies, and the failure of the public sector to adequately provide health care, that led to the increasing role of the private sector, in hitherto 'public' domains, including health (Buse, Mays & Walt, 2005; Ham & Hill, 1993). The shift to private sector provision of health care, and the interplay between private and public sector that led to these changes, is clearly illustrated in the history of how Health Maintenance Organizations (HMOs) developed in the US (Oliver, 2004; Anthony Robbins, personal communication).

During the Great Depression in the US, Sidney Garfield, a young surgeon, built a 12-bed hospital to provide health care for labourers working on an aqueduct by the river Permanente. Financing these services was a

challenge. One of the engineers, Harold Hutch, had previously worked in insurance and suggested that Garfield apply the principle of up-front payment for hospital care.

This would solve the hospital's immediate money troubles, and also let Dr. Garfield put one of his pioneering medical ideas into practice: emphasizing prevention. By keeping people healthy and treating them early on to prevent more serious problems later – rather than merely treating illness and injury – Dr. Garfield introduced a new kind of care.

And so, along with preventive care, prepayment was born. For only 5 cents per day, workers received this new form of health coverage. For an additional 5 cents per day, workers could also receive coverage for non-job-related medical problems. Thousands of workers enrolled, and Dr. Garfield's hospital became a financial success (Kaiser Permanente, 2007).

There were other similar groups formed as well, including with consumer cooperatives (Oliver, 2004). Given the origin of this health care approach with workers' cooperatives and trade unions, these groups were initially considered somewhat subversive or even Marxist. However, analyses soon showed that these organisations were better at responding to, and meeting communities' health needs. By addressing preventive care, hospitalisation rates were also lower (as compared with fee-for-service modes of health care).

During World War II, the ship builder Kaiser asked Sidney Garfield to apply his model to the shipping industry to provide health care for his workers. With this collaboration, Kaiser Permanente, that is now the

largest HMO in the US, was established (Kaiser Permanente, 2007). In another development,

Paul Ellwood, a physician specializing in rehabilitation medicine, who through his Minnesota-based think tank InterStudy promoted the term HMO and saw it as the building block for an entirely different approach to health care. Ellwood had the notion that organizational integration, better management, and competition would improve health services and that policies based on consumer choice were preferable to the command-and-control regulation then dominating proposals for national health insurance in the late 1960s and early 1970s (Oliver, 2004, p. 706).

Through these developments, the American Medical Association (AMA) had continually blocked the US congress from adopting this mode of health care, as it believed that the change would happen at the expense of fee-for-service programs, which were seen to benefit physicians. As HMOs became increasingly privatised, the concepts of health care correspondingly changed, for example, from 'doctor' and 'patient', to 'provider' and 'consumer'. The continuing failure of the US government to coordinate public health care services was seen by some as a sell-out to the private sector,

The failure to rationalize medical services under public control meant that sooner or later they would be rationalized under private control. Instead of public regulation, there will be private regulation, and instead of public planning, there will be corporate planning. [Starr, 1982 in (Oliver, 2004)].

Others saw that it was not a question of either public or private sector involvement in health care, but of ensuring a synergy between the two.

For instance, in the history of HMO development, the private sector provided much needed resources and management know-how (Kaiser Permanente, 2007; Oliver, 2004).

The market alone is not best placed to provide public goods and services, particularly with respect to public health and education (Buse, Mays & Walt, 2005; Ruger, 2006). In the US health care system, which is now largely based on private provision, inequities are well documented and on the rise; these problems affect already vulnerable and disadvantaged groups. In addition, the focus on medical care as a product detracts from the emphasis on public health as a process that is key to maintaining and promoting health.

The inability of markets to meet public health needs can be attributed to various factors. Buse, Mays and Walt (2005, p. 50) summarise some of the main reasons for market failure in health services provisioning.

- Optimal levels of health services may not be produced or consumed because externalities (costs and benefits) are not fully taken into account by producers and consumers, e.g. as related to the individual versus public health risks and benefits of vaccination.
- Markets have no incentive to provide public goods as these are usually 'non-rival' (consumption of the good by one individual does not significantly reduce the amount of the good available for

consumption by others) and 'non-excludable' (it is not possible to exclude individuals from the good's consumption) and, therefore, often 'non profit' as well.

- In the market economy there may be monopolies, overcharging and information asymmetry that put consumers at risk or in a disadvantaged position, thus necessitating state regulation.

There is, however, growing recognition of the comparative advantages of private, public and civil society sectors with respect to their access to different types of resources and communities, and with respect to their different ways of working. Some private sector organisations are also taking it on themselves to be more socially responsible through 'Corporate Social Responsibility' policies and programmes, through both philanthropy and partnerships with civil society and public sector organisations. In this context Public Private Partnerships are increasing and are seen to be mutually beneficial to partners (Buse, Mays & Walt, 2005; Crisp, 2007; Oliver & Exworthy, 2003). Thus responding to market failures by simply opting for monopoly state provision and finance does not seem prudent. Building health policy strategies based on the comparative strengths of different actors in different policy contexts seems the rational approach.

Approaches to rational participation in policy-making

In the UK, during the 1990s, conflicts between policy, science, corporate

interests and public perceptions came to a head in debates on BSE and genetically modified foods. The UK Public Consultation on Developments in the Biosciences was set up to facilitate dialogue between different groups on a range of topics in the biosciences, to try and understand and address these conflicts. Irwin (2001, p. 4), analysed this consultation and its implications for policy-making.

Between 1997 and 1999, this government-led consultation aimed to build up a public assessment of the “biosciences” (including xenotransplantation, animal and human cloning, genetic modification of food, and genetic testing). In British terms, this represented a path-breaking exercise – and one intended to have wide consequences for the operation of national regulatory policy. Announced by the minister of science, commissioned by the UK Office of Science and Technology (OST), and conducted by one of Britain’s best-known market research companies (MORI, or Market & Opinion Research International), this was a high-profile and forward-looking consultation in a politically, and economically, sensitive area.

Analysing the types of interactions involved in these consultations, Irwin (2001) identified two main approaches, the social research approach and the deliberative democracy approach. He recommended that interactions of science, state and society move beyond these two models to a third, contextual or localised model of socio-political interaction.

The **social research model** is a professional approach driven by public policy and research institutions. It aims to elicit public views in a representative manner across the population, and in a timely manner for

policymaking. The relevance of the pre-framed social research agendas and questions for participants outside the research and policy systems is variable. This approach does not allow for much interpersonal interaction among the various actors; in fact, in the context of research, this could be seen to bias the process. The advantage of this model is that interaction through public policy institutions has the potential to directly inform policy-makers and influence related resource allocation and programme implementation.

The **deliberative democracy** participation model is largely defined by civil society goals, where CSOs and interest groups take a more active role in setting the agenda for policy interaction. Although this approach allows for more flexibility than the social-research model, it is often limited in scope, restricted in terms of the range of people and resources involved, including institutional mechanisms to support these processes. Thus this model may have relatively weak policy links and influence. [The point on resources and mechanisms having been noted, the deliberative democracy approach in the HIV/AIDS-related activist movement, did have widespread impact and influenced health research and policy agendas, facilitated more affordable and equitable access to antiretroviral drugs and catalysed changes in public health behaviours (Epstein, 1996; Piot, 2000).]

A third model, the **localised and contextual model**, takes into account the contextual nature of the relationship among between science, state and

society and the need for ongoing interaction in different contexts. Irwin (2001, p. 16) notes that the localised model “fits less easily into the operational frameworks of policymaking institutions – although it does have important policy implications in terms of the advocacy of greater contextual sensitivity and the establishment of more open and two-way knowledge relations”.

Empirical analyses, for example, on *detraditionalisation* in negotiating risks and values (Beck, Giddens & Lash, 1994) and on the desirability of *full public engagement* in health care to improve health outcomes and health services efficiencies (Wanless, 2002), support Irwin’s conclusion. Rather than seeking “universal solutions and institutional fixes”, policy-making should focus on developing open and ongoing dialogue with different groups in society, with respect to specific issues in particular contexts (Irwin, 2001, p. 16). Parsons (1995) reached a similar conclusion based on a review of public policy in general.

Whereas the predominant focus of policy analysis in the 1960s was speaking truth to rulers, the mission of policy analysis [at the turn of the 21st century] must be to help in fostering a genuine dialogue between policy-makers, policy specialists and an ‘active’ society (Parsons, 1995, p. 615).

An appreciation for the comparative value of different groups’ perspectives and the need for better dialogue was also evinced in the studies conducted during this PhD (Bernard & Kuruvilla, 2007; Kuruvilla,

Mays & Walt, 2007). Researchers, policy-makers and civil society groups, cited networks and partnerships as crucially important in policy deliberations, including in policy research, formulation, communication, implementation and evaluation.

In the LSHTM study and the UNICEF review, policy networks comprised researchers, policy-makers and civil society organisation staff in addition to patients and the general public. There was also some movement of personnel between these groups; for example researchers were seconded to policy posts, people who had worked in civil society organisations moved to academic or government institutions and vice versa. While the different groups often had different roles within the projects, they generally followed a similar approach with respect to identifying and inquiring into problems and seeking ways to address them; though the specific methods used to conduct inquiry may have been different. For example, researchers used more empirical and experimental methods, while civil society and policy groups tended to use more deliberative approaches. However, noting the lack of scientific and analytical capacities in their organisations as a gap that needed to be addressed, policy and civil society organisations interviewed in the UNICEF review, were setting up policy analysis and impact assessment units in order to inform their work.

While individual staff were cognisant of the broader societal, moral and emotive issues related to their work, the degree to which the institutions in which they worked formally took account of these dimensions of socio-political inquiry varied. For example, LSHTM researchers were unclear about what the institutional requirements were as related to the UK Research Assessment Exercise criteria. As one researcher noted, "*We often feel that we are walking a tightrope between trying to meet some research assessment target and trying to be socially engaged citizens.*" (Kuruvilla, Mays & Walt, 2007). These and other considerations for a more holistic approach to rationality in public policy-making are addressed in the following chapters.

This thesis proposes that rationality, both as a desired characteristic of different groups participating in policy-making and as a unifying point in policy theory, is an integrative factor for both policy theory and participation. However, as discussed, there are contentious views on rationality and the concept needs to be clarified. To accomplish this clarification, Chapter 3 reconstructs, and redefines, rationality based on key tenets of pragmatist philosophy.

Chapter 3. A pragmatist reconstruction of rationality

CHAPTER OUTLINE

| | |
|------------------------------------------------------------------|-----|
| A pragmatist reconstruction of rationality | 102 |
| 1. The rhythm of situations | 103 |
| Habitual situations and interruptions of equilibrium..... | 104 |
| ‘Ends in view’ and transactive change | 109 |
| Satisfactory resolution and aesthetic consummation..... | 114 |
| 2. Socially intelligent inquiry | 116 |
| a. Individual preferences do not add up to social purposes | 120 |
| b. The need for reference communities and public coordination . | 123 |
| c. Social intelligence as pluralism, not panaceas | 128 |
| d. The rational use of power..... | 133 |
| e. Logic: a theory of inquiry | 134 |
| 3. Via media to knowledge..... | 142 |
| Pragmatist inquiry versus scientism | 143 |
| A rational path between foundationalism & relativism | 147 |
| Knowledge that is operative | 154 |
| 4. Deliberation, norms and moral imagination | 156 |
| Role and nature of norms in pragmatist philosophy | 157 |
| The paradox of institutions as conduits of both norms & change | 160 |
| The Ethical Postulate and moral deliberation..... | 164 |
| On making Dewey’s vision more operative | 175 |

A pragmatist reconstruction of rationality

Rationality ... is the attainment of a working harmony among diverse desires, [habits and impulses]... Method is their effectual organization into continuous dispositions of inquiry, development and testing. It occurs after these acts and because of their consequences.

John Dewey, 1922, Human nature and conduct

Nature appears to have built the apparatus of rationality not just on top of the apparatus of biological regulation, but also from it and with it.

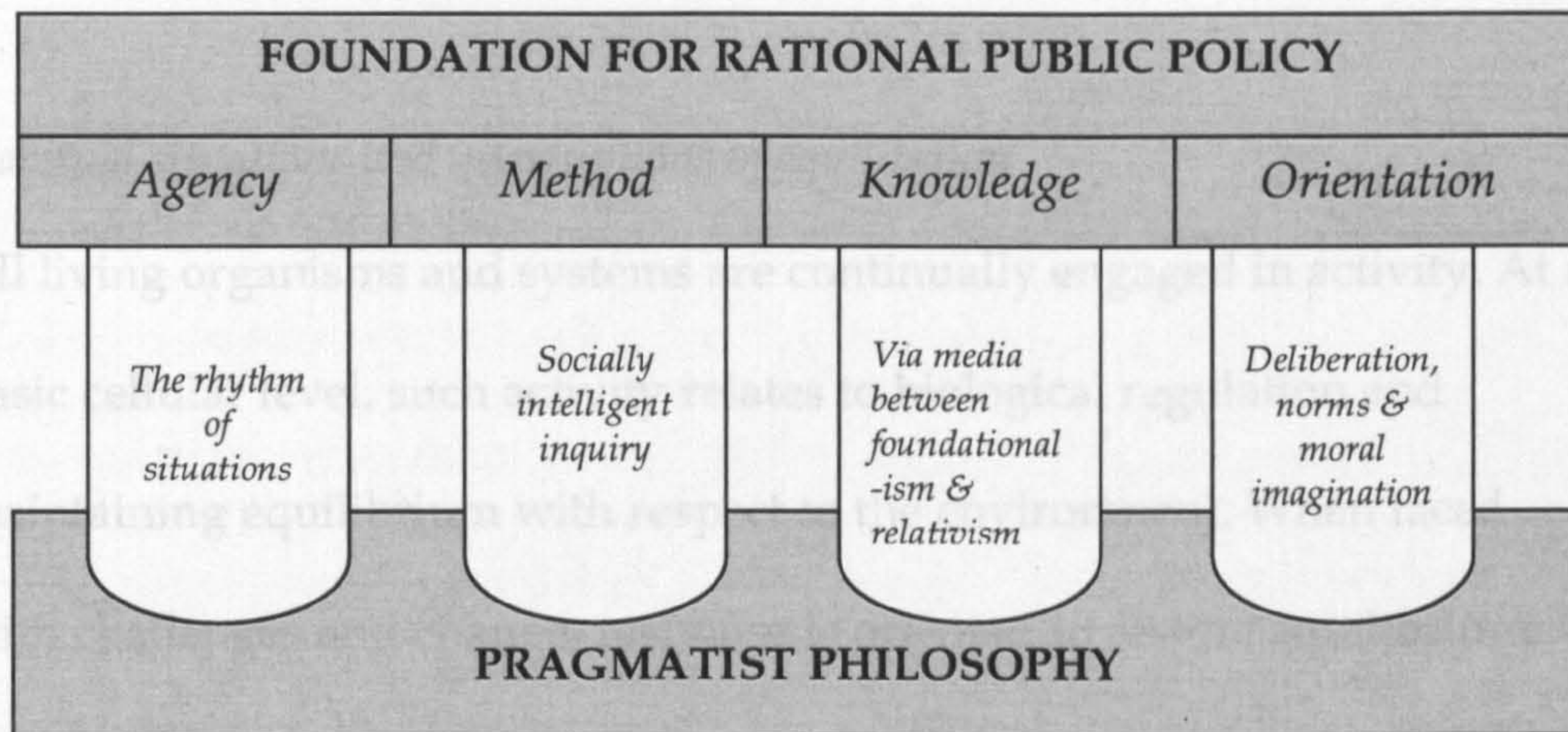
*Antonio Damasio, 2006, Descartes' error:
Emotion, reason and the human brain*

To reconstruct rationality as an integrative framework for policy processes and participation, four conceptual 'pillars' of pragmatism are constructed as a philosophical foundation (See Figure 4). These pragmatist 'pillars' are based on a review and categorisation of the key concepts and postulates in Deweyan pragmatism that relate to rational agency and public policy⁷.

1. Rhythm of situations
2. Socially intelligent inquiry
3. Via media to knowledge (between foundationalism and relativism)
4. Deliberation, norms and moral imagination to orient practice.

⁷ This chapter builds on, and adapts, a paper that was presented and discussed at a conference on the 'Philosophy of Management' at Oxford University, 2005. This paper was also peer reviewed and published by the Journal of Philosophy of Management (Dorstewitz & Kuruvilla, 2007).

Figure 4. Pragmatist pillars for public policy



1. The rhythm of situations

A primary consideration in a discussion on rational agency is *how* rational agency is initiated. Linear instrumental models cast rationality as a 'slave of passion', along the lines of Hume, Russell and Simon as discussed earlier. In this view, desires or problems occur in some antecedent, passive or perceptual stage, for example as represented by utilities and preferences in econometric models, rationality is then employed to satisfy these ends. Dewey rejected this view of rationality and drew on insights from the natural and social sciences, and a review of philosophical traditions, to put forward an empirically congruent concept of the *rhythm of situations* as the template of human agency. Dewey's (1922/ 2002) definition of rationality, in the introductory quotation to this chapter, states that agency requires 'method' in order to be rational, and pillars two, three, and four set up a methodological orientation for rational

agency. First, the rhythm of situations provides an epistemology, or template, for human agency.

Habitual situations and interruptions of equilibrium

All living organisms and systems are continually engaged in activity. At a basic cellular level, such activity relates to biological regulation and maintaining equilibrium with respect to the environment. When faced with challenges and change, response is oriented to restore equilibrium; this is a well-established scientific concept (Damasio, 2006; Dewey, 1910/1997, 1994).

Dewey extended this concept of dynamic equilibrium to human experience; regarding humans as continually engaged in actions and interactions, self-referentially, with each other and within socio-political and natural environments; he termed the composite of transactions as a *situation*. The word 'transaction' is specifically used in pragmatist philosophy based on the distinction between three historical or evolutionary levels of "organising and presenting inquiry" (Dewey & Bentley, 1946, p. 509):

- **SELF-ACTION:** Where things are viewed as acting under their own powers.
- **INTER-ACTION:** where thing is balanced against thing in causal interconnection.

- TRANS-ACTION: where systems of description and naming are employed to deal with aspects and phases of action, without final attribution to “elements” or other presumptively detachable or independent “entities”...

Transaction is thus analogous to the concept of interaction in ‘systems’, where constituent parts have a relative independence, in that together they constitute the whole. Dewey (1886) describes transactions that occur in biological systems as analogous to those in a “well-organised society”.

The various sensory and muscular stimuli, almost infinite in number, are always co-ordinated and harmoniously combined...At times it may seem as if one part were functioning alone, but it is always found (unless the action be pathological) that it is a relative independence. The end of the organism is best gained by allowing a certain amount of origination and self-executed action by the particular part...It signifies the division of labor in order that the whole task, the development of the organism, may be the more speedily and economically effected. There is no communistic level, but the due gradation and subordination of the various factors in the unity of the whole, as in a well-organized society.

With respect to human agency, when a situation comprises habitual actions and interactions, that are functionally coordinated, a dynamic *equilibrium* is achieved. In a habitual situation, intentional action, or *agency* – as contrasted with habitual action – is not required. Dewey saw this as a matter of intellectual efficiency and as a matter of course (Dewey, 1994).

When there is a disruption, or change, in functional coordination or a challenge to maintaining dynamic equilibrium, an *indeterminate situation* is

experienced. In the policy science literature, Baumgartner and Jones (1991) describe a similar transition between stability and instability in their *punctuated equilibrium* model of policy-making. However, the punctuated equilibrium model has been criticised on the grounds that it does not satisfactorily explain the transition between periods of stability and change and the return to stability (John, 1998), nor does it provide an explanation of the nature and role of rational agency in policy-making, which pragmatist philosophy does. The links between pragmatist philosophy and policy theory will be elaborated in Chapter 4.

To return to the concept of indeterminate situations - pragmatist philosophy regards any interruption of habitual activity, and equilibrium, as initially being quite ill defined, or *indeterminate*. An indeterminate situation may arise as a result of changes in environments, but also from agents thinking differently about a situation. An indeterminate situation also could be sensed as a passion or preference for a different situation or state of affairs, or indeed diverse passions and preferences may be experienced.

While pragmatism acknowledges that passions are a motivating factor for agency, there is a divergence from Hume's (1739-40/ 1994) position on passions, described earlier, on at least three points. First, passions, in the context of pragmatist rational agency, are not "original existences" present in some passive, predefined or perceptual state that precedes activity.

Action is ongoing in every situation, including in the generation of passions and preferences; it is the *nature* of action that changes when an indeterminate situation is experienced. When habitual action ceases to be harmonious, certain or functional, this necessitates the initiation of intentional action, or agency.

Second, there may be alternative, or conflicting, ends and desires that comprise an indeterminate situation. Thus there would need to be some rational process to inform choice and guide action to resolve the situation. Further, as discussed in the 'sour grapes' and 'grass is greener' critique of linear instrumental rationality (Elster, 1991), an initial sense of a passion or preference needs to be subject to reason, as it may not be rational or beneficial otherwise (Dewey, 1922/ 2002). 'Ends' also evolve and are shaped by learning and experience. Finally, an indeterminate situation is, by definition, ill defined and uncertain. In this view, defining ends, passions and preferences with respect to an indeterminate situation requires agency. Agency is thus initiated by an indeterminate situation, not by pre-existing passions or ends.

Thus, the initiation of agency is, in effect, the move from a habitual, well-rehearsed mode of transaction to a mode of intentional action and active inquiry, in order to define and address a challenging situation. The current policy response with reference to inquiry and deliberation about

climate change is an example of this phenomenon, as is the pursuit of 'loose ends' in scientific inquiry.

If in response to an indeterminate situation, only initial, ill-defined and poorly examined impulses, or preferences, drive further action, i.e. at a basic stimulus-response level, this would not necessarily be *rational* agency. According to Dewey's (1922/ 2002) definition, rationality requires method. When *method* is employed to define an indeterminate situation, to explore options and consequences and make choices to resolve the impasse, this comprises *rational agency*. In this instance, a *problematic situation* is instituted.

As part of the method used to resolve problematic situations, concepts such as *ends & means, resources & constraints*, that are present in linear instrumental models, may be used. However, in the pragmatist view, unlike in linear instrumental rationality, these concepts are only methods or tools to help organise inquiry and resolve problematic situations. These concepts are therefore *products, not prerequisites* of rational agency.

Dewey explained that categories such as ends and means, or intentions and knowledge, co-evolve in efforts to resolve problematic situations. As earlier discussed, ends are often but "ends-in-view", in that they are defined with respect to the means to achieve them, and ends themselves may be means to some other end. Buying a bigger house may be an end,

but it is also a means to other ends such a certain quality of life or being able to comfortably accommodate a larger family. Thus ends are not 'given' or 'fixed' and therefore cannot be relegated to preliminary or preparatory stages of rational decision-making.

'Ends in view' and transactive change

Dewey saw concepts, such as 'ends' and 'means', as organising tools or methods to help resolve problematic situations. Dewey also saw ends only as "ends-in-view" for the following reasons.

i) An end or aim for rational agency is formulated "only when it is worked out in terms of concrete conditions available for its realization, that is in terms of "means"" that are available and actionable (Dewey, 1994, p. 73).

The course of forming aims is as follows. The beginning is with a wish, an emotional reaction against the present state of things and a hope for something different...it projects itself in an imagination of a scene which it were present would afford satisfaction. This picture is often called an aim, more often an ideal. ...at its best it is material for poetry or the novel. It becomes an aim or an end only when it is worked out in terms of concrete conditions available for its realization, that is in terms of "means".

Dewey (1939/ 1989a) saw poetry and art as being able to convey emotions and aspirations better than scientific information could, but emphasised that rationality was achieving a working harmony between diverse perspectives so that together they constituted a 'whole'.

Similarly ideals can be constituent of rational method; however, Dewey cautioned that ideals on their own were not reliable guides for rational agency. Ideals are so far removed from immediate situations and practical considerations that they can incapacitate, or frustrate, rational agency.

Dewey (1897/ 1999, p. EW.4.262) considered ideals as “working hypotheses for action”, not as “remote goals”; “ideals are like stars, we steer by them not towards them.”

ii) *Ends-in-view* also refers to ends often being the more foreseeable means to some other end. For example better health can be viewed as an end of health policy-making, but health can also be viewed as a means to a better quality of life, as one among a variety of other possible ends.

iii) Finally, “ends are foreseen consequences which arise in the course of activity and which are employed to give activity added meaning and to direct its further course” (Dewey, 1992/ 2002, p. 225). Ends are thus concomitant with consequences, some of which one may be able to anticipate early on and others which only become clear in the course of action. Thus ends need to be kept open to revision in order that agency may be rationally guided.

In keeping with the concept of *ends-in-view*, change, in Deweyan pragmatism, involves both responsibility – in the examination of choices

and consequences, and creativity – in the ‘intelligent creation of purpose’ and in resolving indeterminate situations (Dewey, 1922/ 2002).

Joas (1996) discussed how in pragmatism, change is an inherently creative process that is linked with the *rhythm of situations*.

According to this model, all perception of the world and all action in the world is anchored in an unreflected belief in self-evident given facts and successful habits. However, this belief, and the routines of habit based upon it, are repeatedly shattered: what has previously been a habitual, apparently automatic procedure of action is interrupted...and the only way out of this phase is the reconstruction of the interrupted context...This reconstruction is a creative achievement on the part of the actor. If [the actor] succeeds in reorienting the action on the basis of changed perception and then continuing with it, then something new enters the world: a new mode of acting, which can gradually take root and thus itself becomes an unreflected routine (Joas, 1996, pp. 128-129)

Dewey described three modes of change resulting from rational agency in problematic situations: *adaptation*, *accommodation* and *adjustment* (Dewey, 1934; Joas, 1996). Linear instrumental rationality deals with only one of these three types of change, i.e. *adaptation*, where means are employed to achieve goals by changing external conditions.

Dewey (1934), and later Vickers (1965) in discussing the *Art of Judgement* in policy-making, discussed that change was pervasive throughout situations and systems. A situation may comprise a range of transactions that include, but are not limited to ‘individual and society’, ‘mind and

body', 'human beings and the physical environment', 'reason and emotion' and of 'morality', 'scientific sense' and 'democratic sensibility'. Change occurs in, and through, these different constituents of situations and human agency. Aligned with this transactive, systems view, Dewey (1934) discussed two additional modes of change: *accommodation* and *adjustment*.

In *accommodation*, agents deal with a problematic situation by changing their own attitude towards that situation, by modifying their goals and preferences, or by learning to live with the status quo. This mode of change goes beyond the concept of "deciding to do nothing" (Howlett & Ramesh, 2003). Accommodation additionally involves an internal, cognitive process directed at changing the agents' evaluation of a situation. Agents learn to accept intractable conditions rather than persist with a desire to change them (Dewey, 1934; Joas, 1996). However, goals, desires and preferences can be altered in view of changing circumstances and as a result of learning and experience. Thus accommodation is not a passive attitude or surrender, but an active and constructive approach to organise cognitions in response to problematic situations, even though external conditions may not be changed.

Adjustment, the third mode of transactive change that Dewey describes, is a more fundamental change that affects the character of an agent and the structure of a problematic situation, and may also effect changes in the

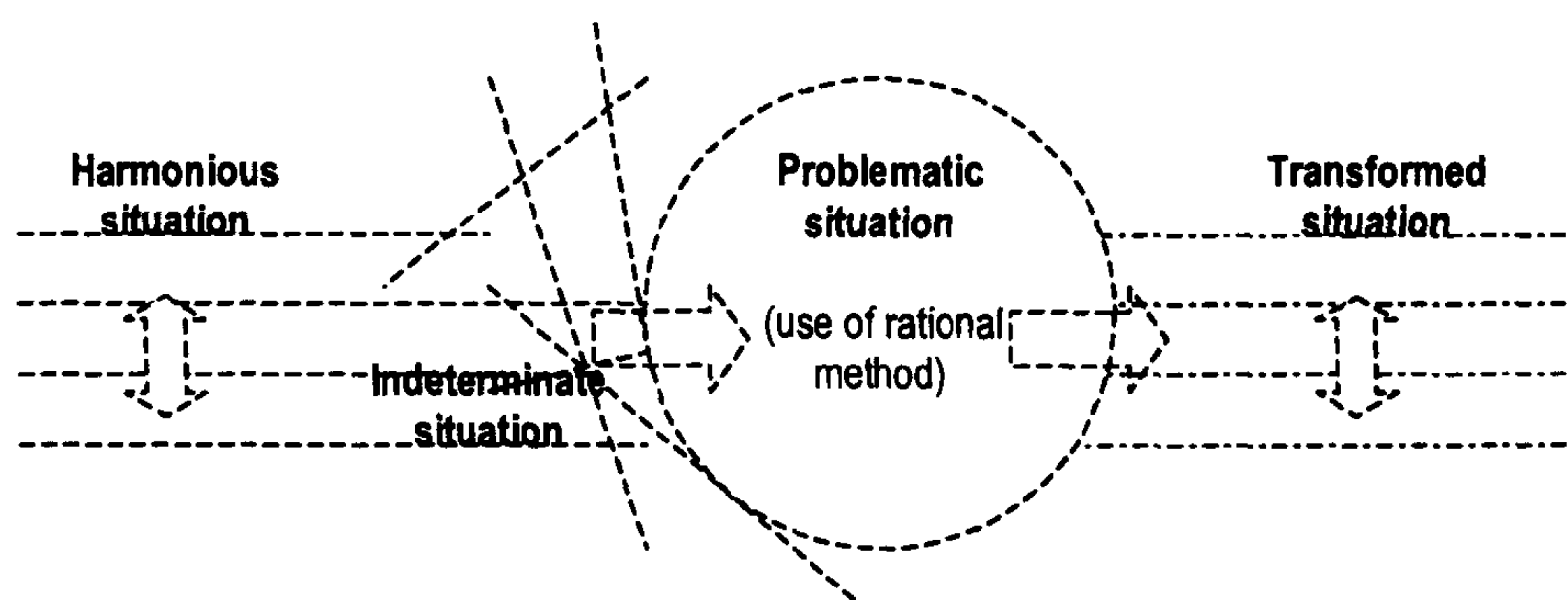
surrounding environment. This type of change is perhaps closest to a concept in contemporary organisational theory, termed by Argyris and Schön (1978) as “double loop learning”. Here a fundamental change in prevalent beliefs and practice of agents results from transactive learning from the consequences and effects of rational agency. Organizations that are able to learn and make structural adjustments for effective and evolutionary change, including in their goals and modes of operation, in this way are referred to as *learning organizations*.

The concepts of *adaptation*, *accommodation* and *adjustment* describe the nature of change resulting from rational agency and through which equilibrium is restored. While resultant changes may continue to be integrated into individual and institutional practice, the initial problematic situation itself will cease to exist and rational agency need no longer be employed with respect to that situation. Instead, changes that successfully resolve problematic situations can develop into knowledge and new habitual interactions that constitute new and transformed situations. Thus rational agency is not a persistent mode, but rather something that comes into effect only in an indeterminate situation, or in response to disequilibrium. In periods of equilibrium, relying on habitual interactions is a matter of intellectual efficiency and a natural mode of operation.

Thus, there is an overall *rhythm of situations* in human experience (Dewey, 1925), an underlying pulse - or beat, between states of equilibrium,

disequilibrium and, again, equilibrium. This rhythm of situations provides an alternative to the linear instrumental model of rational agency. Figure 5 provides an outline, or template, of the rhythm of situations.

Figure 5. The rhythm of situations outlined



Satisfactory resolution and aesthetic consummation

In the successful resolution of an indeterminate situation, there is an immediate and present quality of satisfaction. Dewey did not see satisfaction or utility as something that was external, or distal, to present situations, or that as something that was to be calculated in some future accounting exercise (c.f. utilitarian views). Additionally, in the pragmatist view, rational agency is not forever subordinated to some intangible ideal of rationality or bounded with respect to 'fixed' ends and 'given' constraints (c.f. Simon's (1957) idea of 'bounded rationality' and 'satisficing'). A pragmatist sense of satisfaction is based on 'fitness for purpose' with respect to successfully resolving concrete situations.

Successful resolution, however, includes both restoring immediate harmonious experience, as well as ascertaining that the consequences of present actions would support learning and rational agency to resolve future problematic situations (Dewey, 1939/ 1989b, 1994). There is thus an 'evolutionary' dimension to pragmatist rational agency, in that it supports learning and individual and societal flourishing. This forward-looking definition of successful rational decision-making is not that common, though it is increasingly apparent in contemporary deliberations on sustainable development (Department for Environment Food and Rural Affairs, 2005).

Finally, satisfactory, rational resolution is also unifying and integrative (of diverse desires, impulses and perspectives) and is, in this sense, 'consummatory' (Dewey, 1939/ 1989b). The unification of experience through rational agency has an aesthetics akin to the classical Greek composite of *ens, bonum, verum, pulchritudum* – of Being, the Good, the True and the Beautiful – or of experience, ethics, science and art. In classical Greece, this composite was seen the natural order towards which all gravitated. This concept of deterministic natural order changed with the Scientific Enlightenment. Since then, while these different dimensions of human experience have been explored and developed, there has been no real unifying framework to bring them together. As a result, these considerations often seem to be fragmented, or disparate, in contemporary

analyses and experiences. Dewey saw rational agency as a way to “consummate”, or bring together and make complete, diverse dimensions of human experience. Not that such a unification was antecedent or pre-ordained, only that it was possible through rational agency (Dewey, 1922/ 2002, 1939/ 1989). An aesthetic ‘consummation’ of problematic situations is thus one of the main promises of pragmatist rationality. To achieve this, however, rationality requires method, as is discussed in the next pragmatist ‘pillar’ of *socially intelligent inquiry*.

2. Socially intelligent inquiry

In describing *socially intelligent inquiry*, Dewey differed with both John Stuart Mill and Walter Lippman, who held diametrically opposing views on the public’s capacity for governance (Dewey, 1954/ 1927; Ryan, 1995).

Ryan (1995, p. 218) discusses how John Stuart Mill, writing *On Liberty*, thought that,

Democracy had sprung up first as a resistance to monarchs and aristocrats, essentially on a defensive basis. Then it had triumphed, and the sense that the public is always right – *vox populi vox Dei* – that was useful as a slogan of resistance became dangerous. Once public opinion was omnipotent, what was needed was some way of curbing its intrusion into matters that did not concern it.

Dewey, writing a century later than Mill, agreed with this historical analysis of democracy, but disagreed with the implications of this

analysis. Dewey believed that *coercion and control* as a means of social coordination could be replaced in a more constructive manner by *cohesion and cooperation* (Dewey, 1954/ 1927). Further, it was not the case that the problems of elitism and aristocracy had been forever resolved with a shift to democratic modes of governance. As Ryan (1995, pp. 218-219) notes,

Dewey also believed that modern society has become so amorphous, so sprawling, so generally unmanageable and incomprehensible to its individual members that they are simply lost. At the same time, new aristocracies unknown to Mill had sprung up in place of the old. The bankers and the captains of industry did not simply control the state – they, too, were not so well organized as that – but they were the most potent and organized of contemporary social forces.

A contemporary of Dewey's, Walter Lippman, who is sometimes referred to as the 'Dean of American Journalism', famously argued, in *The Phantom Public*, that the issue of democratic practice was moot, as the public just did not have the capacity to govern themselves.

When public opinion attempts to govern directly it is either a failure or a tyranny. It is not able to master the problem intellectually, nor to deal with it except by wholesale impact. The theory of democracy has not recognized this truth because it has identified the functioning of government with the will of the people. This is a fiction. The intricate business of framing laws and of administering them through several hundred thousand public officials is in no sense the act of the voters nor a translation of their will (Lippman, 1927/ 1993, pp. 60-61).

Lippman also presaged, though some would say 'spawned', the rise of spin-doctors and propaganda in politics.

The process by which public opinions arise...and the opportunities for manipulation open to anyone who understands the process are plain enough...The creation of consent is not a new art. It is a very old one which was supposed to have died out with the appearance of democracy. But it has not died out. It has, in fact, improved enormously in technic, because it is now based on analysis rather than on rule of thumb.... None of us begins to understand the consequences, but it is no daring prophecy to say that the knowledge of how to create consent will alter every political calculation and modify every political premise (Lippman, 1922/1991, p. 248).

Dewey and Lippman had several heated debates on the role of the general public in democratic governance (Dewey, 1954/ 1927; Ryan, 1995; Westbrook, 1991). Dewey agreed with Lippman that the public was, as yet, insufficiently educated and without the required skills and sensibilities for effective democratic practice. However, he disagreed with Lippman on the conclusion that democratic practice was therefore an illusion and that publics should be guided and controlled through elite political propaganda, even if the elitism was liberal in intention.

Dewey (1939/ 1989a, p. 109) also asked, "Is it possible to admit the power of propaganda to shape ends, and deny that of science?"

In emphasising the role of wants, impulse, habit, and emotion, it often denied any efficacy whatever to ideas, to intelligence (Dewey, 1939/1989a p. 115).

However, Dewey recognised that scientific information, and so-called rational ideas, needed to be more emotive in order to counteract propaganda and to catalyse moral reasoning and rational agency.

Ideas are effective not as bare ideas but as they have imaginative content and emotional appeal. I have alluded to the extensive reaction that has set in against the earlier over-simplified rationalism (Dewey, 1939/ 1989a p. 115).

Dewey (1939/ 1989a) also observed the ways in which religion, for centuries, not only included, but also relied heavily on art, music and imagery to convey its ethos and message. He advised that science, in aiming to replace religion as a reliable source of knowledge and beliefs, had to connect at an emotional level with people (recognising that appealing to emotion is explicitly eschewed in many scientific traditions). If science fails to connect with the public in this way, people would be more motivated to act by appeals to their emotion that come from a range of other sources, including political, capitalist or religious propaganda, that may not be as reliable as sources of information.

Dewey's method for rational agency, based on the idea of *socially intelligent inquiry*, addressed five main concepts:

- a. Individual preferences do not add up to social purposes
- b. The need for reference communities and public coordination
- c. Social intelligence as pluralism, not panaceas

that they evolve through experience and inquiry was previously discussed. In addition, through deliberation in a process of *socially intelligent inquiry*, new understandings and purposes are created (Dewey, 1922/ 2002). This goes beyond an aggregation of individual knowledge or preferences, and is more a 'sublimation', and unification, of diverse desires that leads to new understanding and social purposes to guide rational agency.

Further, it is impracticable to translate individual preferences into social purposes. Kenneth Arrow (1963), a Nobel prize-winning economist, challenged the idea of aggregating individual preferences as the basis of rational decision-making at the societal level. He proved that if there were two or more individuals involved in decision-making, and at least three options to decide from, in every situation there would be a violation of at least one of four minimal criteria for rational aggregation of choices:

- i. *Universality*: there should be a complete ordering of societal preference based on every set of individual preferences ranked relative to each other.
- ii. *Independence of irrelevant alternatives*: if attention is restricted to a particular subset of options, changes in individuals' ranking to irrelevant options (outside the subset) should not influence the societal ranking of the relevant subset.
- iii. *Pareto inclusiveness*: if all individual preferences change in favour of one alternative, then the social preference should change in

favour of that same alternative. Phrased as Pareto efficiency, this criterion states that no system can be called efficient if there is an alternative arrangement that improves the situation of some people without any worsening in the situation of other people.

iv. *Non-dictatorship*: the social preference scheme should not favour one individual's preferences while ignoring others.

Dewey (1954/ 1927) argued against the notion that individual preferences and social purposes could be neatly separated, given that societies and individuals are mutually constitutive and interrelated. In this respect, pragmatism is more aligned with Mill's utilitarianism, than Bentham's, in that,

We cannot think of ourselves save as to some extent social beings. Hence we cannot separate the idea of ourselves and of our own good from our idea of others and of their good (Dewey & Tufts, 1908/ 1999, p. 268).

However, pragmatism differed from utilitarianism in the notion that individuals were separate entities from the societies in which they lived. This individualist concept had its roots in early liberal philosophies, for example those of Hobbes, Locke and Rousseau. In *Liberalism and Social Action*, Dewey (1935/ 1999, p. LW.11.30) points out that,

The underlying philosophy and psychology of earlier liberalism led to a conception of individuality as something readymade, already possessed, and needing only the removal of certain legal restrictions to come into full play. It was not conceived as a moving thing, something that is attained

only by continuous growth. Because of this failure, the dependence in fact of individuals upon social conditions was made little of...social arrangements were treated not as positive forces, but as external limitations.

b. The need for reference communities and public coordination

Dewey argued that inhibition and *coercion* as means of social coordination could be replaced by *cohesion* and cooperative intelligence (Dewey, 1954/1927). Rational agency forms, and evolves, within the attempt to clarify and settle indeterminate situations (Dewey, 1939/1989b). Cooperative intelligence extends this idea to *communities of inquiry* that coordinate and communicate in order to resolve particular problematic situations (Shields, 2003). This is an analogous process to how scientific communities define, develop and test concepts to address scientific problems; Dewey recommended that this approach be extended to democratic practice. One connection between communities of inquiry and policy science, are the theories and empirical analyses on policy networks, partnerships and 'advocacy coalitions' that can influence how particular policy issues are addressed (Heclo, 1978; Sabatier, 1992). These policy theories, however, tend to be more empirical than normative, as will be further discussed in Chapter 4.

Dewey recommended that communities of inquiry be the foundation for rational agency, for effective problem solving, moral deliberation and democratic practice overall. Dewey thus held a position, aligned with

Jefferson's, that the community was the foundation of democratic practice,

Unless local communal life can be restored, the public cannot adequately resolve its most urgent problem, to find and identify itself (Dewey, 1954/1927, p. 216).

However, Dewey recognised that communities are not built on physical contiguity alone, as they also have a functional basis. In fact, Dewey foresaw that "to a very considerable extent, groups having a functional basis will probably have to replace those based on physical contiguity. In the family both factors combine." (Dewey, 1939/1989a, p. 123).

The concept of a *reference community* is not used in pragmatist philosophy, but this phrase is employed in this thesis to convey the idea of communities as a locus for *socially intelligent inquiry* and as a reference for *moral deliberation* (as will be discussed in the fourth pragmatist pillar).

Individual and societal development also occur through reference communities be they at school, work or in social groups and fora.

Dewey was concerned, however, by how difficult it was to locate and build and sustain functional communities. In particular, with the rapid development and dispersal of communication technologies and the means of production for goods and services, people are increasingly subject to 'readymade' and pre-packaged items, over the composition and content of which they have little control.

The new mechanisms resulting from application of scientific discoveries have, of course immensely extended the range and variety of particular events, or “news items” which are brought to bear upon the senses and the emotions connected with them. The telegraph, telephone, and radio report events going on over the face of the globe. They are for the most part events about which individuals who are told of them can do nothing, except to react with a passing emotional excitation. For because of lack of relation and organization in reference to one another, no imaginative reproduction of the situation is possible, such as might make up for the absence of personal response. Before we engage in too much pity for the inhabitants of our rural regions before the days of invention of modern devices for circulation of information, we should recall that they knew more about the things that affected their own lives than the city dweller of today is likely to know about the causes of his affairs (Dewey, 1939/ 1989a, p. 40).

The importance of building linkages with reference communities has been discussed in the context of health care decision-making. Mays (2000) argues that the legitimacy and sustainability of 'solidaristic', or universal publicly financed, health systems can be enhanced through linkages with 'intermediate organisations'.

The main threat to the sustainability of such systems lies in the inability of so-called 'advanced' societies to develop institutions that are capable of acceptably reconciling inevitably scarce resources with individual and collective desires to have all the health care we want. Many 'advanced' societies lack, or fail to incorporate into their health systems, the range of intermediate institutions that could potentially help in more effectively reconciling individual wants with collectively determined levels of resources (Mays, 2000, p. 122).

Mays (2000) identifies intermediate institutions (after Durkheim's 'occupational associations' or 'guilds') as including professional institutes, religious organisations, ethnic associations and trade unions. Similarly, Glasius (2005) discusses the role of "deliberative forums", including those on the Internet, that are key to helping organise and develop the global civil society movement. As discussed in the UNICEF partnership review (Bernard & Kuruvilla, 2007), the Child Rights Information Network (CRIN)⁸, is one such an online forum and has a membership of more than 1,700 organisations in over 140 countries. In policy-making, intermediate organisations and deliberative forums could serve as *reference communities*, in the pragmatist sense.

While Dewey emphasised the importance of decentralised, situation-specific collaborative inquiry in functional communities, he also stressed the importance of *public* coordination. The public coordination Dewey envisaged went beyond the putative regulating mechanism of the 'invisible hand' in market economics.

Dewey (1954/ 1927, p. 13) defined the 'public' as comprising situations where human acts had consequences that "extend beyond [those] directly concerned and affect the welfare of many others". However, he cautioned that the *public* should not be confused with the 'social' or even with the 'socially useful'. Dewey proposed that the boundaries of the *public* should

⁸ <http://www.crin.org>

be, “drawn on the basis of the extent and scope of the consequences of acts which are so important as to need control, whether by inhibition or by promotion”; in addition, public officials and organisations should perform this regulatory role (Dewey, 1954/ 1927, p. 13). Thus, Dewey posited that public coordination was necessitated, and authorised, to manage *externalities* with respect to particular problematic situations, rather than by generalised or *a priori* social contracts. The latter approach being the case in early theories of liberalism and in later theories of social justice (Dewey, 1939/ 1989a, 1954/ 1927).

In essence, Dewey asserted that public coordination is particularly important in the provision of key public services, such as education and public health. He initially drew on philosopher T.H. Green’s work, which influenced liberal thinking on the role of government and social welfare policies in Britain (Ryan, 1995). Dewey identified that in education, as in public health, the state was best placed to organise systems and services. At the level of the state, there would be a more comprehensive perspective that would not be limited, necessarily, by more local prejudices and pressures. There would also be more resources at this level to coordinate and support the progressive development of both individuals and society overall (Dewey, 1939/ 1989a, 1954/ 1927).

At the same time, Dewey stressed the importance of education to build individuals’ intelligence and skills to resolve problematic situations and

contribute to democratic practice (Dewey, 1916, 1954/ 1927). A considerable portion of his work was dedicated to the development of education systems that would support democratic practice and individual and societal flourishing.

More recently, the need to both build individuals' capabilities and have state coordination to support human welfare, is reflected in the work of Amartya Sen's and Martha Nussbaum's Capability Approach (Clark, 2005; Nussbaum & Sen, 1993; Ruger, 2006). They argue that promoting individuals' functional capabilities (such as the ability to access health care and participate in economic transactions and political affairs), rather than end-state utilities (for example, health, happiness, or desire-fulfilment), should be the objective of human welfare systems and that this development requires public or state investment and coordination. Ruger (2006) has adapted this approach for health, in the Capability Health Account, which will be discussed in Chapter 7.

c. Social intelligence as pluralism, not panaceas

However, as with individual and social preferences, Dewey did not consider that social capacity and intelligence were equal to the sum of the intelligence or capabilities of participating individuals. He considered as problematic, the purely individualistic notion of intelligence.

Alleged scientific findings about hereditary and by impressive statistics concerning the intelligence quotient of the average citizen, rest wholly

upon the old notion that intelligence is a ready-made possession of individuals (Dewey, 1935/ 1999, p. LW.11.38).

Dewey considered such measures of individual intelligence as abstractions that were removed from the social dimension of intelligence. This individualistic view also was of little use in coordinating social intelligence to resolve problematic situations.

Dewey (1954/ 1927) and Mead (1913/ 1982) appreciated that individuals developed unique capacities and perspectives, but emphasised that uniqueness, by definition, was considered with respect to others and developed through individuals' interactions in society. Further, social intelligence, or the social organisation of knowledge, supported building individuals' intelligence and capacities.

Dewey emphasised the importance of making knowledge available at the level of social organisation. Few individuals have the capacity to invent new technologies, such as the telephone or the computer, or to create works of art. However, the social organisation of knowledge enables individuals to understand and use new technologies, and enjoy art.

A mechanic can discourse of ohms and amperes as Sir Isaac Newton could not in his day. Many a man who has tinkered with radios can judge of things which Farraday did not dream of ... It is aside from the point to say that if Newton and Faraday were now here, the amateur and the mechanic would be infants beside them ... A more intelligent state of social affairs, one more informed by knowledge, more directed by

intelligence, would not improve original endowments one whit, but it would raise the level upon which the intelligence of all operates (Dewey, 1954/ 1927, p. 210).

There are other imperatives for the social extension of knowledge and intelligence. Societies are held together by shared systems of knowledge, behaviour, symbols and values (Nieva & Hickson III, 1996). If all members of society do not have access to the knowledge that defines and drives their society, there is a risk of social fragmentation, inequity and conflict.

As long as our culture continues to refract reality through the lens of science there is an obligation to make the science accessible to everyone. What is at stake here is not just individual sanity, but ultimately social cohesion (Wertheim, 1996, p. 9).

Dewey recommended that intelligence at the level of society be ascertained by (Dewey, 1954/ 1927):

- i. The number and range of pluralistic intellectual resources in a society, particularly for the resolution of problematic situations.
(This is a similar concept to the one of a larger sample size facilitating more robust and reliable results in scientific inquiry.)
- ii. The extent to which these resources are organised and made available in society.

Dewey considered pluralist perspectives to be an invaluable resource for resolving problematic situations in society and for supporting both

individual and societal development (Dewey, 1954/ 1927; Ryan, 1995). This approach also involves openness to viewing pluralism in societies as a resource, rather than as a risk. This shift in thinking, from risks to resources, was discussed in the LSHTM study on research impact (Kuruvilla, Mays & Walt, 2007). Researchers in one project noted that they had used categorisations of *risk* to describe young people's access to health care, particularly with respect to young people from immigrant communities in London. This view changed when researchers recognised how resourceful these young people were in facilitating health care access for themselves and their families. In addition to seeking and setting up health care appointments for their families, these young people also undertook other necessary tasks, such as translating clinical consultations and medical prescriptions (Green, Free, Bhavani & Newman, 2005). As a result, one partner institution in the study changed its policy to focus on *resources*, rather than *risks*, in programmes aimed at improving young people's access to health care.

With respect to pluralism, Dewey also cautioned against the search for panaceas, noting, for example, that advances in health had been made as a result of developing solutions to deal with specific problems.

The problem of production of change is one of infinite attention to means; and means can be determined only by definite analysis of the conditions of each problem as it presents itself. Health is a comprehensive, a "sweeping" ideal. But progress toward it has been made in the degree in which recourse to panaceas has been abandoned and inquiry has been

directed to determinate disturbances and means for dealing with them (Dewey, 1939/ 1989a, p. 129).

Dewey did not see why this should not be the case also in socio-political and economic research. He cautioned that the search for unitary explanations and solutions led to 'totalitarianism'. He often commented on the pervasiveness of "totalitarian economics"; with one such example present in Marxist accounts:

In claiming to replace "Utopian" socialisms, Marxism throws out psychological as well as moral considerations. Whether the theory is in fact able to live up to its claim - without which its "materialism" is meaningless - is another matter. For it would seem as if certain organic needs and appetites at least were required to set the "forces of production" moving. But if this bio-psychological set of factors is admitted, then it must *interact* with "external" factors, and there is no particular point at which its operation can be said to cease (Dewey, 1939/ 1989a, p. 79).

Dewey also considered that "laissez-faire individualism indulged in the same kind of sweeping generalisation, but in the opposite direction" (Dewey, 1939/ 1989a, p. 71).

The more rational approach would be to draw on a range of pluralistic perspectives, developed through inquiry in particular problematic situations. Having pluralistic intellectual resources and alternatives would best support *socially intelligent inquiry* across a range of diverse and continually changing circumstances (Dewey, 1939/ 1989a).

d. The rational use of power

Dewey explicitly recognised the role of power in rational agency. Several contemporary theories focus on 'power' as a primary force in shaping the nature and outcomes of policy discourse (Foucault, 1984; Habermas, 1987; Lukes, 1974). A negative understanding of power views it as being exerted through coercion, barriers to inclusion, by inhibiting or distorting information (Lukes, 1974) and through restrictions and limits imposed by previously established concepts, norms and institutions (Foucault, 1984). Habermas (1987) posited that power can also operate as a positive force to mobilise change through collective and communicative action. However, given the somewhat intangible nature of the "ideal speech conditions" that he proposed as a means to exercise constructive power, Habermas committed much of his critical theory to resolving the more tangible asymmetric power-relations that caused distortions in communication between individuals and groups.

Dewey recognised that power had both creative and destructive connotations and he found it of interest that power was usually seen as a negative force in others, but a constructive force in oneself.

We attribute a will to power to others but not to ourselves, except in the complementary sense that being strong we naturally wish to exercise our strength ... the will to power is imputed only to a comparatively small number of ambitious and ruthless men ...

So far we have no generalized will to power, but only the inherent pressure of every activity for an adequate manifestation. It is not so much a demand for power as a search for an opportunity to use power already existing. If opportunities corresponded to the need, a desire for power would hardly arise: power would be used and satisfaction would accrue ... when social conditions are such that the path of least resistance lies through subjugation of the energies of others, the will to power bursts into flower (Dewey, 1922/ 2002, pp. 141-142).

Dewey recommended that individuals and societies focus on the constructive use of power to resolve indeterminate situations. This social, collaborative dimension of pragmatist philosophy opens up the possibility of developing and sharing concepts and practices and promoting the creative and constructive use of power in society. Or as Dewey put it, societies could, and should, “replace coercion with cohesion” in order to support democratic practice as well as individual and societal flourishing (Dewey, 1939/ 1989a, p. 124). However, to realise the full potential of democratic inquiry and to facilitate the constructive exercise of power, Dewey considered that democratic pluralism, scientific temperament and moral imagination as well as tested methods of inquiry and deliberation were required (Dewey, 1954/ 1927).

e. Logic: a theory of inquiry

In order to develop a theory and method of *inquiry*, Dewey studied a range of methods and approaches used to resolve problematic situations. For example, he analysed modes of inquiry used in scientific experiment,

common sense, mathematical logic and even musical exposition. His aim was to establish a common foundation for different types of inquiry and he explained that, "I have tried in my *Logic* to ... go to specific sorts of inquiry and reach a generalized account of knowing through analyses of the features they present" (Dewey, 1939/ 1989b, p. 557). In his analysis, Dewey (1938/ 1999) reveals five main elements in the logic of *inquiry*:

- i. Indeterminate situations* are experienced where harmonious, habitual and functional interaction is interrupted or challenged, and this stimulates or initiates intentional action.
- ii. Institution or intellectualisation of a problem*: This phase refers to the process of modifying an indeterminate situation, or sensation of disrupted equilibrium, into a 'problematic' situation where the issue is delimited or framed in way that it may be addressed.
- iii. The determination of problem-solutions*: Dewey's *inquiry* gives new meaning to the expression that "*a problem well-put is half-solved*" (Dewey, 1939/ 1989b). In this activity a problem is defined or formulated with respect to possible solutions or hypotheses. Of particular interest for policy theory is the implication that here the concepts of having a problem and finding a solution are interrelated and mutually constitutive and thus cannot be considered as temporally distinct or separate stages.
- iv. Deliberation and judgement*: This activity is analogous to testing hypotheses, but also includes deliberation and judgement on concomitant intentions, values and potential consequences. Shared

purposes can be developed through reflection on imagined models or scenarios related to situations and this can seamlessly lead to commitments on action. However, conflict or uncertainty on purposes and values would necessitate further reasoning and deliberation. The process of deliberation, including the role of imagination and valuation in the process, is detailed in Chapter 4.

- v. *Restoration of harmonious experience*: The warrant of successful inquiry is that it manages systematically to harmonise conceptions with experience, resolve problematic experience and restore equilibrium and functional coordination.

These phases of inquiry closely relate to the phases in the rhythm of situations, discussed earlier. Dewey defined inquiry in terms of the rhythm of situations, as the “directed or controlled transformation of an indeterminate situation into a determinately unified one” (Dewey, 1938/1999, p. 117). With this common foundation for inquiry and human agency, he affirmed that ‘democratic’ and ‘scientific’ inquiry were analogous, and this understanding is at the core of this thesis.

This thesis refers to *democratic sensibility* rather than to a fixed definition of democracy per se. Democracy, as defined in pragmatist philosophy, is an evolving concept based on a “consciousness of a communal life” rather than a fixed concept or end state. In Dewey’s words:

Regarded as an idea, democracy is not an alternative to other principles of associated life. It is the idea of community life itself. It is an ideal in the only intelligible sense of the word ideal: namely, the tendency and movement of something which exists carried to its final limit, viewed as completed, perfected. Since things do not attain such fulfilment but are in actuality distracted and interfered with, democracy in this sense is not a fact and never will be. But neither in this sense is there or has there ever been anything which is a community in its full measure ... Wherever there is conjoint activity whose consequences are appreciated as good by all singular persons who take part in it, and where the realization of the good is such as to effect an energetic desire and effort to sustain it in being just because it is a good shared by all, there is in so far a community. The clear consciousness of a communal life, in all its implications, constitutes the idea of democracy (Bernstein, 1998, p. 155).

This pragmatist concept of communal or democratic sensibility is further explicated throughout the thesis, particularly in terms of Mead and Dewey's concept of the *Social Self* discussed in this chapter, the need for functional communities of inquiry and reference communities as discussed in Chapters 3, 4 and 6, and other related concepts throughout the thesis.

Similarly, the term *scientific sense* rather than science is used in the thesis title to denote a systematisation of social inquiry, the use of method and testing applied to the logic of inquiry found even in everyday modes of thinking (Dewey, 1938/ 1999). Dewey saw a clear link between the democratic and scientific orientation. Alan Ryan (1995) explains this position:

Dewey thought of democratic processes as a search procedure in which we look for policies, laws, and administrative techniques that will allow us to continue a common life in a way that all of us can find fruitful and fulfilling ... The nearest he got to a single account of democracy's virtues was that they were like those of science: It excluded the fewest alternatives, allowed all ideas a fair shot at being tried out, encouraged progress, and did not rely on authority (Ryan, 1995, pp. 313-314).

Inquiry in public policy-making, from a pragmatist perspective, should thus have an appreciation that different forms of democratic inquiry are not, in principle, different from scientific inquiry and vice versa. Scientific excellence (as contributed by experts), political acumen (as the purvey of elected politicians), administrative planning (as carried out by bureaucrats) and participatory enfranchisement (by the involvement of citizens) are not necessarily conflicting ideals of rationality.

Dewey considered the scientific method as an extension, or refinement, of problem-solving efforts in societies and governance. Thus the logic of inquiry underlying 'scientific sense' and 'democratic sensibility' can be regarded as one and the same even though both can be usefully informed and improved by developing and using 'methods' of inquiry. Dewey held that one did not need to be an expert in order to value and evaluate the recommendations of experts, which is the key for democratic deliberation (when one assumes that, by definition, the presence of experts implies that on any policy issue there are likely to be people who are 'non-experts'. Further, experts on one topic may not be so on another). However,

valuation and evaluation processes are also predicated on rationality. The 'catch' is that rationality is not some antecedent, fully developed quality, whether in scientists, politicians, bureaucrats or citizens, but rather an attribute developed by systematic, laborious and iterative efforts to resolve problematic situations through cooperative inquiry (Dewey, 1922/2002).

Dewey emphasised that in inquiry, it was important to recognize the tentative and evolving nature of knowledge. In his view, the best outcome of inquiry was *warranted assertability*, or the extent to which assignment of meaning and agreement on the facts of a situation could successfully coordinate action within inquiry and resolve problematic situations. As in science, knowledge generated by any process of *socially intelligent inquiry* should then open to being tested in other problematic situations.

This section on socially intelligent inquiry can be concluded profitably by recounting a discussion on logic and pragmatism in Ian Hacking's book, *Probability and Inductive Logic*. 'Probability' is a concept that underpins much of the evidence on which health research and policy are based. Hacking, a philosopher of science, discusses the *single-case objection* to logic and probability made by Charles Sanders Peirce⁹, who, along with Dewey and James, was one of the main founders of pragmatist philosophy.

⁹ A major focus in Peirce's work was on methods of logic and scientific measurement.

Hacking (2001, p. 264) sets out Peirce's 'single case' challenge using this scenario: A standard pack of 52 cards is divided into two packs, one with red cards and the other with black. One black card is placed in the red pack and one red card is placed in the black pack, with both red and black packs having a total of 26 cards.

The chance of getting a black card from the red pack is $1/26$. Now consider this gamble for a prize P.

- (i) P if a red card is drawn from the red pack.
- (ii) P if a red card is drawn from the black pack.

We would all choose option (i). Why? ...

Most of the time, if you take option (i) you will get your prize; not so with option (ii).

But suppose you are offered this gamble just once, by a mad kidnapper.

The prize P is your release; if you don't win he'll murder you in an especially horrible manner.

We would all choose (i) and hope. That is the only reasonable thing to do, in the circumstances.

Peirce searched for ways to explain this choice as rational inductive behaviour, but saw that this would only work if the choice were one of many possible choices, or if it were possible to choose again till the desired result was obtained. In a single, finite case, as would be the case in making most individual choices in life, there was usually just one chance. Peirce

came to the conclusion that in order to view the choices that human beings make as logical, and rational, inductive choices, the scope of choices had to be extended beyond the individual. Hacking (2001, pp. 265-266)

continues with the story,

Peirce concludes in an astounding way:

It seems to me that we are driven to this, that logicity inexorably requires that our interests shall *not* be limited. They must not stop at our own fate, but must embrace the whole community. This community, again, must not be limited, but must extend to all races of beings with whom we can come into immediate or mediate intellectual relation. It must reach, however vaguely, beyond this geological epoch, beyond all bounds....

It may seem strange that I should put forward three sentiments, namely interest in an indefinite community, recognition of the possibility of this interest being made supreme, and hope in the unlimited continuance of intellectual activity, as indispensable requirements of logic...It interests me to note that these three sentiments seem to be pretty much the same as that famous trio of Charity, Faith and Hope, which, in the estimation of St. Paul, are the finest and greatest of spiritual gifts.

Peirce's conclusion, which was one of logic and not of religion, can be extended to both scientific and democratic inquiry. Further, because this approach to inquiry takes into account considerations of the influences of, and on, other human beings, it is also a moral approach, and serves as a foundation for understanding how human beings can learn to live and learn together in a way that promotes individual and societal flourishing.

3. *Via media to knowledge*

The two 'pillars' of pragmatism discussed so far, the *rhythm of situations* and *socially intelligent inquiry* have led to conflicting sets of criticisms being levelled at Dewey. Dewey's subscription to the scientific method has led to him being accused of *scientism* and technical elitism. Given Dewey's efforts to extend the scientific method to society and to establish a common foundation for the logic of inquiry, this criticism seems unfair. Other critiques cast Dewey as a *foundationalist* for making the assertion that there is an immutable 'rhythm of situations' that underpins all human agency. Others misread the concept of pragmatist inquiry as a purely subjective or *relativist* process where ends, knowledge and values can be recreated and reinterpreted in response to changing situations by agents at their will¹⁰. For example, Pawson and Tilley (1997) in *Realistic Evaluation*, launched a scathing, albeit misinformed, critique of pragmatism along these relativist lines,

Ever since the term 'pragmatism' was first coined by C. S. Peirce (1931), its notion of 'truth' (ideas which promote satisfactory relations with other parts of our experience) has been assailed as obscurantist and relativistic. In the last analysis, it rests on a theory of the social acceptability of ideas, rather than on their 'correctness'. Our view is that once researchers abdicate the claim for privileged knowledge based upon their methodological strategy, then someone else will claim warrant for them.

¹⁰ Pragmatism'' is sometimes referred to in current debates synonymously with relativism. This is partially due to the sceptical writings of neo-pragmatists like Richard Rorty who see individuals as authors with licence to more or less freely invent 'reality' in the form of (incommensurable) narratives. This is a very different philosophical position from that in the classical pragmatism as set out by Peirce, Dewey and James.

We speak from the heart since the usurpation of the criteria for knowledge is happening in the UK as we speak:

The main principle governing any Government funding of R&D is the Rothschild principle ...'the customer says what he wants, the contractor does it, if he can, and the customer pays'...

(Pawson & Tilley, 1997, p. 14).

Before setting out the pragmatist via media to knowledge, these criticisms about scientism, relativism and foundationalism in pragmatist philosophy will be addressed and related misinterpretations clarified.

Pragmatist inquiry versus scientism

First, with regard to his use of the scientific method and empiricism, Dewey saw logic as being present in everyday forms of inquiry, including, as discussed earlier, in 'common sense' approaches to resolving problems. Dewey explained that in science, the logic of inquiry was further developed and applied through the use of 'method'. He stressed that to the extent possible, the scientific method should be made accessible to all, but emphasised that in any case, scientific findings should be made widely accessible for the resolution of problematic situations in society.

As discussed in Chapter 1, Dewey (1925/1999) distinguished 'methods' in pragmatist inquiry from those in historical, or traditional, empiricism. Pragmatist method focused on ascertaining consequences in order to guide action in concrete situations, not just on understanding past or

'given' phenomena and concepts in the abstract. By focusing on consequences and the 'possibilities of action', pragmatist methods have a progressive, and forward-looking, disposition (Dewey, 1910/ 1997; Ryan, 1995).

Dewey also saw pragmatist inquiry as rooted in a unified, transactive 'systems' view of human experience. This contrasted with the atomism, reductionism and abstraction in predominantly empiricist approaches. Dewey particularly rejected dualisms and dichotomies such as those between mind and body, passion and reason, fact and value. In this respect, pragmatism was influenced by Hegelian philosophy - with some important distinctions. In his earlier works, Dewey found the unifying nature of Hegelian idealism, both intellectually satisfying and liberating.

My earlier philosophic study had been an intellectual gymnastic. Hegel's synthesis of subject and object, matter and spirit, the divine and the human, was, however, no mere intellectual formula; it operated as an immense release, a liberation. Hegel's treatment of human culture, of institutions and the arts, involved the same dissolution of hard-and-fast dividing walls, and had a special attraction for me (Dewey, 1930/ 1999, p. LW.5.153).

In his later work, Dewey differed from Hegel with respect to the *practical* relevance and usefulness of intellectual concepts developed in the abstract, and not through experience and learning in actual problematic situations (1930/ 1999; Dewey, 1938/ 1999). Dewey did not see how any abstract or purely intellectual approach could successfully orient practice.

For knowledge to usefully guide human agency, he saw that inquiry, experimentalism and deliberation, needed to be grounded in concrete problematic situations, in order to help individuals and societies solve existential problems, learn and evolve.

With regard to resultant knowledge from inquiry, Dewey emphasised that, in principle, no perspective is privileged. No feature of the world can be taken as 'given' or beyond doubt and no law or standard is absolute and beyond investigation and revision. Knowledge by nature evolves and is therefore fallible. This position is not unfamiliar. There is always some scepticism about authoritative claims and the "truthfulness" of scientific messages, in part because orthodoxies are periodically overturned (Kuruvilla & Mays, 2005). For example, a contemporary randomised trial indicated that the widely accepted use of corticosteroids to treat head injuries could be harmful (Edwards, Arango, Balica, Cottingham et al., 2005).

The acknowledgement in pragmatism that knowledge is fallible, however, is very different from concluding that everything is 'relative' and should be placed under the auspices of doubt. Contrary to Pawson and Tilley's (1997) interpretation (quoted earlier), Peirce's position was that *doubt, just as belief, needs good reasons* (Peirce, 1931-1935). Dewey strongly endorsed this position, which goes beyond Rorty's neo-pragmatist proposal to reject "wholesale scepticism" in favour of more selective "retail scepticism". In

the classical pragmatist view, not only do beliefs need warrants, but equally, doubts also need clear and present warrants in order to challenge previously held beliefs. Joas (1993) explains the role of doubt in pragmatist inquiry,

Doubt becomes necessary only when well-established certainties no longer stand the test of reality or when subjects raise objections to the certainties of other subjects. The purpose of this doubt is to bring about new certainties through creative problem solving (Joas, 1993, p. 61).

Rational doubt, therefore, rather than the mere possibility of inserting arbitrary question marks, should be a response to practical and existential problems arising from the inability of available knowledge and beliefs to satisfactorily guide rational agency and resolve problematic situations. At the point where a well-coordinated habitual situation changes and becomes indeterminate and problematic, *rational doubt* helps to identify knowledge (concepts and beliefs) that can helpfully guide rational agency and knowledge that needs to be revised in order to solve the impasse and restore equilibrium.

Hilary Putnam (1995, p. 152), a contemporary pragmatist philosopher, makes the point that a unique contribution of pragmatist philosophy is the integration of *antiscepticism*, wherein doubt requires justification just as much as belief, and *fallibilism*, wherein there is no metaphysical guarantee to be had that any belief can be above revision.

A rational path between foundationalism & relativism

In response to critiques of his work as either foundationalist or relativist, Dewey vehemently argued against both extremes, with equal force, as philosophical and methodological pitfalls (Dewey, 1939/ 1989b).

Throughout his work, he consistently paved a *via media* between relativism and foundationalism as the reliable path to knowledge; this position is the basis for this third pragmatist pillar.

Dewey drew extensively on both the methods and the findings of the natural sciences in his work. That there is a physical or material 'reality' was never a question for Dewey, however, he saw this area of inquiry as the domain of the natural sciences (Dewey, 1939/ 1989b). He saw the concern of philosophy and the social sciences as the development of knowledge about human experience and transactions, including with material 'objects' and physical environments (Dewey & Bentley, 1946). For Dewey, this knowledge evolved from human experience in concrete situations, and in response to problematic situations. He emphasised that it was a situation itself that became problematic, not just the interpretation or intellectual description of the situation. The change between a settled and a problematic situation is *existential* (a term used to avoid using the misleading term 'objective'). However, one must remember that attitudes and cognitions are as constitutive of transactions and situations as are the 'matter' of natural science.

To illustrate the concept of how both 'things' and 'thoughts' constitute situations, Dewey discussed the case of a table: there may be different situations in which humans interact with tables, where the specifics of situation determine the nature of human experience, and agency, related to that table. For example, a student may see the table as a place to put down books or a family may view the table as a place on which to eat a meal. A physicist, however, may see the table as a swarm of "electrons, deuterons, etc", comprising more space than matter (Dewey, 1939/ 1989b, p. 537). However, as Dewey noted, "one would hardly put books or dishes on the latter or sit down before it to eat."

Thus there is a functional, or 'fitness for purpose', component in the pragmatist via media to knowledge. In this respect, realist evaluation is more closely aligned with pragmatist philosophy than its authors (Pawson and Tilley, 1997) are prepared to recognise. For instance, the realist approach has been defined as a method of inquiry, which instead of asking the question '*What works?*' tries to answer specifically, '*What works for whom, in what circumstances, in what respects and how?*' (Pawson, Greenhalgh, Harvey & Walshe, 2005). This realist approach is aligned with the pragmatist concept of inquiry in that both are conducted with respect to particular problematic situations.

Where pragmatism would diverge from the realist approach is with regard to the earlier quote from Pawson & Tilley (1997) that viewed

scientists as having a privileged perspective on knowledge and holding the ultimate warrants for knowledge in society. This goes against Dewey's approach of socially intelligent inquiry that recommends drawing on a range of pluralistic resources in society to resolve problematic situations and further recognises that there are diverse dimensions and definitions possible in any situation. Dewey did see a specific, but not 'privileged', role for scientific expertise in policymaking, that lay not in "framing and executing policies, but in discovering and making known the facts, upon which the former depend", as well as in carrying out specific technical functions as part of a larger community of inquiry working to resolve a problematic situation (Dewey, 1954/ 1927).

To further attend to relativist critiques of pragmatism, the concept of the rhythm of situations is not the same as the idea that the relevance of policy initiatives is arbitrarily dependent on any individual's or group's descriptions and definitions. The problematic character of a situation is existential. However, it is not beyond further conceptualisation or description by the groups involved; in fact, there are often disagreements about whether a situation is actually problematic and requires policy intervention. Only rarely is the transition from a harmonious to a problematic situation unanimously accepted by all involved in a particular situation, though this may sometimes occur, for example, in response to large scale or cataclysmic events (like 9/11 or a tsunami). More frequently, drivers of rational agency are more subtle and open to negotiation. Even

within the scientific community, it is clear that experts can and do interpret problems and evidence differently (Kuruville & Mays, 2005; Majone, 1989). Scientists can disagree even when conducting and interpreting systematic reviews, a method promoted in medical research for its reliability (Ferreira, Ferreira, Maher, Refshauge et al., 2002). Experts also use evidence to lobby for different policies and interests (Irwin, 2001; Majone, 1989; Salwen & Stacks, 1996).

The realist critique of pragmatism, cited earlier (Pawson & Tilley, 1997), highlighted the Rothschild reforms of UK government research as an example of how reliable knowledge was being placed in jeopardy by forcing scientists to respond to policy-makers' needs and thus taking away scientists' autonomy. The Rothschild report (1971) did propose a system aimed at producing scientific knowledge to support policymakers in government departments, including in health and social services. These reforms positioned government as the 'customer' for research and the scientific community as the 'contractors' (contentious terms at the time and since then).

Debates on the relationship between science and state can be traced back at least to Bacon's 1626 essay, *New Atlantis*. Bacon described a utopian society where wise rulers sponsored scientists to conduct experiments and sent delegates across seas and countries to collect and synthesise knowledge that could then be strategically deployed for the good of

society (Bacon, 1626/ 1905). Since then there has been support for Bacon's ideology that states should systematically attempt to organise the agenda and activities of science so as to serve the interests of society (Bernal, 1939). However, this approach has also been associated with the potential of the state to suppress scientific autonomy and curiosity-driven research and innovation.

The 'Republic of Science' side of the science and society debate, on the contrary, argues that science should be solely guided by the internal norms of science (Bush, 1945; Merton, 1973; Polyani, 1962). This position was widely backed in the scientific community that argued that this approach led to the production of the best science, which could then best inform policies from which society could ultimately benefit. It is unlikely that either position is tenable in an absolute sense. Dewey certainly did not see much value in scientific enterprise that was not oriented towards gaining a better understanding of human experience and to resolving problematic situations (Dewey, 1954/ 1927).

To better understand the logistics and implications of the Rothschild reforms, the UK health department commissioned a seven-year formative evaluation of the reforms, one of very few participant observations of the workings of a government department (Kogan & Henkel, 1983; Kogan, Henkel & Hanney, 2006).

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Based on this participant analysis of the Rothschild reforms, Kogan and Henkel (1983) showed that rather than either the scientists or the policy-makers being 'right' or 'wrong', there were fundamental differences in imperatives, roles and approaches within, and between, research and policy systems (Kogan, Henkel & Hanney, 2006). Despite their commonalities (for example, researchers and policy-makers may have had similar educational backgrounds and there were secondments between the two systems), government rarely found it possible routinely to devote the time and resources to being an informed customer, or receptor, of research. For institutional and epistemological reasons, scientists often struggled to produce the knowledge relevant for policy-making. These different perspectives needed to come together to build new understandings and effectively tackle policy problems.

One of the main recommendations from Kogan and Henkel's analysis was to develop better linkages and brokerage mechanisms at the 'interfaces' between research and policy systems (Kogan & Henkel, 1983; Kogan, Henkel & Hanney, 2006). They saw that linkage mechanisms were required to enable scientists and policymakers to improve communication, facilitate understanding of their respective roles with respect to policy-making, and to foster better collaboration. The need for linkage mechanisms, knowledge brokers and regular interaction has been increasingly highlighted in empirical analyses since then, and in strategies to improve the relevance and utilisation of evidence in policy-making

(Innvaer, Vist, Trommald & Oxman, 2002; Kogan, Henkel & Hanney, 2006; Lomas, 2000).

The need for 'linkages' extends beyond those required between researchers and policy-makers. For example, the current R&D strategy of the English Department of Health moves beyond the objective of supporting policy-makers to supporting patients and health professionals, and to promote an environment conducive to increasing knowledge to improve health services (Department of Health, 2006). This would necessitate the need for further linkage mechanisms across society, including at interfaces shared by government and civil society, consumer groups and the private sector. Such linkage mechanisms are envisaged in the new R&D strategy, including clinical research networks that have both 'comprehensive and topic-specific' participation (Department of Health, 2006).

This need for knowledge linkages is quite closely aligned with the idea of a pragmatist via media that not only builds on existing knowledge, but also recognises that the knowledge necessary to resolve problematic situations develops from pluralistic perspectives that constitute these situations. Therefore, walking the pragmatist via media requires openness to pluralistic perspectives and ongoing inquiry in order to develop shared understandings and to successfully coordinate rational agency. These issues are further discussed in the following chapters.

Knowledge that is operative

The ultimate pragmatist test of socially intelligent inquiry is the successful resolution of problematic situations. However, if rational agency were solely associated with resolving immediate problematic situations as measured against the standard of 'what works', this view of rationality would again lay itself open to criticisms of opportunism, convenience and amorality. This interpretation is wrongly associated with pragmatist philosophy and exacerbated by the colloquial use of the word 'pragmatic' in contemporary business and politics to prioritise expedient action over both theoretical and moral qualms.

As a further complication, establishing 'what works' in terms of resolving problematic situations in public policy may not be easy, given the long-term nature of impacts from societal interventions and conflicting views in society of what constitutes successful resolution of problems. Highlighting this problem, Elster (1989, p. 116) states that,

'Learning from experience' proceeds by largely unreliable inferences from small-scale, short-term, transitional effects to large-scale, long-term, equilibrium effects. In addition, the very notion of 'experimenting with reform' borders on incoherence, since the agents' knowledge that they are taking part in an experiment induces them to adopt a short time horizon that makes it less likely that the experiment will succeed.

To address this problem, Elster considers “justice as an alternative guide to political action” (Elster, 1989, p. 116). He argues that democratic process should be guided by justice (and socially agreed-upon criteria for the same) as opposed to consequentialism.

Dewey, writing before Elster, differed with this view of justice and agreed with John Stuart Mill that the proper principles of justice were those that had just consequences (Dewey, 1933/1989a). So while Dewey appreciated the importance of norms to guide rational agency and democratic practice, he disagreed with the position that any norm or ‘good’ was above revision and further inquiry, or an end in and of itself. A key characteristic of pragmatist inquiry is a need for intellectual responsibility with respect to consequences. Responsibility, in this context, also requires a willingness to reengage in inquiry and revisit norms if harmonious experience between established beliefs and current practice is not achieved.

To be intellectually responsible is to consider the consequences of a projected step; it means to be willing to adopt these consequences when they follow reasonably from any position already taken. Intellectual responsibility secures integrity; that is to say, consistency and harmony in belief (Dewey, 1933/1999a, p. LW.8.138).

Dewey recognised that there was inequity in the extent to which different actors had influence in societies and access to material welfare, and that there was a need for social norms and rules to mitigate these inequities (Dewey, 1939/ 1989a, 1954/ 1927). However, Dewey saw norms

functioning as part of, and subject to – not in lieu of – a socially intelligent process of inquiry that addressed societal problems and that was cognisant of consequences.

4. Deliberation, norms and moral imagination

In the pragmatist view, rational agency develops in relation to specific problematic situations. The question then arises, is there any room in this view for general concepts and norms that apply to more than one situation? If this possibility were denied, the very idea of constructing a generalised, or normative, concept of rational policy-making based on pragmatist premises would be pointless. Dewey did not have this conclusion in mind when he postulated the uniqueness of qualitative immediate experience.

Dewey did state that, “everything directly experienced is qualitatively unique” (Dewey, 1939/ 1989b, p. 545). However, he also emphasised the socio-historical interdependence of situations, in that “situations are *immediate* in their direct occurrence, and mediating and mediated in the temporal continuum constituting life-experience” (Dewey, 1939/ 1989b, p. 546). Showing some bemusement at criticisms that came from readings of his philosophy interpreted as saying that experience was *either discrete or continuous*, Dewey remarked that this was but another false dichotomy,

I lay no claim to inventing an environment that is marked by both discreteness and continuity. Nor can I even make the more modest claim that I discovered it. What I have done is to interpret this duality of traits in terms of the identity of experience with life functions (Dewey, 1939/1989b, p. 546).

The socio-historical development of knowledge as a result of inquiry in problematic situations, and the use and application of this knowledge to resolve further problematic situations, was discussed under the pragmatist pillar of *socially intelligent inquiry*. In keeping with the pragmatist principle of antisepticism, knowledge that has been successfully tested in terms of resolving different problematic situations, should not be questioned unless there is a functional crisis or problem that requires further inquiry. Reliance on tested knowledge is part of the pragmatist concept of rational decision-making. However, while some knowledge may be generalisable, the application of knowledge in any new situation will *always* require interpretation and judgement. There may not always be available, tested knowledge on how to resolve new problems, in this case, norms come into play.

Role and nature of norms in pragmatist philosophy

To address the problems posed by new situations, Dewey viewed *norms* as methods or instruments that could usefully organise and orient practice towards the resolution of problematic situations. He viewed norms as concepts or tools that developed through socially intelligent deliberation

or through resolving problematic situations. With Dewey's emphasis on learning and evolution, the resultant learning would have value beyond the specific situations in which the norms developed. For instance, moral and ethical norms, such as human rights standards, may make demands beyond immediate convenience or efficiency in a specific situation.

Nevertheless, it can be argued that these general ethical principles and standards provide a strong and agreed upon foundation for directing long-term social coordination and developing shared practices that are of value to individuals and societies, even if there is disagreement on the specifics of particular problematic situations.

In the UNICEF partnership review (Bernard & Kuruvilla, 2007), across countries, civil society organisations (CSOs) emphasised that the principles outlined in the Convention on the Rights of the Child (CRC) provided the most reliable and agreed-upon foundation for partnerships with UNICEF and governments. International organisations' and national governments' strategies and targets periodically changed with policy and planning cycles. CSOs had to pay attention to these changes for project funding and management purposes. However, the principles outlined in the CRC were widely agreed upon and comprehensive enough to accommodate more transitory, or specific, policy and programmatic changes. Thus the CRC provided a stronger basis for collaboration and a wider framework within which specific collaborations could be developed.

To identify norms that can, or should, guide public policy-making, pragmatism offers two main criteria, though these are not necessarily mutually exclusive or temporally ordered: evolutionary success and successful deliberation. First, norms used in rational decision-making should have had a long evolutionary history and have successfully withstood the test of time and different problematic situations. Norms that evolved in such a way may become 'imprinted' in the social consciousness and may thus appear 'eternal' or 'categorical'. Nevertheless, it is the long-term and continued success of such moral intuitions that guarantees their authority. Objections may, however, be raised by those who consider that norms such as human rights, basic liberties, and central moral tenets are fundamental and immutable and thus cannot be left open to the tests of history and evolution. However, this position would deny the opportunity to learn how norms can be further developed and applied to deal with continually changing situations and challenges.

The second criterion that pragmatism provides (to assess norms) is that norms can rest on insight, deliberation and good justification (e.g. in the absence of tested solutions). The importance of establishing conditions of reasonable and accountable deliberation, in order to ensure fair and just processes in society, is stressed in the Accountability for Reasonableness framework (Daniels & Sabin, 1998). This and other normative frameworks will be discussed in Chapter 7. In pragmatist philosophy, this deliberative

approach to the development of norms comes with the proviso that the forms and methods of normative (e.g. moral) reasoning themselves are products of evolution and testing.

As for the role of ideals - while Dewey appreciated that ideals could provide some sense of orientation, he cautioned against considering ideals as reliable norms or guides for rational agency. Since ideals cannot be tested in practice, and since they are so far removed from practicalities, they are also unreliable guides for practice. Habermas' (1987) ideal speech conditions or Simon's (1957) concept of rationality being 'bounded' compared to some intangible ideal, are examples of ideals that may not be able to effectively guide practice or satisfactorily resolve 'real world' situations. In pragmatism, rationality is not held to some unrealistic, unattainable standard of rationality, but rather to the standard of helping individuals and societies successfully resolve concrete problematic situations in a way that also facilitates learning for the resolution of future problems.

The paradox of institutions as conduits of both norms & change

'Norms' in the fourth pragmatist pillar, is a nominal placeholder for a number of guiding/orientating categories ranging from institutional structures and rules, to social conventions, legal injunctions, moral principles, virtues, values and goods. This list, though not exhaustive,

should convey the variety of principles and rules with normative character that guide and channel decision-processes.

The concept of 'norms' is also a reminder that socio-political agency is not only driven by a powerful few, but is also shaped by social conventions and is further agreed upon through standards and institutional processes (some of which may have developed through the exercise of hegemonic power, but also others that developed through deliberations on aspirations and shared values in society, and popularly mandated reforms). This is an important concept for individuals to maintain hope and develop aspirations that they can control and contribute to, rather than being passively shaped by, or subject to, dominant socio-political forces. One example of this possibility is how human rights concepts were effectively used in the civil society movements to help overthrow authoritarian regimes in the Eastern European communist bloc (Falk, 1999).

Norms that are successfully used to resolve problematic situations may already be institutionalised or become institutionalised as part of future habitual situations. In a harmonious and functionally coordinated experience, Dewey saw that certain adaptive behaviours and norms were institutionalised, both to promote efficiency of habit and to guide individual and societal practice based on established and agreed upon standards and values. Just as institutions of science have standards to

guide and arbitrate scientific enterprise, Dewey saw public policy institutions and standards as guiding and regulating public deliberation and action.

However, Dewey recognised that public organisations could become autonomous structures that protected, and propagated, their own agendas and interests even at the expense of matters of public concern (Dewey, 1954/ 1927). Once there was extensive institutionalisation, ensuring responsive change would be difficult and resisted, as this would invariably require some reform of the institutions themselves. With progressive failures to change, institutional structures and practices would get ever more entrenched, rendering them almost intractable to making changes that were relevant and responsive to the public interest. Thus, pre-existing institutional structures and rules may inhibit or restrict ongoing actions and interactions in society and fail to respond to current needs.

The influence of structure, such as institutions or norms, on agency and vice versa, is a fundamental area of inquiry in several fields, including policy science and sociology (Beck, Giddens & Lash, 1994; Ostrom, 1999). Structural factors that influence agency in policy-making include the degree to which policy networks are fixed or allow for new membership, the openness of policy institutions to new ideas and to change, and whose

ideas and interests are usually represented in policy processes (Buse, Mays & Walt, 2005; Howlett & Ramesh, 2003; John, 1998; Ostrom, 1999).

To ensure that the public interest was protected and to fully realise the potential of democratic inquiry, Dewey saw the need for ongoing interaction between individuals and public institutions, and for mutually informed change that grew out of socially intelligent inquiry. Dewey (1939/ 1989a) found it untenable that institutions remained unchanged in light of changing circumstances and new learning. He cited Thomas Jefferson to highlight the need for ongoing, and socially relevant, change in public institutions,

I know that laws and institutions must go hand in hand with the progress of the human mind ... As new discoveries are made, new truths disclosed, and manners and opinions change with the change of circumstances, institutions must change also and keep pace with the times...

The idea that institutions established for the use of a nation cannot be touched or modified, even to make them answer their end . . . may perhaps be a salutary provision against the abuses of a monarch, but is most absurd against the nation itself ... A generation holds all the rights and powers their predecessors once held and may change their laws and institutions to suit themselves (Dewey, 1939/ 1989a, pp. 120-121).

Jefferson went further to recommend institutionalising institutional change, in order to be responsive to societies' changing needs.

He [Jefferson] engaged in certain calculations based on Buffon, more ingenious than convincing, to settle upon a period of eighteen years and eight months that fixed the natural span of the life of a generation; thereby indicating the frequency with which it is desirable to overhaul "laws and institutions" to bring them into accord with "new discoveries, new truths, change of manners and opinions" (Dewey, 1939/ 1989a, p. 121).

Against this backdrop, Dewey was incredulous of the near idolatry of the American constitution, and institutions of government, in the name of Jefferson. It could be argued that the lack of a fixed constitution in Britain provides a basis for a more fluid and evolving basis of governance.

However, institutions of British government that have become entrenched over centuries, and its monolithic public sector organisations, such as the National Health Service, may not be easily amenable to fundamental change. Some may argue that there is too much change in the NHS, but the extent to which this change is overarching, or fundamental, is debatable.

The Ethical Postulate and moral deliberation

There have been several criticisms of Dewey on the grounds that he provides no substantive guide for individual and societal development (Ryan, 1995; Schilpp & Hahn, 1939/ 1989). Dewey did not see human beings as inherently moral or immoral. Instead he saw moral development as an evolutionary process that resulted from learning and deliberation in problematic situations. Through this process of learning, Dewey was sure

that individuals and societies would find that a commitment to ethical and moral development was without parallel as a guide for rational agency, and as a means for social coordination that supported both individual and societal flourishing.

Dewey (1939/ 1989b) did not see that it was up to philosophers and academics to say what moral standards should, or should not, be. Instead, in the process of *socially intelligent inquiry* and deliberation, certain precepts would stand the test of time, even if not all the time. There would need to be compelling reasons to doubt these evolutionary moral precepts (as doubt, just as belief, requires warrant in the pragmatist approach).

However, pragmatists also recognise that the application of norms and rules will always require interpretation and judgement in response to particular problematic situations (Dewey & Tufts, 1908/ 1999). No norm or rule has such inherent authority and generalisability that it obviates the need for judgement and interpretation when confronted with specific situational challenges. This concept is played out in the legal system where laws, even if considered inviolate, have to be interpreted and applied with respect to the details of a specific case. In the event that existing laws do not successfully clarify and resolve problematic situations, they can be revised, but only through a rigorous process of inquiry and deliberation.

As with the concept of *inquiry*, Dewey (1922) had a specific definition of *deliberation*, which is different from the more colloquial use of the term. Given that there are always pluralistic perspectives, preferences and possibilities in relation to an indeterminate situation, Dewey (1922) saw *deliberation* as a rational method for 'trying out' diverse courses of action. The advantage of deliberation is that this 'trial' is based on reflection and imagination. Different strategies and consequences can be explored, 'experienced' and evaluated through imagination, rather than by making a premature commitment to a strategy and having to face up to irretrievable consequences, before such exploration.

Deliberation is an experiment in making various combinations of selected elements of habits and impulses, to see what the resultant action would be like if it were entered upon. But the trial is in imagination, not in overt fact...Thought runs ahead and foresees outcomes, and thereby avoids having to await the instruction of actual failure and disaster...The object thought of may be one which stimulates [action] by unifying, harmonizing different competing tendencies ... in a "sublimated fashion" (Dewey, 1922/ 2002, pp. 190, 194).

Rawls' (1971/ 1999) "theory of justice" was based on the concept of *reflective equilibrium*, but he made a distinction between a more limited political concept of justice and a more comprehensive moral philosophy. In this and several other contemporary theories, justice is considered as the sphere of governance, and the morality an individual pursuit. Dewey's integrative philosophy rejected a distinction between individual and societal reflection and moral deliberation.

Reflective conscience must be based on the moral consciousness expressed in existing institutions, manners, and beliefs. Otherwise it is empty and arbitrary (Dewey, 1891/ 1999, p. 359).

Dewey put forward *The Ethical Postulate* (a reconstruction of Hegel's *Sittlichkeit*). The Ethical Postulate was posed as a falsifiable statement that Dewey hoped individuals and societies would test through inquiry, and use to resolve problematic situations and evolve moral deliberation and democratic practice.

In the realization of individuality there is found also the needed realization of some community of persons of which the individual is a member; and, conversely, individuals who duly satisfy the community in which they share, by that same conduct satisfy themselves. (Dewey, 1891/ 1999, p. 322) ¹¹

This Ethical Postulate has elements of both 'egoism' and 'altruism', which have been identified as key motivators in contemporary social policy decision-making (Le Grand, 2003; Pinker, 2006; Titmuss, 1968). This link between pragmatist ethics and social policy, including health policy will be further discussed in Chapters 6 and 7.

In the pragmatist perspective, based on the concept of the *social self*, these two dimensions of egoism and altruism are interrelated and integral to each other, and thus should be mutually referential in moral deliberation

¹¹ Note: changes made to more gender-neutral language.

and moral development. Dewey (1891/ 1999) considered that Polonius' advice to his son Laertes exemplified this sentiment.

This above all: to thine ownself be true
And it must follow, as the night the day,
Thou canst not then be false to any man.

(William Shakespeare, Hamlet Act I, Scene III)

In addition, the social aspect of pragmatist ethics goes beyond mere altruism, again because social considerations are connected to considerations of the self. As with inquiry, having a referent community is, therefore, an integral part of moral deliberation. However, finding a referent community for moral deliberation, and democratic practice overall, is a major challenge, and one that was recognised by Dewey (1954/ 1927, p. 213).

It is said, and said truly, that for the world's peace it is necessary that we understand the peoples of foreign lands. How well do we understand, I wonder, our next door neighbors? ... A man who has not been seen in the daily relations of life may inspire admiration, emulation, servile subjection, fanatical partisanship, hero worship; but not love and understanding, save as they radiate from the attachments of a nearby union. Democracy must begin at home, and its home is the neighborly community... That happiness which is full of content and peace is found only in enduring ties with others, which reach to such depths that they go below the surface of conscious experience to form its undisturbed foundation.

By referring to 'neighbourly community', Dewey was again emphasising the importance of having a 'reference community' that comprises face-to-

face communication, shared experiences and evolving understanding and relationships.

Moral development, in this fourth pragmatist pillar, refers both to *learning lessons* and to *being ethical*. In this respect, Dewey and Tufts (1908/ 1999) saw that developing moral theory was important both to guide reflective moral deliberation and to provide a systematic approach for moral development.

Realization that need for reflective morality and for moral theories grows out of the conflict between ends, responsibilities, rights, and duties defines the service which moral theory may render, and also protects the student from false conceptions of its nature. The difference between customary and reflective morality is precisely that definite precepts, rules, definitive injunctions and prohibitions issue from the former, while they cannot proceed from the latter. Confusion ensues when appeal to rational principles is treated as if it were merely a substitute for custom, transferring the authority of moral commands from one source to another. Moral theory can:

- i) Generalize the types of moral conflicts which arise, thus enabling a perplexed and doubtful individual to clarify his own particular problems by placing it in a larger context.
- ii) State the leading ways in which such problems have been intellectually dealt with by those who have thought upon such matters.
- iii) Render personal reflection more systematic and enlightened suggesting alternatives that might otherwise be overlooked, and stimulating greater consistency in judgement (Dewey & Tufts, 1908/ 1999, p. LW.7.166).

Additionally, for moral learning and development, a better understanding of human nature needs to be developed. This understanding is also the foundation for developing democratic practice overall; without this, democracy is meaningless because democracy, as conceptualised in pragmatist philosophy, is based on faith in shared human experience and potential. In this context, Dewey (1939/ 1989a, p. 83) described the evolution of democratic and moral thinking as a play with three acts.

The fundamental difference between even ancient republican and modern democratic governments has its source in the substitution of human nature for cosmic nature as the foundation of politics ...

The subject matter which follows is that of a drama in three acts, of which the last is the unfinished one now being enacted...The first act, as far as it is possible to tell its condensed story, is that of a one-sided simplification of human nature which was used to promote and justify the new political movement [based on an exaggerated view of individuals as being separate from the societies in which they lived]. The second act is that of reaction against the theory and the practices connected with it, on the ground that it was the forerunner of moral and social anarchy and the ties of cohesion that bind human beings together in organic union. The third act, now playing, is that of recovery of moral significance of the connection of human nature and democracy, now stated in concrete terms of existing conditions and freed from the one-sided exaggerations of the former statement.

Dewey wrote his 'play in three acts' summary of moral and democratic development, before positivist, reductionist and mechanistic theories and technologies made their entrance. These entrances were often made on the arms of military, market and scientific players. The result of these recent

entries has been a major, even catastrophic, retrogression in moral and democratic thinking. Early liberalism, Dewey's 'first act', was guilty of a simplified and exaggerated concept of the individual, risking social anomie and anarchy. However, these theories were at least based on the concept of *human dignity* and a nod to trying to understand human nature. These early democratic and moral theories, in relying on *natural rights* instead of *natural laws*, also recognised the role of human beings as agents in their own destiny, rather than as mere instruments in some deterministic scheme of things.

An informative and entertaining, albeit markedly polemical, programme on BBC 2 aired in March 2007, titled *The Trap: whatever happened to our dreams of freedom?* portrayed an almost endemic encroachment of reductionist, mechanistic thinking across all walks of life. For example, the programme highlighted the pernicious use of 'checklists' in psychiatry that comprised only measurable items and observable symptoms. These checklists ignored the causes of these symptoms and led to the management of the symptoms alone, through medication. This purportedly led to a medicalisation of even the most fundamental human experiences and emotions, such as grief, disappointment and loneliness (Curtis, 18/03/2007).

Reassuringly, the programme also depicted the way in which human nature can, and does, transcend the 'madness'. Originators of these mental

health checklists, including John Nash (who was interviewed on the programme), now acknowledge that this approach was too simplistic and that it led to the over-identification of mental illness in society.

The programme also commented on 'selfish' and mechanistic gene theories that now had to contend with alternative evidence showing that genes are edited based on environmental demands (and humans beings are now setting about modifying genes as well). Similarly, game theories of the self-interested, materialistic consumer had to contend with more complex theories of economic and social behaviour, with recent Nobel Prize winners in economics having focused their work on these more complex theories¹².

Of particular interest with respect to this thesis, was the programme's examples related to health and social policy (Curtis, 18/03/2007). To set the scene: in Britain, as a new government, New Labour had wanted to establish a freer, more meritocratic society. They set out to do this through the use of 'objective measures' and performance assessments. This approach was meant to signal a move away from a society based on elite control, entitlements and aristocracy. While this new aim was quite egalitarian, ultimately the means employed to achieve them were not.

¹² However, the fact that Dawkins' *Selfish Gene* theory involved cooperation from the genetic level to the level of organisms and systems and that some game theories also took into account factors such as altruism, were largely ignored in this particular documentary.

By drawing on the aforementioned 'dastardly' game theories and free market thinking (inspired by the use of the same by the Clinton administration), New Labour's implementation of 'objective measurements' relied on, and created a 'new elite'. Technocrats, consultants and think tanks came up with these 'objective' measurements, and were often the only ones who understood them. Ironically, new aristocracies were also formed through the free market with even less potential for social mobilisation than in the Thatcher years. Social inequalities widened, including and with respect to infant mortality and life expectancy¹³.

Nevertheless, human beings were once again shown to be more complex and enterprising than game theories would have them be; in essence, they started gaming the system. For instance, there were instances of gaming to meet NHS targets (Curtis, 18/03/2007)¹⁴. Wheels were taken off trolleys so they could be classified as beds and corridors were classified as wards so that they were not be taken into account in waiting time targets and calculations. Operations were scheduled for times when the concerned person was on holiday, which also brought down waiting times. NHS institutions were not the only 'culprits' in gaming the target system, some

¹³ Here again, one could ask for more detail on what the director thought constituted the link between the use of objective measurements and growing social inequalities.

¹⁴ Similar incidents were reported by the National Audit Office, for example as related to the "Inappropriate adjustments to NHS waiting lists":

http://www.nao.org.uk/publications/nao_reports/01-02/0102452.pdf

police stations classified certain crimes as 'suspicious occurrences' to bring down crime rates and some schools mainly focused on teaching answers to exam questions to meet their targets. There was no real resolution of societal problems, only increasingly frenetic chases of seemingly arbitrary targets and measures (Curtis, 18/03/2007).

Coming back from this Orwellian scenario to the pragmatist concept of the rhythm and resolution of real situations, it seems that the latter can provide a more meaningful approach to solving problems in societies, and one that is based on an understanding of human nature. While the use of targets and financial incentives may improve overall performance, it seems that the means by which these improvements are achieved, and their longer-term effects, also need to be considered; including whether these means and incentives are aligned with the morals and values considered important in a society. If deliberation on whether incentives and methods are seen as acceptable normatively can be explicitly integrated into public policy-making, moral development and democratic practice can again progress in an integrated manner. Having deviated from the script of the three acts Dewey described, the plot would have to be rewritten for our times. By getting moral development back on track, there would also be a development of a better understanding of human nature, both its positive and negative aspects, as well as an appreciation of human potential, creativity and relationships, which seems so much more

appealing than the technocratic, mercenary and mechanistic approaches earlier described.

On making Dewey's vision more operative

Dewey's philosophy was one of hope and faith in democracy and human potential. In this respect, Ryan (1995) considered Dewey as an unusual visionary; unusual in the sense that his focus was on the present, not on the future.

Dewey was a curious visionary, because he did not speak of a distant goal or a city not built with hands. He was a visionary about the here and now, about the potentialities of the modern world (Ryan, 1995, p. 369).

Lasswell (1971) and the other founders of the policy sciences recognised the potential of Dewey's vision to provide a reliable and inspirational guide for policy science and democratic practice. It seems high time to reclaim this vision; the consequences of not doing so can be a continued denigration of the very experiences and emotions that make us human, and the destruction of the hopes and dreams that we cherish.

Making Dewey's philosophy operative for public policy is the focus of this thesis; however, this is not an easy task. Dewey himself was, and continues to be, widely criticised for not making his work more easily accessible and 'usable'. For instance, Caspary (1991, p. 175) recognises "Dewey's extensive and profound investigations of ethical deliberation,

judgment, and action". However, he notes that, "though Dewey himself took his theory of inquiry, systematized it and applied it ... he did not undertake a comparable project with regard to his theory of ethics." Thus, a case can be made that Dewey's theory of ethics needs to be explicated and made operative before "accurate applications" are possible. Others have been less generous. William Galston (1993, pp. 149-150) described Dewey's views on democratic practice as comprising "his characteristic combination of high-minded moralism and practical ineptitude."

Ryan (1995, p. 327) poignantly captures both the optimism afforded by Dewey's vision, and the frustration faced in finding instructions on how to make this vision operative.

The prospect Dewey offers is daunting. We are encouraged to seek a multi-causal, culturally and historically sensitive recipe for a liberal-democratic society built on a socialized economy, but we are told it will be exceedingly difficult. We are told we shall be tempted by monocausal individualism or laissez-faire, or by monocausal collectivism of either a Marxist or Fascist kin, but we must resist. Then we are left to work out for ourselves how to build a revived Jeffersonian democracy in the complex situation thus outlined. Marx ended the *Manifesto* with the cry "Workers of the world, unite!" The last sentence of *Freedom and Culture* reads: "At the end as at the beginning the democratic method is as fundamentally simple and as immensely difficult as the energetic, unflagging, unceasing creation of an ever-present new road upon which we can walk together." It may be childish to wish that Dewey had raised his voice to the pitch of Marx's, but with the next war barely a year away, readers in 1938 must have hoped for more guidance than they could find here on *how* to build that road.

This thesis has the privileged perspective of a pragmatist view as well as of theoretical and empirical analyses in the policy sciences in the years following Dewey's work. It is hoped that by integrating these two views a more holistic and operative approach to public policy-making can be developed, one that keeps the faith in both scientific sense and democratic sensibility. It is with this objective in mind that a new integrative and normative theory of policy-making – the Decision Cell model is developed. As discussed in Chapter 1, earlier versions of this model were presented at a conference and introduced in two papers that were developed and published during this PhD (Dorstewitz & Kuruvilla, 2007; Kuruvilla, 2005). The further development of this model was informed by feedback received on these papers and by further conceptual and empirical analysis undertaken during the PhD. The Decision Cell model is applied to health policy with a view to making it more operative in this context and is also analysed in relation to contemporary theoretical and empirical analyses in the policy science and health policy literature. The overall development, and analysis, of this new theory of rational policy-making – the Decision Cell model – is described in the succeeding chapters.

**Chapter 4. The Decision Cell Model (I): dealing with
indeterminate situations and coordinating rational agency**

CHAPTER OUTLINE

Dealing with indeterminate situations and coordinating rational agency
.....179

The Decision Cell model182

Policy environments and indeterminate situations186

 Explanatory aspect: Policy environments and disrupted equilibrium
 186

 Normative aspect: The 'public' & a 'fourth approach' to policy-
 making 189

Forming rational agency196

 Explanatory aspect: policy networks, participation and power 197

 Normative aspect: public coordination and functional participation
 205

The centrality of communities and capacities220

 Individual capabilities – health literacy 222

 Societal capacities..... 228

Dealing with indeterminate situations and coordinating rational agency

Changes and the need for further change in democratic theory are connected with an inadequate theory of the constitution of human nature and its component elements in their relation to social phenomena.

John Dewey, 1939, Freedom and Culture

Social science at the present time has collected too many facts upon which it has not worked. It has gone about matters in the wrong way. Facts after all are not physical objects which can be caught, labelled and put in glass cases. The greatest collection of them so displayed will get us nowhere. Theories must evolve from them, otherwise there is no use in bringing them together. They must lead to control and action.

John Dewey surveys the nation's ills:

Woolf, 1932, An interview with John Dewey in the New York Times Magazine

Over the years, the metaphor of cellular organisation has been used to describe, and prescribe, different aspects of socio-political organisation. Thomas Jefferson (1816/ 1947) described the desirability of political system that was grounded in decentralised decision-making. Decisions would then flow upwards, as nutrients would through the cellular structure of a plant from its roots, and thus prevent the centralised concentration, and abuse, of political power.

Dewey (1886), as discussed in Chapter 3, described the transactions of a well-organised society as analogous to those at a biological level of an organism: "The various sensory and muscular stimuli, almost infinite in number, are always co-ordinated and harmoniously combined ... there is due gradation and subordination of the various factors in the unity of the whole, as in a well-organized society."

In the planning literature, Friedman (1973) uses the metaphor of a cell to describe how networks of actors form around a policy issue. Network 'membranes' demarcate an issue to facilitate related planning and coordination; the structure and permeability of the membrane frames both participation and inquiry.

Maturana and Varela (1980) developed the concept of "autopoiesis" to describe self-creating and self-organising systems, such as cellular systems. In an autopoietic system, agency cannot be reduced to some central property. Rather, agency is both the interaction of components of a system self-referentially, and the way in which components relate to each other, the system as a whole and the environment. Systems of self-organised activity differentiate from other systems and the surrounding environment through the formation and modification of boundary structures (Maturana & Varela, 1980).

Changes in the environment can catalyse changes in the system, and the system's response is determined by its structure. This response, in turn, can effect structural changes in the environment; essentially, this view (of creative and interactive 'systems') of agency and change is aligned with the transactive nature of agency and change described in pragmatist philosophy. This concept of autopoietic systems is apt in policy science with respect to the organisation and interaction of diverse institutions and networks in a policy system; this concept has also been applied to biology, sociology, cognitive studies and systems thinking.

The interplay between social structure and human agency is also a key concern in sociological analyses, as highlighted in this passage by Dixon and Dogan (2004, p. 574),

In contention is whether agency and structure are interdependent, in a duality relationship as asserted by Giddens: "The reflexive capacities of the human actor are characteristically involved in a continuous manner with the flow of day-to-day conduct in the contexts of social activity" (1984, p. xxiii), or interdependent but different and thus distinguishable (in an analytically dualist; Bhaskar, 1975) or morphogenetic relationship (Archer, 1995), which means that, with time and power, social structure is both a cause and a consequence of agency (Parker, 2000).

The cell metaphor, the systems view of transactive agency and the interplay between agency and structure, all are constitutive of the new theory of rational policy-making developed in this thesis: the Decision Cell model.

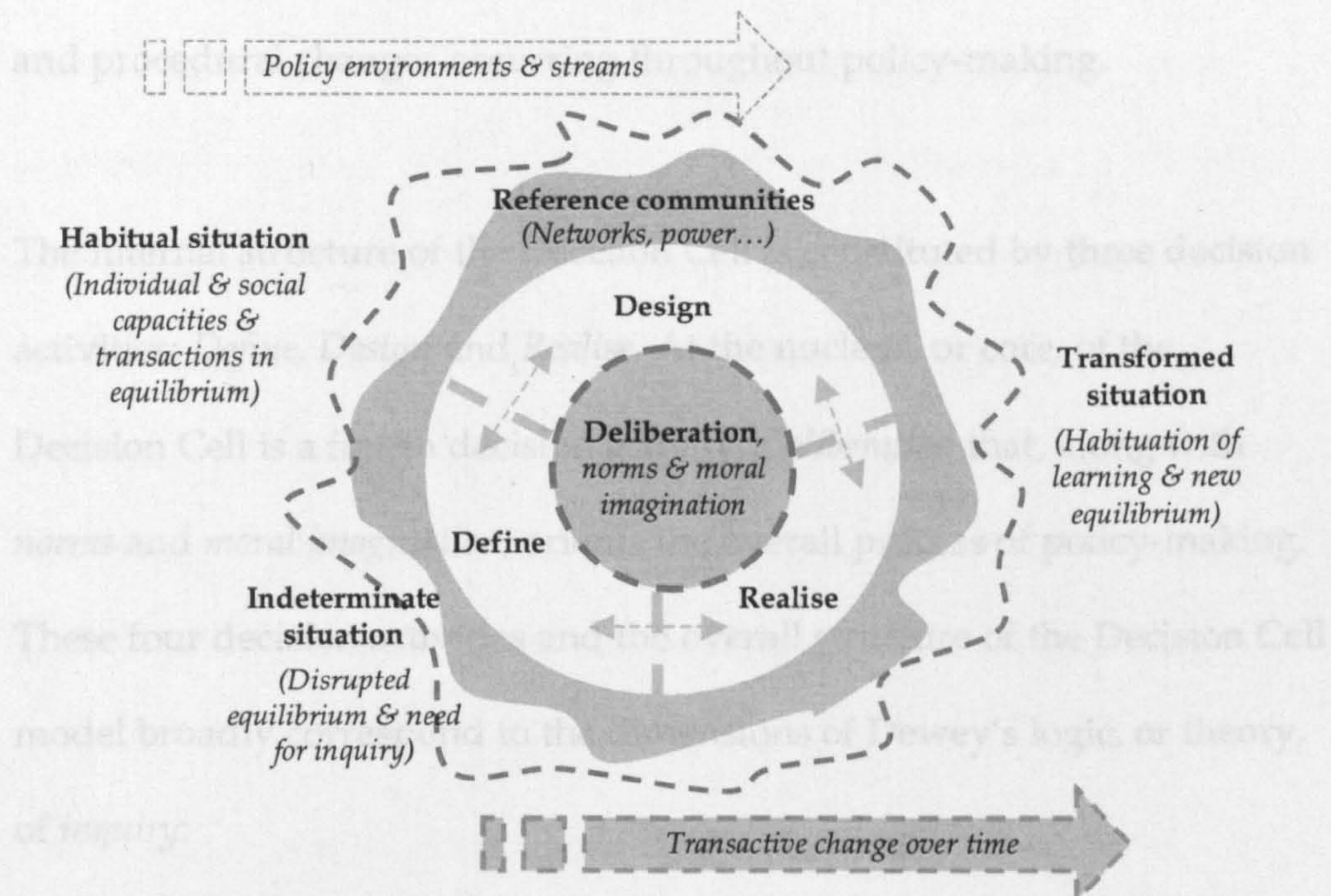
In response to an interruption of equilibrium, an indeterminate situation arises. Actors who can influence, or may be influenced by, an

The Decision Cell model

The template for the Decision Cell model corresponds to the template of action, or agency, in order to resolve the situation. The social and institutional structures involved in the process and the interests therein, form the boundaries of the Decision Cell. The boundaries delimit participation in the policy process and determine what is considered relevant for resolving the indeterminate situation, from the surrounding policy environment. These boundaries do not pre-exist, but form and change in response to the ongoing demands of the situation. Thus the

Figure 6).

Figure 6. The Decision Cell: an integrative model of policy-making



- * Indeterminate situations
- * Institution or intellectualisation of a problem
- * The determination of problem-solutions

In response to an interruption of equilibrium, an indeterminate situation arises. Actors who can influence, or may be influenced by, an indeterminate situation and its potential consequences, initiate intentional action, or agency, in order to resolve this situation. The social and institutional structures involved in this process and the interactions therein, form the 'boundaries' of the Decision Cell. The boundaries delimit participation in the policy process and demarcate what is considered relevant for resolving the indeterminate situation, from the surrounding policy environment. These boundaries do not pre-exist, but form and change in response to the ongoing demands of the situation. Thus the depiction of the boundaries of the Decision Cell is somewhat fluid or flexible. The flexible boundaries indicate that there can be both structural and procedural changes occurring throughout policy-making.

The internal structure of the Decision Cell is constituted by three decision activities: *Define, Design and Realise*. At the nucleus, or core, of the Decision Cell is a fourth decision activity, *Deliberation* that, along with *norms* and *moral imagination*, orients the overall process of policy-making. These four decision activities and the overall structure of the Decision Cell model broadly correspond to the dimensions of Dewey's logic, or theory, of *inquiry*:

- Indeterminate situations
- Institution or intellectualisation of a problem
- The determination of problem-solutions

- Deliberation and judgement
- Restoration of harmonious experience.

The template of the Decision Cell model (of rational policy-making processes) incorporates the dimensions of indeterminate situations and the restoration of harmonious experience. The coordination of rational agency, as set out in the second pragmatist pillar of *socially intelligent inquiry*, forms the boundaries of the cell. Different actors may be involved in different decision activities at various points and to varying degrees, depending on the situation, the structure of the cell and the permeability of the boundaries to participation at different points in the process.

The decision activities could be read in a linear mode, for example, following a sequence of 'Define' → 'Design' → 'Deliberation' → 'Realise'. However, this is not the only, or even the most salient, depiction, as the decision activities could take place concurrently, separately or iteratively; additionally, they all influence each other. The fluid nature of the boundaries of the Decision Cell and ongoing interaction between the 'cell' and the policy environment further inhibits a linear reading of the model.

The depiction of this policy model as a cell is also indicative of the transactive nature of pragmatist rationality, on which this model is based. The cell is constituted of interdependent elements that function together, and with reference to the surrounding environment, as a system. First, this

means that while the decision activities or modes may have individual functions, they are nevertheless interlinked, and influence each other and the nature of the cell itself. Second, all the decision-activities are considered as *formative* in policy-making, as opposed to the central, definitive 'point' of political decision-making in linear instrumental models of policy-making (Friedman, 1973). This transactive element of the Decision Cell model also focuses attention on the nature and effects of rational agency throughout the policy-making processes.

The cell metaphor, however, cannot be overstretched. There are important limits to the similarities between organic cellular structures and the Decision Cell model. In particular, the criteria of persistence or viability of a cell is not a defining characteristic of this policy model. It would not be desirable to promote the notion of a structure that is self-referentially directed at creating conditions to ensure its own viability. Decision Cells should typically persist only as long as the problem-situations around which they are formed. Boundaries set by participants may be widened, or narrowed, depending on what appears relevant in the deliberation process. However, institutional structures, socio-political contexts and participants' capabilities present parameters within which decision-cells can form. Some decision 'cells' may also dissipate, split into smaller components, or merge into other processes.

Overall, the Decision Cell model is a conceptual abstraction to illustrate key explanatory and normative aspects of rational policy-making processes in an integrated way. The integrative function of the model operates by bringing together diverse policy processes and considerations. This chapter describes the formation and coordination of rational agency. Chapter 5 focuses on the decision activities of *define, design and realise*. Chapter 6 will discuss the core of the Decision Cell, which comprises *Deliberation, norms and moral imagination*.

To begin building the Decision Cell model, the template, or foundation, for rational agency, as in the pragmatist concept of rationality, is *situations*.

Policy environments and indeterminate situations

Explanatory aspect: Policy environments and disrupted equilibrium

‘Situations’ are the foundational category for rational agency in the Decision Cell model. As described earlier - in the pillar on the rhythm of situations, a state of dynamic equilibrium comprises habitual, coordinated and instituted transactions. In describing policy processes, Kingdon (1995) conceptualised ongoing, parallel streams of policy activity in *politics, problem, and policy streams*. Hall (1977) characterised *policy environments* as having institutional, technological, legal, political, economic, demographic, ethical, ideological, ecological, and cultural dimensions. A descriptive model of policy-making, developed by the UK government

Cabinet Office (1999), circumscribes the policy environment using four concentric circles of policy processes and socio-political contexts:

- *Policy process* focuses on understanding and addressing a particular policy issue.
- *Organisational context* includes institutional, resource and incentive factors that influence policy processes.
- *Political context* involves strategic considerations of who is involved, how evidence is framed and getting 'buy-in'.
- *Wider public context* addresses 'real world' needs, perceptions and the possible consequences of policy processes, and also extends to considerations of related evidence, including similar experiences in other countries.

All these factors would comprise a policy situation. In a habitual situation of dynamic equilibrium, as described in the Decision Cell, there are habitual, well-rehearsed and functionally coordinated 'streams' of activity in policy environments and contexts. This does not mean that no problems arise or that there are no disagreements. What a habitual situation indicates, is that existing processes, knowledge and institutional arrangements are able to maintain functional coordination, including addressing problems and differences of opinion that periodically, and habitually, arise. For instance, the UK parliamentary system has been in place since the 14th century and several policy-making processes have been developed, tested and established through evolutionary success and

political agreement. It would not be necessary, and indeed would be inefficient, to change these processes every time a new problem or challenge arose.

However, when existing processes, knowledge and perspectives are insufficient, or unable, to resolve an impasse or interrupted equilibrium, an indeterminate situation arises. Referring again to the UK, in 2007 analyses indicated that social inequalities were at the highest level in 40 years¹⁵. This potentially could constitute an indeterminate situation, and indicate that existing processes and policies were not 'working', thus necessitating policy inquiry and change.

An indeterminate situation is therefore the basis for initiating sociopolitical inquiry and catalysing policy change. Habitual interactions and equilibrium can be interrupted for a variety of institutional, political, moral, and intellectual reasons (Baumgartner & Jones, 1991; Kingdon, 1995). For example, indeterminate situations can come about when:

- Important values, such as human rights are violated;
- New benchmarks for policy processes are developed;
- There is economic or social mobilisation;
- Natural or socio-political crises occur;

¹⁵ Wealth gap 'widest in 40 years'
<http://news.bbc.co.uk/1/hi/business/6901147.stm>

- Existing policy arrangements are unfavourably evaluated or compared to others; or
- Policy issues are defined or framed differently.

Knowledge also plays a role in developing indeterminate situations; for example when there is insufficient evidence to guide policy activity, say with regard to the logistics of implementing party manifestos. New knowledge can also overturn existing orthodoxies, necessitating changes in related policies and practices. For instance, a randomised controlled trial, published in June 2005, established that the widely accepted use of corticosteroids to treat head injuries could be harmful (Edwards, Arango, Balica, Cottingham et al., 2005). One key challenge for public policy-making is to determine when perceived disruptions of equilibrium require *public policy* intervention and when they can be resolved through other means. This question leads to the normative aspect of this part of the Decision cell model.

Normative aspect: The 'public' & a 'fourth approach' to policy-making

As discussed in the pragmatist pillar of *socially intelligent inquiry*, Dewey defined the 'public' as comprising situations where human acts had consequences that "extend beyond [those] directly concerned and affect the welfare of many others" thus requiring coordination by public officials and organisations (Dewey, 1954/ 1927, p. 13). In this view, it is

externalities that necessitate and authorise the role of public sector organisations.

Externalities are one of the main reasons for market failure with respect to health care (Buse, Mays & Walt, 2005; Ruger, 2006), which reinforces the importance of a 'public' role in this respect. Dewey, however, considered 'externalities' in a broader socio-political sense, as in his definition of the 'public' that was based on the societal consequences of acts, rather than in a narrower economic sense of production and consumption, or profit and loss.

A priori contracts form the basis of several predominant political philosophies. In early liberalism and utilitarianism, contracts were based on agreements to inhibit either individual or state action (Boucher & Kelly, 2003). Contractual theories that proceeded these were based on criteria of justice and fairness (Elster, 1989; Rawls, 1971/ 1999). In essence, contractual theories model public and political life as the outcome of pre-established, or hypothetical, consensus between free and consenting individuals, with externalities only being considered as exceptional occurrences. From a 'contractual' point of view, the costs and consequences of externalities are, literally, external to the immediate policy activities or transactions at hand. As a result, these externalised costs and consequences may be ignored, or dealt with through a patchwork of case-by-case remedial actions. This can result in a paralysing

'compensation culture' (with respect to cases of 'unforeseen' externalities) or result in precautionary and conservative approaches in public policy-making (in order to avoid these costs).

Socially intelligent inquiry is an approach that is creative, forward-looking and responsible (with regards to both potential consequences and externalities). Along these lines, Kass (2001) highlights the need for a new framework of ethics for public health. Bioethics primarily focuses on issues related to individual autonomy and privacy with respect to health research and medical care. However, what is good for the individual may not necessarily be good for the public, and vice versa with respect to the potential impact of public health interventions.

Interruptions of equilibrium that require public policy intervention will vary with context and require deliberation among those involved. For example, UK government initiatives on controlling smoking and alcohol consumption, promoting healthy nutrition and regulating child-care services have led some to accuse the government of interfering in individuals' private lives and of being a 'nanny state'. Others make the case that the consequences of smoking and alcohol, obesity, and inappropriate child-care could have long-term societal costs in terms of health and societal risks and health care costs. Underlying these debates is the need to understand and define what constitute problematic situations and what concepts are used to understand and resolve it. For example,

concepts such as 'binge-drinking' or 'teenage-mothers' are developed to help define and demarcate a public policy problem.

Matters of public concern and the socio-political contexts in which they occur are also continually changing. Therefore, there is a need for ongoing deliberation and negotiation in society on what constitutes matters of public concern, the concepts used to define these concerns, and the criteria used to determine when *situations* require public policy-making. Thus another normative element of the Decision Cell is the procedural aspect of determining what is in the public interest, as proposed by Morrison (2004, p. 5),

Due to the variable nature of individual interests, 'the public interest' ... is accounted for by ensuring the articulation of diverse values and interests in public policy.

Considerations of pluralistic perspectives, and of who participates in policy-making will be elaborated in a following section on *functional participation*.

A 'fourth approach' to rational public policy

The view of rational agency as a response to an indeterminate situation, as discussed in Chapter 3, may imply a conservative or incrementalist approach to rational agency. A challenge thus posed would suggest that a Deweyan policy-maker would only respond to situations that had already

turned problematic, functioning as a kind of post hoc repair mechanic. By the same token it would be reasonable to worry that Deweyan policy-making would be incapable of effecting radical change and transformation and would instead just tinker around the edges of policy problems in order to maintain the flow and status quo.

Dewey recognized a socio-historical continuum in the rhythm of situations, as did Lindblom (1959), in describing how policy processes rarely begin afresh, but are a continuation of ongoing policy activity.

Where pragmatism diverges from incrementalism, is in the view that the changes resulting in problematic situations, and the responses to these situations, need not be only conservative or incremental, but also could be forward thinking and revolutionary. Rather than settling for 'muddling through', rummaging through 'garbage cans' or being led by an 'invisible hand', pragmatism proposes that societies would benefit from adopting a more rational, forward-looking and purposefully coordinated approach of 'socially intelligent inquiry'.

Dewey saw problematic situations as developing as much from *thinking* differently about situations, or *forecasting* future scenarios, as from more immediate problems (Dewey, 1929/ 1999, p. LW.4.182). Thinking is not something that takes place outside of situational transactions, and is an integral part of both situations and agency. A pragmatist policy-maker thus would not seek only to remedy symptoms of failure after they occur,

but also would proactively and creatively think about avoiding future impasses and sustaining social coordination and development. Thinking about the ramifications of anthropogenic climate change for future generations, or about challenges to pension and social security systems as a result of changing population demographics, may be posed as tangibly as any problematic situation - as a potential threat to equilibrium that needs to be addressed through policy-making.

The pragmatist approach to identifying policy problems is thus more aligned with the *mixed scanning* model of decision-making than with incrementalism. Etzioni (1967) proposed 'mixed scanning' as a 'third approach' to decision-making, as an alternative to Simon's 'bounded' technical or instrumental rationality, and Lindblom's incrementalism. Etzioni (1967) saw mixed scanning as a process whereby there is broad vigilance with respect to potential policy solutions and in-depth analysis of the most compelling options. This mixed scanning process could be extended to problematic situations in a process analogous to weather forecasting, where there is broad vigilance with respect to future problematic situations as well as more detailed investigation of specific changes in weather or situations that require more immediate attention.

In describing forward-looking rationality, Dewey additionally recommended the use of 'imagination' and 'dramatic rehearsal'. The pragmatist approach to decision-making thus goes beyond the

identification of potential problems, to the development of new vision and purpose. Imagination can be defined as the ability “to see the actual in the light of the possible” (Alexander, 1993, p. 384).

J.B. Mays (1968) in *The Poetry of Sociology* urged social scientists to remember the role imagination played in major scientific ‘breakthroughs’ in the natural sciences. He also highlighted the value of poetry to help understand the human experience and the role of imagination in learning how to enhance this experience.

Through the imaginative faculty, the poet achieves a new synthesis of life ... The imagination which is par excellence the poet’s gift, is, moreover, the great instrument of the moral good, and so much poetry comes to comprehend all science ...

If the world is to be refashioned, I hope I will not be a traitor to my profession if I say that I would not like this delicate and tremendous task to be entrusted to scientists alone – neither to the natural nor to the social scientists. I would ask that the poets be invited to be present also at this recreating ceremony and given some voice in the ordering of things ... (Mays, 1968, pp. 4-5).

The role of the arts and poetry in policy processes, and the concepts of *deliberation* and moral imagination will be discussed in more detail in following chapters.

This section discusses many specifics, but was crafted to introduce an important normative point: while scientific methods can synthesise the

facts related to a problem, it is also important to synthesise both the interpretive and emotive aspects of indeterminate situations that motivate agency.

The unsettlement, going by the name of the conflict of science and religion, proves the existence of the division in the foundations upon which our culture rests, between ideas in the form of knowledge and ideas that are emotional and imaginative and that directly actuate conduct (Dewey, 1939/ 1989a, p. 128).

The emotive dimension of knowledge is an important, often missing, element in contemporary polemics on 'real science' (c.f. Loius Wolpert) versus 'science as social construction' (c.f. Bruno Latour and Steve Woolgar). *Socially intelligent inquiry* helps build a bridge between knowledge in the form of fact and information, and knowledge that is interpretive and imaginative, as both shape human experience and agency (as was discussed in the pragmatist pillar of *via media* in Chapter 3). Pragmatist rationality thus provides a 'fourth approach' to policy-making, going beyond bounded rationality, incrementalism and mixed scanning, and including the interpretive, empathetic and creative dimensions of human knowledge and agency.

Forming rational agency

Indeterminate, interrupted situations make it necessary to define and delimit the problem in order to systematically coordinate a resolution

through inquiry. Boundaries are framed by reflection and deliberation on the nature of the problematic situation as well as with respect to the actors involved. These considerations may change as the process of inquiry evolves. The formation of communities of inquiry, discussed in the pragmatist pillar of *socially intelligent inquiry*, is a primary act of rational agency and metaphorically constitutes the boundaries of the Decision Cell model.

Explanatory aspect: policy networks, participation and power

The idea of a boundary is key to the Decision Cell because a process of inquiry and policy change has to be distinguishable from more habitual interactions and events in policy environments. The boundaries of the Decision Cell develop in light of crystallising problem-definitions based on deliberations on who, and what, is considered relevant to understanding and resolving an indeterminate situation. The 'membrane' of the cell is therefore *both a product and a process* of defining the policy problem. Boundaries are shaped through ongoing inquiry and are permeable to changes in the external environment as well as to the participation of actors. This keeps the definition and scope of the Decision Cell flexible and responsive to changes in *situations*. This responsiveness is not seen in linear instrumental models where boundaries and problem-definitions are formed a priori and external to rational deliberation.

The pragmatist concept of the formation of rational agency and *communities of inquiry* is congruent with *policy network* and *advocacy coalition* theories (Heclo, 1978; Sabatier, 1988). In an analysis of British and Swedish welfare policies, Heclo (1978) concluded that policy change resulted not only from macro-factors in social, economic and political environments, but also from the interactions of experts within policy networks or communities.

Heclo (1978) referred to some policy networks that were fixed or impermeable to outside participation, as “iron triangles” – usually comprising politicians, bureaucrats and established interest groups. However, more wide-ranging, formal and informal networks or ‘subsystems’ were perhaps more common. Building on Heclo’s work, Sabatier (1988, p. 139) analysed the US “air pollutions control subsystem” as constituted by the following actors:

- The Environmental Protection Agency
- Relevant congressional committees
- Portions of peer agencies frequently involved in pollution control policy, such as the Department of Energy
- Polluting corporations, their trade associations, unions, and, occasionally consumer associations
- The manufacturers of pollution control equipment
- Environmental and public health groups
- State and local pollution control agencies

- Research institutes and consulting firms with a strong interest in air pollution
- Important journalists who frequently cover the issue
- On some issues such as acid rain, actors in other countries.

Given the wide range of potential policy actors, Sabatier (1988) found that it was useful to analyse policy change from the perspective of “advocacy coalitions”. Advocacy coalitions are groups that share “basic values, causal assumptions, and problem perceptions – and who show a non-trivial degree of coordinated activity over time”. Such coalitions can be seen as *epistemic communities*, or ‘invisible colleges’, with their own norms, paradigms and belief systems (Callon, 1993; Sabatier, 1988).

From a pragmatist perspective, *a priori* belief systems of advocacy coalitions cannot be taken as ‘given’ or ‘fixed’. With respect to indeterminate situations, beliefs and values may not be explicit and may change in the course of rational inquiry. In keeping with the idea of changing and flexible boundaries in the Decision Cell model, empirical analyses on decision-making indicate that actors, their interests and positions can, and do, change throughout the process (Brugha & Varvasovsky, 2000; Buse, Mays & Walt, 2005; Dugdale, 1999). Changes in networks and coalitions can influence both the substance and the process of policy-making. As Callon (1993, p. 413) observes, “change the composition of the collective, and you change the content of its

productions". Policy networks may comprise different epistemic communities, making the coordination and management of these networks a particular challenge in policy-making.

In addition to networks, in *Making health policy*, Buse, Mays and Walt (2005) note that partnerships are becoming increasingly influential. Partnerships tend to have a more formal organisational connotation than networks, in that partners usually work together in the context of a particular policy, project or programme and collaborate on the basis of agreed upon objectives and principles, such as mutual trust and benefit (Balloch & Taylor, 2002). As discussed earlier, UNICEF relies on partnerships with civil society organisations to communicate with, and deliver services to, children and their communities (Bernard & Kuruvilla, 2007). In the context of international health, public-private partnerships (PPPs) play a key role, for example, in programmes instituted to facilitate equitable access to anti-retroviral drugs. Advising the Prime Minister on the UK's role in Global Health Partnerships, Lord Crisp (2007, p. 92) highlights the role of NHS organisations, educational institutions and private organisations in development, and notes that,

In each case they see benefit in reputation, in terms of their 'Corporate Social Responsibility', in the motivation of their staff or, in some cases, the more direct benefits of influence and of commercial advantage.

Partnerships should build on the comparative advantages of diverse groups - the public sector, multi-national corporations, civil society organisations and academia. However, while there are shared commitments and purposes in partnerships, as with networks, there are also differences in belief and incentive systems across diverse partnership groups that need to be understood and coordinated in the context of health policy deliberations and the implementation of health programmes.

The exercise of power

Powerful policy networks and partnerships, and powerful actors within these, can control the interpretation of a policy problem and thus determine the manner in which it is conceived and acted on (Baumgartner & Jones, 1991; Sabatier, 1988). Political power operates not only by getting issues on policy agendas and shaping them, but also by keeping issues off policy agendas (Bachrach & Baratz, 1962; Crenson, 1971).

Crenson (1971) undertook a comparative study of policy-making in cities with similar levels of air pollution. He showed that the presence of a powerful 'polluter' in a city, such as US Steel in Gary Indiana, continually kept pollution off that city's policy agenda compared with other cities where similar levels of pollution were a key policy concern. While no one particularly wanted to breathe polluted air, the perceived power of the industry inhibited attempts to get the problem of pollution onto policy agendas. However, members from the industry were not necessarily

directly involved either in the informal deliberations or in formal policy processes that kept the issue of air pollution off policy agendas; with respect to policy, this was *non decision-making*. Factors such as employees' fear of sanctions and unemployment contributed to keeping the issue of pollution off formal policy agendas (Crenson, 1971).

While power in non-decision making may operate in a relatively implicit manner outside formal policy structures, there are also challenges posed by power differentials in more formal structures, such as partnerships (Balloch & Taylor, 2002):

- Partnerships tend to leave existing power relationships intact, taking place at the margins of larger participating agencies, and focusing on specific initiatives or objectives, rather than on related systems change.
- More powerful partners lay out the 'rules of the game', while others legitimise, rather than make, decisions.
- Smaller partners may not have the financial resources to engage effectively in partnerships (through they often have other types of resources); they often lack the fall back positions that bigger partners take for granted, if the partnership fails.
- Time spent on the mechanics of building partnerships takes smaller partners away from their constituencies and frontline work.
- There are power issues in the way funding relationships in partnerships place smaller groups in an inevitably dependent

position; one in which they may not feel like equals around the table.

Interestingly, traditional patterns of power in public partnerships may be changing. For example, a significant proportion of development aid is now being channelled through larger international NGOs, rather than only through UN agencies or directly to governments (Hulme & Edwards, 1997). World Vision, one of the largest international NGOs, now has a larger budget in some countries than UNICEF. Even small national CSOs are increasingly able to 'hook into' global and regional networks. CSOs are therefore able to "weigh the relative benefits" before deciding to work with larger INGOs versus UN agencies (Bernard & Kuruvilla, 2007).

To constructively manage power in partnerships, partnerships need to be built on an analysis of the comparative advantages and strengths of the partners, and this was one of the main recommendations in the UNICEF review (Bernard & Kuruvilla, 2007). UNICEF recognises that CSOs are increasingly influential in shaping public opinion and global public policy:

Civil society has grown stronger and more vibrant and has been a leading force in lobbying for change and in providing much needed services to the poor. On a regional level, new advocacy and partnership opportunities exist in relation to bodies like the African Union, the former Commonwealth ... These new or newly energized groups are focused on norm-setting and norm-adherence and so, through them, closer and more critical light can be thrown on issues affecting children and on the responses and actions of leaders. They also provide forums where

constructive criticism or peer approval and international approbation can be aired (UNICEF, 2005, p. 5).

In addition, on a more local level, the reach and relationships of CSOs with disadvantaged and vulnerable children and their communities is something that a large organisation, such as UNICEF, cannot match or replicate.

At the same time, CSOs recognize that UNICEF brings considerable value to partnerships, beyond money, including access to governments, a validated country and global presence, technical capacity and a convening power to bring diverse actors together that CSOs can rarely match. Thus, to a large extent, both UNICEF and CSOs recognise that it is by working together, based on their comparative advantages that they can better hope to achieve their mutual goals of protecting and promoting the rights of children.

Power in rational agency, thus does not need to have only negative connotations. There are several other factors that promote the influence of ideas and interests in policy-making including recognised comparative advantages, resources, reach and strategic collaborations (Buse, Mays & Walt, 2005; Howlett & Ramesh, 2003; Kingdon, 1995). Against this backdrop, Fischer (2003) proposes explicitly 'reframing public policy' to acknowledge the role of power in policy-making, with respect to both the 'positive' standards against which creative, and critical, political agency

can be evaluated, as proposed by Habermas (1987), as well as in terms of the socio-historical influences, norms and institutions that may inhibit or constrain agency, as emphasised by Foucault (1984). Additionally, with potential changes in knowledge and the composition of networks during policy-making, the method by which power is exercised may change over the process, and these changes too need to be recognised and coordinated (Brugha & Varvasovsky, 2000; Drager, 2000; Walt & Gilson, 1994).

In the Decision Cell model, the depiction of 'power' in the boundary of the cell acknowledges that it shapes the process, but carries no commitment to centralised or hierarchical forms of power. On the contrary, power as an element of the Decision Cell is more a reminder that all the individuals and groups involved in the different decision activities ('define', 'design', 'realise', and 'deliberate'), and in surrounding policy environments, can potentially shape inquiry and contribute to resolving problematic policy situations. This potentially egalitarian dimension of power in the Decision Cell model influences all the decision activities.

Normative aspect: public coordination and functional participation

The need for public coordination

In the preceding discussions on the formation of rational agency and the constructive use of power, the need for the coordination and management of policy-making was emphasised. Dewey saw government and public

organisations playing such a coordinating or facilitative role, but emphasised that democratic practice extended beyond governance mechanisms and institutions.

The idea of democracy is a wider and fuller idea than can be exemplified in the state even at its best. To be realized it must affect all modes of association, the family, the school, industry, religion. And even as far as political arrangements are concerned, governmental institutions are but a mechanism for securing to an idea channels of effective operation. (Dewey, 1954/ 1927, p. 143).

In this context, the Decision Cell broadens the scope of public policy inquiry beyond processes taking place in government institutions. For example, as will be further discussed vis-à-vis the decision activity 'Define', the role of the arts and media in defining public problems and capturing the public mood would be explicitly taken into account as well. To secure 'channels of effective operation' across diverse groups and pluralistic publics, there is a need for public institutions to play a strong coordinating role, especially in the areas of education and public health (Dewey, 1954/ 1927; Nussbaum & Sen, 1993).

Recent empirical analyses confirm that central coordination and support are required for effective decentralised health systems and public participation in the same. A survey across 45 local (*município*) health systems in Ceara, Brazil, where decentralisation is a core management tenet, indicated that good management practices led to good decentralised

local health systems rather than vice versa (Atkinson & Haran, 2004). Additionally, a regression analysis indicated that the association between decentralisation and performance seemed to be an artefact of factors relating to informal management practices and political culture. Similar findings resulted from an ethnographic study of participation in health services provision in Uganda (Golooba-Mutebi, 2005). The Uganda study also questioned the capacity and interest of groups, particularly CSOs, to participate in health services decision-making and concluded that,

To succeed in the long term, devolution and participation must take place in the context of a strong state, able to ensure consistent regulation, and a well informed public backed up by a participatory political culture (Golooba-Mutebi, 2005).

The need for public sector organisations to play a stronger coordinating role in socio-political decision-making is increasingly recognised and endorsed (as discussed in relation to managing externalities in health care, for example). In the UNICEF review as well, CSOs stressed that they would welcome, and strongly endorse, UNICEF taking up a leadership and coordinating role in global, regional and national partnerships to promote and protect children's rights (Bernard & Kuruvilla, 2007). This type of coordination was seen to be key, not only to enhancing the partnership relationship, but also to focusing partnership action and improving results. Instead, there was a perception that UNICEF was often competing with larger CSO/INGO partners, and that there was

duplication of work, including with the work of smaller CSO partners. As one CSO respondent noted,

Instead of being the coach and coordinating the game, UNICEF keeps getting onto the field, trying to be the fastest player ... acting like an NGO ... and it often drops the ball.

One key task for public policy institutions with respect to coordination is the management of policy networks and partnerships.

Designing and managing networks and partnerships

In the LSHTM study, researchers across the case studies identified that their involvement in research and policy networks and partnerships was a key factor influencing the impact of their work (Kuruville, Mays & Walt, 2007). These networks included other academic institutions, but also civil society organisations, government departments and the private sector.

Researchers thought that there needed to be greater awareness and attention paid, at management and policy levels, to the importance of, investment needed and skills required for effective network management.

The role and importance of partnerships in health policy-making, including public private partnerships, has also been highlighted in previous sections. One product of the UNICEF civil society review was a typology of public sector-civil society partnerships (See Figure 7) that aimed to:

- i. Illustrate a range of potential partnership arrangements or modes,
- ii. Highlight the implications for UNICEF management associated with different partnership modes.

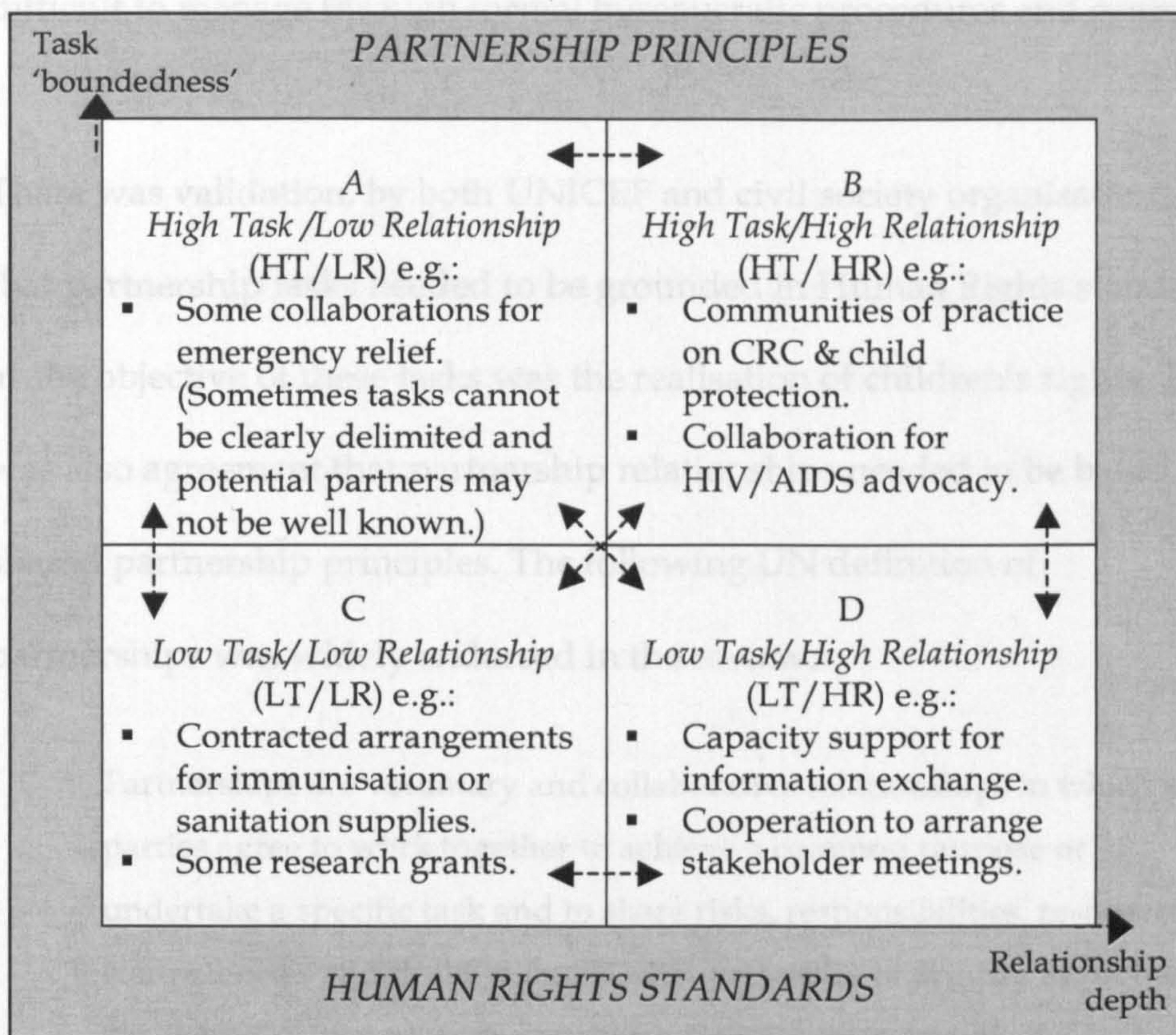
Figure 7. Modes of partnership

| | | | | |
|---------------------------------------------|----------------------------------|----------------------------------|-------------------------------|--------------------------------------------|
| Capacity- building/ grants & training | Contracted / Fee for services | Cooperation/ Resource-sharing | Collaboration/ Synergistic | Community of practice/ Co- evolution |
|---------------------------------------------|----------------------------------|----------------------------------|-------------------------------|--------------------------------------------|

Partnerships may operate (in respect to the different partnership modes) concurrently, sequentially or in iteration at different stages in a project in order to carry out different policy and programme tasks. This typology, therefore, does not put forward a fixed partnership hierarchy or progression, per se. This partnership spectrum illustrates a range of partnership modes that can be strategically employed depending upon the specifics of a policy situation.

Two key challenges for policy coordination, with respect to both networks and partnerships, is the *empirical problem* of identifying and characterising these arrangements with respect to different policy situations, and the *management problem* of keeping this picture up to date and responsive to changing needs. For UNICEF, this means achieving the right balance between building a partnership relationship and managing a partnership task. Figure 8 sets out a 'grid' to help locate partnerships along these two axes.

Figure 8. Partnership location grid



(Adapted from Bernard & Kuruville, 2007)

The data of the UNICEF Review, suggest that most partnership arrangements move across quadrants as needs, resources and relationships change. Most CSOs prefer that their partnerships with UNICEF be in the two "high relationship" quadrants (B and D). This would allow them a more sustained, and administratively stable, focus on the long-term task of promoting children's rights and societal development, compared with that afforded by short-term contracts or limited collaborations in emergency situations. The partnership mode of

community of practice or co-evolution is most closely aligned with Dewey's idea of communities of inquiry, but is also perhaps the most difficult to manage through formal bureaucratic procedures and contracts.

There was validation, by both UNICEF and civil society organisations, that partnership tasks needed to be grounded in Human Rights standards, as the objective of these tasks was the realisation of children's rights. There was also agreement that partnership relationships needed to be based on shared partnership principles. The following UN definition of partnerships was widely endorsed in the review.

Partnerships are voluntary and collaborative relationships in which all parties agree to work together to achieve a common purpose or undertake a specific task and to share risks, responsibilities, resources, competencies and benefits. In priority, principles of priority to partners are shared values, clear expectations, defined roles, specified contributions, joint decision-making, and mutual monitoring, evaluation and opportunities to learn.

Also confirmed, in the UNICEF review (Bernard & Kuruvilla, 2007), as integral to partnership are three mutually contingent 'partnership principles':

- *Core principles*, especially shared values, trust, transparency and risk-taking;
- *Operational principles*, especially mutual accountability, attribution of credit and joint monitoring and

- *Management principles*, especially consistency, commitment to standards and constancy of involvement.

There are similar considerations with respect to the management and coordination of networks. In order to identify principles for the effective management of networks, Perri 6 et al. (2006) analysed networks across a range of sectors – defence, biotechnology, crime, health and social care.

They identify three types of network management configurations:

- **Enclave networks** which operate through cohesive forces connecting members by shared values, trust and commitment to certain goals. There is usually no central authority or institutionalisation. These networks have great value for mobilising support and creating ‘bottom-up’ legitimacy, but can be unstable owing to lack of resources and institutional support.
- **Hierarchical networks** which have organisational structure and are coordinated by steering groups or other authoritative bodies. These networks can be efficient at coordinating and implementing predefined tasks, but may fail from over-regulation and bureaucratisation and the lack of a mandate to manage their members.
- **Individualistic networks** are driven by single individuals or organisations that develop affiliations in relation to a particular

task, e.g. through procurement of services. Such networks can provide innovative and flexible means of working, but can result in conflict and competition, as there is no long-standing relationship to facilitate shared understandings and approaches.

This multi-sectoral analysis concludes that rather than privileging any one type of network over another, organising and managing diverse networks is the most effective strategy for complex health policy and programme challenges (6, Goodwin, Peck & Freeman, 2006).

Functional participation

Dewey (1954/ 1927) emphasised that pluralism was both a reality and a rich resource on which societies could draw to resolve problematic situations. There are many ways in which people define themselves and the publics they form. Dewey strongly recommended, therefore, that with respect to coordinating socially intelligent inquiry to resolve indeterminate situations, publics be identified on a functional basis, rather than by a priori categorisations (Dewey, 1954/ 1927).

The need for functional, rather than pre-defined, participation to resolve indeterminate policy situations extends to the perceived confines of geo-political boundaries. Indeterminate public policy situations are rarely confined within geo-political boundaries; therefore, it does not make sense that mechanisms to deal with these problems are thus delimited. For

example, in the UNICEF study, it was identified that recruitment of children to fighting forces took place across national borders in Liberia, Guinea and Sierra Leone. UNICEF country offices, however, maintained a primarily national focus, with a mandate to work alongside national governments. This made it difficult to generate a meaningful regional or community-based response to this problem and was identified by CSOs as one of the main reasons why UNICEF was failing to deal effectively with child protection issues (Bernard & Kuruvilla, 2007)..

However, CSOs with more flexible structures and protocols were able to set up collaborations across country borders; for instance, WANEP (the West African Network for Peace Building) trained local communities in different countries to develop early warning systems of potential conflicts and to prevent child recruitment into armed forces. As a preventive measure, mediation and conflict resolution skills were taught both in the community and in schools. However, given the limited resources of these CSOs, the institutional integration of these types of activities in national policies and programmes is limited.

Three analytical perspectives that can help public institutions to facilitate more functional participation in policy-making are:

- Stakeholder analyses
- Matching participation requirements and methods
- Considering legitimacy

Stakeholder analyses and fairness of participation

A stakeholder group can be defined as a group of people or institutions that are affected by a specific problem, have a common interest in a particular issue, or could influence a proposed policy in a similar way (Brugha & Varvasovsky, 2000; Drager, 2000; Reich, 1996). Stakeholders can be categorised on at least three levels, according to:

- Affiliations with policy and civil society institutions,
- Potential roles in relation to the issue being considered, e.g. as researchers, policy analysts, public officials, politicians, communicators and media, implementers, potential beneficiaries, and those potentially at risk, and
- Specific positions taken in relation to a policy topics, e.g. in advocating or opposing particular policy options.

Stakeholder analyses, however, are not simple tasks in the context of policy-making. There are concerns about the increasingly diffuse lines separating states, donors, civil society organizations, the business sector and a range of other sub-national, national and global actors; for example as a result of their collaboration in networks and partnerships (Howell & Pearce, 2001; Hulme & Edwards, 1997). Further, given the fluid nature of policy processes and the varying degrees to which stakeholder interests and roles are explicit, or may change, during the process, stakeholder roles and interests need to be carefully and periodically assessed and managed

throughout the policy-making processes.

In setting out criteria for 'good decisions', Dietz (2003) proposes that criteria of fairness and proportionality also guide participation considerations. Referring to 'proportionality' as an ancient philosophical tradition, that was further developed in work by Dewey and Habermas, Dietz (2003, p. 35) suggests that participants be selected based on the extent to which actors stand to gain or lose from related decisions. Further, while all arguments should have a fair chance of being heard, he recommends that arguments be weighted in proportion to their 'logic', 'sincerity' and 'persuasiveness'. These criteria pose further empirical and management challenges for stakeholder analysis and management, and would best be addressed through an overall process of inquiry and deliberation, with respect to particular indeterminate situations.

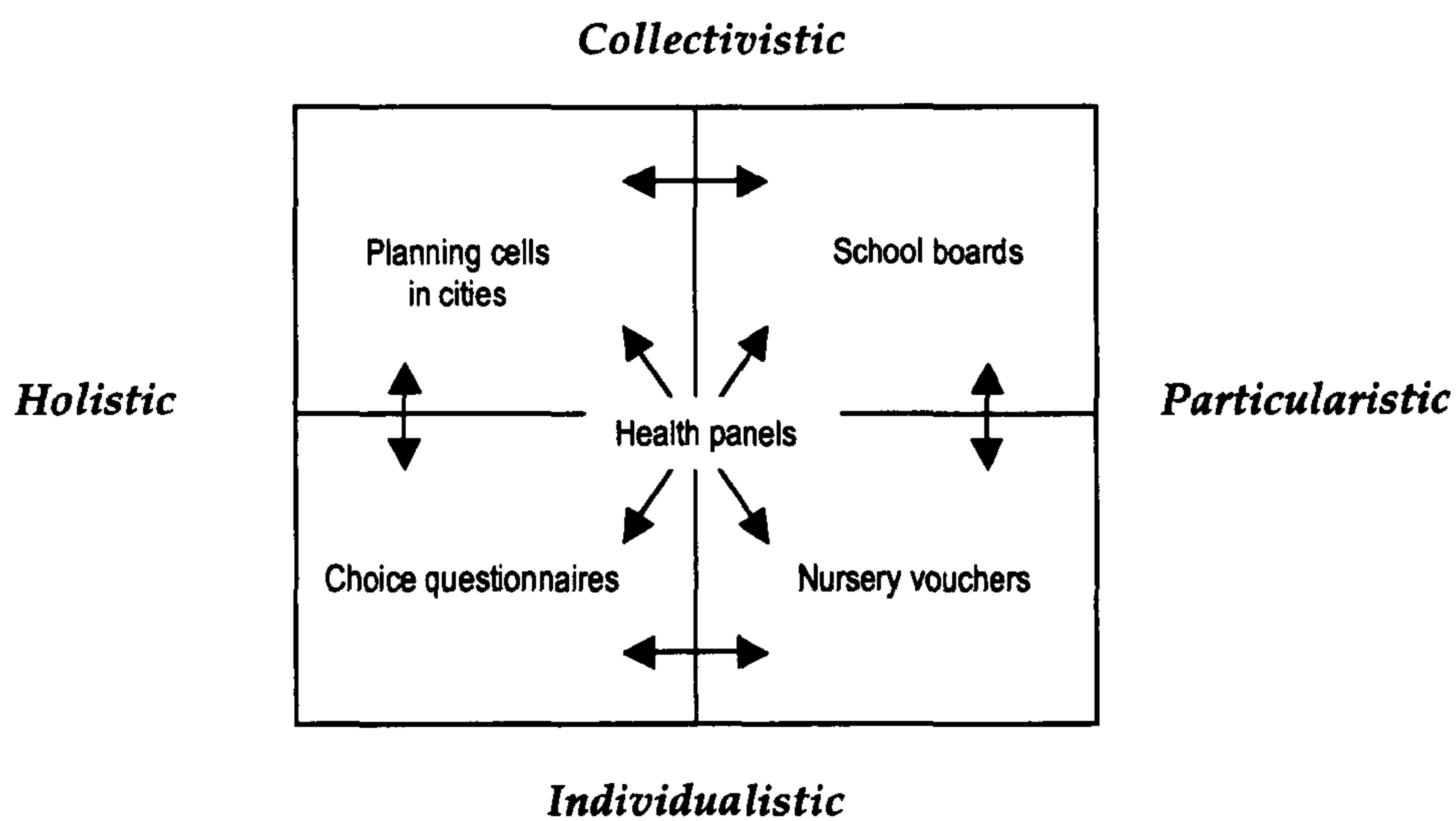
Matching participation methods with requirements

In discussing participation in policy-making, there seems to be an implicit expectation that the ultimate goal is to have everyone participating all the time, whereas this can be impracticable, inefficient and ineffective, and thus irrational (Cooke & Kothari, 2001; Khan, 1999). Even in Switzerland, where there are national referenda on almost every topic, from genetics research to the colour of post-boxes, different modes of civil society participation are being explored to enable more effective, efficient and strategic methods of participation that are appropriate to different policy

topics and contexts (Butschi, Joss & Baeriswyl, 2002).

One tool that can help policy-makers think through these issues is the *public involvement matrix* (See Figure 9); this was developed and tested with a set of European case studies on state-citizen political dialogue on health, education and city planning policies (Khan, 1999). This matrix helps match different participation methods to different policy and participation requirements.

Figure 9. The public involvement matrix



(Khan, 1999)

The public involvement matrix is structured along two axes. The first axis extends, vertically, from **collectivistic** to **individualistic**; collectivistic referring to whether everyone who may be affected by the policy participates, while individualistic refers to whether individuals can choose

to participate based on their interest in relation to specific topics or their requirements for different types of services. The second, horizontal, axis takes into account whether the mechanisms require people to think in **holistic** terms about the larger common good, or in terms of **particularistic** needs and interests related to a specific group, for example parents of school-age children. In their analyses, Khan et al (1999) show that, although participation mechanisms may be initiated in one of the cells, they can 'move' laterally or vertically along the two axes depending on the topic, the type of policy process involved and related consequences (similar changes were noted with respect to partnership modes in the *Partnership Location Grid*, Figure 8).

Considering legitimacy

A further issue in considering whether the 'right' people are involved in policy-making is legitimacy. Public institutions need to evaluate legitimacy of participation in order to ensure the legitimacy of the policy process itself. In 1947, Weber explicated three types of legitimacy: rational, traditional and charismatic. Brown (2001), in an analysis focused on CSO interactions, and describes four bases for CSO legitimacy in policy interaction: moral, technical, political and legal. Synthesising these approaches, legitimacy for participation in policy-making could potentially be established on the following bases (Kuruvilla, 2005):

- **Rational-legal**, based on legal or formalised requirements for participation

- **Traditional**, in terms of customary or historical roles and positions held, for example by religious leaders
- **Charismatic**, through compelling leadership and communication styles
- **Moral**, by making explicit value statements or aligning with specific ethical positions
- **Technical**, in terms of specialised functions performed that are required in the given context
- **Political**, through persuasive political argument and action
- **Representative** would be an additional type of legitimacy where participants explicitly represent the interests of specific societal groups and are recognised by these groups to do so.
- **Resource-based**, where participation is based on having the resources required to influence a problematic situation. As seen in the UNICEF study, this is one of the main sources of legitimacy for international NGO involvement in policy-making processes in developing economies. This is also the basis on which much corporate policy lobbying in more economically developed countries operates.

While this categorisation provides some insight into possible approaches for ascertaining legitimacy, it is not always clear to whom and how different types of legitimacy can be 'proved' or what level of evidence or agreement is required (Pollard & Court, 2005). Further, different

legitimacy criteria may apply to different situations. This again is a consideration that needs to be deliberated on with respect to specific situations. What is considered to be legitimate participation in one situation may not be considered legitimate in another context. For example, while public-private partnerships to facilitate more equitable access to drugs may be seen to be legitimate, partnerships with the tobacco industry in research and policy-making related to smoking and public health, may not.

There are also associated accountability implications that need to be established. For example, Chief Executive Officers (CEOs) of International NGOs, interviewed in the UNICEF project (personal communication), indicated that they were primarily accountable to their donors in industrialised countries. Their business models did not include being accountable to the governments, children and communities with whom they worked in developing countries. However, this was something these CEOs identified as an important area that needed to be developed, preferably coordinated by a public agency, such as UNICEF, that would have the networks and resources in place to institute such accountability mechanisms.

The centrality of communities and capacities

The pragmatist approach to rational policy-making, and to democratic practice overall, is founded on the concept of community (Dewey, 1954/

1927; Ryan, 1995; Shields, 2003). In the Decision Cell model, community has been discussed as related to communities of inquiry, which also serve as 'reference communities' for moral deliberation. Building on the discussions so far, such communities could be built up and coordinated through policy networks, partnerships and intermediate organisations.

In this context, one important strategy for public policy institutions in coordinating rational agency, is to build on existing community structures. This approach saves the costs required to set up new structures and also adds value, in supporting the development of local solutions and enhances policy and programme sustainability. A Ford Foundation study of civil society and democratisation in 22 countries identified the failure of donors to build on existing structures and processes in trying to strengthen civil society (Van Rooy 1998 cited in Howell & Pearce, 2001). This was a finding confirmed in the UNICEF review (Bernard & Kuruvilla, 2007).

When we identified youth groups who were already doing HIV/AIDS prevention activities, we were able to really make a difference to their projects by supporting them with a small amount of money. These groups still carried on after our funding was over. When we spent a lot of money to set up new youth groups these were not as successful and many of them stopped when the funding was over (UNICEF Country Office staff).

In Chapter 3, the possibility of intermediate organisations serving as communities of inquiry, and as reference communities for moral

deliberation, was discussed. Intermediate organisations can include professional institutes, religious organisations, ethnic associations and trade unions (Mays, 2000). The success of such intermediate organisations in health care was illustrated in the historical development of HMOs in the US; workers unions and cooperatives provided more responsive and cost-effective health care than did health care services with no such community affiliations (Oliver, 2004; Anthony Robbins, personal communication).

Individual capabilities – health literacy

To build strong communities of inquiry, both individual and social capacities need to be developed. A substantive focus in John Dewey's work was on building education systems that supported democratic practice and rational agency. His project was an integrative one, looking at the role of education alongside that of scientific progress, moral development and the production of goods as well as of history, culture and artistic enterprise and democratic practice. In an increasingly specialised world, these considerations are increasingly separated. For example, John Dewey's work on education and school systems is now both lauded and criticised, with little appreciation of the larger context of in which he situated discussions on education (Ryan, 1995). For Dewey, education, in a comprehensive sense, was integral to both scientific and democratic development and to realising potential in individuals and societies.

Aligned with this thinking, the Indian constitution states that it is the fundamental duty of citizens to “to develop the scientific temper, humanism and the spirit of inquiry and reform” (Government of India, 1950/ 2006). Similarly, the Bill and Melinda Gates Foundation recognises a crisis in the American education system and, based on the analysis of experts on education, recommends a more integrative and socially-oriented approach to building literacy, with the “New 3 Rs”: Rigor, Relevance, Relationships (Gates Foundation, 2006).

There is growing evidence of the impact of literacy specifically on health decision-making and health outcomes (Nutbeam, 1998; Zarcadoolas, Pleasant & Greer, 2005). Developing health literacy is seen to be a critical component for achieving the ‘fully engaged’ scenario for future health set out in the Wanless review of long-term sustainability of health spending in the UK (Wanless, 2004).

In perhaps the first randomised control trials to study the effects of participation and health literacy on health outcomes, Manandhar et al. (2004) established that neonatal and maternal mortality in a poor rural population in Nepal significantly decreased through a low cost, community-based participatory intervention. This study facilitated women’s group meetings every month to identify perinatal problems and to find ways to address them in an “action-learning cycle” (Manandhar,

Osrin, Shrestha, Mesko et al., 2004). What is important here, from the perspective of developing a model for rational decision-making, is that learning, in the Nepal study, occurred in relation to a particular problematic situation and was used to resolve it.

Taking this functional view, 'health literacy' is defined as the skills and competencies that people develop and use to seek out, comprehend, evaluate and use health information and concepts to make informed decisions, reduce health risks and increase quality of life (Zarcadoolas, Pleasant & Greer, 2005). Health literacy can be considered as having the following dimensions (Nutbeam, 1998; Zarcadoolas, Pleasant & Greer, 2005):

- **Fundamental literacy:** reading, speaking and numeracy skills, and competence in comprehending print as well as spoken language.
- **Science and technology literacy:** knowledge of science and technology and an understanding of scientific uncertainty and change.
- **Civic literacy:** knowledge of sources of civic and policy information and how to interpret them. This includes media literacy skills and knowledge of civic and governmental processes.
- **Cultural literacy:** recognising, evaluating and using socio-cultural knowledge, norms, worldviews and artistic expressions in order to understand, communicate and act on health information as appropriate to a given cultural context.

- **Communicative literacy:** cognitive and literacy skills which, with social skills, enhance participation in everyday activities and allow knowledge to be applied to new situations.
- **Critical literacy:** skills that allow for a critical examination and application of institutions and information.

Commenting on US schooling in the early 20th century, Dewey was of the view that schools tend to propagate “a systematic, almost deliberate, avoidance of the spirit of criticism in dealing with history, politics and economics ... the history and institutions of one’s nation are idealised.” (Dewey, 1922/ 1999, p. MW.13.333). Now, however, there are many sources of information in society beyond education systems. For example in the UK, critiques of the health system in the mass media seem ubiquitous and it is unlikely that students graduate with an unsullied idealism about the NHS, and neither should they. However, in this case, *critical literacy* skills need to be developed in order to evaluate different sources of information and the merit of different arguments.

Two more dimensions of health literacy could be usefully added. While these may be covered in the previous health literacy categories, they are worth emphasising in the context of pragmatist inquiry:

- **Ethics literacy:** refers to knowledge of ethical and moral reasoning for health decision-making. Public and patient participation is

increasingly sought in ethics review panels or priority setting exercises and patients and their families also have to make complex ethical decisions about health care (Crawford, Rutter, Manley, Weaver et al., 2002; Leshner, 2003; McIver & Ham, 2000). Ethics literacy is therefore a key requirement for health care decision-making.

- **Relational (ecological and emotional) literacy:** Pragmatist philosophy views human beings and their interactions as part of nature and emphasises the interdependence of relationships in nature. Thus, how natural resources are used, the extent to which this use is sustainable and the interrelationship between the environment and human experience are key considerations. Research and policy debates on human activities associated with climate change are an obvious example where such a relational, or ecological, literacy will play a role.

The concept of interdependent relationships also extends to human relationships. The importance of relationships was earlier stressed in the Gates Foundation's approach to promoting the new 3Rs in education. *Collective intelligence, emotional intelligence* and *social intelligence* are all topics receiving increasing attention for their role in facilitating better interactions including in 'communities of practice', for example in organisations (Damasio, 2006; Goleman, 1995; Isaacs, 1999). Socially intelligent and interlinked communities

are a foundation for the pragmatist approach to rational agency.

Dewey (1939/ 1989a), however, cautioned against efforts to improve literacy, without application to concrete situations and reference communities within which there can be ongoing learning.

Schooling in literacy is no substitute for the dispositions which were formerly provided by direct experiences of an educative quality. The void created by lack of relevant personal experiences combines with the confusions produced by impact of multitudes of unrelated incidents to create attitudes which are responsive to organised propaganda (p. 41-42).

One effect of literacy under existing conditions has been to create in a large number of persons an appetite for the momentary "thrills" caused by impacts that stimulate nerve endings but whose connections with cerebral functions are broken (p. 40).

There is hope that an integrated scientific, democratic, moral and practical literacy can be developed, based on the perspective of a younger generation – as expressed in a winning essay in the Independent/Bosch Technology Horizons Award 2006 (reproduced in Figure 10). However, there is also a marked disillusionment in this essay with current policy processes, and policy-makers, which needs to be addressed if public policy is to be seen as relevant, responsive and reliable.

Figure 10. The Independent/ Bosch Technology Horizons Award

2006 Winning essay for 14-18 year olds, Sophie Walker

In so many ways our own Brave New World is poised on the edge of an abyss. The Daily Shriek trumpets climate change, the miseries of AIDS and TB, globalisation, bio-warfare, twin-tower terrorism, the yellow peril of China, population explosion and - much worse - the end of cheap four-star. Surely, all is lost.

I can't help smiling. In my mind's eye I see Isambard Kingdom Brunel in his big hat. He's not standing on the edge of that abyss, but hanging by his toenails to get a better look into it. In his hand, his trusty notebook. In his mind, the engineering solutions: tension or compression, iron or steel. The biggest hole in history is the best reason to build the biggest bridge, the longest span, the cheapest drug, and the cleanest fuel. Yes, it's the best reason to build a brighter future.

And look at the tools that are coming on stream. What would IKB have made with energy from fusion, nano-technology, TCP/IP, petaflops, the double-edged light sabre of genetic engineering, and - nearly forgot - sudoku on the mobile phone.

Well, we are going to find out because the world is now stuffed full of IKBs. A century of emancipation and education - only in the developed world, sadly, so far - has seen to that. The opportunities are truly endless but the bridge over the abyss has to be planned, paid for and built. "We the people" get the bill and the building.

So who project manages the Great Work? Who is the mastermind who can plan the route ahead? Who decides whether your DNA is defective and must be terminated? Who decides who earns and who learns? Who controls the purse strings? George Bush and Tony Blair? Mega Conglomerate and Media Mogul? Now, that is scary. Tell me it's not so. Tell me there's a better way.

Our political and economic world is simply not up to the job. Cringe at their first attempts at the 21st century: compulsory ID cards, epsilon-minus eugenics, crocodile concern for Africa's poor black oilfields, the hundred years' war on terror, no clean water for the world, no control over energy abuse. No hope.

"If there's hope," another George - Orwell - once wisely wrote, "it lies with the proles." If we the people don't realise that we must take control of our own destiny, then all is indeed lost. We need new forms of government. Representative party democracy is a sick joke. Place your plant-dye cross on a scrap of tree bark and get back to the factory for another five years. You've just signed away all your rights to influence the important decisions.

Compare that sterility with the vibrant political discussions on the internet. It is now possible for the people to make those decisions for themselves. True democracy is but a mouse click or SMS away.

The future is indeed technologically challenged. But there is hope. The small man in the big hat is still here. And this time we are Legion.

Societal capacities

In promoting health literacy, it may seem easier to focus on providing

individuals with information about specific topics, say scientific knowledge about malaria control or controlling obesity. The fabric of society, however, is woven from many strands of knowledge – scientific, cultural, religious, ethical, artistic, political and economic. These strands are inextricably linked and can make a difference to how different issues are viewed in different contexts. For example, despite similar levels of scientific and economic development, Americans are generally more accepting of genetically modified foods than the British, while the converse seems true for therapeutic cloning, indicating that there may be differences in which factors influence health-related decisions in different contexts (Gaskell, Bauer, Durant & Allum, 1999).

As different factors in society influence decisions related to health and policy, a more linked-up approach to the sharing and applying of different types of knowledge in society seems required. Three aspects of developing societal capacities to support rational policy-making, are discussed in the following sections.

- Social capital
- Systems and institutional linkages
- Culture and art.

Social capital

The social capital literature provides a rich resource on building social capacities that support and are linked with, but not equal to, individual

capacities. For example, researchers have found associations between social capital and health outcomes (Campbell, Wood & Kelly, 1999; Kawachi, 2001). Social capital is measured through a variety of social research techniques, where the context of the assessment is an important consideration; however, many authors seem to agree on the importance of the following as measures of social capital (Campbell, Wood & Kelly, 1999; Kawachi, 2001):

- *Degree of social engagement and cohesion* (through social interaction, mobilisation and connections as well as the development of shared knowledge and concepts)
- *Level of self-efficacy and collective self efficacy* (the ability and resources for problem solving at individual and societal levels)
- *Degree of trust* (in other individuals and groups in society). For example, in a series of surveys in the UK on who people generally trusted to tell them the truth, doctors and teachers were listed first, scientists and the 'ordinary man/ woman in the street' were near the middle and politicians and journalists were at the bottom of the list (Worcester, 2003). Similar surveys have been carried out in other countries (Dierkes & von Grote, 2000), with trust identified as a key factor influencing deliberations on science, civil society and public policy.

Systems and institutional linkages

Another aspect of building societal capacity is at the systems level. Pang et

al (2003, p. 816), build on the concept of a 'system' as a group of elements operating together to achieve a common goal to define a Health Research System as:

The people, institutions, and activities whose primary purpose in relation to research is to generate high-quality knowledge that can be used to promote, restore, and/or maintain the health status of populations; it should include the mechanisms adopted to encourage the utilization of research. The definition includes all actors involved in knowledge generation, research synthesis, and using research results in the public and private sectors.

This type of systems approach provides a platform to support and coordinate otherwise potentially isolated and disparate actors and activities, towards coordination on shared purposes and towards more integrative learning.

The role of public institutions in promoting public interests and efficiencies of habit for functional coordination was discussed earlier. A key challenge is for institutions and systems to be responsive and ensure that habits change when what is in the public's interest changes, as knowledge develops and with respect to specific policy needs.

As discussed in Chapter 3, in their analysis of the Rothschild reforms, as they affected research in the UK health department, Kogan and Henkel (1983; Kogan, Henkel & Hanney, 2006) recommended that mechanisms at the 'interfaces' between research and policy systems needed to be further

developed in order to enable scientists and policymakers to work effectively in collaboration. Empirical evidence gathered since Kogan and Henkel's study supports their recommendations (Hanney, Gonzalez-Block, Buxton & Kogan, 2003; Lomas, 2000).

In a review article on policy and research system linkages, Hanney et al. (2003) discuss the role of interfaces and knowledge brokers at different phases of the research to policy 'cycle': research priority setting, research commissioning and resource allocation, research review processes, conduct of research, research syntheses and technology assessments, and research communication. The Canadian Health Services Research Foundation specifically focuses on building 'linkage and exchange' between researchers and policy-makers at different phases in order to enhance the utilisation and impact of research on policy as well as to evaluate this impact (Lomas, 2000).

Since the Rothschild reforms, successive phases of NHS R&D reform have focussed on instituting wider linkages; including with the government, health services, research systems, patients and the general public (Black, 1997; Buckland & Gorin, 2001; Oliver, Clarke-Jones, Rees, Milne et al., 2004; Peckham, 1999). Efforts to address the problems of under-utilisation of research within the UK National Health Service also included pioneering research into methods to implement research. There was evidence of the uptake of effective practices, particularly in maternity

units (Haines & Donald, 1998; Wilson, Thornton, Hewison, Lilford et al., 2002). However, linkage mechanisms with patients and the general public have been more difficult to implement and the effects more difficult to ascertain (Buckland & Gorin, 2001; Oliver, Clarke-Jones, Rees, Milne et al., 2004).

In the LSHTM study on describing the impact of health services and policy research, researchers noted how research and policy networks were a key factor influencing the commissioning, conduct and impact of their work. Researchers also emphasised that, "*As knowledge users include policy-makers as well as the range of civil society organisations, it is important to develop networks both within and outside the formal bureaucracy*" (Kuruvilla, Mays & Walt, 2007). However, linkage mechanisms, even within the same institution are seen to be lacking. For example, LSHTM researchers noted that there should be a more direct mechanism between the research and education programmes to ensure that curricula reflect advances in scientific knowledge and draw on related research resources at the School.

The importance of institutional linkage and 'interface' mechanisms is highlighted in international analyses of Health Technology Assessments (HTAs), showing that the evidence will not necessarily be used in policy-making unless a receptor body for HTAs is properly established (Hanney, Gonzalez-Block, Buxton & Kogan, 2003). In the UK, receptor bodies, such as the National Institute for Health and Clinical Excellence (NICE) and the

National Screening Committee, provide strong demand for HTAs and also give authority to some HTAs, thus enhancing their use (Kogan, Henkel & Hanney, 2006).

For example, in the LSHTM study on policy impact (Kuruvilla, Mays & Walt, 2007), the national tonsillectomy audit found that 'hot' surgical techniques for tonsillectomy (diathermy or coblation) had around a three times higher risk of complications than cold steel tonsillectomy. These findings led to NICE issuing guidance while the audit was still ongoing (The Royal College of Surgeons, The British Association of Otorhinolaryngologists – Head and Neck Surgeons Comparative Audit Group & The Clinical Effectiveness Unit – The Royal College of Surgeons of England, 2005), which may not have happened had there not been a 'receptor body' for such information.

One concern is that with respect to research topics external to clinical medicine, such as health policy research or research on health systems reform, similar receptor bodies may not exist. Thus, health policy studies, such as Kogan and Henkel's (2006) analysis of R&D systems reform, may not inform ongoing policy-making as efficiently as could have been done had there been stronger institutional mechanisms, or receptor bodies, to review, coordinate and promote health policy research.

Linkages are also required between sectors. In the UNICEF civil society partnership study, CSO partners expressed concern about UNICEF's vertical programming policies that were structured around specific topics, such as education or nutrition. CSOs' approach to working with children was, and had to be, more holistic and they requested that information and training be provided with this in mind. As one CSO interviewee remarked, "We cannot tell children we will work on your nutrition on Monday, but we will come back another time to look at your education" (personal communication).

For the health policy system, mapping contemporaneous health policy issues and identifying the available institutional and intersectoral interfaces (including brokerage and receptor bodies) would be important to ascertain to what extent there is institutional support for linked-up policy-making.

Culture and art

Another way societal intelligence can be built is through culture and art (Dewey, 1954/ 1927; Kuruvilla, Mays, Pleasant & Walt, 2006). Culture refers to patterns of human learning and activity that lead to shared communication, artefacts and characteristics in societies; including language, patterns of behaviour, beliefs, identity, customs, traditions and other modes of expression (Boas, 1920). These learned characteristics enable group members to hold and communicate shared meanings. For

example, the boundaries between what is considered traditional medicinal practice and research-based evidence are continually renegotiated as is the concept what constitutes health and ill health (Durie, 2004; Foucault, 1973/ 1963).

Arts and entertainment is a particular area where there is interest in disseminating health information (Kirby, 2003). Some scientists serve as advisors on movies and TV shows. Scientific journals are also increasingly interested in arts and entertainment; for example, the *Journal of Public Health Policy* (2006) reviewed the film *The Constant Gardener*. The film was based on John le Carre's book of the same title, in which the author mentions consulting Peter Godfrey-Faussett, a senior researcher at LSHTM, among others, in doing background research for the book. This review concludes with an observation of the potential impact of such work noting that,

This one production will be seen by millions of people around the world [and] will have done more to present the pharmaceutical industry's obstacles to improving health in developing countries ...than all health and science journals can in a year (Robbins, 2006).

The influence of science on art, and of art on science as well as on health and wellbeing, certainly bears further research (Hamilton & Petticrew, 2003). However, the interpretation and communication of science through art is increasingly considered an important means of science communication. This is true not only in the mass media and movies, but

also in museum collections on art and health, as well as in art collections and programmes of major health research funders, such as the Wellcome Trust (2006).

Access to information and the need for methods of inquiry and deliberation

Dewey's criteria for assessing social intelligence were the level of pluralism in a society's intellectual resources, as well as the extent to which these resources were freely available and could be used in inquiry to resolve problematic situations. In addition to the linkages and resources discussed in preceding sections, one mechanism that seems particularly well suited to enable such linkages is the Internet, providing people have access to the technology and have the skills to use it. There is no doubt that a plethora of pluralistic perspectives is now available online and through multiple media sources, including 24/7 news from around the world. What is less clear is how useful this information is with respect to resolving problematic situations for individuals and societies. Writing before the Internet was developed, Dewey (1954/ 1927, pp. 162-163) cautioned,

There has been an enormous increase in the amount of knowledge, but ... the development of a critical sense and methods of discriminating judgement has not kept pace with the growth of careless reports and of motives for positive misrepresentation.

This problem seems even more pronounced today. Part of the solution, as discussed earlier, is literacy and education; through this, people will develop the skills of inquiry and deliberation needed to facilitate rational decision-making. There is also the need for reference communities to facilitate functional participation in decision-making and support meaningful inquiry and deliberation with respect to concrete problematic situations. In Chapters 5 and 6, these factors of rationality - inquiry and deliberation - will be discussed in relation to the Decision Cell model.

Chapter 5. The Decision Cell Model (II): the decision activities of *Define, Design and Realise*

CHAPTER OUTLINE

The decision activities of Define, Design and Realise.....240

Define.....241

 Explanatory aspect: uncertainty, systemic agendas & pluralism 242

 Normative aspect: genealogy, synthesis & shared understanding... 251

Design260

 Explanatory aspect: technical formulations, constraints & consequences 260

 Normative aspect: beyond panaceas to pluralism and experimentation 268

Realise276

 Explanatory aspect: changes through implementation & learning .. 276

 Normative aspect: reasoned transactions versus 'phantom publics' 280

The decision activities of Define, Design and Realise

The essential need, in other words, is the improvement of the methods and conditions of debate, discussion and persuasion. That is the problem of the public. We have asserted that this improvement depends essentially upon freeing and perfecting the processes of inquiry and of dissemination of their conclusions.

John Dewey, 1954, The Public and its Problems

*But yield who will to their separation
My object in life is to unite
My avocation and my vocation
As my two eyes make one in sight.
Only where love and need are one
And the work is play for mortal stakes,
Is the deed ever really done
For Heaven and the future's sakes.*

Robert Frost, 1936, Two Tramps in Mud Time

While rationality is a characteristic of human agency, not all agency is necessarily rational. Method helps apply and develop rationality; while there are many methods available, Dewey outlined an overall process, or *logic*, of inquiry to guide rational agency. As discussed in Chapter 3, Dewey developed his *logic of inquiry* based on an analysis of the logic underlying different types of investigation and problem solving approaches, from scientific to 'common sense' methods.

The 'decision activities' in the Decision cell model correspond to this method of rational inquiry. Chapter 4 set out the template of the rhythm of situations, where inquiry is initiated by an indeterminate situation; to resolve it, agency is organised and coordinated for *socially intelligent inquiry*. This chapter focuses on the decision activities of *define, design and realise*, which broadly correspond to the phases of 'institutionalisation of a problem', 'determination of problem-solutions' and 'restoration of harmonious experience' in the logic of inquiry (Dewey 1938/ 1999).

In the Decision Cell model, both explanatory and normative aspects of these decision activities are also shaped by theoretical and empirical analyses on policy-making and health policy that are related to these activities. Breaking with a linear reading of inquiry, the method of rational policy-making is instead described by the decision activities of *define, design and realise*, which all overlap with a core activity - *deliberation*. All these activities are mutually influential in policy-making, in what is often an iterative process of refinement of rational inquiry.

Define

The first task of rational agency is to understand the indeterminate situation and institute it as a policy problem, through the decision activity *define*.

Explanatory aspect: uncertainty, systemic agendas & pluralism

Definition as a product, not precondition, of rational agency

The decision activity 'Define' is aligned with agenda setting theories in the policy science literature. *Define*, however, goes beyond the idea of getting pre-existing, or pre-defined, problems or preferences onto policy agendas, as is the case in linear instrumental models. In the pragmatist model, it is an indeterminate situation that initiates rational agency. An indeterminate situation is, by definition, ill defined. The recognition of disequilibrium or imbalance, "just as does, say the organic imbalance of hunger ... is but an initial step in institution of a problem" (Dewey, 1938/1999, p. 107).

In response to an indeterminate situation, different actors and networks set about defining the situation in order for it to be better understood, explored and addressed, making suggestions for possible 'problem-solutions'. Definition of policy agendas and problems is open to modification and refinement throughout the process of policy-making, based on the development of new understandings, as well as on the perceived success of the concepts used to resolve the situation. *Definition is therefore a product, not a precondition, of rational agency.*

In the Decision Cell model, all actors and groups involved in a particular problematic situation can potentially influence how this situation is defined. The fluid nature of the Decision Cell boundaries are shaped and

reshaped based on evolving definitions (within and outside the Cell) of what the problem is, and of what is required to resolve it.

In the LSHTM study (Kuruvilla, Mays & Walt, 2007), one project highlighted how changing situations necessitated, or led to, changed definitions and conceptions of 'problem-solutions'. A few years ago, climate change was not considered a 'health topic'; thus, specific health research funding was not available for this topic and grants had to be sought from other sources, such as the Energy, Environment, and Sustainable Development (EESD) programme of the EU in this case.

In 2003, mid-way through a project analysing the effects of climate change on health, there was a heat wave in Europe resulting in many deaths; in France alone, around 14,000 people died from heat-related causes (German Weather Service (DWD), London School of Hygiene and Tropical Medicine & WHO/Europe, 2004). This event raised the profile of climate change as a public health issue, and raised expectations that this research project would draw out the health policy implications and communicate them. This climate change research project resulted in protocols for multi-sectoral coordination of emergency response, particularly with respect to heat waves in the EU (German Weather Service (DWD), London School of Hygiene and Tropical Medicine & WHO/Europe, 2004).

Systemic versus institutional agendas

This interplay in *definition* between the socio-political environment and the constituents of the Decision Cell, is thus different from those agenda setting theories in the policy literature that focus primarily on government-related activities. For example, Kingdon (1995) in *Agendas, Alternatives, and Public Policy*, defines *agenda* as “the list of subjects or problems to which government officials, and people outside government closely associated with those officials, are paying some serious attention at any given time” (Kingdon, 1995, p. 3). In a review of Kingdon’s book when it was first published, Brodtkin (1985, p. 165) observed that,

[Kingdon’s definition of] agenda is equivalent to what others have called the “institutional” agenda, in contrast to the “systemic” agenda, which includes subjects that do not crystallize into public issues. Because of its focus on the institutional agenda, this book misses an opportunity to directly challenge critics of pluralist theory who focus on the discrepancies between these two types of agendas in order to demonstrate that some issues and groups are systematically excluded from the political process.

Other policy analysts, in particular Bachrach and Baratz (1962) and Crenson (1971) highlighted the importance of systemic agendas in their studies on ‘non decision-making’ (discussed in Chapter 4). They showed how in non-decision-making, issues of salience, or problematic situations in societies are sometimes kept off policy agendas. This was seen in the example of how the problem of air pollution, in cities with powerful

industries responsible for this pollution, was kept off these cities' policy agendas (Crenson, 1971).

Sources of information

In response to an indeterminate situation, there may be multiple definitions developed and communicated through multiple sources of information in society. Research is conducted on a range of health topics. As the LSHTM study indicated, while some research was commissioned by government agencies, researchers reported working on topics that were of personal interest and related to ongoing work in the research networks in which they were involved (Kuruvilla, Mays & Walt, 2007). This raises issues for management of health research priority setting and coverage of health policy topics. One area for analysis is to determine how portfolios of researcher-initiated projects and commissioned research, compare with research priorities set by the institution and by national and international policy bodies. One LSHTM researcher posed as a hypothesis for further study, that researchers were more likely to promote, and be aware of, the social implications and impact of researcher-initiated projects than of commissioned projects.

Researchers also raised concerns about accountability issues and the extent to which researchers can, or should, be held accountable for the impact of their work. Accountability concerns had been emphasised in the wake of the publication of findings linking the MMR vaccine with autism

that led to decreased immunisation rates and, ultimately, the loss of social trust. This raised questions about whether there were different standards of accountability for researchers and practitioners (Black & Carter, 2001).

The influence of the mass media in both reflecting, and shaping, socio-political agendas is the subject of extensive research (McCombs & Shaw, 1993). Many people increasingly get science and health information from the media (Brown & Walsh-Childers, 2002; Hargreaves, Lewis & Speers, 2003). There is also growing evidence that the media influence health policy agendas, the utilisation of health research and health behaviours (Grilli, Ramsay & Minozzi, 2002).

The way the media cover a public health topic, may be quite different from the way scientific evidence is framed. For example, again referring to the MMR controversy, there was significantly more scientific evidence showing that the vaccination was not linked to autism, than accounts that made this link (Hargreaves, Lewis & Speers, 2003). However, the media usually cover 'both sides of the story' and a survey indicated that the main impression the public had was that there were two sides to this issue.

While there are trained science and health journalists, many other journalists may not have sufficient training in epidemiological concepts, for example, in order to accurately communicate findings related to relative risk (Hargreaves, Lewis & Speers, 2003). There are concerns about the credibility and accuracy of health information in the mass media, but

the media may have more checks in place to provide accurate information than, say, in informal networks. Furthermore, the issues covered in the media tend to reflect, or project, issues of societal importance (Hargreaves, Lewis & Speers, 2003; McCombs & Shaw, 1993).

However, it is important to realise that mass media outlets and conglomerates are, in fact, businesses that need to sell news and advertising space; to garner such income, they can influence both the topics covered and the content of media information in order to sell stories. Further, there are considerable inequities regarding media access, both within and between countries, which can influence how different groups differently perceive policy issues. There are also differing levels of media fairness, bias and freedom, which need to be understood in analysing the agenda-setting role of the mass media (Brown & Walsh-Childers, 2002; Dierkes & von Grote, 2000; Pleasant, Kuruvilla, Zarcadoolas, Shanahan & Lewenstein, 2003).

The role of the arts in helping people explore and communicate societal problems is also recognised. The importance and integral nature of emotions in rational agency was discussed in preceding chapters. The arts are particularly effective at communicating the emotive and 'big picture' dimensions of indeterminate situations that may not be as well communicated through scientific or technical reports. One example of the emotive aspect of a problem leading to policy change is the public

response in France to the film *Indigenes*. This film tells the story of North African soldiers who helped liberate France in World War II. *Indigene* depicted difficult social situations, such as the discrimination faced by these soldiers. In one instance, “Arab men sacrifice their lives to liberate a village in Alsace, but the survivors are ignored as official photographers snap the white French troops who arrive on the scene afterwards” (Sandford, 2006). Foreign soldiers who fought with the French army also received less than a third the pension of their French counterparts. This film visibly moved audiences, including French president Jacques Chirac. The need for public policy intervention to address this problem was recognised and this movie catalysed the French government’s efforts to reform the pension system for foreign soldiers.

Problem-solutions

Define closely relates to the stage of developing ‘problem-solutions’ in Dewey’s Logic of Inquiry (1938/ 1999, pp. 105-106).

The statement of a problematic situation in terms of a problem has no meaning save as the problem instituted has, in the very terms of its statement, reference to a possible solution. Just because a problem well stated is on its way to solution, the determining of a genuine problem is a progressive inquiry.

On a normative level, it is important to recognise that a particular definition of a situation is concomitant with a particular solution or type of solution. Analyses of US policy-making on the problem of disability

access usefully illustrate how different definitions are concomitant with different solutions. In this case, problems related to disability access had at least two alternative policy frames or definitions - as a transport issue and as an anti-discrimination issue (Kingdon, 1995; Richardson, 2002). Each definition had very different policy implications and consequences.

Initially discussed under the Urban Mass Transportation Act in 1970, policy deliberations centred on the costs and efficiency of measures to meet special transportation needs. Thus, rather than investing in a massive redesign of all existing public facilities and vehicles, supplementary measures were proposed that included the provision of special vehicles and services for people who were elderly or had disabilities. Advocates, for the elderly for example, supported this approach, which included door-to-door transportation.

As an anti-discrimination or civil-rights issue, however, the 'mainstreaming' of people with disabilities in all walks of public life was the primary concern. In the mainstreaming approach, advocates championed making significant changes in public buildings and transportation services, irrespective of cost-effectiveness. Ultimately the second approach won out and was legislated in the Americans with Disabilities Act of 1990 (Richardson, 2002); though elements of the transport-focused strategy were retained. Thus the issue of disability

access was addressed, but the 'end' was not one envisaged when the issue was first identified twenty years earlier.

Was the 'right' decision made? Did the process take the 'right' amount of time? There is rarely an 'objective' answer to these questions; it is more often the case that determining the success of policy processes and outcomes is determined through *deliberation* by actors involved in the process and by empirical and historical analyses of the situation.

Thus, there may be multiple definitions of the indeterminate situation put forward by diverse sources. Ideas not selected as immediately constitutive for the process may be taken up at a later stage or made available as resources for other problematic situations, as described in the 'garbage can model of policy-making' (Cohen, March & Olsen, 1972). Different actors involved in defining problematic situations may only be loosely associated with each other, if at all, and definitions may only crystallise over time. Further, there also may be a range of differing and competing definitions of a particular indeterminate situation, each with very different policy considerations and consequences. Deciding how to move forward with rationally defining a problem to effectively resolve an indeterminate situation, is dealt with in the following section on the normative aspect of *define*.

Normative aspect: genealogy, synthesis & shared understanding

The genealogy of knowledge

With respect to the activity *define*, in order to understand a situation and effectively act to resolve it, there first needs to be both a socio-historical understanding of the evolution of definitions and concepts that could be used and an appreciation of the potential consequences of using them.

Foucault (1984) analysed the dynamics and implications of '*truth and power*' with respect to constituent objects "madness, criminality, etc...".

He stressed the importance of analysing the 'genealogy of knowledge' in order to recognise the power concomitant with shaping knowledge and to prevent abuses of this power.

One has to dispense with the constituent subject, to get rid of the subject itself, that's to say, to arrive at an analysis which can account for the constitution of the subject within a historical framework. And this is what I would call genealogy, that is, a form of history which can account for the constitution of knowledges, discourses, domains of objects etc., without having to make references to a subject which is either transcendental in relation to the field of events or runs in empty sameness throughout the course of history (Foucault, 1984, p. 59).

The field of literary criticism, in particular, provides some valuable insights into how concepts develop and shape public perspectives and actions. For example, Steele (2005) discusses how symbols and concepts develop through history and affect people's understanding of their lives, delimit their imagination and thus influence the nature of socio-political reasoning. He makes a case against political theorists and philosophers

alike, with particular reference to Habermas, for failing to take into account the historical evolution of public meaning and reasoning.

As discussed in the pragmatist pillar of 'via media', it is the *balance between antiscepticism and fallibilism* that is key to socially intelligent inquiry (Putnam & Conant, 1995). The demands of the situation should determine whether existing definitions are useful or not. This approach was illustrated in Dewey's example of the possibilities, all 'true', of viewing a table as an object on which to eat or as a mass of subatomic particles in continuous motion. The rational choice of definition would depend on the demands of the situation, for instance whether the situation involved a family sitting down to dinner or a physicist conducting an experiment in a laboratory. Further, it would not be rational, or efficient, to deconstruct the concept of a table every time one is used.

The emphasis in the decision activity of *define* is on developing an understanding of indeterminate situations and exploring possible solutions to resolve them. This is a mode where brainstorming, empirical and epidemiological analysis, concept development, narratives, poetry and film all have application. There are also specific 'problem-structuring methods' that have been developed and tested to support rational decision-making, including the definition of problematic situations and possible solutions (Rosenhead & Mingers, 2001).

Pluralistic perspectives and alternative evaluation criteria

Having pluralistic perspectives to draw on, has been earlier mentioned as a rich resource on which societies can draw to resolve problematic situations (Dewey, 1954/ 1927). Further, Dewey (1922/ 2002) stressed that having 'more, not less passions', and preferences and perspectives, was the key to rationality. This left 'fewer stones unturned' and enabled diverse desires to be constructively and creatively unified through inquiry and deliberation.

Drawing on creativity and pluralistic perspectives is key to a pragmatist approach to defining policy situations. As an example of how these perspectives influence definitions in health, the boundaries between what is considered traditional knowledge and research evidence, as well as on what constitutes health and ill health, are continually re-negotiated. For example, drawing on pluralistic perspectives, including both scientific research and indigenous knowledge, Maori researchers in New Zealand have found that they are able to develop more comprehensive understandings of health and illness (Durie, 2004).

Pluralistic perspectives also help counteract partial perspectives and this idea can be extended to democratic practice in general.

Civil societies become democratic when there are opportunities for people to learn the importance of listening to all views, even those they dislike, of 'working through' conflicting approaches to solving a problem,

and of building common ground for action (Mathews, 1998 cited in Ramaley, 2000).

Methods and criteria used to analyse diverse sources of evidence and resolve contentions regarding the same, are also an important aspect of the *define* phase. There are several possible criteria that could be used to evaluate research. Each set of criteria is associated with a particular perspective or philosophy, though there may be some overlap between them (Mays & Pope, 2000; Patton, 2001).

- **Traditional scientific research criteria** include validity, reliability, generalisability, minimisation of bias, methodological rigour, and testing causal hypotheses.
- **Social construction criteria** include acknowledging and taking into account the development of and influences on research-generated knowledge, particularity – or doing justice to particular cases, transferability of knowledge across contexts, triangulation of perspectives, and enhanced understanding.
- **Artistic and evocative criteria** include the extent to which new or novel perspectives are provided, aesthetic quality and interpretative vitality, creativity, authenticity, and the ability to connect with and move audiences.
- **Critical change criteria** include an increased consciousness about inequalities and injustices: their sources and nature, representations of the perspectives of the less powerful, identification of strategies for change, clear historical and values context, and consequential

validity.

- **Evaluations standards criteria** include utility, feasibility, accuracy, level of systematic inquiry, evaluator competence and integrity, ethics, responsibility, fairness, and respect for a diversity of interests and values.

Using different research assessment criteria would necessitate addressing differences in the methodological and philosophical stances associated with those criteria (Mays & Pope, 2000; Patton, 2001).

Dewey stressed the importance of developing pluralistic and alternative scientific accounts, not only because this would be the case anyway (even experts within the same field have been known to disagree), but also to avoid what he referred to as 'totalitarianism' in the social sciences.

One example of an alternative account developed with respect to health policy, is the Global Health Watch. The People's Health Movement (PHM)¹⁶ - an alliance of CSOs, social activists, academics and health professionals from over 75 countries - views the data produced by the WHO (e.g. in its World Health Report) and by UNAIDS and other international organisations as deficient, particularly with respect to taking into account considerations of social justice and human rights. By publishing the Global Health Watch, PHM provides an alternative view

¹⁶ www.phmovement.org

that takes into account these considerations with a view to holding national governments and international organizations accountable in this respect. For example, the 2005/2006 Global Health Watch “questions the success story painted by proponents of the current form of globalization, pointing to increases in poverty in Africa, eastern Europe, central Asia and Latin America and a rise in income inequalities in many countries (including wealthy ones) in recent years” (Global Health Watch, 2005/2006). The report also critiques development aid strategies noting that, “even this small amount of aid can cause immense problems in poorer countries, as donor programmes are often uncoordinated and focus on specific diseases to the detriment of the health system as a whole”.

Synthesis and developing shared understandings

There are two methods that could help unify the diverse sources of evidence at the *define* stage:

- Synthesis and appraisal and
- Collaborative approaches to developing shared understanding.

Consider the volumes of available information generated on health. Just taking into account biomedical research, over two million journal articles of varying quality are published annually (Ad Hoc Working Group for Critical Appraisal of Medical Literature, 1987). There is clearly a need for critical review and synthesis of research evidence to inform health policy and practice. The Cochrane Collaboration, through its method of rigorous

systematic reviews mainly focuses on synthesising quantitative experimental data from randomised clinical trials, internationally, to establish the effectiveness of health interventions (Clarke and Oxman, 2003). One challenge is bringing discrete sets of data together at a functional level for policy-making. For example, during the course of developing the ODI working paper, there was interest from colleagues in other disciplines in the systematic review method, as used in health research, and its potential to provide an overarching, evidence-based perspective on a topic. However, there was also some bemusement as to how the specific review topics were brought together on a functional level. One question posed was, *"I came across a systematic review for treatment of neck injuries, but aren't neck injuries associated with head injuries? Who is responsible for putting the systematic reviews of head and neck injuries together?"*

Additionally, beyond clinical effectiveness data, in policy-making other factors need to be considered including, cultural acceptability, individual and societal values, cost-effectiveness, effect on health inequalities and context-specific logistics (MacIntyre, Chalmers, Horton & Smith, 2001; McIver & Ham, 2000). Health technology assessments (HTAs) mentioned earlier, are commissioned specifically to advise policy-makers on issues that need to be addressed in the health care system and go further than research syntheses in directly addressing policy considerations (Hanney, Gonzalez-Block, Buxton & Kogan, 2003). HTAs may use research

syntheses to establish the clinical effectiveness of proposed interventions, but also take into account cost-effectiveness and equity implications as well as public preferences (e.g. through using modelling techniques). There also may be *appraisals* of HTA findings by policy-makers, practitioners, patients and the general public. Appraisals include further deliberations on 'technical' findings with respect to implications for public policy.

Information that influences, or requires, policy intervention, however, may not always be related to research data or scientific publications and may, in addition, be communicated through policy briefs, media coverage, art, websites and interpersonal communication. This requires the further development of methods of synthesis, from multiple information sources. Such methodological development is ongoing (Dixon-Woods, 2005; Hargreaves, Lewis & Speers, 2003; Mays, Pope & Popay, 2005; Pawson, Greenhalgh, Harvey & Walshe, 2005). However, as earlier discussed, meaningful synthesis of information for policy-making will need to go beyond a focus on empirical data, to considerations of emotion, meaning and motivation. Subsequently, developing 'supra-empirical' approaches to developing shared understandings is also important (Fischer, 2003; Wynne, 2003).

An approach that could help with *defining* indeterminate situations with respect to empirical evidence, as well as to values and motivations, is a

more collaborative approach to setting policy agendas (Aldo Leopold Leadership Program, 2006; Innes, 1998). As one example in practice, The Aldo Leopold Leadership Program (2006) adopts an innovative approach in relation to understanding and communicating environmental policy in the US (Andrew Pleasant, personal communication). The program provides fellowships to leading researchers in environmental science. As part of the program, training sessions are organised in order to bring together scientists with media, policy specialists, business leaders, policy-makers and NGOs; the purpose of these meetings is to discuss key issues related to environmental policy that year. This allows diverse groups to share their views on current environmental concerns, negotiate positions, facilitate building shared understandings and support the formation of 'communities of practice' that can engage with defining, and resolving, the ongoing 'public' problems identified (Aldo Leopold Leadership Program, 2006; Innes, 1998). Methods to facilitate developing shared understanding and collaborative planning are further discussed in Chapter 6 on *Deliberation*.

With respect to health policy as well, systematic reviews indicate that ongoing communication to build shared understandings between research and policy-makers, or with consumers in agenda setting exercises have greater impact, compared with other modes of communication, including one-off consultations (Innvaer, Vist, Trommald & Oxman, 2002; Oliver, Clarke-Jones, Rees, Milne et al., 2004). These recommendations to

reconcile perspectives in the decision activity *define*, through communication, overlaps with concepts in *deliberation*, highlighting the interlinked nature of activities in the Decision Cell model.

Design

Explanatory aspect: technical formulations, constraints & consequences

Technical formulations and theory

Design is an activity where possible solutions and strategies to resolve indeterminate situations (based on problem-solutions developed during the *define* phase) are explored and evaluated. Analysing available evidence, developing technical models and operational strategies, including allocation of resources and roles, assessing constraints and feasibility and formulating related policy options are part of the design phase. Design is probably the most technical or 'formal' phase in policy-making; this is not to say that this activity does not have exploratory and creative dimensions. Simon (1996), in a pragmatist turn, describes *design* as an activity that is enjoyable in and of itself.

The act of envisioning possibilities and elaborating them is itself a pleasurable and valuable experience. Just as realized plans may be a source of new experiences, so new prospects are opened up at each step in the process of design. Designing is a kind of mental window shopping. Purchases do not have to be made to get pleasure from it.

One of the charges sometimes laid against modern science and technology is that if we know how to do something, we cannot resist doing it. While one can think of counter examples, the claim has some measure of truth. One can envisage a future, however, in which our main interest in both science and design will lie in what they teach us about the world and not in what they allow us to do to the world. Design like science is a tool for understanding as well as for acting (Simon, 1996, p. 164).

Thus while there may be various alternative design options generated, they need to be deliberated on till a way forward is clear. The decision activity of *deliberation* will be discussed in Chapter 6. Methods used in the *design* phase may include operational and strategic modelling, health technology assessments, cost-effectiveness analyses and policy formulation.

Peter de Leon (1988), in his analysis of US policy-making during the Vietnam War, emphasised that the failures of strategic modelling to take into account moral and cultural consideration were among the key reasons for failures in this war. 'Technical' in the context of the *Design* phase of the Decision Cell model, should not be taken to mean 'quantitative'. Technical here refers to Dewey's (1954/ 1927) concept that experts and scientists have the skills to organise the facts to inform policy deliberations, not that experts make policy decisions on their own. Further, part of this process is facilitating public valuation of the facts.

Products of the *design* activity usually have a technical, legal or policy form, for example, technical specifications and guidelines, operational or strategic models and scenarios, budgets, bills, treaties, legal contracts, policy directives and guidelines. Some explicit forms of *design* decisions would include those commonly associated with policy formulation (Buse, Mays & Walt, 2005; Howlett & Ramesh, 2003; Lomas, 1990):

- Legislative decisions associated with laws and governance
- Administrative decisions for resource allocation and organisation of services
- Practice guidelines concerned with professional codes of conduct (to the extent that these are set through public mechanisms and
- Technical specifications and models for strategies and processes.

Determining constraints

Another task in *design* is to analyse the constraints and feasibility of different policy options or strategies. In the pragmatist model of rationality, unlike in linear instrumental models, constraints are not considered as 'fixed' or 'given'. Majone (1989) discusses the need to understand how constraints are formulated in order to fully understand both the formulation and feasibility of policy options. He discusses different formulations of constraints to illustrate this point (Majone, 1989, p. 83).

- *Objective versus self imposed constraints* - some constraints may be objective (legal, resource, environmental), while others are self-imposed (heuristic, methodological, contractual).
- *Goals versus constraints* - it is often contended that policy-makers are more concerned with feasibility than with the optimisation of values or goals. Majone (1989) recounts how Simon proposed that the distinction between a goal and a constraint was a matter of linguistic or analytic convenience, while Nozick disagreed. Nozick argued that while policy-makers would be willing to trade one goal, or value, for another end-state maximising one, constraints could not be traded-off. Thus if a particular value (at the margin) can be traded off against other values, then it should be treated as a goal; if not, as a constraint.
- *Short-term versus long-term constraints* - analyses of constraints may also focus on the short versus long-term implications; for example the implications of pushing forward short-term agreements versus building long-term cooperation of policy actors. As another example, a low level of initial investment in research systems in early stages of national development may become a constraint later on.
- *Deterministic versus probabilistic constraints* - with regards to policy-making the expectation is that the policy will work most of the time, not necessarily all the time; e.g. energy efficiency standards allow for some leeway with respect to constraints of extreme weather, fuel availability etc.

As in the discussion on the *Define* activities, both a sense of the genealogy of concepts used and *deliberation* on the same are often required to make analytical distinctions and administrative decisions on both strategies and constraints in policy-making.

Considering consequences

Dewey viewed externalities, and consequences, as the basis for identifying the need for public intervention and for developing and evaluating proposed solutions (Dewey, 1954/ 1927). Some policy analysts have noted that focusing on process alone as a guide for decision-making, without taking into account consequences, seems as irrational, and unethical, as the observation that, “The operation was successful, but the patient died” (Edelman, 1977).

In an article in *The Economist*, on the Healthcare Commission’s audit of the NHS (“The NHS fails its own bewilderingly complicated health check”), the question of whether the right things were being measured was raised (The Economist, 2006). In this article, Nick Black observed that,

The commission is faced with the problem of auditing quality without any data on outcomes. So instead it asks whether hospitals are carrying out the processes it thinks they should be.

Black noted that better measures of performance, particularly as related to assessing patient outcomes, could be relatively easily and efficiently

developed. For example, post-discharge questionnaires were one possible method suggested and a team was in place to look into the logistics of implementing such outcome assessment approaches.

Yet even when outcomes are taken into account, for example, in cost-effectiveness measures, there are often further questions as to 'whether the right things are being measured'. In a critique of economic evaluation, particularly with respect to cost-effectiveness, Coast (2004) emphasises the need to understand the wider range of consequences that reflect societal needs and values. She suggests that 'optimal outcomes' in cost effectiveness measures, such as maximizing health and minimising costs, are probably only defined as such by economists, and only on a methodological level at that. She also points out that measures of cost-effectiveness, such as Quality Adjusted Life Years (QALYs) gained per unit of resource, can be difficult to understand and use in policy-making. "When many decision makers do not fully understand the basis for QALYs, expecting them to identify their maximum willingness to pay for additional QALYs on behalf of society seems nonsensical" (Coast, 2004, p. 1235).

Coast (2004, p. 1235) proposes using 'cost-consequences', instead of 'cost effectiveness', to inform health policy-making. In considering *cost-consequences*, a range of stakeholders would identify the potential consequences related to a proposed intervention. A 'table of

consequences' could include factors such as anxiety and depression, pain control, carers' quality of life, costs to social services and accessibility of the intervention (Coast, 2004). Diverse effects could thus be taken into account, instead of attempting to use a single metric.

In the LSHTM study on research impact, a similar approach was taken with respect to developing the Research Impact Framework (Table 2) (Kuruvilla, Mays, Pleasant & Walt, 2006).

Table 2. The Research Impact Framework

| <i>Research-related impacts</i> | <i>Policy Impacts</i> | <i>Service impacts</i> | <i>Societal impacts</i> |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <ul style="list-style-type: none"> • Type of problem/ knowledge • Research methods • Publications and papers • Products, patents and translatability potential • Research networks Leadership and awards • Research management • Communication | <ul style="list-style-type: none"> • Level of policy-making • Type of policy • Nature of policy impact • Policy networks • Political capital | <ul style="list-style-type: none"> • Type of services: health/ intersectoral • Evidence-based practice • Quality of care • Information systems • Services management • Cost containment and cost effectiveness | <ul style="list-style-type: none"> • Knowledge, attitudes and behaviour • Health literacy • Health status • Equity and human rights • Macroeconomic / related to the economy • Social capital & empowerment • Culture and art • Sustainable development outcomes |

(Kuruvilla, Mays, Pleasant & Walt, 2006)

This framework identified potential areas of research impact through a review of literature as well as from researchers' experience and expectations. The framework was developed through an iterative process

of testing through developing 'one-page' structured impact narratives of the selected projects and by addressing the gaps, inconsistencies and required clarifications in the framework that were encountered en route.

This relatively standard framework allowed researchers to more systematically describe, and think through, the impacts of their work. In addition, the structured narratives based on this framework, allowed for comparisons to be made across previously incommensurable project descriptions. This type of analysis was useful for management and policy purposes, for instance in identifying the potential need for more institutional support for the management of research networks, which was both a key concern across the projects and a key influencing factor of research impact (Kuruville, Mays & Walt, 2007; Platt, 1987).

Some desired impacts, or consequences, of both health research and health policy, for example, *well being* or *sustainable development*, may seem incalculable or as too long term prospects to guide current practice or to evaluate evidence and health policy in the short term. Dewey's definition of "ends in view" provides one indication for how consequences can be practically and progressively defined, at least with respect to particular indeterminate situations. Taking the long-term view is facilitated through 'scenario development', a method further discussed in Chapter 6. The pragmatist focus on consequences and foresight in public policy-making also has implications for how change is managed. In this view, managing

consequences and change in policy-making are iterative and mutually constitutive processes. As Anderson (1975) stated,

Policy is being made as it is administered and administered as it is being made.

Normative aspect: beyond panaceas to pluralism and experimentation

Addressing the tendency in social sciences towards "totalitarianism"

In *define*, the need to develop and draw on pluralistic perspectives was emphasised not only as a valuable resource for policy-making, but also to avoid 'totalitarianism' in *how* policy issues were defined. Similarly, in the decision activity of *design* there is a need to go beyond the search for one-size fits all solutions or one-off institutional fixes (Irwin, 2001; Parsons, 1995).

Dewey cautioned against the search for panaceas, noting, for example, that advances in health had been made as a result of developing solutions to deal with specific problems. Dewey did not see why this was not the approach also used in socio-political and economic research. Instead, at one extreme, he noted there were "those who believe there is a necessary historical law which governs the course of events so that all that is needed is deliberate acting in accord with it" (Dewey, 1939/ 1989a, p. 129). In this context, he cautioned against the pervasiveness of "totalitarian

economics”, for example, in Marxist accounts of materialism or in laissez-faire accounts of individualism (Dewey, 1939/ 1989a, p. 71). At the other extreme – from developing totalitarian theories – Dewey also saw that the social sciences tended to collect facts without organising them into theories or strategies that could help resolve social problems (Woolf, 1932/ 1999). He recommended that some balance between these two extremes of totalitarian theorising and atheoretical empiricism be found.

The more rational approach to design policy theory and strategy would be to have a range of concepts, explanations and methods, developed through inquiry with respect to specific problematic situations, in the policy ‘toolbox’. The most appropriate tools to a particular situation could then be used to develop effective and relevant socio-economic interventions in that situation. Developing and testing a range of models and frameworks would best support public policy-making that is continually faced with diverse and changing circumstances (Dewey, 1939/ 1989a).

In developing and using theories in policy *design*, as with *define* activities, an understanding of the genealogy of knowledge and underlying assumptions is required. Pawson et al. (2005) suggest that a way forward is to explicate the theories and, often implicit, assumptions that underlie policy strategies and interventions. Evaluations can then be conducted, and evidence synthesised in relation to these theories and causal

assumptions. The research question that would guide such a *realist approach* to evidence synthesis and policy evaluation, as earlier highlighted, is not, 'What works?' but instead, 'What works for whom, how, and in what circumstances?' Explanatory principles then can be developed based on an analysis of the consequences of implementing different policy strategies, and also by developing new theories and hypotheses from the learning gained.

Dobrow et al. (2006) suggest a related approach to guide research utilisation in policy-making. They ask, "Should the same evidence lead to the same decision outcomes in different decision-making contexts?" Based on an analysis of expert reviews of evidence to develop cancer-screening guidelines, they conclude that,

The central challenge for evidence-based policy is not to develop international evidence, but rather to develop more systematic, rigorous, and global methods for identifying, interpreting, and applying evidence in different decision-making contexts (p. 1811).

Methods identified in this analysis included the use of 'agreement-based consensus methods', Health Technology Assessments and decision support tools that are context, and topic, appropriate (Dobrow, Goel, Lemieux-Charles & Black, 2006).

The Decision Cell model incorporates developing explanatory principles and testable hypotheses with respect to particular situations as well as

using 'global methods and knowledge' that can be applied across different decision-making contexts. Through application in concrete problematic situations, the validity and usefulness of the theories, strategies and hypotheses used can be tested and further developed.

Thus part of the task of *design* is to develop theories, strategies and causal hypotheses that can guide policy implementation and evaluation. Bevan, Maynard, Holland and Mays (1988) in an analysis of phases of reform in the NHS caution that,

Without research to illuminate further what such change might lead to, the UK would be repeating mistakes of previous reorganisations of health care. The NHS was reorganised in the 1970s on the basis of a belief in planning, and in the mid 1980s on a belief in management. These reorganisations have been based on passing fashions, rather than a well-researched argument about how to optimise the use of scarce resources available for health care for improved health.

This analysis concluded that health care reform and policies be based on both 'research and experimentation', so that there would be more systematic approaches to policy design and development and more explicit policy assumptions that could be better understood and evaluated (Bevan, Maynard, Holland & Mays, 1988).

It may not always be possible to design and evaluate policies and programmes as 'experiments' in a traditionally scientific, or academic, sense. However, this orientation would help focus attention on

'experiment-like' situations in policy-making; for example, in one of the projects analysed in the LSHTM research impact study, researchers noted that the different NHS strategies in England, Scotland and Wales could serve as a natural experiment for studying the processes and effects of different health policy strategies in the UK (Smith, Dixon, Mays, McLeod et al., 2005). The idea in *design* is to explicitly set out guiding strategies and causal assumptions so that different stakeholders can examine if policies and programmes are working the way they were intended. This experiment-oriented process in policy *design* can thus facilitate an overall process of socio-political inquiry and learning.

Public valuation and shared vision

All concerned actors may or may not be directly involved in the technical aspects of this decision activity and experts may indeed play a primary role here. However all actors can, and should, play a role by evaluating the proposed technical strategies, concomitant consequences and the extent to which the strategies are in keeping with desired social values vis-à-vis the problematic situation. Dewey saw this type of interaction as important both to prevent authoritarianism and elitism in governance and as a means to build scientific sense and democratic sensibility across society.

As an example of public valuation of proposed policy solutions, public commentary is a requisite component of federal rule making in the US.

Roth et al. (2003) analysed the written public commentary on FDA regulations to restrict the sale of tobacco to minors; they identified five ways in which policy proposals were framed and evaluated.

- **Scientific frames** included evaluations of overall research quality and more specific arguments about problem definition, study design, measurement, and interpretation of results, including charges of bias, misinterpretation, and fraud.
- **Ideological frames** invoked freedom of choice, human rights, and the necessity for, or threat of, government intervention.
- **Economic frames** focused on the proposed rule's costs (for example, to government or to the tobacco industry), its potential impact on the local, state and national economies, and the costs of tobacco-related illnesses.
- **Political frames** invoked federal pre-emption of state and local laws, enforcement of the proposed rule and the political implications of such enforcement.
- **Procedural frames** invoked the adequacy, appropriateness or fairness of the rule-making process itself.
- **Cultural frames** is a further category that could be used to frame issues and evidence. Referring to an earlier example, the approach used in New Zealand to integrate indigenous and scientific knowledge showed how more comprehensive, and relevant, understandings of health and illness could be developed in this cultural context (Durie, 2004).

The analysis of the US tobacco control legislative proposals showed that while government experts tended to use scientific or technical frames, civil society commentators tended to use political or ideological frames. Roth et. al. (2003, p. 36) concluded that,

Though scientists and regulatory experts may identify and present scientific evidence to indicate proposed regulations' technical rationality, the social problems that these regulations address may always be reframed in moral terms that undermine the regulation's legitimacy. When these moral values are understood by the public - or, more specifically, the involved segment(s) of it - as more fundamental than the scientific evidence, the proposed rule will lack public credibility.

Different groups can thus influence policy, even during the 'technical' *design* phase, by challenging and reframing the evidence on which policy strategies are based. Additionally, changes occurring through *deliberation* and from learning developed in the decision mode of *Realise*, may necessitate further iterations in both the *Define* and *Design* phases of policy-making.

Earlier it was discussed that *design* is probably the most 'technical' phase of the Decision Cell model. The products of design, in terms of technical specifications, legislative decisions and administrative guidelines, may be more or less successful in communicating a shared vision on how an indeterminate situation can be resolved. Such a 'vision' is required to get buy-in from a range of stakeholders and to coordinate socio-political

agency.

Russell Ackoff (2007), a pioneering 'management guru', talks about the need for managers to develop and communicate a shared vision. He makes a link with architecture to discuss this process. Architects rarely use formulae or technical details to communicate their plans. Instead they are able to convey a clear picture, or 'blue print', of the final product that clients can comment on and through which different groups are able to see their role in its realisation.

Continuing with the architectural analogy, Collier (2006) makes a link between pragmatist philosophy and architecture, particularly with respect to the unification of function, aesthetics and ethics. In addition to being useful and a work of art, architecture involves ethics, as it can inspire (and/or otherwise influence) the way that people live, work and relate to an environment.

With organisational processes becoming increasingly modularised and almost dehumanising, contributing to a shared vision helps engender a sense of purpose, community and meaning. This idea is well illustrated in the proverb about the two workers in a marble quarry, who were asked what they were doing. One replied that he was breaking up stones, the other that she was building a cathedral.

Thus developing and communicating a shared vision for public policy interventions is a key task in the *design* phase of policy-making. In an analysis of leadership, Howard Gardner (1995) noted that one common characteristic of great religious and military leaders, is their ability to tell a compelling story - both to emotively convey their vision and to get people to 'buy-in' to this vision. This is a lesson that could be well worth learning in public policy. This idea also reinforces the need for a 'supra-empiricist' perspective in rational decision-making, with respect to developing visions that can inspire and bring people together, not just to communicating empirical evidence. In the pragmatist view, this vision should also extend to the functional, aesthetic and ethical resolution of indeterminate situations in society. Such resolution should also be evolutionary, in building on learning from previous situations and contributing to new learning. The relationship between resolution, change and learning is discussed in the next decision activity, *Realise*.

Realise

Explanatory aspect: changes through implementation & learning

Integrating doing, learning & change

Realise, as the term suggests, incorporates elements of 'putting into practice', 'evaluating and learning', and 'change'. This activity is in line with the pragmatist concept of change wherein any effected change in a situation, is concomitant with changed experience in that situation, and a

changed situation (Dewey, *Logic: Theory of Inquiry* LW12). This breaks down the linear sequence between 'implementing change', 'learning from experience' and then 'changing'. 'Learning by doing', would be an insufficient concept to sum up this interrelationship between experience, learning and change. In the pragmatist model, *realise* extends to the overall process of restoring harmonious experience, and equilibrium, through changes in the overall situation comprising agents, environments and transactions.

The process of 'realising', corresponds to organisational change theories, such as Argyris and Schön's (1978) concept of "double loop learning". In this type of learning process, mutually influencing changes occur in actors' knowledge and values as well as in the organisational or policy environments. Dewey's concept of transactive change takes this mode of realisation forward into a transformed situation, where equilibrium and functional coordination are restored.

Activities in this phase of *realise* include implementation of agreed upon approaches, agreement on benchmarks and evaluation criteria, and methods and strategies of evaluation, which could include collaborative assessment. Failure to realise hypothesised effects or to meet agreed upon benchmarks would require changes to be made. These changes can be achieved through informal decisions 'on the ground' or through a

coordinated process of policy inquiry, involving *deliberation* and changes in *define* or *design* activities.

Discretionary decisions and iterative change

Studies of policy implementation show that ongoing, discretionary decision-making by bureaucrats and managers at 'street-level' is inevitable in the implementation and administration of policies and programs (Lipsky, 1976; Pressman & Wildavsky, 1984). However, these discretionary decisions can render policies and programmes unrecognisable from their planned formulation. Pressman and Wildavsky (1984) described this phenomenon in their landmark study, evocatively titled, *Implementation: how great expectations in Washington are dashed in Oakland; or why it's amazing that federal programs work at all, this being a saga of the Economic Development Administration as told to two sympathetic observers who seek to build morals on a foundation of ruined hopes.*

Explicitly recognising that ongoing discretionary decision-making is inevitable – even desirable – facilitates the coordination of ongoing decision-making throughout the process of policy-making. However, a further reason to integrate discretionary, or bureaucratic, decisions as part of an overall process of rational public policy is related to concerns about the extent to which these discretionary decisions are democratic and integrated with an overall process of *socially intelligent inquiry*, versus autocratic and arbitrary (Richardson, 2002).

As has been discussed so far, there is considerable overlap and iteration between the different decision activities and, in particular, iteration through processes of *deliberation*, at the core of the model. The only relatively stable temporal ordering in the Decision Cell model is the transition from indeterminate/problematic phases to a stage of transformed equilibrium and functional coordination. Within the Decision Cell, activities take place according to the demands of the situation rather than according to any temporal ordering of stages.

For example, the relationship between the three modes of activity *define*, *design* and *realise* in developing a strategy paper on a particular policy issue, need not be a linear, temporal one. There can be iteration between activities of concept development, data-collection, drafting, evaluation, feedback and rewriting. It may be helpful to distinguish these different types of activities in a linear way in planning the process and in presenting it subsequently e.g. in documentation. It is less helpful to see a move from drafting to identifying gaps and having to do more primary research as a 'step back' or as a deviation from a desired or fixed logical temporal ordering of tasks.

The capacity and openness to inform and modify policy strategies based on ongoing experience and learning is a key component of rational policy-making. It would be irrational not to do so. Dewey viewed concepts such

as ends and means simply as organising tools to help resolve problematic situations. As discussed in Chapter 3, ends are but 'ends-in-view' based on current understandings, and in the long-term ends may be means to some other ends. Thus, deliberation on policy ends to ensure that they are congruent with ongoing learning, changing situations and public values is integral to rational public policy and democratic practice (Richardson, 2002).

Normative aspect: reasoned transactions versus 'phantom publics'

In public policy it is important to ensure that policy problems are resolved in a manner informed by scientific sense, democratic sensibility and moral imagination. To do so there needs to be explicit recognition of the integrative nature of inquiry, of facts and values, of internal and external change. Sir Geoffrey Vickers (1965) highlighted the interdependent nature of decision-making and change in policy systems in *The Art of Judgement*, with respect to what he called "appreciative systems".

Appreciation involves making judgements of facts about the 'state of the system', both internally and in its external relations. I will call these reality judgements ... It also involves making judgements about the significance of these facts to the appreciator or to the body for whom the appreciation is made. These judgements I will call value judgements. Reality judgements and value judgements are inseparable constituents of appreciation ... for facts are relevant only in relation to some judgements of value and judgements of value are operative only in relation to some configuration of fact (Vickers, 1965, p. 40).

In Chapter 3, three types of change were discussed in the pragmatist concept of rational agency. In *adaptation* the focus is on changing conditions external to the indeterminate situation and process of inquiry. In *accommodation*, change is more of an internal process. Agents deal with a problematic situation by changing their own attitudes, beliefs and expectations towards a problematic situation or by learning to live with it, when inquiry shows that external elements cannot be changed. *Adjustment* is the third mode of change and involves both external and internal change. In pragmatist philosophy, this is a mode of change that goes towards constituting the character and beliefs of the agent and reflects not only who the actor is, but also who the actor would like to be. Here a fundamental change in prevalent beliefs and practice of agents occurs as a result of learning from the consequences of rational agency.

Referring to the Decision Cell model, with *adjustment*, there is a fundamental change in the architecture of the 'cell'. *Adjustment* questions whether boundaries were correctly set between what is inside the cell and what is determined to be of low relevance to resolving the indeterminate situation. It also aims at intelligently reformulating and reframing those items that are considered to be relevant for inquiry, and thus re-determines the relationships between the constituents of the Decision Cell and the problematic situation. *Adjustment* thus changes both the character of agents and the structure of a problematic situation.

Theories of organizational change have developed in line with this integrative systems view. Maturana and Varela's (1980) concept of self-creating and self-organising, *autopoietic systems* was earlier discussed. This type of systemic change is also aligned with Argyris and Schön's (1978) concept of "double loop learning" and Vickers' (1965) theory of "appreciative systems".

"Creative destruction" is another theory of organisational change, introduced by Schumpeter in the 1940s, to describe how organizations change by periodically 'self-destroying', or reinventing themselves, in order to innovate and gain a competitive edge in the market. In public sector organizations, such as the National Health Service in the UK, the term 'creative destruction' has been more recently applied to recommend reform efforts where,

The aim is to produce a system that will adapt itself to changing circumstances instead of constantly being driven by the government to reform (Ham, 2006, p. 985).

However, change, in the pragmatist view, needs to be constructively informed and managed as part of an overall, reflective process of *socially intelligent inquiry*. As discussed in Chapter 4, effective inquiry and meaningful change can also be facilitated by intermediate organisations or reference communities, such as perhaps NHS trusts in the case of an adaptive NHS. However, central coordination is also required to provide

the overarching perspective and institutional support required to coordinate change and manage externalities and consequences. If an overall process of inquiry does not inform change, there is danger of reform being undertaken for reform's sake, or as a 'knee-jerk' reaction to immediate, indeterminate situations.

Another maladjusted approach, from the perspective of individual and societal flourishing, would be to rely on authoritarian, or elitist, drivers of change. Schumpeter (1942) was of the view that consumers, i.e. the general public, did not realise what they needed and were unaware of the possibilities for change. Innovative companies could therefore continually create new consumer needs and sell new products. Lippman (1927/ 1993) had a similar disdain for the public's capacity to figure out what they wanted, and how to do so. Dewey saw that considerable effort needed to be invested, to build scientific sense and democratic sensibility to support rational decision-making by the public. However, he stressed that it was imperative to do so to ensure individual and societal flourishing.

With the US stock market crash in 1929 and its disastrous effect on societies, Dewey (1933/ 1999b) asked the public to heed the consequences of a misplaced faith in elite institutions to resolve their problems, in an essay titled, *Imperative Need: A New Radical Party*.

Power today resides in control of the means of production, exchange, publicity, transportation and communication. Whoever owns them rules

the life of the country... In order to restore democracy, one thing and only one thing is essential. The people will rule when they have power, and they will have power in the degree that they own the land, banks, the producing and distributing agencies of the nation. Ravings about Bolshevism, communism and socialism are irrelevant to the axiomatic truth of this statement. They come either from complaisant ignorance or from the deliberate desire of those in possession of power and rule to perpetuate their privilege... This situation continues only because the mass of the people refuse to look facts in the face and prefer to feed on illusions produced and circulated by those in power with a profusion that contrasts with their withholding the necessities of life. The day that the mass of the American people awake to the realities of the situation, that day the restoration of democracy will commence, for power and rule will revert to the people (Dewey, 1933/ 1999b, p. LW9.76).

Dewey (1954/ 1927) believed that individual and societal flourishing would be best supported by building up individual and social intelligence. Part of this process was guiding development through collaborative inquiry in concrete problematic situations faced by societies, rather than through change driven by elitist and capitalist ideas or by transient fads and propaganda.

It would appear that Dewey lost the battles of political and capitalist propaganda in his time. But did he also lose the war of faith in science and democracy as the most reliable guides for human flourishing? One would hope this pragmatist faith is not misplaced.

Ultimately, the pragmatist faith in rational agency is a faith in the possibilities of human experience, and of bringing together the diverse dimensions of human experience in a meaningful and productive way. This sentiment was eloquently expressed by the poet Robert Frost (1936/2002, pp. 113-114) and quoted in the opening lines of this chapter, *“but yield who will to their separation, my object in life is to unite, my avocation and my vocation ... only when love and work are one is the deed ever really done for heaven and the future’s sake.”*

**Chapter 6. The Decision Cell Model (III): *Deliberation* and
'good' policy theory**

CHAPTER OUTLINE

Deliberation and 'good' policy theory287

The dynamics of power and deliberation.....287

Systematising Dewey's concept of deliberation.....295

i. A role for passions and norms.....296

ii. Developing new insights versus confrontation or consensus.....299

iii. Dramatic rehearsal and scenario development.....302

iv. Valuation and reasoned choice.....306

v. Empathy, moral imagination and human nature308

vi. Using the Ethical Postulate as a moral compass312

vii. Aesthetics in action.....319

Barriers to functional participation and deliberation320

Feminist critiques of deliberative theories, and links with pragmatism
.....325

The Decision Cell: a 'good' policy theory?332

Deliberation and 'good' policy theory

As long as deliberation pictures shoals or rocks or troublesome gales as marking the route of a contemplated voyage, deliberation goes on. But when the various factors in action fit harmoniously together, when imagination finds no annoying hindrance, when there is picture of open seas, filled sails and favoring winds, the voyage is definitely entered upon. This decisive direction of action constitutes choice.

John Dewey, 1922, Human Nature and Conduct

Deliberation is a way of evoking insight, seeing new options, exploring possibilities, examining choice and a way of reordering knowledge, particularly taken for granted assumptions or tacit norms.

William Isaacs, 1999, Dialogue and the art of thinking together

The dynamics of power and deliberation

In previous (presented and published) versions of the Decision Cell model, power and influence were situated at the core of the model (Dorstewitz & Kuruvilla, 2005a; Kuruvilla, 2005). However, ongoing reading and conceptual analysis indicated that power was exercised in shaping the overall process of policy-making, for instance through non-decision making, which determines what sociopolitical problems get onto policy agendas, as discussed in Chapter 4 (Bachrach & Baratz, 1962; Crenson, 1971), or in the predominant definitions, norms and concepts used (Foucault, 1984; Lippman, 1922/ 1991). Power is also reflected, as discussed in Chapter 4, in the membership of epistemic communities and

policy networks, for instance closed iron triangles versus more open issue networks and advocacy coalitions (Heclo, 1978; Sabatier, 1988).

It was also clear, at least in the context of social policy and health policy in particular, that while power shaped and circumscribed the policy process, deliberation was key to orienting and shaping policy change, including in the development of political opinion (Huckfeldt, Johnson & Sprague, 2004). Huckfeldt, Johnson & Sprague (2004) studied the development of political opinion in policy networks. They found that in confrontational situations (for example during elections where different political parties or networks are pitched against each other) there was consolidation and stasis of political opinion, even within the networks. Confrontation was thus not conducive to the development of new ideas or policy change. However, their analysis indicated that in situations that were non-confrontational, diverse political opinions were deliberated on and developed, both within and between networks (Huckfeldt, Johnson & Sprague, 2004).

These views on deliberation, as developing and orienting the policy process were also reflected in the empirical work conducted during this PhD. In both the LSHTM and UNICEF studies, deliberation (including to address conflicts) was central to orienting policy, e.g. in how different groups interacted in the development of the Convention of the Rights of the Child, or in developing policy briefs with reference to UK law-making

on home safety or with respect to drawing up international ethical guidelines for research with women and adolescents who are trafficked (Bernard & Kuruvilla, 2007; Kuruvilla, Mays & Walt, 2007).

Dewey explicitly recognised the ubiquity of conflict in problematic situations, but saw deliberation as being employed, and required, to understand and resolve both the problematic situation and the conflicts therein.

Deliberation is a work of discovery. Conflict is acute; one impulse carries us one way into one situation, and another impulse takes us another way to a radically different objective result. Deliberation is not an attempt to do away with this opposition of quality by reducing it to one of amount [quantity]. It is an attempt to uncover the conflict in its full scope and bearing. What we want to find out is what difference each impulse and habit imports, to reveal qualitative incompatibilities by detecting the different courses to which they commit us, the different dispositions they form and foster, the different situations into which they plunge us (Dewey, 1922/ 2002, p. 216).

As a result of these developing insights, in the current version of the Decision Cell model 'power' is depicted in the boundary of the cell, reflected in the formation and constitution of political agency and explicitly acknowledged as a key factor that shapes the entire policy-making process. 'Deliberation' plays a core coordination role between the different policy activities and provides orientation for policy change.

After these changes were made to the model, a classic policy study was suggested as a resource to help further contextualise the roles of deliberation and power in policy-making (Chris Ham, personal communication): Heclo's (1974) analysis of social policy-making in Britain and Sweden. In particular, Heclo emphasises the general tendency to overestimate the role of power and underestimate the role of deliberation in social policy-making; the following section summarises Heclo's argument using extended quotes from his analysis of political learning and policy change (Heclo, 1974, pp. 284-322):

Politics as learning

Tradition teaches us that politics is about conflict and power. Where there are conflicting opinions, there will be politics; where men agree (p. 305) about who gets what, when, and how, there is no politics. Governments reconcile conflict and through public policy give authoritative expression to the resulting courses of action; these policies change when there is a change in the possession and relationships of power among conflicting groups.

This is a blinkered view of politics and particularly blinding when applied to social policy. Politics finds its sources not only in power but also in uncertainty – men collectively wondering what to do. Finding feasible courses of action includes, but is more than, locating which vectors of political pressure are pushing. Governments not only “power” (or whatever the verb form of that approach might be); they also puzzle. Policy-making is a form of collective puzzlement on society's behalf; it entails both deciding and knowing ... This process is political, not because all policy is a by-product of power and conflict but because some men have undertaken to act in the name of others.

Axiomatically, a nonrevolutionary change in social policy required that external tensions in society find corresponding tensions within existing political institutions. But a pure power approach, like a circular “systems analysis” (input, blackbox, output, feedback), fails to flesh in how this actually occurred.

The tension between power and deliberation in policy-making is by no means a ‘settled’ debate. Flyvbjerg (1996) in his analysis of *Rationality and Power*, views the two as antithetical based on assertions such as: rationality is context dependent, but power defines the context; the rationality of power has deeper historical roots than the power of rationality; rationality yields to power when there is open confrontation; the power of rationality is embedded in stable power-relations rather than in confrontations (Forester, 2001).

Forester (2001, p. 265) in a strong critique of Flyvbjerg’s theory of power vis-à-vis rationality, notes that even within such a unicausal theory it is important to ‘flesh in’ the details.

Flyvbjerg has so generally connected his concepts of ‘power’ and ‘rationality’ to planning practice or praxis that we cannot distinguish planning that serves established power from planning that resists it, or planning that rationalizes elite decisions from planning that rationally criticizes such decisions.

Forester stresses the importance of analysing power at least from the perspectives of: the *variation* in political agents’ practices not only as

passive bearers of a discourse, but to resist some forms of power while exercising others; the discrete and specific *forms* of power and rationality that can come into play in specific institutional and political contexts; *conditions* under which a rational critique of dominating power is possible; and different *kinds of rationality* that can blind or instruct planning and policy-making (Forester, 2001, p. 269).

Hecló's (1974, p. 306) analysis proceeds with a similar view to Forester's on why it is important not to consider power as an overriding explanation of policy change, and highlighting the importance of pluralistic perspectives as well as of social deliberation and learning.

To observe that particular policy contents have not flowed from innate qualities, interests, or demands of powerholders is not to say that power considerations have been negligible. It is to suggest that a great deal of policy development - its creation, alteration, or redirection - has been settled prior to or outside of substantial exercises of power. In the end, when analysis, deliberation, and persuasion have failed to achieve agreement - as in the case of Swedish superannuation in 1956-57 or British unemployment insurance in 1931 - political power has been resorted to and sometimes proven decisive. Yet these events, which onlookers in each country inevitably termed "crises," stand out precisely because they are so rare. More frequently, changes in the relationships of power - wider political participation, elections results, party government turnovers, new mobilizations of interest groups - have served one variety of stimulus, or trigger, helping to spread a general conviction that "something" must be done. But there have been other triggers besides power contributing to these convictions and, in any event, the possible range of specific policy responses regarding what to do seems limitless.

The question is how can we adequately conceptualize the broad political process supplying this “what to do”?

Our review of social policy development suggests the fruitfulness of viewing politics through the concept of learning. Learning can be taken to mean a relatively enduring alteration in behaviour that results from experience; usually this alteration is conceptualized as a change in response made in reaction to some perceived stimulus. Unfortunately, learning theory has concentrated almost exclusively on learning by individuals; our understanding of how groups learn is, to say the least, fragmentary. To speak of learning by society or groups should not imply reifying society into a discrete organic mind responding to holistic stimuli. Social learning is created only by individuals, but alone and in interaction these individuals acquire and produce changed patterns of collective action. ...

(p. 319) At some risk of oversimplification we may say that, in the policies considered, elites in each nation have functioned as the agents of institutional learning, while the plurality of interests and techniques of influence over time has functioned as the agent of social learning....

The significance of pluralism for political learning and policy has been at the societal rather than institutional level of analysis. The pluralism we have observed is not that usually assumed by American observers, that is, a large number of semi-independent power units at a fairly narrow cross-section in time. At various points policy has been decisively shaped by one or a very few principal actors. The plurality affecting the creation and development of modern social policy has been longitudinal. Over the course of policy development, no particular group, party, or administrative organ has finally captured a monopoly of influence on any policy; no one device of electoral determination, party competition, interest group pressure, or bureaucratic politics has provided “the” technique of policy-making. All have played an important part at one time or another ...

(p. 322) Much of social policy has remained at the level of chance discovery and ad hoc invention, with little attention to accumulated evidence, experimentation, or questions of how the learning process itself might be improved. Despite all this, the collective process of policy-making in Britain and Sweden has remained open, which is to say that it has retained the potential for future political learning. On the policies we have considered, what have been achieved are settlements rather than solutions. Democratic social politics has failed to provide or convince itself that it has any comprehensive, final answers to the profound issues of human welfare. In this failure may lie its greatest success.

In order to both explain and explicate the process of socio-political learning and change, including the resolution of conflicts in the process, Deliberation is discussed in this chapter as the core of the Decision Cell. Heclo (1974) observed that “learning theory has concentrated almost exclusively on learning by individuals; our understanding of how groups learn is, to say the least, fragmentary”, and that little attention has been paid “to accumulated evidence, experimentation, or questions of how the learning process itself might be improved”. To address these concerns, this chapter focuses on systematising Dewey’s concept of *Deliberation* that arguably provides such a normative orientation for public policy-making and sociopolitical learning. This discussion is further informed by more contemporary analyses and critiques on the topic of deliberation.

Systematising Dewey's concept of deliberation

Deliberation is part of the pragmatist method for developing and testing strategies to rationally resolve indeterminate situations; it is the core of the Decision Cell. As seen in preceding chapters, the other decision activities – *define, design and realise* – continually refer to *deliberation*, as it is essentially the decision activity that unifies and coordinates diverse aspects of rational agency.

Deliberation, as conceptualised in pragmatism, relies on imagination (Dewey, 1922/ 2002). Through deliberation the consequences of different problem-solutions and design strategies can be safely, and 'virtually', examined. In this respect, deliberation is also a moral exercise. Even though deliberation is a method for rational agency, Dewey did not organise the different elements of deliberation into a methodological construct (as he did with *inquiry*) (Caspary, 1991). Nevertheless, he extensively analysed deliberation in relation to both rationality and moral development, for example in *Human Nature and Conduct* (1922/ 2002) and six main dimensions of deliberation can be synthesised:

- i. The role of passions and norms
- ii. Developing new insights versus confrontation or consensus
- iii. Dramatic rehearsal and scenario development
- iv. Valuation and reasoned choice
- v. Empathy and moral imagination
- vi. Aesthetics in action

i. A role for passions and norms

In response to an indeterminate situation, acting on an overwhelming preference, or being a 'slave to passion', as linear instrumental models of rationality would have it, was not, in Dewey's view, reasonable.

There is reasonable and unreasonable choice. The object thought of may simply stimulate some impulse or habit to a pitch of intensity where it is temporarily irresistible ... Then choice is arbitrary and unreasonable (Dewey, 1922/ 2002, pp. 193-194).

Dewey, however, did not ignore the influence of passion on agency. On the contrary, he saw passions and emotions as resources, or catalysts, for rational inquiry.

'Cold blooded' thought may reach a correct conclusion, but if a person remains anti-pathetic or indifferent to the consideration presented to him in a rational way, they will not stir him to act in accord with them (Dewey & Tufts, 1908/ 1999, p. LW 7.269).

This quote is congruent with findings in neurophysiological research, as discussed in Chapter 3, showing that without emotion, people are unable to make decisions on which they can act reasonably (Damasio, 2006).

However, for Dewey *more passions, not fewer, are required for rational deliberation.*

Deliberation is irrational in the degree in which an end is so fixed, a passion or interest so absorbing, that the foresight of consequences is

warped to include only what furthers execution of its predetermined bias (Dewey, 1922/ 2002, p. 198).

The pragmatist proviso for passions that play a role in rational agency is: that imaginative and intelligent deliberation should consider the nature and consequences of different passions and desires. Rationality, then, is “the attainment of a working harmony among diverse desires” (Dewey, 1922/ 2002, p. 196). This pragmatist approach of analysing different passions or preferences, and their consequences, is very different from linear instrumental rationality where passions and preferences are considered as ‘given’ and fixed. It could be said linear instrumental models are ‘irrational’ in that they are blindly lured by passions, instead of constructively channelling passion through inquiry and deliberation.

Another less than rational response to an indeterminate situation might be to uncritically “download” previously established norms as a guide for rational agency. Some of these norms may have contributed to the problematic situation in the first place. Sabatier (1988) discusses three overlapping frameworks of norms, or belief systems, in policy-making:

- i. Ideologies and deep core beliefs
- ii. Basic political values or strategies
- iii. Specific policy measures.

Sabatier (1988) also notes that specific policy measures are relatively open to negotiation and change; change, however, becomes increasingly

difficult when moving up the typology of norms, especially because changing core ideologies is a process akin to effecting religious conversion.

As with unevaluated passions, in the pragmatist view, blindly following pre-existing norms and habits is not necessarily rational; this can also lead to 'dead ends' by preventing further learning and moral development.

Habits are conditions of intellectual efficiency. They operate in two ways upon intellect. Obviously, they restrict its reach, they fix its boundaries. They are blinders that confine the eyes of mind to the road ahead...All habit-forming involves the beginning of an intellectual specialization which if unchecked ends in thoughtless action (Dewey, 1922/ 2002, p. 121).

As previously emphasised, following the pragmatist path requires keeping to the *via media* between *fallibilism* (recognising that no norm is so authoritative that it does not require interpretation and judgement with respect to its use in particular situations) and *antiscepticism* (recognising that it is inefficient to arbitrarily discard or ignore pre-existing norms, especially those developed through previous processes of rational inquiry).

In pragmatist inquiry, norms are considered as "intellectual instruments to be tested and confirmed - and altered - through consequences effected by acting upon them" (Dewey, 1929/ 1999, p. LW.4.221). In a way, making

normative judgements in policy-making can be compared to pastry making in to baking. It is a fundamental process, but requires the development of technique through practice and also the correct constituents and conditions, and an understanding of how these 'work' together. In addition, imagination and creativity can make the difference between a run-of-the-mill product and something exceptional.

As a fundamental process in policy-making, making normative judgements should not be an implicit consideration in policy theory, formulation and analysis. Expertise in making normative judgements in public policy needs to be developed through explicit method, practical experience and evaluation. Pragmatism also recognises that imagination and intuition can make a real difference to both the processes and outcomes of policy-making.

ii. Developing new insights versus confrontation or consensus

To resolve indeterminate policy situations, individuals and groups coalesce and form networks or communities of inquiry, delineating the 'boundaries' of the Decision Cell. They may then interact in a 'socially intelligent' process of inquiry or engage in an adversarial process of 'beating down' alternatives till one is the victor. Several parliamentary systems are based on an adversarial system of political deliberation. However, empirical evidence, from the time of the Greek polis to contemporary studies on effective dialogue, shows that confrontation

prevents the development of new knowledge and understanding (Huckfeldt, Johnson & Sprague, 2004; Isaacs, 1999).

Huckfeldt, Johnson & Sprague (2004) studied the development of political opinion in policy networks. They found that in confrontational situations (for example during elections where different political parties or networks are pitched against each other) there was consolidation and stasis of political opinion, even within networks. Confrontation was thus not conducive to the development of new ideas. Whereas in situations that were non-confrontational, diverse political opinions were deliberated on and developed both within and between networks (Huckfeldt, Johnson & Sprague, 2004).

The experience of the MIT Dialogue Project, (Isaacs, 1999) highlights the importance of deliberation in developing new insights and new ways of thinking. Techniques of negotiation, conflict resolution and dialogue can all contribute to facilitating non-confrontational deliberation and the development of new understandings to resolve problematic situations (Drager, 2000; Isaacs, 1999).

As part of a longstanding collaboration between the WHO and the Conflict Management Group, Drager et al (2000) analyse 'real-world experiences' of policy negotiations in over 40 developing countries, in health, planning, finance, development and other sectors. Identification of

'good' negotiation practices was part of this analysis and these practices reflect some of the other approaches, aligned with pragmatism, that have been discussed in earlier chapters:

- Identify all parties involved, e.g. using a stakeholder analysis.
- Consider the interests, priorities, hopes and fears of all parties.
- Develop multiple options and scenarios, keeping in mind that circumstances change and the need to be flexible.
- Apply criteria and standards that are independent and verifiable to help make ongoing decisions.

There is also ongoing research on consensus development methods, especially as they relate to the development of clinical guidelines. In one study, Hutchings et al. (2006) assessed practitioners' use of Delphi and nominal group methods to develop consensus on mental health treatment guidelines. The study showed that while consensus was closer in the nominal group method (face-to-face), the results were more reliable with the Delphi method (where participants do not meet), suggesting that a hybrid of these methods could provide better results.

However, to develop new insights and facilitate learning, there is a need to go beyond consensus, or compromise, on previously held perspectives. Dewey saw new understandings developing, not from competition, or even consensus, but through a 'sublimation' that integrated and

transformed constituent perspectives and preferences (Dewey, 1922/ 2002; Dewey & Tufts, 1908/ 1999).

The object thought of may be one which stimulates [action] by unifying, harmonizing different competing tendencies. It may release an activity in which all are fulfilled, not indeed in their original form, but in a “sublimated fashion”, that is, in a way which modifies the original direction of each by reducing it to a component along with others in an action of transformed quality (Dewey, 1922/ 2002, p. 194).

To develop new insights and shared understanding, developing and testing methods to do so is critical. Methods that have been shown to support ‘thinking together’ (Isaacs, 1999) and building shared understanding, include role plays (Innes, 1999) and scenario development techniques (detailed in the next section).

iii. Dramatic rehearsal and scenario development

Dewey defined deliberation as comprising a “rehearsal (in imagination) of various competing possible lines of action...an experiment in finding out what the various lines of possible action are really like” (Dewey, 1922/ 2002, p. 190). One method that illustrates how dramatic rehearsal can be used in policy-making is *scenario development*. Scenarios have since been used in different policy contexts, including in climate change deliberations (Nakicenovic, Alcamo, Davis, de Vries et al., 2000). The UK Cabinet Office, in setting out core competencies for *Professional Policy Making for the Twenty First Century* (Cabinet Office, 1999), identifies scenario building as

'good practice' for developing forward looking and innovative policies, and for anticipating and managing policy change. The Wanless scenarios, earlier discussed, that described possible futures for the NHS and health outcomes in the UK are illustrative of this concept (Wanless, 2002, 2004).

In scenario development, a set of plausible 'futures' is developed, usually in the form of a matrix of alternative scenarios (Koehler & Harvey, 2004).

The implications of these scenarios, indicators that one or the other scenario may already be playing out, and contingency plans to meet concomitant opportunities and risks are also considered. Scenario development also provides opportunities for people to consider their individual roles and interactions. Possible changes in policy environments are also taken into account, including international economic changes, technological breakthroughs, social value shifts, and environmental pressures in these alternative futures.

A variant of scenario development is the normative scenario, or desired future. This type of scenario development "puts a face on" otherwise abstract sets of objectives.

A well-crafted normative scenario allows an organization to become proactive, working specifically for their desired future, rather than sitting by and passively waiting for what ever the world delivers. It is a tool for allowing individuals and organizations to "create their own future," a perspective that is often an epiphany for the participants (Arlington Institute, 2005).

Scenarios are not probability models or crystal balls in that they are not used to predict the future. Scenarios focus on conceptual and epistemic factors rather than computational complexity (Koehler & Harvey, 2004). A useful analogy for a scenario is a script for a play where certain circumstances are described and interactions in those circumstances explored. Scenarios thus enable actors and organizations to think through and respond more quickly and effectively to changing circumstances, marked by previously identified signposts.

Some of the most powerful examples of scenario development in public policy relate to their use in guiding countries' transitions to democratic systems of governance, for example in South Africa and Guatemala (Commissariat General du Plan, 2004; Kahane, 2002). In 1991-1992, in South Africa, workshops were organised to project alternative scenarios for the country's future over the following decade. Workshop participants were from different racial, socioeconomic, political and occupational groups. While there were many disagreements on what South Africa's future should be, all the participants agreed on scenario development as a method to discuss this topic.

Four scenarios were developed, each named after a type of bird to highlight key characteristics of the scenario for South Africa's future (Commissariat General du Plan, 2004).

- *Ostrich* brought to mind a scenario where international pressure was eased on the government that then decided no further reforms were required. There would be no progress save that of a big bird unable to fly that hid its head in the sand when danger, for example violent opposition, threatened.
- *Lame duck* referred to a bird that limped along, unable to take flight despite trying. In this scenario, different groups would continually veto other groups' proposals, hindering progress.
- *Icarus* was constructed around the idea of a democratically elected government trying to do too much too quickly (fly now, crash later).
- *Flamingo* depicted a slow take off, but with the possibility of flying high and for a long time together with other flamingos. This scenario built on the idea of national and international coordination and taking a long-term view on social and economic development.

While participation in the workshops was limited to a small group of people (from diverse parties and cultures), the four scenarios were presented in South African newspapers, discussed at political conferences, as well as with trade unions, universities and corporations. Phrases such as "Fly like a flamingo" or the threat of becoming a "lame duck" were soon part of socio-political discussions, including in church sermons and on radio talk shows. The 'Flight of the Flamingos' scenario was the one selected to guide South Africa through the country's period of governance

transition. The scenario development process was seen to help South Africans develop a shared vision for the future and guide action along the way (Commissariat General du Plan, 2004).

There are some methodological concerns about scenario development, including participant selection and the somewhat arbitrary structure of the 2x2 matrix to organise scenarios (Koehler & Harvey, 2004).

Nevertheless, scenario development has shown promise as a practical method to help develop imagination and foresight in resolving indeterminate situations (Cabinet Office, 1999). As with all methods of inquiry and deliberation, this method too needs to be applied, tested and progressively developed to facilitate rational use in policy-making.

iv. Valuation and reasoned choice

In considering different policy options and scenarios, deliberation involves making value judgements. Dewey defined *valuation* as a process of inquiry for the evaluation of moral consequences; “in some cases, the value of ends is thought of and in some cases the value of means” (Dewey & Tufts, 1908/ 1999, p. LW.7.274). He made the distinction that *moral* deliberation “differs from other forms not as a process of forming a judgement and arriving at knowledge but in the kind of value that is thought about.”

The value is technical, professional, economic etc., as long as one thinks of it as something which one can aim at...as something to be got or missed. Precisely the same object will have a moral value when it is thought of as making a difference in the *self*, as determining what one will be, instead of merely what one will have (Dewey & Tufts, 1908/ 1999, p. LW.7.274).

Valuation thus reflects both current priorities and future aspirations. A key task of rational agency is to make a unified choice for action based on valuation of diverse preferences and options.

Choice is not the emergence of preference out of indifference. It is the emergence of a unified preference out of competing preferences (Dewey, 1922/ 2002, p. 192).

To illustrate the process of valuation and choice as set out in pragmatist philosophy, Mousavi and Garrison (2003) discuss an ethnographic analysis of consumer behaviour in supermarket shopping. Following the rhythm of situations, shoppers engage in inquiry and deliberation when habitual actions fail to address problem situations. "If it were just a matter of making the calculation, then one would only have to acquire the habit, or the computing program" (p. 149).

More typically, shoppers ascertain what is available in the store, take into account storage capacity at home and what can be bought without spoilage, assess nutritional values, appreciate the aesthetics of products or packaging, and consider ethical issues related to the mode of production before making a final decision on what to buy. The result is reasoned

choice, which, as defined by Dewey (1922/2002), is the emergence of a unified preference or strategy of action out of competing preferences and constraints. Thus, more than just making calculations based on pre-defined preferences and measurable values, as in rational choice or bounded rationality models, Mousavi and Garrison (2003, p. 131) argue that,

A theory that can deal with deliberation regarding incommensurable values better explains economic behavior in the everyday marketplace.

For Dewey, rational choice also required consideration of the consequences of choice and moral choice included taking responsibility for these choices. Choices have consequences both in terms of the potential to resolve immediate problematic situations as well as the extent to which the acts promote learning and facilitate rational agency in the future.

v. Empathy, moral imagination and human nature

In analysing moral imagination in the practice of architecture, Collier (2006) draws on Dewey's concept of *empathy* as "the animating mold of moral judgement".

Empathy involves a going beyond ourselves and our concerns, imagining ourselves as the other so that we come to understand and sympathise with their aspirations, interests and worries. We feel not just for them but as they do (Collier, 2006, p. 313).

In architecture, moral imagination is required not only to meet clients' needs, and to be accountable to professional standards, but also to imagine and nurture "a truly human and sustainable home for us all. That is the vision" (Collier, 2006, p. 316). It seems obvious that empathy should play a role in public policy, at least for similar imperatives as in architecture.

Constituted by sentiments such as empathy and aspiration, deliberation reflects character and projects hope, and therefore cannot be reduced to some simple quantitative construct.

Deliberation is then not to be identified with calculation, or a quasi-mathematical reckoning of profit and loss. Such calculation assumes that the nature of the self does not enter into the question ... Every choice sustains a double relation to the self. It reveals the existing self and it forms the future self (Dewey, 1994, p. 141).

Empirical inquiry, moral imagination and practical experience need to be integrated in pragmatist rational agency. So rather than empiricist, or 'post-empiricist', *supra-empiricist* is perhaps a more appropriate term to describe rational public policy in this context. Key to supra-empiricism, are qualities such as intuition, sympathy and empathy. Pragmatist philosophy is, after all, a commitment to appreciating and developing an understanding of the multiple dimensions of human experience and human nature, including emotion, intuition and creativity, rather than reducing all of human nature to an easily measurable, mechanistic model.

Dewey (1939/ 1989a, p. 83) recognised that a range of problems could arise from basing social, economic and political theories on faulty understandings of human nature. For example, he disentangles the implicit theoretical assumptions that connect capitalism and democracy, as if they were “Siamese twins, so that attack upon one is a threat directed at the life of the other”.

This type of theory claims ... that all social phenomena are to be understood in terms of the mental operations of individuals, since society consists in the last analysis only of individual persons. The practically effective statement of the point of view is found in economic theory, where it furnished the backbone of laissez-faire economics; and in the British political liberalism which developed in combination with this economic doctrine. A particular view of human motives in relation to social events, as explanations of them and as the basis of all sound social policy, has not come to us labelled psychology. But as a theory about human nature it is essentially psychological.

It is, at the very least, unscientific to continue to base public policy and economic interventions on psychological and sociological assumptions about human nature, that have little empirical support. In the *Journal of Economic Methodology*, a series of papers discusses how pragmatist philosophy, based on a more empirically congruent understanding of human nature, can better explain economic behaviour, including consumer choice and economic entrepreneurship, than can mainstream economic theory (Mousavi & Garrison, 2003; Shook, 2003). This discussion has to be taken forward to avoid further reduction of the richness and complexity of human experience and agency to simplistic, easily

measurable and mechanistic models. Developments in neurological and psychological research offer some interesting methodological options, based on understandings of human nature, to guide rational agency. In this context, Damasio (2006) observes that the “organism has some reason that reason must utilise”. In order for such utilisation to occur, Damasio puts forward the *Somatic Marker Hypothesis* to inform rational decision-making.

Somatic markers are a special instance of feelings generated from secondary emotions. Those emotions and feelings have been connected, by learning, to predicted future outcomes of certain scenarios. The automated signal protects you against future losses, without further ado, and then allows you to choose from among fewer alternatives (Damasio, 2006, pp. 173-174).

This description of somatic markers may have, correctly, brought to mind the phrase ‘gut feeling’. Somatic markers may also be more implicit, as at the level of neuromodulator responses related to dopamine and oxytocin. Damasio does suggest caution; stating that this method, just like others, requires understanding, development and testing. In the pragmatist view, somatic markers would be considered as one among many inputs in an overarching, and integrated, process of inquiry.

There is also growing interest in the science and psychology of emotions, as evinced by Goleman’s (1995) best selling book, *Emotional Intelligence: why it can matter more than I.Q.* Emotional intelligence, including empathy

is a key component of both *socially intelligent inquiry* and *moral deliberation* in the pragmatist concept of rational agency.

Assessing how policy-making could build on, and be informed by, human nature-related findings in the health and social sciences, poses a very interesting challenge for the theory and practice of health policy. Perhaps, in addition to surveys, electroencephalographs (EEGs) could help define people's policy preferences (as one factor in an overall process of socially intelligent inquiry). Additionally, the role of intuition and empathy could be more explicitly acknowledged and accounted for in policy theory and analyses; for instance, it is generally acknowledged that great politicians have an ability to 'intuitively sense the mood of the public' or that sometimes policies are only publicised on determining whether they would 'smell right' to the public. More research on the neurophysiological and emotional aspects of rational decision-making, particularly as related to public policy-making, is warranted.

vi. Using the Ethical Postulate as a moral compass

In chapter 3, Dewey's Ethical Postulate was introduced as a falsifiable statement to be tested in problematic situations, restated here as a reminder.

In the realization of individuality there is found also the needed realization of some community of persons of which the individual is a member; and, conversely, agents who duly satisfy the community in

which they share, by that same conduct satisfy themselves. (Dewey, 1891/ 1999, p. 322) ¹⁷

The pragmatist test of this postulate would be with respect to its ability to successfully guide moral deliberation and democratic practice in resolving problematic situations and supporting individual and societal flourishing. It was also discussed how the Ethical Postulate has elements of both 'egoism' and 'altruism', which have been identified as key motivators in social policy decision making (Le Grand, 2003; Pinker, 2006; Titmuss, 1968). This particular body of literature provides a very useful link between pragmatist philosophy and public policy.

For example, Robert Pinker's (2006) synthesis of issues related to egoism, altruism and social policy discusses how the apparent discrepancies between the two characteristics of altruism and egoism have led to contentious debates and dissension on the nature and objectives of social welfare policies in Britain. Richard Titmuss made a passionate case for welfare systems to be based on altruism. This case was supported by his analysis of *The Gift Relationship* of voluntary blood donation. His empirical, and normative, analysis showed that the quality and quantity of blood received in this way, from people's altruism towards a "universal stranger", was superior to that obtained by more competitive or commercial means. Titmuss' treatise, was thus, "also a passionate

¹⁷ Note: changes made to more gender-neutral language.

indictment of the corrupting influence of competitive markets across the whole field of social policy” (Pinker, 2006, p. 13).

Others, like Arthur Seldon, strongly disagreed with Titmuss, saying that he “did not understand how markets worked or the indispensable role they played in the efficient allocation of resources, the extension of choice and the enhancement of welfare.” (Pinker, 2006, p. 12). Pinker himself held that,

In their extreme forms, altruism and egoism are marginal phenomena. As I suggested in *The Idea of Welfare* ‘for the egoist social life is meaningless, and for the altruist it is impossible .(Pinker, 2006, p. 14)

Pinker’s vision for social policy, is remarkably similar to that proposed by Dewey with respect to moving away from unitary solutions to recognising the pluralistic and interdependent nature of human values and social relationships.

The problem with the unitary model of social welfare is that it cannot respond with sufficient sensitivity to the diversity of human aspirations and needs and this will be the case, irrespective of whether the sole providers of services are statutory, voluntary or private sector agencies...

Good social policies ought, therefore, to be designed to complement and reinforce the qualities of interdependence and reciprocity. These are the ideals by which most people try to order their social relationships (Pinker, 2006, pp. 17-18).

However, Pinker acknowledges that a shortcoming of just focussing on

the nature of citizenship and interdependence, was a lack of focus on the motivation and agency that influenced these relationships. Le Grand's (2003) exposition on *Motivation, Agency and Public Policy*, was seen to effectively bring these considerations together.

Le Grand considers that human nature comprises both altruistic and egoistic dimensions that are differently influenced by incentives and costs, including opportunity costs. Therefore,

Positive service outcomes are more likely to be optimized when social policies work with the grain of human nature and take account of the duality of our moral sentiments (Pinker, 2006, p. 21).

In order to optimise social policies, to bring out the best of altruism and egoism in people, Le Grand recommends providing, 'robust incentives' for health care workers, more choice for parents of school children and, radically, "the provision of a universal capital grant of £10,000 to all young people on reaching the age of eighteen." He also highlighted the need for state oversight to mitigate negative tendencies and to prevent or redress harmful consequences (Pinker, 2006, p. 21).

All of this complements pragmatist philosophy quite well, save for the emphasis paid to two fundamental concerns. The first difference is that in pragmatist philosophy, the basis of rational agency is neither altruism nor egoism, but rather the rhythm of situations. An indeterminate situation

necessitates agency and a search for ways to act to resolve it. In this context, altruism and egoism may play a role, along with a host of other diverse motivations and pluralistic imperatives. The recommendation for public policy would be to coordinate a process of socially intelligent inquiry, including on the *design* of incentives, with respect to particular problematic situations in society.

The second gap is the basis for understanding human motivation using considerations of altruism and egoism. In pragmatist philosophy, there is a strong sociological basis for understanding human motivation. It is with respect to *reference communities* that individuals develop, thus also forming social relationships and reference communities. These reference communities influence how altruistic and egoistic tendencies, among other human characteristics, develop and are expressed, and also provide a backdrop against which scenarios of moral imagination can be projected. Without such a reference point, altruism and egoism are but disparate and disjointed considerations. Caspary (1991) emphasises Dewey's principle of *anticipating the responses of other people and of oneself* in moral deliberation. Caspary (1991) considers the case of a young woman who is pregnant. She may deliberate on her choices about carrying the baby to term or having an abortion, by considering the responses of her partner and parents to these choices. She would also have to consider her own responses to those elicited from others, for example whether she would rebel or respond positively (Caspary, 1991).

Given the pluralistic nature of individual lives and social relationships, reference communities can change with different situations. The role of 'intermediate organisations' (Mays, 2000) to provide legitimate reference communities (both for inquiry and moral deliberation) was also earlier discussed. In this context, the role of the state would be to:

- Support inquiry and deliberation at the level of reference communities, such as intermediate organisations,
- Manage externalities, either by promotion or control, at a more overarching level and
- Ensure that learning from societal inquiry and deliberations is organised and shared across society through institutional and societal linkages.

Both Titmuss and Pinker refer to importance of social and community relations in social policy decision-making, and to how individuals' spheres of interest widen from the family to the community as they mature (Pinker, 2006). The extent to which later theories, including Le Grand's, take into account considerations of community is less clear. Given the interdependent nature of considerations of self and society, perhaps Le Grand's recommendation of a £10,000 grant to young people¹⁸, could be usefully supplemented by schemes for young people to

¹⁸ Le Grand proposes providing a universal capital grant of £ 10,000 to all young people on reaching the age of eighteen. Such a scheme would be financed from the proceeds of a

provide some similarly substantive service to communities that they would consider as reference communities, be they related to neighbourhood, school or other reference point.

Dewey and Tufts (1908/ 1999) set out the development of moral theory as a systematic way to guide moral development. Moral theory, as discussed in Chapter 3, would help provide a generalisable account of the types of moral problems encountered, provide information on solutions used to resolve these problems in different situations, and support a more systematic process of moral development (Dewey & Tufts, 1908/ 1999).

With respect to health policy, McIver & Ham (2000) recommend developing a system similar to 'case law' to systematically develop learning with respect to ethics-related health care decision-making, especially as related to contested decisions. A key forum for ethics-related deliberation, explicitly related to case law, is the human rights system that is ratified in international law. Links can be usefully made between health and human rights, including cross-cultural ethical considerations (Beyrer & Kass, 2002; Hunt, 2003). The human rights framework and other normative and ethics frameworks for health policy are further analysed in Chapter 7.

reformed inheritance tax. Le Grand describes the scheme as a policy of 'asset-based egalitarianism'. It is asset-based insofar as the capital grants would be invested and managed by public trustees. Withdrawals of cash would be subject to trustees' approval and might be restricted to such purposes as payment of educational fees, down-payments on house purchases, the start-up costs of small businesses or investment in a personal or stakeholder pension. It is egalitarian insofar as the scheme would redistribute from rich to poor and enable more people to become asset-owners in their own right (Pinker, 2006, pp. 20-21).

vii. Aesthetics in action

Dewey defined the successful outcome of rationality as that which achieves a working harmony between diverse values, desires and their consequences. He saw this as a 'consummation', or bringing together of the diverse dimensions of human experience. As discussed in Chapter 3, the idea of a unification of diverse desires and perspectives through rational agency has an aesthetic akin to the classical Greek composite of *ens, bonum, verum, pulchritudum*; or of experience, ethics, science and art. This is neither a deterministic nor a *natural* end, but a possibility of rational agency - one of the main promises of pragmatist rationality. Contemporary theorists and analysts have also recognised the value of unified and integrated experience. For example, Habermas (1987) and Isaacs (1999) view *participation*, literally (based on the Greek root of the word), as a way of *reengaging with the whole*.

Unifying experience in a Deweyan perspective, however, requires both an appreciation of aesthetics *and* the courage to act accordingly. Agency, by definition, involves action and the final result of rational agency should be consummated experience in practice, not just in reflection or imagination.

There are however vices of reflection as well as of impulse. We may not look far enough ahead because we are hurried into action by stress of impulse; but we may also become over interested in the delights of reflection; we become afraid of assuming the responsibilities of decisive

choice and action, and in general be sicklied over by a pale cast of thought. We may become so curious about remote and abstract matters that we give only a begrudged, impatient attention to the things right about us. We may fancy we are glorifying the love of truth for its own sake when we are only indulging a pet occupation and slighting demands of the immediate situation (Dewey, 1922/ 2002, p. 198).

This discussion on the consummation of experience through rational agency concludes the development of the Decision Cell model. This model illustrates how a pragmatist revision of rationality can be transposed to a theory of policy-making.

Barriers to functional participation and deliberation

While the potential power of sociopolitical deliberation has been established, there are implications in how deliberation is designed and operationalised, that warrants caution and evaluation. A politically successful argument, or consensus position, may not necessarily successfully solve the problem it seeks to address; as in Edelman's (1977) analysis of *Words that succeed and policies that fail* suggesting this was equivalent to the expression 'the operation was successful, but the patient died'. Beyond effectiveness concerns, political discourse has power and equity implications. Edelman (1977) also argues that political and media agendas are dominated by ideas and interpretations put forward by political elite invariably reinforcing the status quo and disenfranchising those with less political power and voice.

In addition, while more inclusive policy processes may help address equity concerns, there is nothing intrinsically moral in collective political discourse and action. The ethos of moral theories indicates that ethical and moral standards are products of strong socio-political imperatives and values (Hacking, 2000). However, history demonstrates that some of the most powerful political discourses and societal actions have not always been the most ethical or moral.

From a pragmatist view point, functional participation in deliberative processes refers to the effectiveness of these processes with respect to resolving a problematic situation and in promoting socio-political learning and flourishing. However, there are several barriers to ensuring functional participation in policy deliberation. On a conceptual level, the construct of participation in deliberative and decision-making processes is not clearly defined and can refer to tokenistic or manipulative exercises, as well as to initiatives where participants control agendas and contribute to decision-making (Arnstein, 1969; Litva, 2002).

On a practical level even though the right to participation in public affairs is a human right (UNHCHR, 1996 - 2007), this right may not be enjoyed because of the lack or misallocation of resources, and the lack of institutional processes to ensure the realisation of that right. For instance, if every citizen has a right to participate, a basic requirement to monitor

the realisation of that human right is that every citizen is counted; yet data from registration of births and deaths or censuses are patchy at best in many countries (Tomasevski, 2001); and registering citizens to vote poses similar challenges, even in more developed economies. Even if the right to participate is protected in law, the legal framework for enforcement may have inherent biases with regard to access or itself involve corruption (Jenkins, 1978).

Adequate education and access to information can pose further barriers to participation in policy-making as discussed in Chapter 4 in relation to health literacy. Formal and informal education systems need to provide individuals with a basic knowledge set as well as with the skills to access, understand and use information (Zarcadoolas, Pleasant & Greer, 2006). However, not all education systems function effectively and not all people have access to even basic education. Access to education and information has implications for the extent to which individuals' participation is informed (Jenkins, 2002).

The role the media plays in disseminating information in society was discussed in Chapter 5. However, the media may be driven by agendas that are difficult to ascertain, including commercialisation, and thus provide information of varying credibility (Hargreaves, Lewis & Speers; McCombs & Shaw, 1993). The extent to which the media system is developed in a country, and the degree of press freedom from political

and special interest powers has implications for the quality of information available to citizens¹⁹. The Internet is increasingly used as a forum to mobilise participation, facilitate access to information and services, and demand accountability (Jenkins, 2002; Kuruvilla, Dzenowagis, Pleasant, Dwivedi et al., 2004). However, there are huge disparities in the level of connectivity across and within countries as well as in the skills and resources required to use it.

Thus while activism for increased participation is often associated with calls for decentralisation, strong political institutions, infrastructure and coordination are required to enable effective participation (Cornwall, 2000); a finding supported by empirical studies of centralisation and decentralisation in health systems, as earlier discussed with reference to studies in Brazil and Uganda (Atkinson & Haran, 2004; Golooba-Mutebi, 2005).

While institutional structures are both a reality and required to facilitate effective participation and deliberation, it is also important to recognise the limits these structures impose. On a pragmatic level some national constitutions require that certain governance functions, such as those of the civil service and judiciary, are not subject to amendments by public deliberation or popular choice (Scruton, 1982). Inherent social and institutional biases may exacerbate existing inequities or create new ones.

¹⁹ ICCPR General Comment 25, para 25

For example, land reform programs in Latin America systematically excluded women from the process as land was allocated by household and the deals operationalised through the 'male head of the household' (Tomasevski, 2001).

Participation mechanisms can also maintain the status quo by bureaucratising diverse societal 'voices' into existing institutional processes and structures in an organised way (Mosse, 2001). The bureaucratisation of participation is also evident in the phenomenon of 'development ventriloquism' where bureaucrats and academics interpret and present the views of other stakeholders (Ngokway Ndolamb 1991). It is further observed that broad or 'representative' participation is sometimes used by those in power to dilute dissent of smaller, more vocal opposition groups to proposed policies and programs (Hailey, 1999).

Individuals' participation in public affairs cannot be romanticised as this may be influenced by transient fads and trends (Cooke, 2001). As discussed earlier, it is not clear to what extent individuals' participation is 'informed'. Furthermore, people may act primarily to satisfy their individual needs exclusively, despite evidence that collective action leads to both public and individual benefit. The resultant loss for individuals themselves and society as a whole is referred to as the *tragedy of the commons* (Hardin, 1968).

The outputs of group processes also cannot be romanticised. The inherent morality of a group cannot be assumed and participants' motivations need to be examined carefully. Analyses show that people may think and act differently in group-settings by taking more risky decisions (Cooke, 2001). Critical independent opinions may be suppressed by 'group think' where individuals defer to the perceived dominant opinions of the group (Janis, 1972). The extent to which participants have fixed opinions and the extent to which these opinions are explicit in the participatory process is unclear (Brugha & Varvasovsky, 2000; Dugdale, 1999).

It is also imperative to develop a better understanding of the logistics of participation as the physical environment, communication tools, and even refreshment breaks could all affect the substance, nature and outcomes of the process (Dugdale, 1999; Innes & Booher, 1999). Who participates and the methods used can also affect the nature and outputs of group processes (Brodie, 1996; Kuruvilla & Joseph, 1999). Earlier in this chapter, research on testing consensus development methods was described in the context of clinical guidelines (Hutchings, Raine, Sanderson & Black, 2006); such research could be usefully extended to other areas of deliberation in health and public policy-making.

Feminist critiques of deliberative theories, and links with pragmatism

Fischer (2003) notes that while knowledge and societal discourse are critical dimensions of political power, most models of policy-making

strangely seem to ignore the deliberative dimension of sociopolitical decision-making. He proposes reframing public policy to explicitly acknowledge discursive and deliberative power. Fischer draws on Habermas's theories of communicative action and 'ideal speech' as standards against which political discourse can be evaluated (Fischer, 2003; Habermas, 1987). He also uses Foucault's (1984) theories of power to 'anchor discourse' in socio-historical processes, particularly through genealogical analyses of the constructs and structures of power that shape political discourse and societal action (Fischer 2003). A tension arising from those two theoretical perspectives is whether the main objective of analysis is improved understanding, better quality and morality of political discourse, or changes in societal power structures and the extent to which those aims are linked. This tension constitutes a 'problematic situation' with respect to deliberation that has been extensively addressed in feminist critiques of deliberative theories, particularly as related to Habermas' work.

Seyla Benhabib (1986) developed a fundamental critique against Habermas' earlier deliberative theories that were based on a 'universal' ethic. Habermas' communicative ethics required participants to ignore their individual perspectives, practices and values in order to enter into deliberations based on more general principles on which there could be wide agreement. This general ethic implied that individual, situated perspectives were somehow morally inferior, and were to be less

privileged in deliberation.

Benhabib's critique is aligned with Dewey's views on the importance of plural perspectives in moral deliberation (see also Benhabib, S and Fraser, N, Eds. (2004). *Pragmatism, critique, judgment*). Making a similar critique to Benhabib's, Shook (2004, pp. 40-41) discusses Dewey's concept of moral deliberation in relation to Rawls' and Habermas',

Habermas believes that if people were allowed to include in discussion some appeals to their actually held ethical values and norms, then that discussion would be irredeemably distorted away from genuinely rational and morally acceptable discourse. But from Dewey's perspective, democratic deliberation should primarily concern the diversity of respected and pursued social goods and norms. Dewey would obviously agree with Habermas that democratic discourse should be free from coercion and violence. But Habermas, like Rawls, goes too far in seeking a democratic forum that requires a person to suspend or ignore her genuine values and norms. Nothing is more deserving of public deliberation than our most cherished values.

Issues related to moral deliberation are further analysed in Chapter 7.

Another feminist critique of Habermas' work is based on his model of a single public (bourgeois) sphere for deliberation. Nancy Fraser (1992) disagreed with this depiction and proposed that sociopolitical deliberations were conducted by multiple publics, who could be characterised as either *strong* or *weak publics* (this concept was later taken up by Habermas as well c.f. 'Facts and Norms'). Eriksen and Fossum

(2002) build on Fraser's description of multiple publics, but redefine *weak publics* as *general publics*, referring to the public sphere where a variety of opinions are deliberated on and formed, but not necessarily oriented towards, or included in, formal policy-making processes.

In the context of this discussion, this thesis is specifically focused on public policy-making processes, and thus focuses more on the *strong publics* dimension. However, the *general publics* view is also explicitly recognized as interacting with, and influencing, ongoing policy processes, for instance as depicted in the permeable boundaries of the Decision Cell model, as discussed in Chapter 4 in relation to non-decision-making and the need to recognise both systemic and institutional agendas (Brodkin, 1985; Crenson, 1971), and also as highlighted in Chapter 2 in the distinction made between NGOs and CSOs on the basis of the political orientation of the latter (Blair, 1997).

Young (2000; 2001) further develops the idea of multiple publics to propose that deliberative and democratic processes cannot be consistently identified with a particular policy perspective or institutional context. She cautions against the idea that diverse groups can be brought together under some pre-existing unifying principle or monolithic understanding of political processes.

Young also discusses how publics' perspectives change and be transformed through deliberation.

Most proponents of deliberative democracy emphasize that this model conceptualizes the process of democratic discussion as not merely expressing and registering, but as *transforming* the preferences, interests, beliefs, and judgement of participants (Young, 2000, p. 26).

That this type of transformation through deliberation occurs in practice is borne out by the experience of the MIT Dialogue Project (Isaacs, 1999) and in scenario development exercises (Commissariat General du Plan, 2004), both of which were discussed earlier in this chapter.

The transformative nature of deliberation is reflected in Dewey's (1922/2002) definition of the same; which views deliberation as leading to new understandings and integrating diverse considerations in a transformative manner. Further, Dewey (1954/1927) consistently stressed the importance of pluralism in societies, both as a reality and as a resource for sociopolitical inquiry and deliberation.

Young (2000; 2001) cautions that in modern, pluralistic societies, the extent to which understandings can be shared to satisfactorily resolve conflicts or be truly transformative given existing institutional boundaries, cannot be taken for granted. These concerns relate to earlier discussions with respect to the barriers to participation and deliberation in general.

A case can be made for explicitly including gendered perspectives into the foundation on which pragmatist understandings of socio-political agency are developed (Mahowald, 1997). For instance, Dewey explicitly acknowledged Jane Addams as a key influence in his thinking, worked with her at Hull House and on various resettlement and education projects, and he even named his daughter after her. Mahowald (1997, p. 44) discussing the influence of Jane Addams on pragmatist philosophy notes that:

Jane Addams educated herself informally through extensive, critical reading and through contact with well-respected academics who admired her intellectual strengths ... John Dewey described her manuscript of "A Modern Lear" [an analysis of the Pullman strike] as "one of the greatest things I ever read both as to its form and its ethical philosophy" (Lasch, 1965, p. 176). After reading *The Spirit of Youth and the City Streets*, James wrote to Addams: "You are not like the rest of us, who seek the truth and try to express it. You inhabit reality" (Lasch, 1965, p. 84). Had he framed his compliment in pragmatic terms, James might have written: You are more of a pragmatist than we because in you the dichotomy between theory and action is not simply critiqued but dissolved.

However, despite acknowledging her influence in his life, Jane Addams's writings do not figure prominently in Dewey's work; reflecting perhaps the general position of women's writing in academia at the time (Mahowald, 1997). Further, it can be seen that Dewey's position on the World Wars as the lesser of two evils, was considerably different from that of Addams, who thought that war should never be an option in civilised

societies (she later became the first American woman to win the Nobel Peace Prize, for her activism, political analyses and peace work).

While updating pragmatism with gendered perspectives of experience is a valuable idea, and indeed could quite easily be done (Seigfried, 1996), the pragmatist update should not be thus limited. Dewey's emphasis on pluralism can be used to integrate diverse and pluralistic practices and perspectives on, and in, socio-political deliberations. This view is consistent with Amartya Sen's (2006) thesis on identity, where he recognises that there are multiple ways in which people define themselves and the choices they make, rather than any one definitive categorisation or lens; Sen's views on pluralistic identities are further discussed in Chapter 7. This view is also consistent with that of those feminist scholars who recognise that especially in the context of law and politics, inclusion of women and gendered perspectives, while important, need not necessarily be sufficient to make political processes more attuned to women's perspectives and needs. Attention to a diverse range of 'socio-cultural practices, perspectives and choices may be more politically useful, even for women, than attention to singular 'identities'. Diversities in socio-cultural practices cannot be reduced to a single identifying category and cannot find adequate protection under such categories, even within human rights or anti-discrimination law (Charlesworth & Chinkin, 2000).

Overall, pragmatist philosophy and feminist studies are quite compatibly aligned. In *Pragmatism and feminism: reweaving the social fabric*, Charlene Haddock Seigfried (1996, p. 21) discusses the past divergence of the social sciences from pragmatist philosophy and notes:

But from my perspective it [pragmatist philosophy] seems to have been criticized and eventually relegated to the margins for holding the very positions that feminists today would find to be its greatest strengths. These include early and persistent criticisms of positivist interpretations of scientific methodology; disclosure of the value dimension of factual claims; reclaiming aesthetics as informing everyday experience; linking of dominant discourses with domination; subordinating logical analysis to social, cultural, and political issues; realigning theory with praxis.

Certainly, Dewey intended that pragmatism would be tested and evolve past his time in order to make it relevant to contemporary deliberations; this type of socio-political learning being a central tenet of pragmatist philosophy. Thus he would have welcomed the challenges, critiques and correlations with pragmatist philosophy raised by later feminist studies.

The Decision Cell: a 'good' policy theory?

It now remains to consider whether the Decision Cell model can make a contribution to policy theory, based on criteria set out for 'good policy theory' by some leading policy theorists, particularly Lasswell (1951), Sabatier (1999) and Fischer (2003).

Harold Lasswell (1951) set out four requirements for the development of the policy sciences (Fischer, 2003; Sabatier, 1999), against which the conceptual model of policy-making presented in this paper can be evaluated. These requirements were that theoretical and analytical developments in the policy sciences should be:

1. Multidisciplinary
2. Problem solving
3. Explicitly normative, with an emphasis on human dignity
4. Contextually oriented.

Sabatier (1999) put forward additional criteria for good policy theory. These overlap with Lasswell's criteria, for example, in that policy theory should provide normative orientation. In addition, he recommends that policy theory should:

5. Address broad sets of factors that political scientists traditionally consider important
6. Provide causal explanations and be testable or falsifiable.

A third set of criteria for good policy theory is put forward by Fischer (2003) who stresses the need to *Reframe Public Policy* by incorporating:

7. Critical theory criteria, wherein policy theory should address sources of social inequalities and promote approaches whereby those who are not in positions of political power can also influence socio-political change.

8. 'Post-empiricist' criteria, where post-empiricism is defined as:

An orientation that seeks to move beyond an 'objectivist' conception of reality. Stressing the subjective foundations of social reality, postempiricist scholars seek to overcome the objective-subjective dualism imposed by 'positivists' or 'neopositivist' epistemological doctrines...(Fischer, 2003, p. 12).

As with the previous sets of criteria for good policy theory, critical theories are required to be explanatory, practical and normative.

Finally, a pragmatist test of a good policy theory would be its:

9. Value in practice to help understand and guide human experience with respect to resolving concrete problematic situations.

The Decision Cell model is now assessed against these nine criteria to see whether it stands up as a good policy theory.

1. Multidisciplinary

First, with respect to drawing on multidisciplinary perspectives, the development of the Decision Cell model is explicitly multidisciplinary. In addition to philosophy and policy science, concepts from other fields, including biology, communication, sociology and organisational theory, have been analysed to inform the development of the model and elucidate related concepts. The model is also multi-disciplinary in that it allows for an integrated approach across different levels of disciplinary analysis; for

instance, on the roles of individual actors to organizational processes, with respect to formal and informal relationships, theories of democratic participation and the framing and evaluation of evidence in policy making.

This model could also be considered multidisciplinary from the perspective that there is a possibility for different disciplines to see what role they play in resolving indeterminate public policy situations. For example, researchers may feel more aligned with activities in the 'define' or 'realise' phases where the nature of the problem and possible solutions are explored or evaluated. Economists and policy analysts would perhaps feel more at home with the tasks done in the segments 'define' and 'design', whereas the central area of deliberation may be a domain where lawyers and politicians and civil society groups feel more competent. A pragmatist reading of the model, however, would not favour such allocations, because this would only serve to further the (mistaken) impression of disciplinary boundaries between different segments and activity modes. Perhaps an essential message accompanying this model is that disciplinary boundaries should matter less than they do currently.

In dealing with concrete problems, inquiry cannot be separated into orderly stages and offices. For instance, both civil society groups and economists could have essential contributions to make to what typically goes on in the decision mode of 'define'. During the 'realisation' phases of,

say, a project in preventative care, understandings developed by social scientists, could be as formative of policy implementation as the services provided by medical personnel.

2. Problem-solving

The second criterion addressed is the focus on problem solving. The primary focus of the Decision Cell model is on the resolution of problematic situations where a previously successful state of habitual equilibrium has been challenged. However, as emphasised earlier, the 'problem orientation' of the Decision Cell model should not be misinterpreted as being initiated by a given problem or fixed end ('end', as used here, is a positive formulation of 'problem'). Disequilibrium is not quite the same as having a fully defined problem. The central intuition in the Decision Cell model is that the definition of problems and ends is itself an act of rational agency and that this is an evolving and iterative process throughout the policy-making process.

The specific problem that the development of the Decision Cell model itself addressed was the need for an integrative, explanatory and normative theory of policy-making. By building on a pragmatist foundation on what comprises rational decision-making, the Decision Cell model is able to integrate current empirical and theoretical understandings on policy-making.

3. Normative and based on human dignity

With respect to the criterion that a good policy theory should be normative, the Decision Cell model is, in essence, a normative model of policy-making that integrates scientific sense, democratic sensibility and moral imagination. Normative orientation for policy-making is also provided by Dewey's Ethical Postulate, with an emphasis on human and social dignity, where the flourishing of individuals and societies is mutually referential and best supported by moral deliberation and moral development. Finally, the Decision Cell model provides an overarching structure and method to guide evaluation of other normative frameworks, as can be seen in Chapter 7.

4. Contextual orientation

The final criterion with respect to Lasswell's blueprint for policy science, is that of contextual orientation. As described in the first 'pillar of pragmatism', the concept of the *rhythm of situations* is explicitly context-specific. This rhythm of situations is the foundation for the entire Decision Cell model. A pragmatist concept of rational agency is inseparable from the concept of situation. The *situation* poses the challenge and necessitates the formation of agency. In turn, rational agents produce distinctions, such as between means and ends, as tools to define and resolve problematic situations.

The category of 'situation' thus provides the context in which concepts, norms and strategies are formulated, tested and developed. All strategies and all theoretical distinctions applied to a particular situation must be interpreted as functions to cope with the challenges posed by that particular context. In this sense, the Decision Cell model is definitively 'context-specific' since it is embedded within the 'rhythm of situations'. This contextual orientation extends to considerations of the self and society in context, and of situations themselves being embedded in socio-historical and environmental contexts.

5. Addressing contemporary concerns

Building on Lasswell's criteria, Sabatier (1999) additionally recommends that good policy theory should address broad sets of factors that political scientists looking at different aspects of policy-making have traditionally deemed important. As described in the preceding chapters, the Decision Cell model addresses and accommodates current theoretical and empirical perspectives, including on policy institutions, networks, agendas, norms and change, all of which are traditionally considered important topics in policy science. However, this is a very inward looking, or academic, criterion. In the pragmatist view this criterion would extend to concerns of politicians, bureaucrats and the various publics who are all involved in different policy situations. The Decision Cell model does facilitate such a holistic and inclusive view on contemporary concerns in public decision-making.

6. Testability and causality

Sabatier (1999) also adds the demand, in line with the requirements for scientific theories in general, that policy theory includes causal explanations that are testable or falsifiable. Dewey's core approach to rationality was to integrate precept with practice through the relation of causes to consequences (Dewey, 1938/ 1999). The Decision Cell model itself can be read as an unfolding causal story of policy-making, initiated to resolve challenges to the equilibrium of previously stable policy interactions. Rational agency is used to resolve indeterminate situations and leads to new learning and further (temporary) equilibrium.

Additionally, the decision activities in the model, *define, design, realise* and *deliberate*, are predicated on a 'scientific' method, Dewey's *logic of inquiry*. Thus, policy-making processes and change are described in causal and empirically testable terms in the Decision Cell model. Finally, even one of the most prescriptive elements of pragmatist philosophy, with respect to ethics and moral development, is posed in terms of an Ethical Postulate. This postulate is intended to be applied and tested as a guide to resolve problematic situations and to support individual and social flourishing.

7. Critical theory and social change criteria

Fischer (2003), drawing on Habermas, Foucault and other theorists of deliberative democracy, discusses the need to evaluate policy theory against 'critical and social change criteria' (similar criteria were discussed in Chapter 5 in relation to research evaluation). These criteria address the extent to which policy theory is able to include perspectives of the less powerful, identify the need for and strategies of change, have a clear historical context and explicitly take into account values and consequences. These criteria are key concerns in pragmatist philosophy and are explicitly included in the Decision Cell model, for instance in highlighting the socio-historical context of situations and the need to promote socially intelligent, and inclusive, inquiry. The constructive use of power and the importance of ethics in guiding rational agency are further normative considerations in the Decision Cell model that address these critical and social change criteria.

8. Postempiricist criteria

Fischer (2003) also recommends evaluating policy theory and analysis by post empiricist criteria, highlighting the need to go beyond reductionist, positivist analyses and trying to find unitary metrics and explanations of policy problems and situations. Instead Fischer stresses the need to appreciate pluralistic, 'subjective' perspectives that construct social realities, which may not be as easily measurable.

The pragmatist approach of integrating inquiry into concrete problematic situations with pluralistic perspectives and moral deliberation, is aligned with this post-empiricist view. As described in the pragmatist pillar of 'via media' (in Chapter 3), Dewey described situations as comprising both existential and interpretational, or functional, dimensions (i.e. both 'objective' and 'subjective' qualities). Pragmatism thus also goes beyond 'technical rationality' to emphasise the importance of imagination, emotions and empathy to guide rational agency. However, Dewey emphasised the value of both empirical inquiry and 'post-empirical' intuitions as part of an integrated approach to developing and guiding rational agency. Therefore, rather than 'postempiricist', perhaps 'supra-empiricist' would be a more appropriate term to describe the pragmatist approach that is reflected in the Decision Cell model.

9. Pragmatist test of theory in practice

While the Decision Cell model stands up well against these policy science criteria for good policy theory, the most important pragmatist test of theory is its value as a both a practical 'tool' and guide; in the sense that it can be used to resolve concrete problematic situations and further develop knowledge.

The Decision Cell model, in order to meet this pragmatist criterion, must be applied and tested in practice. The theory also needs to be open to revision and refinement; in this respect through the course of this PhD, the

Decision Cell model has gone through several iterations, made with reference to ongoing reading and new insights on policy theory and pragmatist philosophy, and based on feedback on the emerging concepts from peer reviewers, colleagues and thesis committee members. Thus the Decision Cell model has passed through a process of criticism and refinement, and has a certain theoretical robustness. With respect to contributing to academic discourse, and facilitating a better understanding of policy-making, the feedback, including that from peer reviewers and colleagues, has been largely positive.

However, evaluating the utilisation and utility of this policy theory in the practice of policy-making, poses a considerable challenge. For example, applying this theory in practice or analysis would require funding to undertake such a project and/or a cooperative and interested policy agency and community. While there are no definitive answers that can be provided here as to how this practical challenge may be tackled, getting the Decision Cell model into the policy science literature seems a good starting point with respect to its eventual utilisation and evaluation.

This chapter has only evaluated the Decision Cell model in relation to selected criteria for policy theory. Chapter 7 compares this model with other normative frameworks for health policy and Chapter 8 concludes with a detailed assessment of the potential advantages and challenges that

may be faced in using the Decision Cell model and the pragmatist approach to rational policy-making.

Chapter 7. Comparing norms and ethics for health policy

CHAPTER OUTLINE

| | |
|------------------------------------------------------------------------|-----|
| Comparing norms and ethics for health policy..... | 345 |
| Summaries of six normative frameworks for health policy | 347 |
| a. Accountability for Reasonableness..... | 347 |
| b. Capability and Health Account | 350 |
| c. Ethics Framework for Public Health | 354 |
| d. The Good Decision Criteria | 357 |
| e. Human Rights | 359 |
| f. Professional Policy Making..... | 367 |
| A pragmatist analysis of normative frameworks for policy-making .. | 369 |
| i. The interdependence and rhythm of situations | 370 |
| ii. Agency: self & society & functional coordination..... | 377 |
| iii. Decision activities: define, design, realise and deliberate | 384 |
| iv. Ethics and moral development..... | 388 |
| v. Operational links: methods and mechanisms | 396 |
| vi. The paradox of coordinating change & instituting learning..... | 400 |
| Conclusion..... | 404 |

Comparing norms and ethics for health policy

Morality is a continuing process not a fixed achievement. Morals means growth of conduct in meaning; at least it means that kind of expansion of meaning which is consequent upon observation of the conditions and outcome of conduct.

John Dewey, 1922, Human Nature and Conduct

*Though justice be thy plea, consider this,
That, in the course of justice, none of us
Should see salvation: we do pray for mercy;
And that same prayer doth teach us all to render
The deeds of mercy.*

William Shakespeare, Merchant of Venice, Act IV, Scene I

In this chapter the Decision Cell model will be compared with selected normative frameworks related to health policy. The aim here is not to provide an exhaustive review or comparative analysis of these frameworks; instead, the idea is to examine different normative frameworks in light of pragmatist rationality. This will help ascertain the way in which the Decision Cell model can 'enter into a dialogue' with other normative frameworks and to analyse how norms can be evaluated using pragmatist criteria to guide and orient health policy.

Potentially, any normative frameworks related to health policy could have been used in this discussion. In the interest of honing the scope and focus of this chapter though, the following six frameworks were selected - based

on their relevance to health policy as well as correspondence to, not necessarily agreement with, the pragmatist concepts discussed in this thesis. These selected normative frameworks, while not usually referred to as frameworks per se, are termed as such in this discussion for simplicity, as they cover a range of normative codes, accounts, models, frameworks and ethics for health policy:

- i. Accountability for Reasonableness (Daniels & Sabin, 1998), a normative framework that draws on Rawls' *theory of justice as fairness*.
- ii. The Capability and Health Account (Ruger, 2006), a relatively recent framework is based on Sen's and Nussbaum's Capability Approach.
- iii. The Ethics Framework for Public Health (Kass, 2001), developed to address ethical concerns specific to public health, particularly to address the tensions between population-based health interventions and their effects on individual autonomy.
- iv. The Good Decision Criteria, based on a review of the literature on decision-making and developed in the context of environmental policy (Dietz, 2003).
- v. Human Rights standards, as set out in treaties ratified in international law (UNHCHR, 1996 - 2007), focusing on standards related to participation and accountability in public affairs.
- vi. Professional Policy Making for the Twenty First Century, a framework of competencies developed by the UK Cabinet Office (Cabinet Office, 1999). A related, independent analysis of policy-making processes in

the Department of Health (DH) is also considered in this discussion (Alvarez-Rosete, 2005).

Summaries of six normative frameworks for health policy

a. Accountability for Reasonableness

The **Accountability for Reasonableness** framework is one of the more well-known frameworks in the health policy literature. This framework was developed by Norman Daniels, a philosopher, and James Sabin, a physician, in the context of analysing *The Ethics Of Accountability In Managed Care Reform* (Daniels & Sabin, 1998). This framework was conceived as a meeting point between theoretical concepts of justice, particularly with respect to Rawls' (1971/ 1999) *Theory of Justice* as fairness, and concrete concerns about the design of health systems and the equity of health services. Indeed, Rawls (1985) had also emphasised that his conception of justice was both political and practical.

Rawls (1971/ 1999) based his theory of justice on the *original position*, which was a reference point that could be used to justify, or account for, institutional and policy arrangements. The 'original position' was a hypothetical scenario, or 'thought experiment', wherein individuals entered into a socio-political contract behind a 'veil of ignorance'. This veil precluded knowledge of individuals' social or economic success. Rawls (1971/ 1999) posited that from this original position, the only rational

choice, or contract, that individuals could make was in favour of a fair system that allowed the maximising of the greatest benefit for the least advantaged.

Rawls' (1985, p. 227) theory of *justice as fairness* operates on two key principles. First the *equality of liberty principle* states that "each person has an equal right to a fully adequate scheme of equal basic rights and liberties" and that these liberties should be extended to everyone. The *difference principle* states that "social and economic inequalities are to satisfy two conditions: first, they must be attached to offices and positions open to all under conditions of fair equality of opportunity; and second, they must be to the greatest benefit of the least advantaged members of society". The second condition is also referred to as the Maximin principle, where ensuring the greatest amount of benefit to the least well off in society should be the guiding tenet of public decision-making. These principles are lexically ordered, that is that the second principle follows from the first and there can be no trade-offs.

Rawls' concept of *equality of opportunity* underpins the Accountability for Reasonableness framework (Daniels, 2001). This principle prohibits discriminatory barriers in access to offices and positions in society, and promotes measures to address opportunity inequities, such as those that arise through lack of education, socio-economic inequalities and ill-health. Daniels (2001) sees health care as supporting normal functioning and thus

enabling access to opportunities, but he also recognises the influence of wider social determinants of health. Addressing inequities related to the social determinants of health requires addressing the fairness or justice of related social and economic policies. Fair process in developing policies is, therefore, one of the main rationales for the Accountability for Reasonableness framework.

Accountability for Reasonableness has been applied and evaluated in a range of health care settings to guide and assess decision-making; for example - to compare health care priority setting methods (Gibson, Mitton, Martin, Donaldson & Singer, 2006), discuss strengthening consumer voice in health care decision-making (Sabin & Daniels, 2001), analyse contested treatment decisions (McIver & Ham, 2000) and to develop benchmarks of fairness to evaluate proposals for health systems reform in both industrialised countries (Daniels, Light & Caplan, 1996) and developing economies (Daniels, Flores, Supasit, Ndumbe et al., 2005). These analyses yielded recommendations in the form of modifications to the Accountability for Reasonableness framework; these will be discussed in the following sections.

The Accountability for Reasonableness framework sets out four conditions to help ensure fairness, legitimacy and accountability for reasonableness, in health care decision-making.

- **Publicity condition** – information on decisions and their rationales should be made publicly available.
- **Relevance condition** – the rationales on which decisions are based should be ones that all ‘fair-minded parties’ can agree are relevant.
- **Appeals condition** – there should be available mechanisms to challenge and dispute decisions.
- **Enforcement condition** – voluntary or public regulation for the first three conditions should be in place.

As this framework is based on concept of distributive justice and fairness, there is an overarching assertion that “costs matter” with respect to cost-savings, cost-effectiveness and fairness in health care resource allocation (Daniels & Sabin, 1998, p. 53).

b. Capability and Health Account

The **Capability and Health Account** was developed by Jennifer Ruger (2006), based on the philosophical foundation of Amartya Sen’s *Capability Approach* and Martha Nussbaum’s related work that draws on Aristotle’s political philosophy.

Nussbaum and Sen (1993, p. 1) introduce their edited book *Quality of Life*, with a story from Dickens’ *Hard Times*. In response to the schoolmaster’s question of whether “fifty millions of money” would make a prosperous

nation, Sissy Jupe had no easy answer. She thought it would depend on who had the money, and whether any of it was hers; this, however, was not the approved answer.

The Capability Approach similarly includes considerations of 'who has what', but goes beyond this to ask 'what they do' and 'are' and 'want to be', the freedom they have to make these choices and the 'functionings' and 'capabilities' they have to realise them (Nussbaum & Sen, 1993).

Functionings represent parts of the state of a person – in particular the various things that he or she manages to do or be in leading a life. The *capability* of a person reflects the alternative combinations of functionings the person can achieve, and from which he or she can choose one collection. The approach is based on a view of living as a combination of various 'doings and beings', with the quality of life to be assessed in terms of the capability to achieve valuable functionings (Sen, 1993, p. 31).

Sen (1993, p. 30) makes a link between the Capability Approach and the Aristotelian concept of *dunamin* that was used "to discuss an aspect of the human good, which is sometimes translated as 'potentiality' and can be translated also as 'capability of existing or acting...'" He also acknowledges Martha Nussbaum's role in 'illuminating' and developing this connection. Another Aristotelian principle, key to the Capability Health Account, is that of *proportionality*, whereby like cases should be treated similarly and unlike cases treated differently in proportion to their difference." (Ruger, 2006, p. 142).

There are some differences between Nussbaum's and Sen's approaches to capabilities. Clark (2005) points out that Nussbaum draws on Aristotle's work to develop a list of 'central human capabilities' that include *bodily health, emotions* and *political and material control over one's environment*. Here Sen's work diverges from Nussbaum's, as he does not value, or validate, developing a predetermined, theoretical list of capabilities (Clark, 2005, p. 7). Sen thought that such decisions should emerge from public reasoning and deliberation in specific contexts.

The problem is not with listing important capabilities, but with insisting on one predetermined canonical list of capabilities, chosen by theorists without any general social discussion or public reasoning.

The Capability Health Account transposes the Capability Approach to health care and comprises six key principles (Ruger, 2006):

- **Health capability** ties in with *health agency*, which is individuals' ability to work toward health goals they value and *health norms* that influence agents' values and behaviour (Ruger, 2007). More than seeking end-state utilities or goals, such as 'health' and 'equity', health services should focus on promoting individuals' capabilities to attain the same, in order to support ongoing human flourishing and wellbeing.
- **Basic capabilities** to avoid premature death and to avoid escapable morbidity should be prioritised above 'secondary capabilities' in

health care decision-making (what comprises secondary capabilities is not defined). Here Ruger (2006) is more aligned with Nussbaum's approach than with Sen's approach (as earlier discussed), in making an *a priori* distinction, or prioritisation, of health capabilities.

- **A joint scientific and deliberative approach** should be used to judge the value of health care interventions with regards to capabilities and health.
- **Shared concepts of capability** should be used to make decisions for individuals and societies, and practical models of agreement or consensus used to resolve conflict.
- **Shared health governance** should include equal access to "high-quality health care". Responsibilities should be shared in building capabilities and achieving health goals between the state, institutions and individuals. It is therefore not enough to provide health care without also expanding health agency and capabilities to participate in governance.
- **Costs and equity** considerations should be needs-based,

Cases should be considered alike if they have the same health need and unlike if they have different health needs...further, healthcare must be medically necessary and medically appropriate. This theory supports the allocation of resources to those with health needs in efforts to bring them

as close as possible to a threshold level of functioning as their circumstances permit. Thus, the quality of health care provided to all should be measured by its ability to address the functional impairment arising from injury or illness” (Ruger, 2006, p. 142).

This principle resembles utilitarian welfare economics, in valuing costs and outcomes, but it additionally includes equity considerations. A priori weightings should not be used, for example with regard to disability, as these factors should be evaluated at individual and policy levels based on medical necessity, appropriateness and futility.

c. Ethics Framework for Public Health

Nancy Kass (2001) develops the Ethics Framework for Public Health to address a gap in bioethics, where the primary focus has been on medical care and human research, and on prioritising individuals’ autonomy in these contexts. With public health aimed at societal, rather than individual, health interventions and effects, Kass makes the case for a specific ethics of public health. A ‘6-step’ framework is set out to help public health professionals think through the ethical implications of policy proposals, public health research and programmes.

- **1. What are the public health goals of the proposed program?** Social programmes can have a range of potential benefits, for example promoting literacy, reducing social inequalities and improving access

to health care. In this framework, unless programs explicitly contribute to the “combined goal of the reduction of morbidity and mortality” (Kass, 2001, p. 1778), either individually or as part of a larger initiative, they cannot be considered as public health programmes.

- **2. How effective is the program in achieving its stated goals?** This ethical consideration focuses on ascertaining the validity of the assumptions underlying public health strategies and interventions. The level of evidence supporting program strategies and generated in program evaluations, also needs to be considered.

As a rule of thumb, the greater the burdens posed by a program – for example, in terms of cost, constraint of liberty, or targeting particular, already vulnerable segments of the population – the stronger the evidence must be to demonstrate that the program will achieve its goals (Kass, 2001, pp. 1778-1779).

Programs should be stopped, or modified, if they do not meet their goals.

- **3. What are the known or potential burdens of the program?** Ethical burdens will vary based on who benefits and how; for example, as relates to partner notification programmes in tuberculosis control or in ‘paternalistic’ programmes, such as those for seat-belt enforcement. There are three broad categories of possible burden, or harm, related to public health activities (Kass, 2001, p. 1779):

i) *risks to privacy and confidentiality*, especially in data collection activities;

ii) *risks to liberty and self-determination*, given the power accorded public health authorities to enact almost any measure necessary to contain disease and

iii) *risks to justice*, if public health practitioners propose targeting public health interventions only to certain groups, for example, “certain populations are disproportionately disadvantaged or privileged through research participation” (Kass, 2001, p. 1780).

- **4. Can burdens be minimised? Are there alternative approaches?** If potential risks or burdens are identified in step 3, there is an ethical responsibility to minimise them. If there are two relatively comparable approaches, the one that poses fewer risks with respect to moral considerations – such as privacy, liberty and justice – should be chosen.
- **5. Is the program implemented fairly?** Distributive justice is a key ethical concern in public health. Considerations include the extent to which individuals and communities are aware of the public health risks they face, whether new vulnerabilities or risks are created through the intervention, and the resources available to mitigate these risks. Kass (2001) discusses a range of different approaches that are used to address distributive justice in public health: Rawls’ allocation

of resources to benefit the least well-off; and Daniels' emphasis on enabling an equal level of functioning to facilitate equal access to opportunities in society. In addition, Kass discusses that there are also approaches that make a distinction between situations where intervention is *owed*, because of past or present unfair social practice, and other situations where misfortune is considered 'just circumstantial' and there is no moral obligation to intervene.

- **6. How can the benefits and burdens of a program be fairly balanced?** The final step in the Ethics Framework for Public Health is based on due diligence with respect to the preceding five steps. Given that there are pluralistic values and perspectives in society, there will inevitably be differences in interpreting public health benefits and burdens. A democratic process should be employed to understand and resolve differences, and to consider cases of dissent. The norms and criteria that guide democratic processes may vary across contexts, and procedures should be appropriate to the context in which they take place.

d. The Good Decision Criteria

The **Good Decision Criteria**, identified by Dietz (2003) in the context of environmental policy, is based on a review of the literature associated with what constitutes good decision-making. Interdisciplinary linkages between the health and environmental sectors are increasingly recognised

(Kuruvilla, Mays, Pleasant & Walt, 2006; Wright, Parry & Scully, 2005);

therefore, it seems apposite to discuss this normative framework here.

This framework explicitly references Dewey in the criteria developed and also draws on the work of other philosophers, including Popper and Habermas. Dietz (2003) proposes six criteria of good decision-making.

- **Human and environmental wellbeing** - decisions about the environment should aim to achieve some balance between human wellbeing and the wellbeing of the biophysical environment, including that of other species.
- **Competence about facts and values** - methods of making decisions should be competent with regard to dealing with both uncertain science and uncertain values. Methods should also support dealing with complex, adaptive and indeterminate systems, such as those in the social and environmental sciences.
- **Fairness in process and outcome** - all those who have an interest in, or are affected by a decision, should have a say in that decision. There should be procedural fairness in which all arguments should have equal chance to persuade as well as fairness of outcomes, including with respect to minority groups.
- **Relying on human strengths rather than weaknesses** - human intelligence is a social or linguistic intelligence based on pattern

recognition, language processing and learning from each other in discussion. Decision methods need to build on these strengths, but they also need to be supplemented by methods to filter distorted communication, including in advertisements, 'sound bites' and political rhetoric. Other tools can help deal with tasks such as complex algebraic calculations.

- **Chance to learn** – good decision processes should involve both individual and social learning within a process and over time, and learning should evolve, including with respect to reflection on values.
- **Efficiency** – good decision-making should use resources as efficiently as possible. However, care must be taken not to assume that economic measures or market mechanisms can alone address efficient resource use. Efficiency has to be taken into account in the context of other, not as easily measurable, factors such as values, including equity, and norms.

We should not let “bad numbers drive out good paragraphs” or even let good numbers displace what can only be expressed qualitatively (Dietz, 2003, p. 36).

e. Human Rights

The Human Rights framework has had a longer history and wider scope of application than any of the other frameworks discussed in this chapter.

There are differing accounts as to the origin and evolution of Human Rights thinking and Edmundson (2004) provides an instructive introduction. Human rights were not explicitly referred to before the Enlightenment and its associated rebellions against monarchy, aristocracy and the subsequent recognition of individuals' dignity and acknowledgement of their right to participate in decisions that affected their lives. Since then, there have been two main periods when human rights discourse was particularly prevalent. The first period was in the latter part of the 18th century, linked to the American Declaration of Independence and the French Revolution. The second period was in the mid-20th century, in the aftermath of the Second World War and linked to the Universal Declaration of Human Rights.

There have been heated debates about the extent to which such rights are universal and inalienable versus the product of socio-political reactions and developments (Edmundson, 2004). Bentham held the latter view, as he made plain in a commentary on the instability of rights in the evolution of the French Declaration (Edmundson, 2004, pp. 52-53).

Compare the list of rights, whoever they belong to, whether to the man and the citizen, or the man in society, we shall find, that between the year 1791 and the year 1795, inalienable as they are, they have undergone a change. Indeed, for a set of inalienable rights they must be acknowledged to have been rather unstable. In 1791, there were but two of them – liberty and equality. By the time the second article of [the 1791] declaration was framed, three new ones had started up...viz. property, security, and resistance to oppression: total, four...not five; for in the same interval an

accident had happened to equality, and somehow or other it was not to be found.

However, human rights, founded on the idea of individual rights and human dignity, were seen as a welcome alternative to Bentham's utilitarianism where individuals were but a means to some aggregate social utility. Other contending views also exist, for example, human rights have been seen by some as a cultural and political imposition by Western industrialised nations. Others, including Amartya Sen, have argued that there are analogous concepts in Eastern cultures and developing economies, both historically and as current concerns (Edmundson, 2004).

International human rights treaties were widely ratified despite their content running against the ethos and practice in some countries; this has been attributed to the lack of foreseeable enforcement of such a regime (Falk, 1999). Human rights, however, provided civil society groups (including those in communist states and developing countries) with a platform on which to hold governments accountable; in particular, they provided validation and backing for change toward more democratic systems of governance. States can also hold each other accountable for human rights violations, for example, by 'naming and shaming', by withdrawing development aid, by imposing sanctions, or by withholding membership of international unions, as is currently the case with respect to deliberations on Turkey's entry to the European Union or of Zimbabwe

in the British Commonwealth. Over the years, human rights concepts have entered the lingua franca of global politics. There are now Human Rights related to topics as diverse as the environment, health and the treatment of prisoners of war.

It is no longer possible to clearly identify one clear philosophy of human rights to which all groups subscribe. Nevertheless, Human Rights treaties have been ratified by a majority of countries and were developed through deliberations across governments, academia and civil society groups (UNHCHR, 1996 - 2007). For instance, the Convention on the Rights of the Child (CRC) evolved through wide-ranging deliberations with UNICEF, governments, academics and child rights groups, over a 60-year period and is now the most widely ratified international treaty (Child Rights Information Network (CRIN), 2007). The CRC has been signed by all countries (192 countries) except the US and Somalia. The US has its own human rights legislation in the Bill of Rights and has since signed the optional protocols to the CRC. Somalia, due to governmental instability, has not been in a position to ratify international treaties, but political parties there are amenable to signing the treaty when this situation changes.

Under the human rights system, countries are required to regularly submit reports to UN Human Rights Committees, comprised of independent and internationally recognised experts. For each country,

separate reports may be filed by national governments, international organisations and non-governmental organisations to provide the committee with alternative views on the human rights situation in the country. Committees make an assessment of the country's policies and programmes with respect to progress on meeting the state's human rights obligations. Policy issues and outcomes considerably vary across contexts.

The human rights monitoring and reporting process itself is still evolving, for example, through treaty body reform. For instance, the Convention on the Rights of the Child requires that the Committee meets once a year, but "the CRC became a victim of its success in terms of the volume of work and backlog that resulted" (personal communication, NGO Committee for the CRC). To address these issues, the Committee has met thrice a year since 1995²⁰. In 2003, the Committee was expanded to 18 members and since October 2004 has met in two chambers to divide the workload²¹. Each session of the Committee comprises a three-week scrutiny period with an additional week for the pre-session working groups. These changes have significantly helped in dealing with the workload of the CRC Committee.

There are international human rights treaties on civil, political, economic, social and cultural rights, including the Convention of the Rights of the

²⁰ Report of the 5th session of the Committee on the Rights of the Child, UN Doc. A/49/41

²¹ CRC/C/118, 30th Session, May 2002. Recommendation: Committee to work in two chambers.

Child, discussed earlier. Across these treaties, human rights standards that are linked to policy-making, particularly with respect to participation and accountability in public affairs include²²:

- **Right to participate in public affairs** – the basis for governance should be the will of the people, ascertained through genuine, universal, equal suffrage, as well as through representation. This right also includes the right to hold public office, equal access to public services, participation in cultural activities and in non-governmental and international organisations' work, with special provisions made for the participation of vulnerable groups such as migrant workers and children.
- **Right to self-determination** – people have the right to freely determine their political status and freely pursue their economic, social and cultural development, both within their own country and with respect to other countries.

²² Based on an explication and synthesis of human rights standards related to participation and accountability in public affairs, drawn from six core international human rights treaties: International Convention on the Elimination of All Forms of Racial Discrimination (ICERD), 1965; International Covenant on Economic, Social and Cultural Rights (ICESCR), 1966; International Covenant on Civil and Political Rights (ICCPR), 1966; Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), 1979; Convention on the Rights of the Child (CRC), 1989; International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families (ICRMW), 1990. As described in Chapter 1, this explication and synthesis of human rights standards, currently a draft working paper, was developed during this thesis in collaboration with Amarjit Singh from the Law Department at LSE.

- **Freedom of expression and access to public information** – this is a right for individuals to hold and communicate opinions, have full access to public information that may affect the exercise of a right, including mass media resources that should be made accessible to different groups, and international cooperation in the production, exchange and dissemination of information related to rights.

- **Freedom of assembly and association** – individuals have the right to form associations and to strike, but cannot be compelled to belong to any association and no organisation should incite racial discrimination.

- **Right to remedy** - competent judicial, administrative or legislative authorities should provide and enforce effective remedies for acts that violate human rights.

- **Access to competent, independent and impartial tribunals** – individuals should have access to competent, impartial, independent tribunals established by law, including the right to public hearings and judgements that are made public, except when restrictions are in effect (restrictions are detailed in a following point).

- **Right of non-discrimination** – an overarching human right to respect, protect and fulfil human rights without distinction of any kind, such as

race, colour, sex, language, religion, political or other opinion, national or social origin, property, birth or other status.

Key principles that guide the implementation of the Human Rights framework are:

- **Circumstances where rights may be restricted** – In certain circumstances, rights may be restricted, as provided by law, to respect the rights or reputations of others, for the protection of national security or of public order, public health or morals.

- **Progressive realisation of rights** – “The international code of human rights recognizes that many human rights will be realized progressively and are subject to the availability of resources” (OHCHR, 2004, p. 22). However, even if resources are limited, there is nevertheless an obligation on states to use all appropriate means and maximum available resources to ensure the realisation of rights in a progressive manner, by states individually and through international assistance.

- **Non-regression** - Any deliberately retrogressive measures require the most careful consideration and need to be fully justified with reference to the totality of the rights provided for, and with respect to the full use of maximum available resources.

- **Margin of discretion** – States can determine the manner in which they fulfil their human rights obligations, within the context of the political, economic, religious, cultural and other characteristics of the state. Nevertheless, the state remains under a duty to act and is accountable to the international community for its implementation of this obligation.

- **Interdependence of rights** – There are a range of civil, political, economic, social and cultural human rights, including the right to participate in public affairs and the right to health. No single right is absolute or takes precedence over another; rights overlap in their scope, and are mutually reinforcing and interdependent (Steiner & Alston, 2000).

- **Typology of obligation** – With regards to human rights, states have different dimensions of obligation that include the duty to *respect, protect, and fulfil/ promote* the rights of its citizens. This implies respecting citizens' practice of their rights without interference, protecting the exercise of these rights from interference external to the individual, and to promote the development and ultimate realisation of these rights.

f. Professional Policy Making

The **Professional Policy Making framework** was published by the UK

government in a report titled, *Professional Policy Making for the 21st Century* (Cabinet Office, 1999). This framework was developed through a process of peer consultation, literature review and by building a descriptive model of policy-making. This model was also used to audit practice in different government departments, including the Department of Trade and Industry, the Department of Health, Ministry of Agriculture, Fisheries and Food and the Office of Science and Technology. An independent analysis was conducted to test the model using selected case studies in the Department of Health and highlighted challenges faced in implementing this framework (Alvarez-Rosete, 2005).

The Professional Policy Making framework puts forward three 'themes' to characterise effective policy-making: *vision, effectiveness and continuous improvement*. There are also four concentric spheres of policy activity. The inner sphere is the *policy process*, which is situated within an *organisational context, a political context and a wider public context*.

There are 'nine core competencies' identified as good practice for professional policy-making.

- **Forward looking** – takes a long-term view, based on statistical trends and informed predictions, of the likely impact of policy.
- **Outward looking** – accounts for factors in the national, European and international situation and communicates policy effectively.

- **Innovative and creative** - questions established ways of acting and encourage new ideas.
- **Evidence based** - uses the best available evidence from a wide range of sources and involving key stakeholders at an early stage.
- **Inclusive** - ascertains the impact of policies on the needs of all those directly or indirectly affected by the policy.
- **Joined up** - looks beyond institutional boundaries to the government's overall strategic objectives.
- **Evaluation** - conducts systematic evaluation of early outcomes of the policy.
- **Reviews** - keeps established policy under review to ensure it continues to deal with the problems it was designed to tackle, taking account of associated effects elsewhere.
- **Learns lessons** - learns from experience of what works and what does not.

A pragmatist analysis of normative frameworks for policy-making

The normative frameworks summarised above are now analysed with respect to the key components of the Decision Cell model. It is worth clarifying here, that a detailed critique of the selected frameworks is not what this chapter sets out to do; there are volumes of analyses in the literature serving this function. The function of the analysis in this chapter is to ascertain how the Decision Cell model can be used to analyse normative frameworks for policy-making, given that the core of the model

includes deliberation on norms. Areas of commonality between the selected frameworks are evident from the summaries above. The integrative capacity of the Decision Cell model allows for such an integrated discussion of these frameworks.

The discussion regarding normative frameworks for health policy is structured according to six main components of the Decision Cell model:

- i. The interdependence and rhythm of situations as a template for rational agency.
- ii. Individual and societal capacities for rational agency and public policy participation.
- iii. Decision activities of define, design, realise and deliberation.
- iv. Moral orientation, vis-à-vis the Ethical Postulate, and moral development.
- v. Operational links, including associated methods and mechanisms.
- vi. Managing the paradox of coordinating change and instituting learning.

i. The interdependence and rhythm of situations

In the Decision Cell model, the rhythm of situations is the template for rational agency. This is an alternative to means-ends rationality, where ends and problems are given or fixed (as are constraints) and means are then employed to reach these ends, be they good or bad. In the pragmatist approach, situations are often modelled according to human beings acting and transacting in habitual ways amongst themselves; for example, in

economic and cultural transactions, and within physical and socio-political environments. Habitual interactions are formed based on previous experiences and learning. Situations in the pragmatist view are thus characterised by interdependence on ecological, socio-economic and socio-historical dimensions, among others.

When there is there is a disruption of functional, habitual activity - disequilibrium arises. This necessitates a shift from habitual to intentional activity to resolve the indeterminate situation. To aid this resolution methods of pragmatist rationality that can be used are inquiry and moral deliberation. Equilibrium is restored when diverse desires are evaluated in imagination and unified in action, resulting in a transformed situation, as described in Dewey' (1922/ 2002) definition of rationality. In the process, both agents and their environments change internally, externally or mutually. With change and new experience, new habits are instituted and contribute to new, transformed situations of dynamic equilibrium.

First, with respect to recognising the interdependent nature of agents and environments, the Good Decision Criteria framework (Dietz, 2003) emphasises the need to achieve a balance between human well being and the well being of the biophysical environment, and between policy and project demands and natural resource scarcity. A similar claim can be made with reference to the principle of the *interdependence* of human rights (Steiner & Alston, 2000). Interdependence of rights means that the right to

participation in public affairs is linked to the right to health and to the rights to a safe and healthy environment and sustainable development. Rights cannot be traded-off against each other and they are considered to be equal and interlinked. The Capability Health Account recognises the importance of environmental factors on health, including of 'public goods', such as clean air and water (Ruger, 2006).

The UK government's Professional Policy-Making framework (Cabinet Office, 1999) recognises the need for government to be *outward looking* and *joined up*, but these criteria seem to refer more to boundaries between policy institutions, rather than a more holistic *joining up*, for instance with respect to the environment. The recent 'greening' in the UK government, with some politicians wanting to be seen cycling to work etc., could lead to some changes in this respect.

There is growing awareness, research and evidence on the linkages between health and ecological factors; for example, on the links between heat waves, morbidity and mortality and the need for a multisectoral policy response (German Weather Service (DWD), London School of Hygiene and Tropical Medicine & WHO/Europe, 2004), as detailed in an earlier example. Normative frameworks in health policy-making would do well, therefore, to include considerations of ecological interdependence that may extend beyond institutional jurisdictions.

Many of the frameworks make an effort to acknowledge that economic resources are limited and that resource allocation is a key concern in policy-making; specifically, more resources to one area or group may mean less for another. Efficient and ethical ways of resource distribution are therefore a key concern. In some of the frameworks, economic considerations are explicit categories, covering issues of cost-efficiency, distributive justice and proportionality in the allocation of resources (Daniels & Sabin, 1998; Dietz, 2003; Ruger, 2006). In other frameworks, economic considerations are part of other categories. For example, in the Professional Policy Making Framework (Cabinet Office, 1999), the use of 'evidence' includes using evidence on the "costings of policy options and the results of economic or statistical modelling" (Cabinet Office, 1999, p. 7.1). A key principle guiding Human Rights implementation is the *progressive realisation of rights* where it is recognised that the realisation of rights is subject to the availability resources (OHCHR, 2004). However, this principle also requires that maximum available resources be dedicated to ensuring progress towards the realisation of rights.

Recognising the socio historical interdependence of situations is also important in pragmatist agency. This consideration is covered in the selected frameworks to the extent that they explicitly include analyses of, and address, causes of social injustice (Kass, 2001; UNHCHR, 1996 - 2007) or include foresight, learning and improvement as part of the decision-making process (Cabinet Office, 1999; Dietz, 2003). Daniels and Sabin

(1998, p. 58) assert that “meeting the four conditions [of Accountability for Reasonableness] converts accountability into a process of interactive education among all parties.”

With respect to the *rhythm of situations*, to some extent, all six normative frameworks could be interpreted as being responses to indeterminate situations; for example, as related to inequity and injustice, threats to individuals’ autonomy and rights, and the need for better health capabilities. The Good Decision framework (Dietz, 2003), explicitly mentions that causal pathways are usually unknown in complex social interventions, which is aligned with the concept of an indeterminate situation. Similarly, the Professional Policy Making framework includes considerations of finding out what the problems are, developing alternative scenarios and analysing trends (Cabinet Office, 1999). Other frameworks do recognise that there may be plurality of perspectives and conflicts of interests and moral values, and stress the need for deliberation to resolve these conflicts (Daniels & Sabin, 1998; Kass, 2001; Ruger, 2006).

However, there is a sense across most of the frameworks that both the problems are known or ‘given’, *a priori*, and that solutions are available; for instance, inequity requiring fair process or poor health status requiring improved health capabilities. Despite this seeming assurance, there is no sense of imminent, or even potential, resolution of these problems. On the contrary, resolution seems distant, and even unattainable, in light of

overwhelming goals such as equality, justice and health, not least because these goals themselves need clarification.

The closest the frameworks come to being aligned with a rhythm of situations is in the discussions of 'cases', where with respect to a particular case, problems may be defined, solutions tested, learning developed and the case resolved. With respect to a specific case, it may even be possible that goals are achieved; for example, all those involved in a particular case may agree that justice was done in this instance.

However, in general, there is a danger that the *a priori* norms and goals set out in these frameworks could themselves become fixed ends, which are antithetical to the pragmatist construction of rational agency. Dewey (1939/ 1989a) noted that with the scientific 'enlightenment' and technological advancement, ideas of authoritarian edicts and deontological moral ends were replaced with ideas of rights, goods and justice. This change, ironically, created new standards that became as 'fixed' and 'categorical' as those in any ancient moral regime.

In modern government, the increasing specialisation of policy institutions, for example a Ministry of Health, further entrenches this idea of predefined goals and outcomes that policy institutions have to achieve; this prejudices the situation. There is thus a danger that normative goals and ends, as in linear, means-ends rationality, will not be subject to

rational deliberation. Nussbaum and Sen (1993), propose *capabilities* as an alternative goal to end-state utilities such as health, justice and equity; however, here too people may not always have a clear idea of what they want to do or be, or of what 'functionalities' they need to get there. If public services were to be directed to support the building of human capabilities, it seems to be a prudent and ethical approach to do so on the basis of rational deliberation in specific situations, as described by Irwin (2001) in the *localised* model of socio-political deliberation (discussed in Chapter 3). Further, as situations comprise a range of actors' intentions, interactions and valuations with respect to particular situations, there is always a plurality of perspectives that may also continually change with situations, requiring different or evolving capabilities.

Dewey did see value in the "general notions of health, disease, justice, artistic culture", but only as "tools of inquiry into the individual case and with methods of forecasting a method of dealing with it." (Dewey, 1920/1999, p. MW.12.176). The application and development of moral concepts and norms with respect to a particular situation is analogous to the application and use of medical concepts and norms by a physician with respect to an individual case. Pragmatism stresses that no norm is ever above the need for interpretation and application with respect to its use in particular situations. Norms should not be placed above the possibility of revision and improvement; to do so would be to deny the possibility of learning, growth and evolution.

ii. Agency: self & society & functional coordination

The pragmatist concept of the *social self* recognises that society and individuals are mutually constitutive and referential (Dewey, 1954/ 1927; Mead, 1913/ 1982). The impossibility of aggregating individual preferences to constitute social purposes has been discussed in earlier chapters (Arrow, 1963; Dewey, 1954/ 1927). However, most of the frameworks discussed in this chapter are predicated on the idea of discrete individual capacities and rights that translate to the societal level, with the state fulfilling a regulatory or contractual role.

Rawls' (1971/ 1999) theory of justice is predicated on hypothetical decisions made by individuals who exist independently of society, before entering into a political contract with it. The Ethics Framework for Public Health takes into account that what is considered 'good' at the public health level, need not necessarily be so at the level of the individual, and highlights the need to achieve a balance between the two (Kass, 2001). There are similar tensions in human rights; for example, as seen in the trade-off between protecting individuals' civil liberties and national security concerns. In pragmatist philosophy, considerations of the good of individuals cannot be separated from considerations of the good of society, and vice versa; this forms the basis of the Ethical Postulate. This point is further discussed in the analytical category on morals and ethics.

With respect to capacity building, developing individuals' capabilities (Ruger, 2006), protecting their rights (UNHCHR, 1996 - 2007) and promoting their functioning to facilitate their access to equal opportunity and political participation (Daniels & Sabin, 1998) are strong considerations across most of the frameworks. In a notable exception - the Professional Policy Making framework does not include considerations of capacity building, beyond that of government departments. However, in the report on *Securing good health for the whole population*, Wanless (2004) stresses that a strong government role in building individuals' health literacy was key to realising a *fully engaged* scenario, which was associated with improved health services quality and efficiency and better health outcomes overall.

In addition to promoting individuals' skills and capacities, Dewey (1954/1927) highlighted the need to build societal capacities and intelligence. Societal capacities, in the pragmatist view, are not equal to aggregated individual capabilities or intelligence; instead, they are based on pluralistic resources available in society and the extent to which these are freely available for learning and the resolution of problematic situations (Dewey, 1954/1927). Isaacs (1999) introduces the concept of collective intelligence, or CQ, which is the capacity to develop new, shared understandings and purposes through collective deliberation rather than mere consensus on pre-existing views or aggregation of individual understandings and preferences.

The Good Decision Criteria framework (Dietz, 2003) explicitly recognises that human intelligence is social and linguistic, and recommends that decision processes build on human nature and human strengths. The Human Rights framework has traditionally been associated with respecting, protecting and fulfilling individuals' rights. However, more recent human rights treaties have developed in order to consider 'group rights', particularly the rights of marginalised and vulnerable groups in society, such as migrant workers, indigenous peoples and children (OHCHR, 1996 - 2007). Through related treaties, such as the International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families (ICRMW), the Indigenous and Tribal Peoples Convention, and the Convention on the Rights of the Child (CRC), the Human Rights Framework explicitly addresses building capacities at both individual and social levels. In addition, states are the main duty holders in the Human Rights framework and in this respect, building capacities at the level of the state to realise both individual and group rights, is also a function of the framework (OHCHR, 1996 - 2007; Steiner & Alston, 2000).

In pragmatist philosophy, pluralism is seen both as an empirical fact and as a rich resource on which individuals and societies can draw to resolve problematic situations (Dewey, 1939/ 1989a, 1954/ 1927). There are many ways in which people define themselves and the 'publics' they form in different situations. In discussing *Identity and violence*, Sen (2006)

emphasises that people define themselves across multiple dimensions of what is relevant in their lives, “occupations, social status, languages, politics, and many others,” and not only by their religious or national affiliations. He points out the pernicious effects of simplistic and polarising categorisations, such as in the so-called ‘clash of civilisations’ between Islamic and Western civilisations. To search for one powerful categorization, he says, is to deny the role of reasoning and choice.

The descriptive weakness of choiceless singularity has the effect of momentarily impoverishing the power and reach of our social and political reasoning. The illusion of destiny exacts a remarkably heavy price.

Given the pluralistic nature of public life, Dewey recommended that ‘publics’ be identified on a *functional basis* with respect to the problematic situation at hand, rather than by a priori categorisations (Dewey, 1954/1927). This requires public officials and organisations playing a coordinating role.

All the selected frameworks include some element of coordinating functional public participation through deliberation or consultation. However, the recommendations related to participation can be quite general. The Human Rights framework states that every individual has a right to participate in public affairs, directly or through representation. The Accountability for Reasonableness framework notes that all ‘fair-minded’ parties should agree that the criteria used in decision-making

were fair. The Professional Policy-Making framework includes consultations with stakeholders and considers *inclusiveness as key to* policy processes. The Capability and Health Account (Ruger, 2006) highlights the need for shared governance and responsibility with respect to promoting individuals' health agency and functioning. This framework does take a more 'functional' view on participation when it recommends that disability considerations in health care decision-making should not be made *a priori*, instead these decisions should be based on shared definitions of capabilities and through shared decision-making at individual and policy levels based on "medical necessity, appropriateness and futility".

Dietz (2003), in setting out the Good Decision Criteria, addresses the issues of fairness and proportionality in relation to participation and persuasion in policy-making.

Fairness suggests that all those having an interest in or affected by a decision should have say in that decision. It further suggests that each person should have equal say, or perhaps a standing with weight proportional to what they stand to gain or lose. This is an ancient democratic principle that is very widely accepted in the contemporary world and has been extensively theorized by Dewey and Habermas...

Not all arguments will be given equal weight in making a decision but rather that the weight given a position should be proportional to its logic and sincerity. Some arguments are more persuasive than others, but all arguments should have equal chance to persuade. This is procedural fairness (Dietz, 2003, p. 35).

Thus, Dietz (2003) extends concerns of 'fairness' and 'proportionality' to considerations of participation and persuasiveness. This differs from Ruger's (2006) application of the concept of proportionality, wherein like cases should be treated as like and unlike cases differently. This is also different from Daniels and Sabin's (1998) approach to fairness, in that in *Accountability for Reasonableness*, fairness is related to the justification of a decision, not necessarily to the process of making the decision itself.

Effectively coordinating pluralistic participation to resolve indeterminate situations also requires a reference community that supports the development of plural identities and facilitates coordinated inquiry, learning and moral deliberation (Dewey, 1954/ 1927). The concept of social capital, including social cohesion and trust as well as self-efficacy and collective efficacy, is increasingly viewed as a desired resource to build 'healthy' communities and individuals (Campbell, Wood & Kelly, 1999; Kawachi, 2001). Related studies have also found associations between social capital and health outcomes. The importance and influence of communities such as policy networks and partnerships in policy-making has also been clearly established (6, Goodwin, Peck & Freeman, 2006; Sabatier, 1999).

Some of the normative frameworks discussed here make a link with the social determinants of health literature (Daniels, 2001; Kass, 2001; Ruger, 2006), but mainly with regards to public goods, environmental factors and

policies. This link could be usefully extended to considerations of building communities of inquiry (Shields, 2003), functional public coordination via membership of intermediate organisations (Mays, 2000)(that could also serve as reference communities for inquiry and deliberation) and management of networks and partnerships in health policies and programmes (6, Goodwin, Peck & Freeman, 2006; Bernard & Kuruvilla, 2007).

A final analytical consideration related to rational agency is Dewey's criterion that 'public' intervention was required when consequences of acts had the potential to affect people and conditions external to those carrying out, or directly involved in these acts (Dewey, 1954/ 1927). Such acts required a 'public capacity' – be it through control, coordination or promotion. Thus, Dewey's recommendation was that *public* interventions be based on awareness of externalities, with a view to their management, rather than on *a priori* social contracts or goals. In the contractual approaches, externalities are treated as exceptions and have to be dealt with on a case-by-case basis, rather than with a strategic view to their management. That externalities are a key reason for market failure in health care (Buse, Mays & Walt, 2005; Ruger, 2006), as discussed in Chapter 4, further reinforces the need for a public policy to play a role in this respect.

By focusing on developing alternative scenarios and monitoring trends, the Professional Policy Making framework is oriented towards foresight of consequences and managing externalities. The Ethics Framework for Public Health explicitly sets out steps to think through the externalities concomitant with public health interventions and the Good Decisions Framework extends this perspective to ecological considerations. The Accountability for Reasonableness, Human Rights and Health Capability Account are, largely, contractual approaches to public policy-making with the state responsible for providing, or regulating, certain public goods and processes.

iii. Decision activities: define, design, realise and deliberate

The Professional Policy Making framework (Cabinet Office, 1999) ticks all the boxes, as it were, with respect to decision activities set out in the Decision Cell model. Perhaps this is because this framework evolved through 'on the ground' policy-making experiences, with a view to improving the process; this is an approach both employed and recommended in pragmatism to develop methods and norms. Most of the other normative frameworks also include a wide range of the decision activities set out in the Decision Cell model, with the possible exception of the Accountability for Reasonableness framework, which mainly focuses on activities related to deliberation. The Accountability for Reasonableness framework stresses *publicity* and *relevance* conditions, which are recognised in pragmatism as key to democratic practice. While experts

may organise facts to inform deliberations, the public should be made aware of these facts and deliberate them (Dewey, 1954/ 1927).

With respect to other decision activities, however, in the Accountability for Reasonableness framework, certain process assumptions seem to be made. For instance, one interpretation of the approach could be that irrespective of who is involved in making the initial 'decision', or based on what evidence, as long as 'fair-minded parties' can agree on the decision, the process will be fair, and will result in a fair outcome.

McIver and Ham (2000), used the Accountability for Reasonableness framework to analyse cases of contested decisions related to treatment provision. They highlighted how evaluations of these decisions varied, based on the values and priorities of different groups (patients and their families, clinicians, health authorities and lawyers and courts involved in dispute resolution). Based on their analysis, McIver and Ham (2000), recommended that Accountability for Reasonableness criteria also extend to 'agreement on the standard of proof' and 'evidence of effectiveness' to ensure fair process. These criteria would also align with considerations in the *design* and *realise* sections of the Decision Cell model.

How different frameworks deal with the issue of evidence is another analytical point. The Capability Health Account stresses the need for a joint scientific and deliberative approach. However, 'scientific' and

'deliberative' are not mutually exclusive in the context of public policy-making (Ruger, 2006). In the Professional Policy-making framework as well (Cabinet Office, 1999), evidence seems to be considered as something external to, or as the raw material for, deliberation and decision-making, rather than as evolving through these processes.

The logic underlying scientific and deliberative approaches, as explained in the pragmatist *logic of inquiry*, are similar and interlinked, though the methods used may vary. Dewey saw science as involving deliberation (for example in developing methods, interpreting data and publishing papers) and deliberation as involving inquiry (for example, with respect to exploring the value implications and consequences of policy proposals) (Dewey, 1922/ 2002, 1938/ 1999). In fact, in the context of public policy-making, this distinction is difficult to make.

There is a significant general difference between the kinds of process in which scientific laboratories make their interventions in the world outside through technological artefacts and their associated disciplines and consequences, and those in which the wider interventions occur and recur through discursive networks and narratives of scientific knowledge for policy, such as in 'risk management' public policy issues and decisions. As studies of the latter kind of issue emphatically demonstrate, contestation is rarely only about propositional truths, but is more usually also, if more obliquely, about what is the proper public meaning and definition of the issue(s) being contested (Wynne, 2003, p. 404).

Evidence in policy-making involves interpretation and argument that is developed and formulated in the context of specific policy issues and

public imperatives (Majone, 1989). Thus, in a pragmatist analysis, considerations of effectiveness in decision-making should also extend to the effectiveness of methods used to deliberate and reach agreement on meanings and contentious issues. Additionally, evidence of effectiveness should extend not only to the intervention being considered, but also to the effectiveness of the decisions made, in terms of outcomes and consequences and ultimately to resolving 'problematic situations'. With regards to activities of implementation, monitoring and evaluation, and learning (i.e. aligned with the *realise* activity in the Decision Cell) these are explicit considerations in the Ethics Framework for Public Health (Kass, 2001) and the Professional Policy Making framework (Cabinet Office, 1999).

Finally, all the frameworks include some form of deliberation, ranging from consultation (Cabinet Office, 1999) to shared governance (Ruger, 2006). The primary focus of the Accountability for Reasonableness framework is on conditions to ensure fair deliberation on policy proposals (Daniels & Sabin, 1998). However, the nature of the deliberative processes described in the frameworks is somewhat different to that envisaged in pragmatist philosophy. For the most part, deliberation, as described in several of the frameworks here, seems tinged with contention, legality and the pulling of inhibitory policy reins.

In pragmatism, deliberation is seen as a creative and collaborative process (Caspary, 1991; Dewey, 1922/ 2002). It involves trying out strategies in imagination, which means that it is not concomitant with dire consequences if one scenario or the other fails. While there may be dire problems to be addressed, perhaps creativity and imagination would not go amiss in facilitating collaborative inquiry and 'trying out' different solutions. Of all the frameworks discussed here, only the Professional Policy Making framework explicitly refers to the need for innovation and creativity, and specifically mentions scenario development as 'best practice' to envision strategies as well as to prepare for and manage change.

iv. Ethics and moral development

The normative frameworks discussed here are aligned with different philosophical traditions: the Accountability for Reasonableness Framework (Daniels & Sabin, 1998) with Rawls' Theory of Justice; the Capability Health Account (Ruger, 2006) with Sen's and Nussbaum's Capability Approach and Aristotle's political philosophy; and the Human Rights framework with early theories of liberal democracy. Good Decision Criteria (Dietz, 2003) draw on a range of philosophical sources, including Dewey and Habermas to discuss, for example, the need to ensure participation that was proportional to potential influence and impact. The Ethics Framework for Public Health (Kass, 2001) draws on the discipline of bioethics as well as on a review of ethics in public health. The

Professional Policy Making framework (Cabinet Office, 1999) does not make explicit reference to ethics or moral considerations, however, there are some implicit ethics-like considerations; for example, considerations related to consulting individuals or groups who may be affected by a particular policy.

In general, the pragmatist response would be to appreciate the value of such diverse frameworks that provide rich, pluralistic resources for moral deliberation and orientation for public policy. However, one pragmatist caution is that moral development should be based on an understanding of human nature and experience. Another caveat is that norms should be considered as methods and tools, and not as teleological or totalitarian edicts that obviate the need for intelligent inquiry in specific problematic situations or deny consideration of alternative approaches in order to resolve problematic situations. Further, pragmatist philosophy does differ in substantive aspects from the moral approaches in the frameworks discussed here.

A couple of differences on points of moral philosophy are discussed here to illustrate the directions a more comprehensive, comparative analysis of moral philosophy may take. The Accountability for Reasonableness framework is closely aligned with Rawls' theory of justice. Pragmatism would endorse Rawls' move away from utilitarianism, in rejecting the treatment of individuals as a means to some general social end, to

recognising the dignity of individuals and the need for fairness of process.

However, Rawlsian philosophy poses two particular problems from a pragmatist point of view. The first is with respect to the basis of social philosophy - in this case, the theory of justice as fairness, which makes a distinction between a more limited political concept of justice and a more comprehensive moral philosophy; the former being considered as the purview of governance and the latter a private or personal pursuit. This distinction is, to a greater or lesser extent, a factor in all the frameworks considered here. Concerns have been raised in about the general tendency in public policy-making, and in the context of medicine in particular, to divide "problems into public and the private, urging consensus as the goal of the one, and an unconstrained notion of happiness as the goal of the other" (Tollefsen, 2004).

Second, the theory of justice and the Accountability for Reasonableness framework are mainly procedural. Both John Stuart Mill and Dewey took issue with having fixed prescriptions for justice in processes that did not also take the justness of consequences into account (Dewey, 1939/ 1989a, 1954/ 1927). The consideration of consequences is an important guide for rational, and moral, agency. Dewey defined pragmatism itself with respect to the consequences of operations instituted to resolve problematic situations.

The proper interpretation of the word “pragmatic,” [is] namely, the function of consequences as necessary tests of the validity of propositions *provided* these consequences are operationally instituted and are such as to resolve the specific problem evoking the operations (Dewey, 1939/ 1989b, p. 571).

While Dewey agreed with Mill on the importance of consequences in moral agency, he did not view consequences in utilitarian terms, as measured by an aggregate utility or end (Dewey, 1939/ 1989a, 1954/ 1927). Consequences in pragmatist inquiry are viewed both in terms of the ability of acts to resolve immediate problematic situations and the extent to which previous and current acts render the environment favourable for such acts. This is a very different position from the more commonly adopted view of consequences as related to achieving some pre-defined end, desire, utility or outcome, be it health, equity or another social end.

The pragmatist view of consequentialism is perhaps most aligned with the Capability Health Account, with regard to improved *functioning*. The difference between the two is that in pragmatism, growth and flourishing occur through rational inquiry and the resolution of problematic situations. This approach would not be congruent with developing capabilities as an end in and of themselves, in support of individual goals to the exclusion of social goals, or towards desired capabilities that are themselves not subject to rational inquiry. In pragmatism, growth and

development are seen as occurring through collaborative inquiry which then supports both individual and societal wellbeing.

Another illustrative point on substantive philosophical differences between pragmatism and the selected frameworks is with regard to normative theories that consider that individuals and society are distinct and separate. As discussed under the category of agency, society and individuals influence and are integral to each other. Theories associated with contractarian theories of early liberalism, such as the Human Rights Framework, are based on the view of individuals as separate entities with rights who, through a priori contracts with the state, were entitled to protection of their rights. Dewey saw that such contracts and entitlements led to an exaggerated sense of the individual in relation to society and an inhibitive rather than progressive approach to governance and moral development. Instead, Dewey believed the best way to support both individual and societal development, was by fostering an overarching and integrative ethical and moral development. He put forward "The ethical postulate" (a reconstruction of Hegel's *Sittlichkeit*) as a hypothesis to guide rational agency and orient democratic practice:

In the realization of individuality there is found also the needed realization of some community of persons of which the individual is a member; and, conversely, the agent who duly satisfies the community in which he shares, by that same conduct satisfies himself (EW 3: 322).

As discussed in Chapter 5, putting the Ethical Postulate into practice would require an integration of individual and institutional moral codes as well as an integration of altruistic and egoistic considerations, among others, with respect to a reference community.

As a final point of discussion on substantive philosophical differences, in a review of Sen's and Nussbaum's book *Quality of Life*, Rae (1993) makes note of a discrepancy between on the ground realities, political and administrative concerns, and academic or philosophical deliberations on moral theory.

The distinguished philosophers and economists...possess uneven and sometimes very thin news about doings [and difficulties faced by people on the ground] ... and very little direct experience in delivering ideas to policy-makers. Here, the common discourse centers largely on the resurgence of academic moral theory and the extension of certain results from social choice theory. Over recent generations, these discourses have grown richer in abstraction and poorer in human narrative - open, in principle, to any configuration of human needs but attentive to no specific real ones (Rae, 1993, p. 1007).

The normative frameworks discussed here, all address 'real world' problems. However the moral thinking has developed primarily in academic settings, with two notable exceptions. The Professional Policy Making framework, developed in a government department, makes no explicit moral claims, which perhaps reflects a general gap in contemporary moral theory and administrative practice (DeLeon &

Longobardi, 2002; Garrison, 2000). With the Human Rights Framework, different groups, including experts, policy-makers and non-governmental organisations, have contributed to, and can influence, the development, implementation and monitoring of the normative and moral standards therein (Chinkin, 1998). However, the extent to which, and process whereby, it is possible for individuals and groups to change these standards once these are codified in international law, is variable. However, such change is possible and the process by which different groups contribute to the development, monitoring and implementation of the Convention on the Rights of the Child is described in a following section.

The other frameworks also recognise the need for deliberation, not necessarily on the frameworks themselves, but as part of the process recommended by them. For example, the Ethics Framework for Public Health recognises that pluralistic perspectives define public health values in different contexts, and stresses the need for deliberative processes to develop a better understanding of these issues in different situations (Kass, 2001).

In the pragmatist approach to socially intelligent inquiry, there is a role for experts to play in organising facts to inform public deliberations, but not in making all the decisions thereof (Dewey, 1954/ 1927). The current *inequity* in how different groups contribute to ethics and moral

deliberation in society carries the risk of reversion to the discriminations of the Aristotelian *polis*. In describing an ideal state, Aristotle made a distinction between an inferior class of labourers or 'natural slaves' who produced material goods and an elite class that contemplated civil and moral affairs (Dewey & Tufts, 1908/ 1999). In contemporary society, similar distinctions could be made, for example, between the general public, corporate and production sectors and academic experts and ethicists.

Such divisions between the material and the moral not only lead to discriminatory practices, but also compound what Dewey referred to as the problems of "materialism and brutality of our economic life" (Dewey, 1920/ 1999, p. MW.12.178). He felt that, in order to integrate economic and moral development, considerations of morals had to be reintegrated into economic and production processes. Failure to adopt an inclusive and integrative approach to societal development (both material and moral), not only went against the very idea of democracy, but also gave "aid, comfort, and support to every socially isolated and socially irresponsible scholar, specialist, esthete and religionist" (Dewey, 1920/ 1999, p. MW.12.178).

Dewey did not see human beings as inherently moral or immoral, but instead regarded moral development as an evolutionary process resultant from learning (a product of both the reasoning in and the resolution of

problematic situations). Through a commitment to cooperative learning, Dewey was sure that individuals and societies would find that a commitment to ethical and moral development was without parallel as a guide to inquiry and as a means for social coordination as well as individual and societal development. Ethical and moral standards in turn would evolve through inquiry within particular problematic situations and because of the consequences of the same. In this process of evolutionary moral development, Dewey saw that certain precepts would stand the test of time and thus there would need to be very compelling reasons to doubt them; a position that Daniels and Sabin (1998) are aligned with.

However, *fallibilism* is also a key pragmatist tenet. The interpretation and application of norms and rules is always a matter of valuation and judgement in response to problematic situations (Dewey & Tufts, 1908/1999). No norm or rule has such inherent authority, or generalisability, that it obviates the need for judgement and interpretation with regard to its application in specific situations. Therefore careful deliberation is required in every situation, striving for a balance between antiscepticism and fallibilism in using norms, and ensuring that moral deliberation is an inclusive and socially integrative process.

v. Operational links: methods and mechanisms

There is a need for normative frameworks to be linked with operational

methods if they are to be used and effective in guiding public policy.

Many of frameworks discussed in this chapter have been tested in practice with varying degrees of success. The Accountability for Reasonableness framework was tested in different countries with respect to developing 'benchmarks of fairness' to evaluate the fairness and equity of proposed health sector reforms (Daniels, Flores, Supasit, Ndumbe et al., 2005). These benchmarks were developed during the Clinton administration deliberations on health sector reform in the US; they were found to be useful in developing economies as well. For example these benchmarks were used to evaluate donor agencies' proposals for health sector reforms in countries (Daniels, Flores, Supasit, Ndumbe et al., 2005).

To analyse the extent to which the UK Cabinet Office framework was in operation, Alvarez-Rosete (2005) studied two cases of policy making in the Department of Health, as related to the Mental Health Bill and the reform of generic medicines policy.

Drawing on evidence from these two case studies (with additional insights from others), our conclusion is that progress on modernising policy making in health care has been uneven. The DH has taken the modernisation of policy making seriously and has substantially improved it in many aspects. It has become more inclusive than before; it has improved cross-cutting work; it applies different statistical techniques in order to plan ahead...

But, on the other hand, there are still signs of the prevalence of old practices and a hierarchical, closed and reactive policy making style.

Consulting stakeholders and the public, although now assumed to be a necessary step in the policy process, does not necessarily imply listening to them.

This report concluded: what was required in the Department of Health was a more responsive style of policy-making based on “a more active style of network management” (Alvarez-Rosete, 2005). This fits in with the recommendations made in Chapter 4 for *socially intelligent inquiry* and with respect to the public sector’s role primarily being one of coordination.

The Human Rights framework has the greatest degree of operationalisation of all the frameworks considered within this chapter. For example, with reference to the Convention on the Rights of the Child, countries are required to submit reports to the Committee on the Rights of the Child with respect to progress made towards the realisation of rights, particularly as set out in the CRC and CEDAW (there are similar provisions for other human rights treaties). Governments submit a national report, CSOs develop an alternative report and UNICEF, and other international organisations as relevant, submit reports to the Committee as well. The 18-member committee of experts meets thrice a year in Geneva in two chambers to analyse the different reports. Based on their analysis, the Committee presents their Concluding Observations to guide further implementation and evaluation.

The Committee, however, is limited by the information it receives. For example, it was noted in the review that the Concluding Observations “used to be quite general, for example, one of the recommendations to a country was to provide buses to improve school access. The issue was that there weren’t roads for these buses, but this information was not provided to the Committee. Now the Committee increasingly asks for specific information, encouraging details on the ‘what and how’ of progressive realisation of rights.” (NGO Committee for the CRC, personal communication). However, it is also important to realise that data on human rights indicators is difficult to obtain. In some countries, even basic systems for registering births and deaths are not in place, which severely limits the effective functioning of human rights monitoring processes (Tomasevski, 2001).

The lack of effective methods for democratic practice was also a concern in Dewey’s time and work. In fact, he was subject to excoriating criticism from some of his colleagues for advising the US government to join the First World War. Dewey’s defence at the time was that there were no methods available to facilitate international deliberation and resolve differences between countries (Bullert, 1989). One of the expected results of the First World War was to bring about a ‘new world order’, and indeed the League of Nations was established subsequently, and the United Nations established after World War II. However, going by the dreadful images of war in the daily news, it does not seem that much has

changed with respect to effective methods of international coordination since then.

Finding methods of democratic coordination are critical to a democratic way of life. As Dewey said, “democratic ends require democratic means” (Dewey, 1939/ 1989a, p. 133). Perhaps the way forward is through intermediate organizations and through networks of organisations involved in a particular problematic situation, such as Public Private Partnerships as discussed in Chapter 5, or Public-Civil Society partnerships as discussed in the UNICEF review. This approach would be congruent with the evidence on the effectiveness of intermediate organisations, deliberative forums and other such ‘reference communities’ to bring about relevant, and responsive, socio-political change (Mays, 2000; Glasius, 2005). The role of public sector organisations would then be one of coordination instead of coercion (Dewey, 1939/ 1989a). These and other democratic solutions need to be tested and further developed. The costs of undemocratic alternatives, often in terms of life itself, cannot justify their continued use.

vi. The paradox of coordinating change & instituting learning

Change, in pragmatist philosophy is linked with implementation, consequences and learning. Change may be a matter of external *adaptation*, internal *accommodation* or systemic *adjustment* (as discussed in earlier chapters). The objective of change, in the pragmatist sense, is to regain

functional coordination and equilibrium. Once functional change is achieved with respect to resolving a problematic situation, this change becomes habit - and this is a matter of intellectual efficiency - and new learning gets instituted in transformed situations and new dynamic equilibrium.

Each of the normative frameworks discussed in this chapter address some element of learning, change and institutionalisation. For example, the Accountability for Reasonableness framework has appeals and enforcement conditions to follow up on justifications made. The Good Decision Criteria framework proposes that good decision-making should offer a 'chance to learn' and the Professional Policy-making framework stresses the importance of learning from experience of 'what works and what does not'. The Capability Health Account focuses on building individual capabilities based on the concept of individuals as agents of change, and also recommends that a "deliberative process should also update its recommendations continually to account for changes in medical knowledge, technology, and costs when determining what probability of success would make an intervention worthwhile" (Ruger, 2006, p. 158).

With regard to the process of human rights monitoring through the Committee on the Rights of the Child, the UNICEF review found that this is generally thought to be a useful process. The CRC reporting and recommendations process feeds into treaty body reform, as well as into

legal commentary and case law, as the standards, mechanisms, and information on the realisation of rights is further developed. However, one of the strongest recommendations made, and one of the most critical gaps identified, by CSOs was that the Committee's Concluding Observations be widely communicated through society and be integrated into the design, implementation and evaluation of projects related to children's rights, which was currently not the case (Bernard & Kuruvilla, 2007).

An overall challenge with respect to managing change is with respect to developing moral and ethical norms to keep pace with technological changes. In health, for example, this concern is highlighted by the advances in biotechnology and genomics research, with recognition that ethical standards have not sufficiently developed along side.

Mental and moral beliefs and ideals change more slowly than outward conditions. If the ideals associated with the higher life in our cultural past have been impaired, the fault is primarily with them. Ideals and standards formed without regard to the means by which they are to be achieved and incarnated in flesh are bound to be thin and wavering. Since the aims, desires and purposes created by a machine age do not connect with tradition, there are two sets of rival ideals and those which have actual instrumentalities at their disposal have the advantage. Because the two are rivals and because the older ones retain their glamour and sentimental prestige in literature and religions, the newer ones are perforce harsh and narrow (Dewey, 1954/ 1927, p. 141).

Still, coordinating normative change that reflects socio-political concerns is possible. For example, in the LSHTM study on research impact, researchers identified the need to develop new ethical guidelines for research with women and adolescents who had been trafficked. Their health and safety had to be taken into account, particularly with regard to their anxiety related to being interviewed. Considerations of anonymity and confidentiality related to safety and protection also had to be taken into account. Therefore, one of the main recommendations of this study was that people who were trusted by the interviewees, even if these people were not researchers, should conduct the interviews. These findings led to the development of WHO ethical guidelines for research on women and adolescents who were trafficked (World Health Organisation, London School of Hygiene and Tropical Medicine & Daphne Programme of the European Commission, 2003). These new guidelines are now being used to train journalists who conduct interviews on this topic and are also used in police training courses in several countries to deal with this growing problem (Kuruvilla, Mays & Walt, 2007).

As discussed in earlier chapters, institutional change is often difficult to bring about, but it is critical; it ensures institutions' responsiveness to the public interest. Further, institutions can only support both individual and societal development, if there is corresponding change and evolution in the institutions themselves. Thus public policy institutions have to manage the paradox of both instituting learning and coordinating change.

Conclusion

In this chapter, the Decision Cell model structured an analysis of six normative frameworks related to health policy. While this is a very rough comparative sketch, a table of the main points of analysis will help summarise the key similarities and dissimilarities between the frameworks (See Table 3) that could service as potential points of dialogue between the different frameworks, and on ethics and normative development in health policy.

The Human Rights Framework gets the 'top score', but just a couple of overall points separate the frameworks. This comparison of normative frameworks is based on the 'coverage' of pragmatist criteria. The analytical points have been allotted on the basis that the different analytical factors were addressed in the frameworks, not on whether they were in agreement with pragmatist philosophy on this point.

Earlier chapters have highlighted the differences between a pragmatist understanding of human nature and agency, compared with that in human rights or in theories of justice that are based on an exaggerated concept of individualism with respect to society. However, since a key pragmatist tenet is that moral development be based on an understanding of human nature, in this analysis, frameworks have been scored if they

include this consideration, whether this understanding is in agreement with pragmatist philosophy or not.

Table 3. Coverage of pragmatist criteria for rational policy-making

| DCM ²³ / pragmatism | A4R | CHA | EFPH | GDC | PPM | HRF |
|------------------------------------|-----|-----|------|-----|-----|-----|
| <i>1. Situations</i> | | | | | | |
| - Ecological | | + | | + | | + |
| - Economic | + | + | + | + | + | + |
| - Socio-historical | + | | + | + | + | + |
| - Indeterminate v. ends | | | + | + | + | |
| <i>2. Agency/ 'public'</i> | | | | | | |
| - Individual capability | + | + | | + | | + |
| - Societal capacities | | | + | + | | + |
| - Coordination | + | | | + | + | + |
| - Community/ networks | | | | | | |
| - 'Public' definition | | | + | | + | + |
| <i>3. Decision activities</i> | | | | | | |
| - Define/ evidence | | + | + | + | + | + |
| - Design/ strategies | | + | + | | + | |
| - Realise: implement & | + | + | + | + | + | + |
| - Resolve | | | | + | + | + |
| - Deliberation | + | + | + | + | + | + |
| - Imagination | | | | | + | |
| <i>4. Morals/ ethics</i> | | | | | | |
| - Orientation | + | + | + | | | + |
| - Human nature | + | + | | + | | + |
| - Moral development | | | + | | | |
| <i>5. Institutions/ operations</i> | | | | | | |
| - Operational norms | + | + | + | + | + | + |
| - Managing change | + | | | | + | |
| - Tested methods | + | + | | | + | + |
| Total: 21 | 11 | 12 | 12 | 13 | 14 | 15 |

²³ Acronyms used in Table 3.: DCM - Decision Cell Model; A4R - Accountability for Reasonableness; CHA - Capability Health Account; EFPH - Ethics Framework for Public Health; GDC - Good Decision Criteria; PPM - Professional Policy Making framework and HRF - Human Rights Framework.

Additionally, the analytical factors have not been weighted and this would have made a difference in the overall analysis. For example, as one of the frameworks with the highest 'score' – the Professional Policy Making framework, neither explicitly takes into account moral and ethical factors, nor does it explicitly take into account understandings of human nature, all of which would be 'deal breakers' in a pragmatist analysis. Further, if the analytical factors had been weighted against causal assumptions, for instance those set out in Wanless' scenarios for health (Wanless, 2004), then the failure of the Professional Policy Making Framework to emphasise the importance of building individual and social capacities, would be a critical flaw.

One overarching concern in this thesis has been the issue of 'mainstreaming' ethics and moral development in policy-making. One way to do this would be through integration with related processes that are already institutionalised. In this respect, the Human Rights Framework has unparalleled institutional support, as well as buy-in from different groups and different countries. In this context, Beyrer and Kass (2002, p. 246) recommend integrating human rights concerns with health research ethics.

Although the human rights movement and the sphere of research ethics have overlapping principles and goals, there has been little attempt to incorporate external political and human rights contexts into research ethics codes or ethics reviews. Every element of a research ethics review – the balance of risks and benefits, the assurance of rights for

individual participants, and the fair selection of research populations – can be affected by the political and human rights background in which a study is done.

Additionally, as earlier discussed, through the monitoring and reporting process on human rights, different groups have the opportunity to contribute to, and influence, the process and findings (Bernard & Kuruvilla, 2007; Chinkin, 1998). Perhaps the Human Rights system, particularly through the expert Human Rights Committee reviews, can provide an institutional, and international, forum to deliberate, test and develop normative orientation for both health and general public policy. Since human rights are explicitly linked to international law, this would also be an appropriate forum to develop ‘case law’ related to health policy-making; developing case law being a recommendation made by McIver and Ham (2000) in the context of contested health care decisions.

However, to play such a mainstreaming role human rights would need to be better integrated and instituted into broader socio-economic policies and programs, as conceptualised in the Rights Based Approach to development (Uvin, 2004); but this type of integration is far from being realised. Perhaps in this respect, the Human Rights Framework may be seen to be too ‘political’ or as a separate concern from established ‘everyday’ policy processes. More ‘technical’ frameworks, such as Accountability for Reasonableness, Capability Health Account and the Ethics Framework for Public Health, may be better received, and therefore

more used, by policy institutions. Perhaps integration of ethics in policy-making could even come about through adherence to professional standards for policy-making, such as those set out in the Good Decision criteria or in the UK Cabinet Office model, if these were explicitly extended to considerations of ethics and moral development.

Given what ultimately matters – that moral considerations are integrated in policy-making – it is reassuring to see that there are several points of similarity across the frameworks. These similarities reflect Peter Singer's (1993) conclusions in *'A companion to ethics'* – that comprises a range of writings on ethics, including from 'Western' and 'Eastern' schools of thought,

Ethics is not a meaningless series of different things to different people in different times and places. Rather, against a background of historically and culturally diverse approaches to the question of how we ought to live, the degree of convergence is striking. Human nature has its constraints and there are only a limited number of ways in which human beings can live together and flourish (Singer, 1993, p. 543).

However, while there may be “only a limited number of ways in which human beings can live together and flourish”, there may be an infinite number of journeys taken along these routes. To ensure that ethics and moral norms serve as relevant and useful guides for rational agency, norms require specification, interpretation, application and development with respect to specific situations. As Dewey (1922/ 2002) noted, morality

is a continuing process, rather than a fixed achievement. Moral codes can atrophy and that moral disagreement is the basis for deliberation. Perhaps the differences between the normative frameworks described in this chapter, can provide the impetus for further research and deliberation on norms and ethics for health policy.

Finally, as set out in an introductory quotation to this chapter, Portia makes an evocative plea to the merchant of Venice to look beyond considerations of justice as the 'quality of mercy' would bless "both him that gives and him that takes" (Shakespeare, Merchant of Venice, Act IV, Scene I). Pragmatism also proposes that both individual and societal flourishing would be best served by including qualities such as empathy and imagination in moral deliberation. A further consideration is to integrate, and harmonise, moral considerations across individual and institutional considerations so as to create a mutually supportive (rather than divisive) process of moral development in society. Thus, while justice may be a good starting point for moral deliberation in public policy-making, it should not be its only end.

Chapter 8. Conclusion: advantages, challenges & looking forward

CHAPTER OUTLINE

| | |
|---------------------------------------------------------------------------|-----|
| Reviewing the thesis..... | 413 |
| The practice of, and potential for, pragmatist rationality..... | 415 |
| A story of when scientific sense and democratic sensibility meet..... | 417 |
| Advantages of adopting pragmatist rationality | 422 |
| i. Competency with uncertainty | 422 |
| ii. Rationality that is not 'bounded', but 'fit for purpose' | 423 |
| iii. Creativity and innovation..... | 424 |
| iv. Intelligent social coordination | 425 |
| v. Ecological sensitivity | 427 |
| vi. Scientific sense, democratic sensibility & moral deliberation..... | 427 |
| vii. Satisfaction from unified experience..... | 429 |
| Challenges of adopting pragmatist rationality..... | 430 |
| i. Objectivist and relativist critiques, and the word 'rationality' | 430 |
| ii. Moving beyond conservative readings..... | 432 |
| iv. On East and West ... and whether the twain can meet | 434 |
| v. Integration of empiricist and supra-empiricist methods..... | 435 |
| vi. The mobilising power of morals..... | 436 |
| vii. Logistics of building and coordinating reference communities . | 437 |
| In conclusion | 439 |

Conclusion: advantages, challenges & looking forward

It is not the business of political philosophy and science to determine what the state in general should or must be. What they may do is to aid in the creation of methods such that experimentation may go on less blindly, less at the mercy of accident, more intelligently, so that [individuals and societies] may learn from their errors and profit by their successes.

John Dewey, 1954, The Public and its Problems

In the end, pragmatist philosophy could be characterised as being naively optimistic about the ability of individuals and societies to rationally deliberate on, and effect, social change in a way that ensures individual and societal flourishing (Bernstein, 1998; Ryan, 1995). As Bernstein notes, this optimism could definitely be viewed as a fault, but he stresses that Dewey's was a qualified optimism (Bernstein, 1998, p. 149)

If Dewey was to be faulted, it is because, at times in his reliance on metaphors of harmony and organic unity, Dewey underestimates the conflict, dissonance, and asymmetric power relationships that disrupt "the harmonious whole". I do think that at times Dewey is excessively optimistic about the real social and political possibilities of resolving serious social conflicts by open communication. Although this is a weakness in Dewey's thinking, we can read him in a different way. For we can interpret Dewey as telling us that it is precisely because conflicts between different groups run so deep, that it becomes all the more urgent to develop those habits and virtues by which we can intelligently seek to negotiate and reconcile differences ... Though Dewey was committed to the belief that all human beings can develop their 'creative intelligence' and practical judgement, he did not think that rational discussion itself is sufficient to bring about genuine social reform. It is not accidental that Dewey rarely speaks of 'reason.' He always stresses the ongoing creative

task of nurturing the habits of intelligence – habits that can only be sustained in critical, open, tolerant communities.

It could be argued that the social and political transformation in Northern Ireland occurred through ongoing deliberation between the different parties involved, with the alternatives of fighting and terrorism proving too destructive and costly in terms of livelihoods and lives. Similarly, while coercion and corruption are widely recognised as influencing sociopolitical decisions, deliberation and social learning seem to be preferable alternatives. The challenge, as Dewey (1954/ 1927) observed, continues to be the “improvement of the methods and conditions of debate, discussion and persuasion”. To meet this challenge there are several contemporary studies to develop, test and evaluate methods of deliberation and rational decision-making overall, that were discussed throughout the thesis.

On a personal note, with over 12 years’ work experience at different levels of health decision-making: from hospitals, to rural community health programs and universities, to working with national governments, international organisations, the private sector and civil society organisations, I am certainly more than aware of the myriad difficulties, inequities and dissensions that can restrict policy deliberations.

Nevertheless, I have also seen instances where people have come together, in policy deliberations that resulted in changes that were greater than the sum of the individual interests and perspectives brought to the table, to

shape policies that could potentially bring about more moral and meaningful social change. One of the main questions initiating this PhD was how policy-making processes could be better designed and coordinated to support individual and social development. Indeed, this question itself is predicated on a certain sense of hope, but were such learning and social change inconceivable, it would also be inconceivable for me to continue working in the field of public policy; to this end if pragmatism offers some sense of optimism for public policy-making, I am grateful.

Reviewing the thesis

This thesis has met its primary goal; specifically, to demonstrate that rationality, as defined in pragmatist philosophy, provides common ground on which one may build integrative policy theory. It further shows that pragmatist philosophy is an empirically congruent and normative foundation for public policy-making and democratic practice. In order to make the philosophical concepts more operative, a new theory of policy-making - the *Decision Cell* model was developed. This model was structured by key pragmatist 'pillars' and shaped by theoretical and empirical analyses of policy-making, particularly in health policy.

The Decision Cell model stands up favourably against criteria of good policy theory, including of being integrative, problem solving, explanatory and normative. The integrative capacity of the model is evinced in its

ability to bring together diverse considerations of policy environments, processes and participation. The model is explicitly problem-oriented, based as it is on the pragmatist template of the *rhythm of situations*, where rational agency is initiated and coordinated in order to resolve indeterminate and problematic situations. Through the resolution of indeterminate situations, learning is gained, new habitual efficiencies are developed and a renewed dynamic equilibrium achieved in policy situations. This view also provides an explanatory perspective on policy contexts and change.

The Decision Cell model also serves as a normative guide for policy-making. This normative orientation is not with regard to specific policy topics per se, but in developing a method, or a 'blue print' for policy-making. Such a 'blue print' helps to develop shared understandings and to coordinate rational agency, "so that experimentation may go on less blindly, less at the mercy of accident, more intelligently, so that [individuals and societies] may learn from their errors and profit by their successes" (Dewey, 1954/ 1927). The *Ethical Postulate* provides a moral compass for rational decision-making based on the idea that individual and societal flourishing are interrelated; as a postulate, this pragmatist moral compass is meant to being used and tested in practice. The Decision Cell model also proves a robust reference point for deliberation on alternative normative and ethics frameworks for health policy.

The practice of, and potential for, pragmatist rationality

Throughout this thesis, concrete examples were used to illustrate how different aspects of this new policy theory can be made operational. At the conclusion of this thesis, a discussion on how scientific sense and democratic sensibility can come together in practice is warranted.

Reassuringly, there are many examples that can be used. Caspary (2000), in *Dewey on Democracy*, provides a range of concrete, contemporary examples of pragmatist policy-making. He traverses a range of policy contexts in discussing these examples: from macro-level social experiments, such as those associated with the *New Deal* in the US, the adoption of Keynesian economics, to the success of micro-level social welfare initiatives, such as those of the Grameen Bank in Bangladesh and the evolution of the worker managed Mondragon cooperatives in Spain. Other examples include deliberation and conflict resolution mechanisms that have been used successfully in the corporate sector, in international peace settlements and in national truth and reconciliation processes, the success of which was demonstrated in South Africa (Caspary, 2000).

In *Dialogue and the Art of Thinking Together*, Isaacs (1999), while not explicitly referencing Dewey, discusses the MIT Dialogue project where corporate cultures were beneficially transformed as a result of developing the 'art of dialogue'; an approach that is closely aligned with Deweyan inquiry, deliberation and moral imagination. Collier (2006) specifically

discusses the application of the pragmatist composite of ethics, aesthetics and functionality in architecture.

Other examples were discussed in this thesis to show how public policy could be usefully aligned with pragmatist perspectives. For example, different groups' participation affords pluralistic perspectives to be considered in the monitoring and reporting process of the Convention on the Rights of the Child (CRC). These groups also collaborate to resolve specific indeterminate and problematic situations in countries, in some instances by developing partnerships that serve as *communities of practice* (Bernard & Kuruvilla, 2007).

The CRC process is one based on the *progressive realisation* of children's rights, which is aligned with the pragmatist concept of ends-in-view. However, aspects of this process clearly need to be modified, for example with regard to developing *functional participation*, rather than participation pre-defined by national boundaries; this is especially true in light of cross-border trafficking and armed recruitment of children (Bernard & Kuruvilla, 2007). There is also a need to further incorporate a scientific approach to synthesising evidence and to developing and testing proposed solutions (rather than mainly collecting data related to targets). In addition, systematic opportunities to develop and communicate learning and for an integration of normative and ethics considerations

across institutional and individual practice would also be considered as important from a pragmatist perspective.

In the UK, there is an 'indeterminate situation' with regard to the quality of NHS services and of the status of people's health and well being (Wanless, 2002, 2004). This situation was explored in the Wanless scenarios - a technique aligned with pragmatist deliberation. The recommended solution is one that requires *full public engagement*, and includes building health literacy and institutional linkages, for example between health and education authorities; this kind of approach would be aligned with the pragmatist concept of 'public' policy.

The 'success story' chosen for this concluding chapter is one where I have had the privilege, over the past decade or more, of knowing some of the main people involved ²⁴. Through them, I have learned firsthand about social transformations that can take place when scientific sense and democratic sensibility meet in policies and programmes for health.

A story of when scientific sense and democratic sensibility meet

In a remote tribal area of India, the 1991 census indicated a fall in population due to high mortality, particularly from malaria. The staff of a community health programme, MITRA, in a mission hospital in that area

²⁴ This account was also published in the ODI working paper I wrote (Kuruvilla, 2005).

realised that medical anti-malarial strategies of distributing chloroquine were not making a difference. The MITRA team reviewed the literature for alternative options in combating malaria (e.g. from Africa) consulted malariologists, studied endemic sites and identified the predominant mosquito vector, while ascertaining that people in the villages believed that drinking contaminated water was the cause of malaria. Given the impracticability and undesirability of deploying bio-environmental measures in the hills and streams where the tribes lived, the team determined from the evidence that the most effective strategy would be personal protection adopted on a mass scale: a “people’s movement against malaria” (Oommen, Henry & Pidikaka, 1999).

MITRA launched a public awareness campaign to convey the “essentials of the epidemiology of malaria in a demystified, digestible form”.

Alternative plans for malaria prevention were put in a menu format, from which the people chose insecticide-treated mosquito nets and education strategies. There were no subsidies, so the people themselves were responsible for the production and purchase of the mosquito nets.

Although health education programmes continued, health services were not provided unless sought by the villagers.

Over the next decade, through MITRA (which means relationship or friendship) a partnership for health was forged across 48 villages, addressing malaria control and other public health problems. The

programme worked with government services, trained health workers, set up a primary school, obtained expert help in giving the tribal language a script, and promoted the development of various economic schemes, e.g. related to the production and sale of tribal craft. By 2002, MITRA had seen a significant reduction in morbidity in participating villages and an over 40 percent decrease in mortality compared with the rates in 1991. The morbidity and mortality in surrounding villages that were not part of the programme continued to be extremely high (Oommen, 2003; Oommen, Henry & Pidikaka, 1999).

Upon learning about the success of the MITRA programme, government and donor agencies approached the team and proposed scaling up the programme to other regions. Dr John Oommen, head of the community health programme, was at a loss as to what advice to give.

Asking us to scale up MITRA is like asking someone to identify 10 of their closest friends and then giving them money to go out and make 100s of friends in exactly the same way while explaining to others how to do the same (Oommen, 2003; personal communication).

The MITRA story, while an emblematic example of how civil society and scientists interacted in decision-making that led to improved services and health outcomes, also highlights a paradox for research and policy on complex social interventions. Replicating complex social interventions can be impracticable, yet some form of generalisability, and shared understanding, is required to develop and coordinate policy interventions,

and to facilitate the 'social extension of knowledge (Dewey, 1954/ 1927; Mays, Wyke & Evans, 2001; Pawson, Greenhalgh, Harvey & Walshe, 2005).

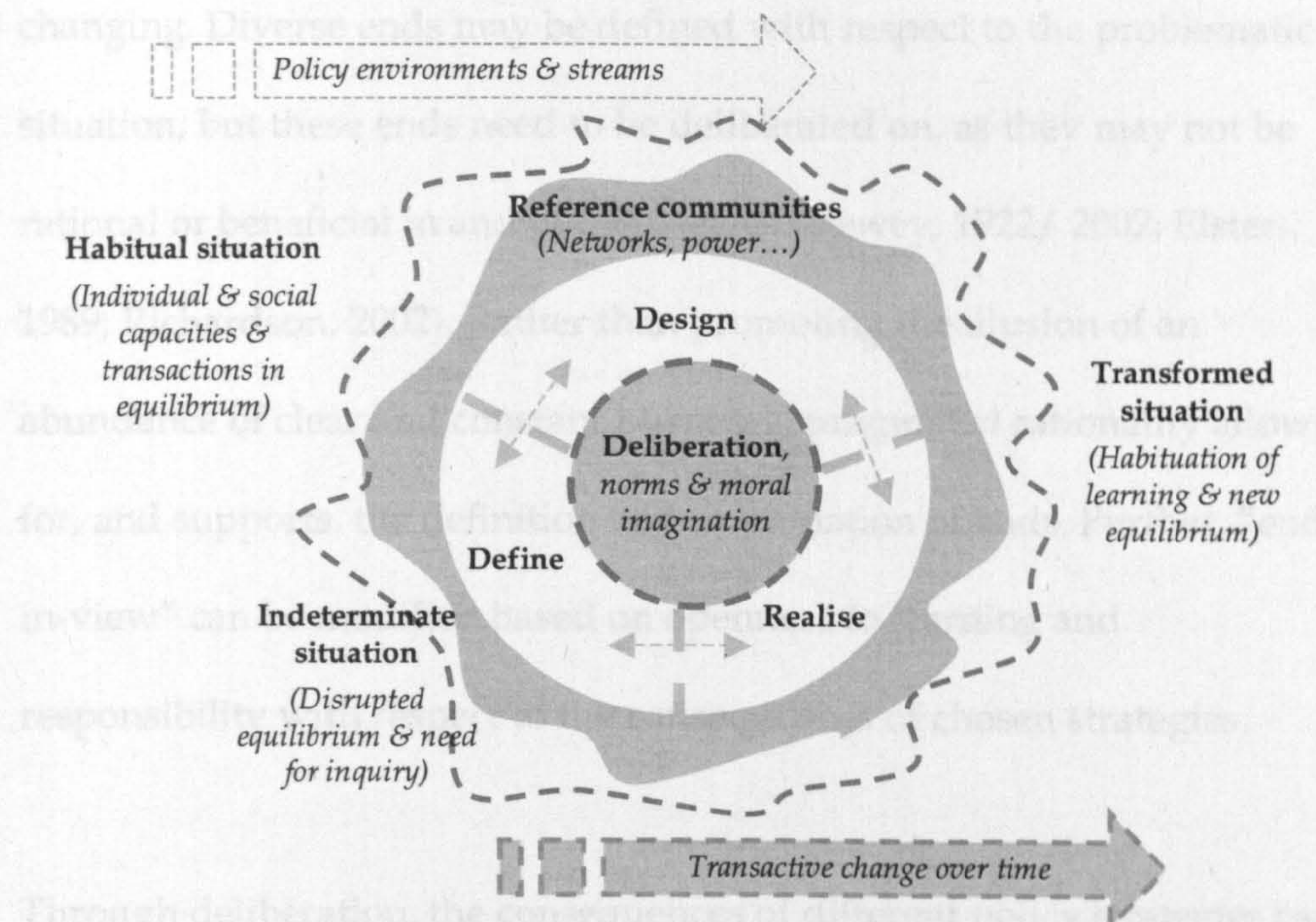
What pragmatist philosophy, and the Decision Cell model based on pragmatist tenets, offers is both a *generalisable account* and *method* for rational public policy-making. Thus, while the specifics and substance of different policy situations will vary, this overarching pragmatist understanding and method can help support and orient public policy processes across situations.

This methods-based approach is in keeping with Dewey's (1954/ 1927) recommendation that the role of experts is to organise facts and develop method to inform and support public deliberations, not to make the substantive decisions about what the public should, or should not do, in this or that situation. However, as with any other conceptual account or practical method, there are both advantages and challenges associated with integrating pragmatist rationality into policy theory and practice. In order to inform how this pragmatist model and other methods for rational agency can be taken forward (in theory and practice), the advantages and challenges of adopting pragmatist rationality and the Decision Cell model need to be discussed.

Since the Decision Cell model was depicted about 200 pages ago, it is

reproduced here as a reminder (see Figure 11), and to orient this discussion on the advantages and challenges of adopting pragmatist rationality in public policy-making.

Figure 11. The Decision Cell model: a reminder



Seven possible advantages, and seven potential challenges of applying pragmatist rationality²⁵ and the Decision Cell model are discussed. An equal number of advantages and challenges is presented, because to decide which side the balance will tip may only be determined through use of the model in concrete policy situations.

²⁵ This discussion on advantages and challenges also draws on the analysis in the paper, described earlier in this thesis, on the pragmatist reconstruction of rationality (Dorstewitz & Kuruvilla, 2007).

Advantages of adopting pragmatist rationality

i. Competency with uncertainty

As a first advantage, the Decision Cell model explicitly recognises that policy processes are often initiated in response to ill-defined and indeterminate situations, and that these situations are continually changing. Diverse ends may be defined with respect to the problematic situation, but these ends need to be deliberated on, as they may not be rational or beneficial in and of themselves (Dewey, 1922/ 2002; Elster, 1989; Richardson, 2002). Rather than promoting the illusion of an abundance of clear and constant purposes, pragmatist rationality allows for, and supports, the definition and examination of ends. Further, “ends-in-view” can be modified based on openness to learning and responsibility with respect to the consequences of chosen strategies.

Through deliberation, the consequences of different policy strategies can be explored without committing to them in practice; for example, through the use of techniques such as scenario development, pragmatist policy-making provides ‘safety’ in exploring alternative options and associated consequences. This process also facilitates the development of shared deliberation on, agreement to, and understanding of, proposed policy strategies. The rational coordination and management of policy change is also facilitated, both with respect to preparation for a range of potential consequences and the possibility of rational deliberation to integrate learning and recognise change through an awareness of ongoing

transactions with policy environments – as depicted in the fluid boundaries of the Decision Cell. Thus, rather than ignoring uncertainties as linear instrumental models of rationality tend to, pragmatist rationality helps develop competencies in policy-making with respect to dealing with uncertainties and change.

ii. Rationality that is not ‘bounded’, but ‘fit for purpose’

In order to address constraints and complexities, theories of “bounded rationality” were developed as ‘real world’ concessions to some abstract, ideal standard of rationality (Simon, 1957). Bounded rationalities, by definition, lead a subordinate parallel existence to some never fully understood ideal standard of rationality. In pragmatist philosophy, ‘bounded’ modes of reasoning are not inferior to abstract ideals. In fact, ‘real world’ rationality could be considered as superior in that it is developed and tested in practice to appropriately deal with the specific challenges. Thus ‘real world’ rationality serves as practical and functional guide for human agency, unlike abstract ideals that are far removed from practicalities. An earlier example described the framing of the policy problem of ‘disability access’, as a transport and as a civil rights issue (Kingdon, 1995; Richardson, 2002). The issue was not so which perspective was right or wrong, or on whether there was some ideal policy solution to be aspired to. What mattered was finding the best solution with respect to the actors and factors comprising this particular policy situation - a solution that best served the demands of this situation.

Pragmatist rationality thus makes the distinction between a 'perfect' abstract rationality and practical 'real world' heuristics less tenable. Where formulations of perfect standards have any bearing, they only serve as tools or manufactured devices that help to orient and formulate reasoning in response to problematic situations. In this context, there is no reason to regard 'so-called' bounded methods of rational decision-making as *defective* adaptations of some ideal standard. This would be analogous to asking Delia Smith to demote her specialised, 'cutting edge', set of chefs' knives to an inferior makeshift solution, just because Sir Thomas Mallory had once written about the magical sword Excalibur.

iii. Creativity and innovation

Pragmatist rationality moves beyond the notion of efficient maximisation, or optimisation, of predefined ends where constraints are 'given'. Instead, the need to continually find *creative solutions* to resolve continually changing problematic situations is emphasised. This creative aspect of pragmatist rationality truly provides a role for people as agents in making decisions about their lives and influencing the situations in which they live (Joas, 1996). Creativity in pragmatism is also associated with imagination and deliberation with respect to 'sublimating' diverse desires, previous habits and status quo responses, and coming up with new and innovative solutions (Dewey, 1922/ 2002).

In a commentary on entrepreneurship in the *Journal of Economic Methodology*, Shook (2003, p. 181) highlights the advantages of the pragmatist approach with respect to innovation and entrepreneurship,

Entrepreneurship cannot be explained by any economic theory that isolates innovation from ongoing social processes or locates creativity in a space of given, fixed values. Unfortunately, mainstream economics has committed these mistakes, rooted in instrumentalist and antidemocratic notions of consumption and rationality that permits reasoning only about means toward given ends. Genuine innovation is, on Dewey's pragmatic approach to values, the intelligent modification of both means and ends for experimental action ... Entrepreneurship is democratic experimentation in the economic realm.

iv. Intelligent social coordination

Key to the Decision Cell model, and pragmatist philosophy, is the concept of functional participation in, and coordination of, rational agency. With respect to a particular indeterminate situation, there may be inquiry in relatively 'decentralised' *communities of inquiry*, for instance in networks or partnerships of academics, civil society organisations, corporate executives or policy-makers. However, Dewey (1954/ 1927) recommended that there be 'public' coordination in order to organise and make knowledge available across society, to provide an overarching perspective and to manage externalities. This pragmatist position is supported by empirical analyses showing that for effective decentralised participation to be realised, central coordination is necessary (Atkinson & Haran, 2004; Golooba-Mutebi, 2005); Additionally, the externalities associated with

providing and promoting public goods and services, including in health, necessitate a strong public sector role in coordinating health care decision-making and provisioning (Buse, Mays & Walt, 2005; Ruger, 2006).

Pragmatist rationality does not leave social coordination to the vagaries of 'invisible hands' or 'muddling through', or rummaging through 'garbage cans'. The pragmatist integration of decentralised collaborative inquiry and centralised, functional coordination offers a more intelligent and purposive approach to socio-political coordination. In addition, the idea of intermediate organisations (Mays, 2000) providing a locus for inquiry, and reference for moral deliberation, was discussed in relation to functional participation in the Decision Cell model. These intermediate organisations can further facilitate 'intelligent' public coordination, by providing a link between 'on the ground' perspectives and more overarching policy considerations.

Building both individual and social intelligence is also critical to supporting intelligent rational decision-making and social coordination. Throughout his work, Dewey (1954/ 1927) emphasised the importance of education to rational agency and democratic practice. He also viewed pluralism as a valuable resource on which individuals and societies could draw. More than an aggregation of individual capacities, social intelligence is determined by the extent to which there are diverse intellectual resources in a community and the extent to which there are

shared and contribute to developing new knowledge in society. However, he identified that there was an essential need to develop and test methods and mechanisms to support and socially intelligent inquiry (Dewey, 1954/1927). It is with this imperative in mind that the Decision Cell model was developed.

v. Ecological sensitivity

Pragmatism regards human beings as embedded in a system of nature; they are part of this system and depend on it for their existence.

Transactions between human agents and the natural environment shape each other, with ramifications throughout a continuum of experience. This means that the basic structure of instrumental rationality models, in which natural resources are considered as external to human agency and can be used or exploited for the benefit of human agents without being affected themselves, is problematic. In this respect, a pragmatist rationality is an 'ecological' theory as it emphasises the interdependent transactions and effects with, and within, the system of nature. In addition, this perspective fosters an awareness of, and responsibility for, the use of resources in public policy programmes.

vi. Scientific sense, democratic sensibility & moral deliberation

These precepts of scientific sense, democratic sensibility and moral imagination, are the crux of this thesis. Pragmatist rationality explicitly

offers a unification of these diverse dimensions of rationality and therefore also affords integrity, versus fragmentation, with regards to the different dimensions of human nature and agency.

Dewey rejected the stark separation between a higher and a lower knowledge (scientific 'truth' versus practical, heuristic skills). This separation lies at the heart of the schism between a scientific sphere of inquiry and practical processes of problem solving; Deweyan pragmatism bridges this gap. There is a role for expertise in organising knowledge to inform those socio-political deliberations as well as to carry out specific technical functions. Dewey also recognised the role of public valuation of information and the role of the state in facilitating those deliberations and protecting the public interest.

A pragmatist reconstruction of rationality is also capable of bridging ethical and technical concerns. By avoiding a priori distinctions between ultimate purposes and tasks of establishing facts and selecting means, pragmatist rationality leaves technical problems open to ethical deliberation. In this context, moral reasoning ceases to be a parallel and competing shadow mode of rational deliberation compared with 'hard' economic and 'factual' considerations. Dewey proposed that value judgments cannot be considered as independent from their interpretation and use in concrete problematic situations (Dewey, 1922/ 2002). He considered valuation as one of the central accomplishments of human

intelligence and rational judgments as a matter of ethical inquiry within problematic situations. This moral orientation is clear, for example, in terms of the need to be cognisant of consequences of actions and proposed solutions. Dewey's Ethical Postulate proposes that rational agency be guided with a view to mutually reflective considerations of the individual and of the reference community of which the individual is a member. The reference community, however, may change with different situations, given the pluralistic nature of people's lives.

vii. Satisfaction from unified experience

A final advantage discussed here is the promise that pragmatist rationality can be consummatory within a concrete situation, and also with respect to the continuum of human experience. The experience of restoring equilibrium, or achieving closure of a problematic situation, is akin to the experience of a job well done, or a game well played. Pragmatist rationality aims at unifying diverse desires through cooperative intelligence and inquiry. This approach also facilitates the integration of diverse actors – policy-makers, scientists and citizens – and diverse dimensions of human life, experience, art, science and ethics. Equilibrium is achieved, not in the classical Greek sense as part of some preordained natural order, but through recognising that unification of human experience is possible through rational inquiry. Further, pragmatist rationality is explicitly situated in a socio-historical context, both with respect to building on previous inquiry and in being guided by agreed

upon norms, but also in developing new knowledge and through change that is constituent of future situations.

The pragmatist approach to rational decision-making does entail considerable effort, and Dewey referred to this as a continual and laborious reworking and achievement. Nevertheless, the results of pragmatist rationality seem more satisfactory, tangible and evolutionary than the dubitable allure of some aggregate audits of utility or the inevitable inferiority complex resulting from forever being 'bounded' with respect to some intangible ideal of rationality.

Challenges of adopting pragmatist rationality

Having discussed a range of potential benefits of adopting pragmatist rationality, there are also a number of challenges to translating the Decision Cell model from theory to practice.

i. Objectivist and relativist critiques, and the word 'rationality'

As discussed in Chapter 3, pragmatism is accused, implausibly, of being both relativist *and* foundationalist. One of the main critiques levelled against pragmatists is that a rationality based on problematic situations would lead into an *objectivist understanding* of problems in decision-making. As discussed in the pillar of *via media*, however, Dewey explicitly

rejected the idea that situations had the quality of being problematic only by virtue of a subjective evaluation or interpretation:

A variety of names serves to characterize the indeterminateness of situations. They are disturbed, ambiguous, troubled and confused, full of conflicting tendencies, obscure, etc.

It is the situation that has these traits. We are doubtful because the situation is inherently doubtful. Personal states of doubt that are not evoked by and that are not relative to some existential situation are pathological (Dewey, 1938/ 1999, p. LW.12.109).

Then Dewey made it very clear that what is experienced with an interruption of habitual equilibrium, is not a ready-made problem, but an indeterminate, often ill-defined situation.

If we assume, prematurely, that the problem involved is definite and clear, subsequent inquiry proceeds on a wrong track (Dewey, 1938/ 1999, p. LW.12.112).

An indeterminate problematic situation can be structured and defined in various ways, so there may be pluralistic perspectives on *defining* the situations and *designing* policy options. Dewey's epistemology continually reminds us that definitions and descriptions have as much a part in determining the quality of a problematic situation, as do physical phenomena. This corresponds well with deliberative theories of policy-making (Fischer, 2003).

If the only guides for rational agency were those established through definitions in specific situations, then there would be no available criteria to judge and discriminate between better or worse types of inquiry (or, indeed, better or worse systems of policy-making). In the pragmatist pillar relating to *norms*, these relativistic critiques were addressed, noting that they ignored the fact that pragmatist inquiry is rooted in processes of learning and *socially intelligent inquiry* where knowledge is shared. In addition, a key tenet of pragmatist rationality is maintaining a balance between *antiscepticism* (wherein doubt requires justification just as much as belief) and *fallibilism* (wherein there is no metaphysical guarantee to be had that any norm or belief can be held above revision and further development) (Putnam & Conant, 1995).

Finally, it is not clear that all the baggage carried around by the word 'rationality' can be sufficiently lightened to allow this revised version of the concept to move forward. Perhaps a more elaborated concept is required, for instance, one that explicitly refers to the intuitions of 'scientific sense', 'democratic sensibility' and 'moral imagination'.

ii. Moving beyond conservative readings

Another critique posed against pragmatism is that it may be dangerously *conservative*. The concern is that rationality, if it is solely reactive to problematic conditions, will be a case of 'too little, too late', in addressing important problems. Problems such as anthropogenic climate change or

the potential shortages in a pension system cannot simply be put on hold till they are somehow in play.

Dewey's answer to this challenge to pragmatist rationality was that,

A disciplined mind takes delight in the problematic, and cherishes it until a way out is found that approves itself upon examination. The questionable becomes an active questioning, a ... quest for the objects by which the obscure and unsettled may be developed into the stable and clear. The scientific attitude may almost be defined as that which is capable of enjoying the doubtful; scientific method is, in one aspect, a technique for making a productive use of doubt by converting it into operations of infinite inquiry (Dewey, 1929/ 1999, p. LW.4.182).

Thinking is not something that takes place outside our habitual coordinations, but is part of this process. Thus, an awareness of a potential catastrophe can result in a disruption of equilibrium as strong as any present phenomenon. In addition, all the decision activities in the *Decision Cell model*, explicitly take a view on the potential consequences of proposed definitions and designs used in policy-making. In *deliberation*, there is an explicit emphasis on the role of imagination in projecting possible future scenarios, and basing valuations of the potential consequences of these scenarios. Further, this forward-looking practice also facilitates a preparedness for change, and a capacity to constructively manage it.

iv. On East and West ... and whether the twain can meet

A further challenge to pragmatism is related to the tension arising from Dewey's ideas of evolution, progress and human flourishing, contrasted with his conception of the rhythm of habitual and problematic situations. The concept of 'growth' has connotations of a typically Western need for progress toward bigger and better things. One critical exchange with Bertrand Russell indicates how Dewey viewed criticisms of this nature (Dewey, 1939/ 1989b). In response to Russell's imputation that the "love of truth is obscured in America by commercialization of which pragmatism is the philosophical expression," Dewey retorted that,

The statement to me seemed to be of that order of interpretation which would say that English neo-realism is a reflection of the snobbish aristocracy of the English and the tendency of French thought to dualism an expression of an alleged Gallic disposition to keep a mistress in addition to a wife ...

And I still believe that Mr. Russell's confirmed habit of connecting pragmatic theory with obnoxious aspects of American industrialism, instead of with the experimental method of attaining knowledge, is much as if I were to link his philosophy to the interests of the English landed aristocracy instead of with a dominant interest in mathematics (Dewey, 1939/ 1989b, p. 257).

In fact, Dewey's conception of the rhythm of situations and the idea of regaining lost equilibrium and restoring harmony is more reminiscent of *Eastern* ways of thinking, for instance Taoism, Zen Buddhism and Yoga have harmony and equilibrium as guiding principles. For instance, as

mentioned in the introductory chapter, in appreciation of the relevance of Dewey's philosophy in China, he was referred to there as a 'second Confucius' (Ryan, 1995; Westbrook, 1991).

In order to resolve the tension between the concepts of *equilibrium* and *growth* in pragmatist philosophy, both perspectives need to be viewed from a more comprehensive concept of evolution (Dewey, 1910/ 1997). Evolution favours neither imbalanced nor stagnant processes; the concept of 'equilibrium' does not imply a *return* to previous habitual practice. Rather, it means finding a *new* equilibrium, one that incorporates learning, enables better functioning and leads to an increased readiness to meet future challenges.

v. Integration of empiricist and supra-empiricist methods

There are challenges and questions regarding this revised concept of rationality that are not easily answered. For instance, in the *Decision Cell* model, both empirical and so-called supra-empirical methods are discussed. Accordingly, there is a need to integrate seemingly disparate worldviews: experimentation with imagination and evidence with empathy. Even within science, there are 'wars' between competing methodological and disciplinary camps (Jasanoff, 2000). Extending these concerns to the wider range of modes of inquiry, intuitions and understanding in society poses a real challenge.

Nevertheless, this type of integration is possible, as seen in the synthesis of literature-based and indigenous definitions of health and illness in New Zealand (Durie, 2004); it is within the scope of pragmatism to come up with a more comprehensive and culturally appropriate understanding of such concepts and approaches. There are promising advances in neurophysiological research showing the importance of emotions in rationality (Damasio, 2006). There is also a growing interest in the science of 'emotional intelligence' (Goleman, 1995) and in the potential of 'collective intelligence', for instance in corporations looking to build supportive and creative work cultures (Isaacs, 1999).

In addition - knowledge is power, and those with privileged knowledge with respect to policy-making, may be unwilling to give up this position. However, if, guided by the Ethical Postulate, it were possible to establish that control could be replaced by collaboration, in the interest of all concerned, then some change may be possible in this respect.

vi. The mobilising power of morals

Dewey's faith that moral considerations provide a sufficient incentive to guide individual and societal action may be seen as naive. Ryan (1995, p. 314), for instance, appreciates Dewey's 'moral socialism', but cautions that "it is difficult to motivate workers to do a good job by presenting them with moral incentives; public spirit and revolutionary zeal can achieve things that self-interest cannot, but over a long haul they are inferior to

self-interest as motivating forces". The proof of either position will be in the testing.

However, this thesis has highlighted examples of how norms and moral considerations can be a powerful means of social coordination, from protests against war or for debt relief in developing economies (DeLeon, 1988; Glasius, 2005). In the UNICEF review, civil society organisations identified that the precepts of the Conventions on the Rights of the Child, and human rights standards, provided a stronger foundation for collaboration than did specific policy or programmatic formulations (Bernard & Kuruvilla, 2007). In the LSHTM study of research impact, some of the most far-reaching impacts resulted from the development of new ethical guidelines for interviewing women and adolescents who had been trafficked (Kuruvilla, Mays & Walt, 2007; World Health Organisation, London School of Hygiene and Tropical Medicine & Daphne Programme of the European Commission, 2003). Police, journalists, civil society organisations as well as researchers are now using these guidelines, again indicating that moral considerations can cut across sectoral, societal and disciplinary boundaries.

vii. Logistics of building and coordinating reference communities

Dewey (1954/ 1927) saw communities of inquiry being built and sustained through face-to-face communication and shared experiences. It is not clear what effects increasingly mediated communication (e.g. through the mass

media and the Internet) would have on how individuals interact, deliberate, and collaborate. Additional challenges to cohesive communities of inquiry are posed by increasingly fragmented 'globalisation' in the production of goods and provision of services, the so-called 'clash of civilisations' and growing social inequities around the world.

It is not yet clear how best reference communities may be supported in order to facilitate social cohesion and flourishing. The literature increasingly offers some promising perspectives on these issues. For example, the possibilities of intermediate organisations, deliberative forums as well as a range of socio-political partnerships (for example, public-private, public-civil society organisation partnerships) was discussed in Chapter 4 (Bernard & Kuruvilla, 2007; Glasius, 2005; Mays, 2000). There is also a need for collaboration across academic disciplines researching participation and communication (including political philosophy, sociology, psychology, science studies, media studies and literary criticism) in order to better understand and inform policy-making and democratic practice overall.

In conclusion

In keeping with the pragmatist ethos, questions related to both the advantages and challenges discussed above can only be answered either through practice or through ongoing rational deliberation. To this end, the pragmatist concept of rational agency and the Decision Cell model offer an orientation - a method to guide and coordinate socially intelligent inquiry, moral deliberation and democratic practice.

Chapter 3 discussed how criticisms have been levelled against pragmatist treatises for their failure to succinctly sum up the key messages. This thesis will conclude with an attempt at such succinctness, using selected summary phrases and words to convey the ethos of pragmatist rationality. These words and phrases are just signposts and cannot, in any way, be a substitute for the richness of the journey undertaken in pragmatist philosophy and public policy.

First, the key tenets of pragmatist rational agency could be summed up using 5 'Es':

Experience, Experiment, be Ethical, Educate and Evolve.

The 4 pillars of pragmatist philosophy would also serve as a useful summary:

- *The rhythm of situations*
- *Socially intelligent inquiry*

- *Via media between foundationalism and relativism*
- *Deliberation, norms and moral imagination*

The 3 'signature' phrases in this thesis can be used to convey the key intuitions of the *Decision Cell* model:

scientific sense, democratic sensibility and moral imagination.

Finally, to take forward the project of rational public policy-making, one word serves as a definitive launching pad. This word has resonance the world over, and conveys a belief in the 'here and now' and in human potential, that John Dewey, and later John Lennon, believed in ... and this word is:

imagine ...

Bibliography and references

- 6, P., Goodwin, N., Peck, E., & Freeman, T. (2006). *Managing networks of twenty-first century organizations*. Houndmills, Basingstoke, Hampshire: Palgrave-McMillan.
- Abelson, J., Forest, P.-G., Eyles, J., Smith, P., Martin, E., & Gauvin, F.-P. (2003). Deliberations about deliberative methods: issues in the design and evaluation of public participation processes. *Soc Sci Med*, 57(2), 239-251.
- Ackoff, R. L. (2007). How to avoid the fatal F-Laws: Global Business, an interview with Peter Day. BBC World Service. Retrieved 02/2007, from <http://news.bbc.co.uk/2/hi/business/6338527.stm>
- Aldo Leopold Leadership Program. (2006). Communicating environmental science. Retrieved 27-11-06, from <http://www.leopoldleadership.org>
- Alexander, T. (1993). John Dewey and the moral imagination: beyond Putnam and Rorty toward a postmodern ethics. *Transactions of the Charles S. Peirce Society*, 19(3), 369-400.
- Alvarez-Rosete, A. (2005). *Better policy-making in health care*. London: King's Fund.
- Andreason, A. R. (1995). *Marketing social change: changing behavior to promote health, social development and the environment*. San Francisco: Jossey-Bass.
- Argyris, C., & Schön, D. A. (1978). *Organizational learning: a theory of action perspective*. Reading: Addison Wesley.
- Arlington Institute. (2005). Scenario development. Retrieved 03/2007, from http://www.arlingtoninstitute.org/products_services/scenariodevelopment_05.asp
- Arnstein, S. R. (1969). A ladder of citizen participation. *Journal of the American Institute of Planning*, 35(4), 216-224.
- Arrow, K. J. (1963). *Social choice and individual values* (Second ed.). New Haven and London: Yale University Press.
- Atkinson, P. (1997). Narrative turn or blind alley? *Qualitative Health Research*, 7(3), 325-344.
- Atkinson, S., & Haran, D. (2004). Back to basics: does decentralisation improve health system performance? Evidence from Ceara in north-east Brazil. *Bull World Health Organ*, 82(11), 822-827.
- Bachrach, P., & Baratz, M. S. (1962). Decisions and nondecisions: an analytical framework. *American Political Science Review*, 56(2), 632-642.
- Bacon, F. (1626/ 1905). *The Philosophical Works of Francis Bacon*. M. J. Robertson (Ed.). London: Routledge & Kegan Paul.
- Balloch, S., & Taylor, M. (2002). *Partnership working: policy and practice*. Bristol: The Policy Press.

- Baumgartner, F. R., & Jones, B. D. (1991). Agenda dynamics and policy subsystems. *Journal of Politics*, 53(4), 1044-1074.
- Beck, U., Giddens, A., & Lash, S. (1994). *Reflexive modernization: politics, tradition and aesthetics in the modern social order*. Cambridge: Polity Press.
- Benhabib, S. (1986). *Critique, norm and utopia. A study of the foundations of critical theory*. New York: Columbia University Press.
- Benhabib, S., & Fraser, N. (Eds.). (2004). *Pragmatism, critique, judgement: essays for Richard J. Bernstein*. Cambridge, Massachusetts: MIT Press.
- Bernal, J. (1939). *The social function of science*. London: Routledge.
- Bernard, A., & Kuruvilla, S. (2007). *Civil society organizations' perceptions of UNICEF partnerships: implications for policy and practice*. New York: UNICEF.
- Bernstein, R. J. (1998). Community in the pragmatist tradition. In M. Dickstein (Ed.), *The revival of pragmatism: new essays on social thought, law and culture* (pp. 141-156).
- Bettcher, D. W., & Kelly, L. (2002). Globalisation and public health. *J Epidemiol Community Health*, 56, 8-17.
- Bevan, G., Maynard, A., Holland, W., & Mays, N. (1988). Reforming UK health care to improve health. Retrieved 03/2007, from <http://ideas.repec.org/p/chy/respap/op9.html>
- Beyrer, C., & Kass, N. E. (2002). Human rights, politics, and reviews of research ethics. *Lancet*, 360(9328), 246-251.
- Black, N. (1997). National strategy for research and development: Lessons from England. *Annu Rev Public Health*, 18, 485-505.
- Black, N. (2001). Evidence based policy: proceed with care. *BMJ*, 323, 275-279.
- Black, N., & Carter, S. (2001). Public accountability: one rule for practitioners, one for scientists? *J Health Serv Res Policy*, 6(3), 130-132.
- Blair, H. (1997). Democratisation and civil society. In D. Hulme & M. Edwards (Eds.), *NGOs, states and donors: too close for comfort?* London: Save the Children Fund.
- Boas, F. (1920). Methods of ethnology. *American Anthropologist* 22(4), 311-322.
- Bohman, J. (2001). Critical theory: Frankfurt School. In N. J. Smelser & P. B. Baltes (Eds.), *International encyclopedia of the social & behavioral sciences* (pp. 2986-2990). Oxford: Elsevier Ltd.
- Boucher, D., & Kelly, P. (Eds.). (2003). *Political thinkers: from Socrates to the present*. New York: Oxford University Press.
- Bowen, S., & Zwi, A. B. (2005). Pathways to "evidence-informed" policy and practice: A framework for action. *PLoS Med*, 2(7), e166.
- Boydston, J. A., & Hickman, L. A. (Eds.). (1882-1953/ 1999). *The Collected Works of John Dewey, 1882-1953. The electronic edition*. Carbondale and Edwardsville: Southern Illinois University Press; Charlottesville: InteLex 'Past Masters' series.

- Brodie, M. (1996). Americans' political participation in the 1993-94 national health care reform debate. *Journal of Health Politics, Policy and Law*, 21(1), 99-128.
- Brodin, E. (1985). Review: 'Agendas, alternatives, and public policy' by John W. Kingdon. *Political Science Quarterly*, 100(1), 165-166.
- Brown, J., & Walsh-Childers, K. (2002). Effects of media on personal and public health. In J. Z. Bryant, D (Ed.), *Media effects: Advances in theory and research* (2 ed., pp. 453-489). Mahwah: Lawrence Erlbaum Associates.
- Brugha, R., & Varvasovsky, Z. (2000). Stakeholder analysis: a review. *Health Policy and Planning*, 15(3), 239-246.
- Brundtland, G. H. (2001). Opening remarks for the second session of the Intergovernmental Negotiating Body for the Framework Convention on Tobacco Control. Retrieved 04/2007, from http://www.who.int/director-general/speeches/2001/english/20010430_INB2tobaccogeneva.en.html
- Buckland, S., & Gorin, S. (2001). Involving consumers? An exploration of consumer involvement in NHS Research & Development managed by Department of Health Regional Offices. Retrieved 04/2007, from http://www.invo.org.uk/pdfs/sb_involving_consumers_Jan2001.pdf
- Bullert, G. (1989). John Dewey on war and fascism: a response. *Educational Theory*, 39(1), 71-80.
- Buse, K., Mays, N., & Walt, G. (2005). *Making health policy*. Maidenhead: Open University Press.
- Bush, V. (1945). *The Endless Frontier. A report to the President on a program for post-war scientific research*. Washington D.C.: US Government Printing Office.
- Butschi, D., Joss, S., & Baeriswyl, M. (2002). Switzerland: new paths for public participation in a direct democracy. In S. Joss & S. Bellucci (Eds.), *Participatory technology assessment. European perspectives*. London: Centre for the Study of Democracy (CSD) at University of Westminster in association with TA Swiss.
- Cabinet Office. (1999). *Professional policy making for the twenty first century*. London: Strategic Policy Making Team, Cabinet Office.
- Callon, M. (1993). Is science a public good? Fifth Mullins lecture, Virginia Polytechnic Institute. *Science, Technology & Human Values*, 19(4), 395-424.
- Campbell, C., Wood, R., & Kelly, M. (1999). *Social capital and health*. London, UK: Health Education Authority.
- Caspary, W. R. (1991). Ethical deliberation as dramatic rehearsal: John Dewey's theory. *Educational Theory*, 41(2), 175-188.
- Caspary, W. R. (2000). *Dewey on democracy*. Ithaca and London: Cornell University Press.
- Center for Dewey Studies. (1961 - current). Retrieved 12/12/2006, from <http://www.siu.edu/~deweyctr/index.htm>

- Charlesworth, H., & Chinkin, C. (2000). *The boundaries of international law: a feminist analysis*. Manchester: Manchester University Press.
- Child Rights Information Network (CRIN). (2007). Convention on the Rights of the Child. Retrieved 02/2007, from <http://www.crin.org/resources/treaties/CRC.asp?catName=International+Treaties&flag=legal&ID=6>
- Chinkin, C. (1998). The role of non-governmental organisations in standard setting, monitoring and implementation of human rights. In J. J. Norton, M. Andenas & M. Footer (Eds.), *The changing world of international law in the twenty-first century: a tribute to the late Kenneth R. Simmonds*. The Hague: Kluwer Law International.
- Chinkin, C. (2000). Human rights and the politics of representation: is there a role for international law. In M. Byers (Ed.), *The Role of Law in International Politics: essays in international relations and international law* (pp. 131-147). Oxford: Oxford University Press.
- Clark, D. A. (2005). The capability approach: its development, critiques and recent advances. Retrieved 14/02/2007, from <http://www.gprg.org/pubs/workingpapers/pdfs/gprg-wps-032.pdf>
- Cliff, J., Walt, G., & Nhatave, I. (2004). What's in a name? Policy transfer in Mozambique: DOTS for tuberculosis and syndromic management for sexually transmitted infections. *Journal of Public Health Policy*, 25(1), 38-55.
- Coast, J. (2004). Is economic evaluation in touch with society's health values? *BMJ*, 329, 1233-1236.
- Cohen, M. D., March, J. G., & Olsen, J. P. (1972). A garbage can model of organizational choice. *Adm Sci Q*, 17, 1-25.
- Collier, J. (2006). The art of moral imagination: ethics in the practice of architecture. *Journal of Business Ethics*, 66, 307-317.
- Commissariat General du Plan. (2004). Future studies and change of political regime: the "Mont Fleur Scenarios" in South Africa. *Les NOTES d'ALEPH*(14), 1-4.
- Cooke, B. (2001). The social psychological limits of participation. In B. Cooke & U. Kothari (Eds.), *Participation: the new tyranny?* London, UK: Zed Books.
- Cooke, B., & Kothari, U. (Eds.). (2001). *Participation: the new tyranny?* London: Zed Books.
- Cornwall, A. (2000). Beneficiary, consumer, citizen: perspectives on participation for poverty reduction. Retrieved 08/2007, from http://www.sida.se/sida/jsp/sida.jsp?d=118&a=2079&language=en_US
- Crawford, M. J., Rutter, D., Manley, C., Weaver, T., Bhui, K., Fulop, N., et al. (2002). Systematic review of involving patients in the planning and development of health care. *BMJ*, 325.
- Crenson, M. A. (1971). *The unpolitics of air pollution: a study of non-decision making in the cities*. Baltimore: Johns Hopkins University Press.
- Crisp, N. (2007). Global health partnerships: the UK contribution to health in developing countries. The Crisp Report. Retrieved 03/2007,

- from
http://www.dh.gov.uk/PublicationsAndStatistics/Publications/PublicationsPolicyAndGuidance/PublicationsPolicyAndGuidanceArticle/fs/en?CONTENT_ID=4143084&chk=uhVU3O
- Curtis, A. (Director) (18/03/2007). The Trap: whatever happened to our dreams of freedom? Part 2: BBC 2.
- Curtis, V., & Cairncross, S. (2003). Effect of washing hands with soap on diarrhoea risk in the community: a systematic review. *Lancet Infect Dis*, 3, 275-281.
- Damasio, A. (2006). *Descartes' error: emotion, reason and the human brain*. London.
- Daniels, N. (2001). Justice, health, and health care. *American Journal of Bioethics*, 1(2), 3-15.
- Daniels, N., Flores, W., Supasit, P., Ndumbe, P. N., Bryant, J. H., Ngulube, T. J., et al. (2005). An evidence-based approach to benchmarking the fairness of health-sector reform in developing countries. *Bull World Health Organ*, 83(7), 534-540.
- Daniels, N., & Sabin, J. (1998). The ethics of accountability in managed care reform. *Health Aff*, 17(5), 252-253.
- Daniels, N., Light, D. W., & Caplan, R. L. (1996). *Benchmarks of fairness for health care reform*. New York: Oxford University Press.
- deHaven-Smith, L. (1988). *Philosophical critiques of policy analysis: Lindblom, Habermas and the Great Society*. Gainesville: University of Florida Press.
- DeLeon, P. (1988). *Advice and consent: the development of the policy sciences*. New York: Russell Sage Foundation.
- DeLeon, P., & Longobardi, R. C. (2002). Policy analysis in the good society. *The Good Society*, 11(1), 37-41.
- Denis, J.-L., & Lomas, J. (2003). Convergent evolution: the academic and policy roots of collaborative research. *J Health Serv Res Policy*, 8(S2), 1-6.
- Department for Environment Food and Rural Affairs. (2005). *Securing the future*. London: DEFRA.
- Department of Health. (2006). *Best research for best health: a new national health research strategy*. London: Research and Development Directorate, Department of Health.
- Dewey, J. (1886). Soul and body. *Bibliotheca Sacra* 43, 239-263. Retrieved 03/2007, from
http://spartan.ac.brocku.ca/~lward/Dewey/Dewey_1886a.html
- Dewey, J. (1891/ 1999). Outlines of a critical theory of ethics. In J. A. Boydston & L. A. Hickman (Eds.), *The Collected Works of John Dewey, 1882-1953. The electronic edition*. Carbondale and Edwardsville; Charlottesville: Southern Illinois University Press; InteLex 'Past Masters' series.
- Dewey, J. (1897/ 1999). The study of ethics. In J. A. Boydston & L. A. Hickman (Eds.), *The Collected Works of John Dewey, 1882-1953. The electronic edition*. Carbondale and Edwardsville: Southern Illinois University Press; Charlottesville: InteLex 'Past Masters' series.

- Dewey, J. (1910/ 1997). *The influence of Darwin on philosophy and other essays*. London: Prometheus Books.
- Dewey, J. (1916). *Democracy and Education*. New York: Macmillan.
- Dewey, J. (1920/ 1999). Reconstruction in philosophy. In J. A. Boydston & L. A. Hickman (Eds.), *The Collected Works of John Dewey, 1882-1953. The electronic edition* Carbondale and Edwardsville: Southern Illinois University Press; Charlottesville: InteLex 'Past Masters' series.
- Dewey, J. (1922/ 1999). Education as politics. In J. A. Boydston & L. A. Hickman (Eds.), *The Collected Works of John Dewey, 1882-1953. The electronic edition* Carbondale and Edwardsville: Southern Illinois University Press; Charlottesville: InteLex 'Past Masters' series.
- Dewey, J. (1922/ 2002). *Human nature and conduct: an introduction to social psychology*. New York: Henry Holt and Co./ Mineola: Dover Publications Inc.
- Dewey, J. (1925). *Experience and nature*. Chicago: Open Court.
- Dewey, J. (1925/1999). The development of American pragmatism. In J. A. Boydston & L. A. Hickman (Eds.), *The Collected Works of John Dewey, 1882-1953. The electronic edition*. Carbondale and Edwardsville: Southern Illinois University Press; Charlottesville: InteLex 'Past Masters' series.
- Dewey, J. (1929/ 1999). The quest for certainty. In J. A. Boydston & L. A. Hickman (Eds.), *The Collected Works of John Dewey, 1882-1953. The electronic edition*. Carbondale and Edwardsville: Southern Illinois University Press; Charlottesville: InteLex 'Past Masters' series.
- Dewey, J. (1930/ 1999). From absolutism to experimentalism. In J. A. Boydston & L. A. Hickman (Eds.), *The Collected Works of John Dewey, 1882-1953. The electronic edition*. Carbondale and Edwardsville: Southern Illinois University Press; Charlottesville: InteLex 'Past Masters' series.
- Dewey, J. (1933/ 1999a). How we think. In J. A. Boydston & L. A. Hickman (Eds.), *The Collected Works of John Dewey, 1882-1953. The electronic edition*. Carbondale and Edwardsville: Southern Illinois University Press; Charlottesville: InteLex 'Past Masters' series.
- Dewey, J. (1933/ 1999b). Imperative need: a new radical party. In J. A. Boydston & L. A. Hickman (Eds.), *The Later Works of John Dewey, 1925-1953*: Carbondale and Edwardsville: Southern Illinois University Press; Charlottesville: InteLex 'Past Masters' series.
- Dewey, J. (1934). *A common faith*. New Haven: Yale University Press.
- Dewey, J. (1934/ 1980). *Art as experience*. New York: Perigee Books.
- Dewey, J. (1935/ 1999). Liberalism and social action. In J. A. Boydston & L. A. Hickman (Eds.), *The Collected Works of John Dewey, 1882-1953. The electronic edition*. Carbondale and Edwardsville: Southern Illinois University Press; Charlottesville: InteLex 'Past Masters' series.
- Dewey, J. (1938/ 1997). *Experience and education*. New York: Touchstone.
- Dewey, J. (1938/ 1999). Logic: the theory of inquiry. In J. A. Boydston & L. A. Hickman (Eds.), *The Collected Works of John Dewey, 1882-1953. The electronic edition*. Carbondale and Edwardsville: Southern Illinois University Press; Charlottesville: InteLex 'Past Masters' series.

- Dewey, J. (1939/ 1989a). *Freedom and culture*. Amherst: Prometheus Books.
- Dewey, J. (1939/ 1989b). The philosopher replies. Experience, knowledge and value: a rejoinder. In P. A. Schilpp & L. E. Hahn (Eds.), *The Philosophy of John Dewey* (Third ed., pp. 515-608). The library of living philosophers. La Salle: Open Court.
- Dewey, J. (1954/ 1927). *The public and its problems*. Athens: Swallow Press/ Ohio University Press.
- Dewey, J. (1994). In J. Gouinlock (Ed.), *The moral writings of John Dewey*. Great books in philosophy. New York: Prometheus Books.
- Dewey, J., & Bentley, A. F. (1946). Interaction and transaction. *The Journal of Philosophy*, 43(19), 505-517.
- Dewey, J., & Tufts, J. H. (1908/ 1999). Ethics. In J. A. Boydston (Ed.), *The Collected Works of John Dewey, 1882-1953. The electronic edition*. Carbondale and Edwardsville: Southern Illinois University Press; Charlottesville: IntelLex 'Past Masters' series.
- DFID Malaria Knowledge Programme. (2006). Retrieved 20/07/06, from <http://www.lshtm.ac.uk/dfid/malaria/>
- Dierkes, M., & von Grote, C. (Eds.). (2000). *Between understanding and trust: the public, science and technology*. Amsterdam: Harwood Academic Publishers.
- Dietz, T. (2003). What is a good decision? Criteria for environmental decision-making. *Human Ecology Review*, 10(1), 33-39.
- Dixon, J., & Dogan, R. (2004). The conduct of policy analysis: philosophical points of reference. *Review of Policy Research*, 21(4), 559-579.
- Dixon-Woods, M. A., Shona; Jones, David; Young, Bridget; Sutton, Alex. (2005). Synthesising qualitative and quantitative evidence: a review of possible methods. *J Health Serv Res Policy*, 10(1), 45-53.
- Dobrow, M. J., Goel, V., Lemieux-Charles, L., & Black, N. (2006). The impact of context on evidence utilization: a framework for expert groups developing health policy recommendations. *Soc Sci Med*, 63(7), 1811-1824.
- Dorstewitz, P., & Kuruvilla, S. (2005, July 8). *Reviewing rationality: a pragmatist perspective on policy and planning*. Paper presented at the Oxford Conference '05, Philosophy of Management, St Anne's College, Oxford.
- Dorstewitz, P., & Kuruvilla, S. (2007). Reviewing rationality: a pragmatist perspective on policy & planning processes. *Philosophy of Management*, 6(1), 91-118.
- Drager, N. M., Elizabeth; Moffitt, Michael. (2000). *Negotiating health development: a guide for practitioners*. Cambridge: Conflict Management Group and World Health Organization.
- Dryzek, J. S. (1989). The policy sciences of democracy. *Polity*, 22, 97-118.
- Dugdale, A. (1999). Materiality: juggling sameness and difference. In J. Law & J. Hassard (Eds.), *Actor Network Theory and after* (pp. 113-135). Oxford: Blackwell Publishers.
- Durie, M. (2004). Understanding health and illness: research at the interface between science and indigenous knowledge. *Int J Epidemiol*, 33(5), 1138-1143.

- Eccles, M., Grimshaw, J., Walker, A., Johnston, M., & Pitts, N. (2005). Variance and dissent: response to "The OFF Theory of Research Utilization". *Journal of Clinical Epidemiology*, 58, 117-118.
- Edelman, M. (1977). *Political language: words that succeed and policies that fail*. New York: Institute for the Study of Poverty.
- Edmundson, W. A. (2004). *An introduction to rights*. Cambridge: Cambridge University Press.
- Edwards, P., Arango, M., Balica, L., Cottingham, R., El-Sayed, H., Farrell, B., et al. (2005). Final results of MRC CRASH, a randomised placebo-controlled trial of intravenous corticosteroid in adults with head injury-outcomes at 6 months. *Lancet*, 365(9475), 1957-1959.
- Efthymiades, A., & Kuruvilla, S. (2005). *An annotated bibliography on civil society participation in health research and policy*. London: Overseas Development Institute (ODI).
- Elster, J. (1989). The possibility of rational politics. In D. Held & J. B. Thompson (Eds.), *Social theory of modern societies: Anthony Giddens and his critics* (pp. 115-142). Cambridge: Cambridge University Press.
- Elster, J. (1991). *The cement of society: a study of social order*. Cambridge: Cambridge University Press.
- Epstein, S. (1996). *Impure science: AIDS, activism, and the politics of knowledge*. Berkeley: University of California Press.
- Eriksen, E. O., & Fossum, J. E. (2002). Democracy through Strong Publics in the European Union? *Journal of Common Market Studies*, 40(3), 401-423.
- Etzioni, A. (1967). Mixed scanning: a 'third approach' to decision-making. *Public Admin Rev*, 27, 385-392.
- Evans, K. G. (2000). Reclaiming John Dewey: democracy, inquiry, pragmatism, and public management. *Administration & Society*, 32(3), 308-328.
- Falk, R. (1999). *Predatory globalisation: a critique*. Cambridge: Polity Press.
- Ferreira, P. H., Ferreira, M. L., Maher, C. G., Refshauge, K., Herbert, R. D., & Latimer, J. (2002). Effect of applying different "levels of evidence" criteria on conclusions of Cochrane reviews of interventions for low back pain. *Journal of Clinical Epidemiology*, 55, 1126-1129.
- Figuroa, M. E., Kincaid, D. L., Manju, R., & Lewis, G. (2002). Communication for social change: an integrated model for measuring the process and its outcomes. *The Communication for Social Change Working Paper Series*, from www.communicationforsocialchange.org/pdf/socialchange.pdf
- Fischer, F. (2003). *Reframing public policy: discursive politics and deliberative practices*. New York: Oxford University Press.
- Flyvbjerg, B. (1996). Rationality and Power. In S. a. S. S. F. Campbell (Ed.), *Explorations in Planning Theory* (pp. 318-332). Malden, Oxford, Berlin: Blackwell.
- Forester, J. (2001). An instructive case-study hampered by theoretical puzzles: critical comments on Flyvbjerg's Rationality and Power. *International Planning Studies*, 6(3), 263-270.

- Foucault, M. (1973/ 1963). *The birth of the clinic*. London: Tavistock.
- Foucault, M. (1984). In P. Rabinow (Ed.), *The Foucault reader*. London: Penguin Books.
- Fraser, N. (1992). Rethinking the Public Sphere: a contribution to the critique of actually existing democracy. In C. Calhuon (Ed.), *Habermas and the Public Sphere*. Cambridge, MA: MIT Press.
- Friedman, J. (1973). *Retracking America. A theory of Transactive Planning*. Garden City; New York: Anchor Press; Doubleday.
- Friedman, J. (1987). *Planning in the public domain: from knowledge to action*. Princeton: Princeton University Press.
- Frost, R. (1936/2002). Two tramps in mud time. In *Robert Frost's Poems* (pp. 111-114). New York: St. Martin's Press.
- Galston, W. A. (1993). John Dewey and the religion of democracy. *Raritan*, 12(3), 144-154.
- Gardner, H. (1995). *Leading minds: an anatomy of leadership*. New York: Basic Books.
- Garrison, J. (2000). Pragmatism and public administration. *Administration & Society*, 32(4), 458-477.
- Gaskell, G., Bauer, M. W., Durant, J., & Allum, N. C. (1999). Worlds Apart? The reception of genetically modified foods in Europe and the U.S. *Science*, 285, 384-387.
- Gates Foundation. (2006). Education. Retrieved 10/2006, from http://www.gatesfoundation.org/UnitedStates/Education/RelatedInfo/3Rs_Solution.htm
- German Weather Service (DWD), London School of Hygiene and Tropical Medicine, & WHO Europe. (2004). *Heat waves: risks and responses*. Copenhagen: WHO Europe.
- Gibson, J. L., Mitton, C., Martin, D. K., Donaldson, C., & Singer, P. A. (2006). Ethics and economics: does programme budgeting and marginal analysis contribute to fair priority setting? *J Health Serv Res Policy*, 11(1), 32-37.
- Gilson, L., Doherty, J., Lake, S., McIntyre, D., Mwikisa, C., & Thomas, S. (2003). The SAZA study: implementing health financing reform in South Africa and Zambia. *Health Policy Plan*, 18(1), 31-46.
- Glaser, B. G., & Strauss, A. L. (1967). *The discovery of grounded theory*. Chicago: Aldine.
- Glasius, M. (2005). Deliberation or struggle? Civil society traditions behind the social forums. *Ephemera*, 5(2), 240-252.
- Glasius, M., Lewis, D., & Seckinelgin, H. (Eds.). (2004). *Exploring civil society: political and cultural contexts*. Oxon: Routledge.
- Global Health Watch. (2005/2006). Mobilising civil society around an alternative World Health Report. Retrieved 05/2007, from http://www.ghwatch.org/2005_report.php
- Goldkuhl, G., & Cronholm, S. (2003). *Multi-grounded theory: adding theoretical grounding to grounded theory*. Paper presented at the 2nd European Conference on Research Methods in Business and Management (ECRM 2003), Reading.

- Goleman, D. (1995). *Emotional intelligence: why it can matter more than IQ*. New York: Bantam Books.
- Golooba-Mutebi, F. (2005). When popular participation won't improve service provision: primary health care in Uganda. *Development Policy Review*, 23(2), 165.
- Gould, S. J. (2003). *The hedgehog, the fox, and the magister's pox*. London: Jonathan Cape, Random House.
- Government of India. (1950/ 2006). Constitution of India. Retrieved 03/2007, from <http://indiacode.nic.in/coiweb/welcome.html>
- Green, J., Free, C., Bhavani, V., & Newman, T. (2005). Translators and mediators: bilingual young people's accounts of their interpreting work in health care. *Soc Sci Med*, 60, 2097-2110.
- Grilli, R., Ramsay, C., & Minozzi, S. (2002). *Mass media interventions: effects on health services utilisation [Review]*: The Cochrane Collaboration.
- Habermas, J. (1987). *The theory of communicative action* (Second ed.). Cambridge: Polity Press.
- Hacking, I. (2001). *An introduction to probability and inductive logic*. Cambridge: Cambridge University Press.
- Hailey, J. (1999). Beyond the formulaic: process and practice in South Asian NGOs. In B. Cooke & U. Kothari (Eds.), *Participation: the new tyranny?* London: Zed Books.
- Haines, A., & Donald, A. (1998). Making better use of research findings. *BMJ*, 317, 72-75.
- Haines, A., Kuruvilla, S., & Borchert, M. (2004). Bridging the implementation gap between knowledge and action for health. *Bull World Health Organ*, 82(10), 724-731.
- Hall, R. H. (1977). *Organizations, structure, and process*. Englewood Cliffs: Prentice Hall.
- Ham, C. (2006). Creative destruction in the NHS *BMJ*, 332, 984-985.
- Ham, C., & Hill, M. (1993). *The policy process in the modern capitalist state* (Second ed.). Hertfordshire: Harvester Wheatsheaf.
- Hamilton, C. M., & Petticrew, M. (2003). Spending (slightly) less on health and more on the arts. Response: Robust research is needed. *BMJ*, 326, 660.
- Hanney, S., Gonzalez-Block, M., Buxton, M., & Kogan, M. (2003). The utilisation of health research in policy-making: concepts, examples and methods of assessment. *Health Research Policy and Systems*, 1:2 <http://www.health-policy-systems.com/content/1/1/2>
- Hardin, G. (1968). The tragedy of the commons. *Science*, 162, 1243-1248.
- Hargreaves, I., Lewis, J., & Speers, T. (2003). *Toward a better map: science, the public and the media*. Swindon: ESRC - Economic & Social Research Council.
- Heap, H. S., Hollis, M., Lyons, B., Sugden, R., & Weale, A. (1992). *The theory of choice: a critical guide*. Oxford, Cambridge: Blackwell Publishing.
- Heclo, H. (1974). *Modern social policies in Britain and Sweden: from relief to income maintenance*. New Haven and London: Yale University Press.

- Hecló, H. (1978). Issue networks and the executive establishment. In A. King (Ed.), *The new American political system*. Washington D.C: American Institute for Public Policy Research.
- Hogwood, B. W., & Gunn, L. A. (1984). *Policy analysis for the real world*. London: Oxford University Press.
- Howell, J., & Pearce, J. (2001). *Civil society and development: a critical exploration*. London: Lynne Rienner Publishers Inc.
- Howlett, M., & Ramesh, M. (2003). *Studying public policy: policy cycles and subsystems* (Second ed.). Ontario: Oxford University Press.
- Huckfeldt, R., Johnson, P. E., & Sprague, J. (Eds.). (2004). *The survival of diverse opinions within communication networks*. Cambridge: Cambridge University Press.
- Hulme, D., & Edwards, M. (Eds.). (1997). *NGOs, states and donors: too close for comfort?* London: The Save the Children Fund.
- Hume, D. (1739-40/ 1994). Reason and Passion. In P. Singer (Ed.), *Ethics. Oxford Readers* (pp. 118-123). Oxford: Oxford University Press.
- Hunt, P. (2003). *Interim report of the Special Rapporteur of the Commission on Human Rights on the right of everyone to enjoy the highest attainable standard of physical and mental health*. In accordance with Economic and Social Council resolution 2003/45, UN Doc A/58/427.
- Hutchings, A., Raine, R., Sanderson, C., & Black, N. (2006). A comparison of formal consensus methods used for developing clinical guidelines. *J Health Serv Res Policy*, 11(4), 218-224.
- Innes, J. (1998). Information in communicative planning. *Journal of the American Planning Association*, 64(1).
- Innes, J., & Booher, D. (1999). Consensus building and complex adaptive systems: a framework for evaluating collaborative planning. *Journal of the American Planning Association*, 65(4), 412-423.
- Innvaer, S., Vist, G., Trommald, M., & Oxman, A. (2002). Health policy-makers' perceptions of their use of evidence: a systematic review. *J Health Serv Res Policy*, 7(4), 239-244.
- Irwin, A. (2001). Constructing the scientific citizen: science and democracy in the biosciences *Public Understanding of Science*, 10, 1-18.
- Irwin, A., & Wynne, B. (Eds.). (1996). *Misunderstanding science? The public reconstruction of science and technology*. Cambridge: Cambridge University Press.
- Isaacs, W. (1999). *Dialogue and the art of thinking together*. New York: Currency, Doubleday.
- Janis, I. L. (1972). *Groupthink: Psychological studies of policy decisions and fiascos*. Boston, Mass.: Houghton-Mifflin.
- Jenkins, R., & Goetz, A.-M. (2002). *Voice, accountability, and human development: the emergence of a new agenda*. New York: UNDP.
- Jenkins, W. I. (1978). *Policy analysis: a political and organizational perspective*. London: Martin Robinson.
- Jasanoff, S. (1996). Beyond epistemology: relativism and engagement in the politics of science. *Social Studies of Science*, 26, 393-418.
- Jasanoff, S. (2000). The "Science Wars" and American Politics. In M. Dierkes & C. von Grote. *Between understanding and trust: the public,*

- science and technology* (pp. 39-60), Reading: Harwood Academic Publisher.
- Jefferson, T. (1816/ 1947). The elementary republics of the wards: letter to Joseph C. Cabell. In L. D. Abbott (Ed.), *Master works of government* (pp. 570-571). New York: Doubleday.
- Joas, H. (1993). *Pragmatism and social theory*. Chicago and London: University of Chicago Press.
- Joas, H. (1996). *The creativity of action*. Chicago: The University of Chicago Press; originally published by Suhrkamp Verlag, 1992.
- John, P. (1998). *Analysing public policy*. London and New York: Pinter.
- Johnson, A. H. (Ed.). (1949). *The wit and wisdom of John Dewey*. Boston: Beacon Press.
- Kahane, A. (2002). Civic scenarios as a tool for societal change. *Strategy & Leadership*, 30(1), 32-37.
- Kaiser Permanente. (2007). History of Kaiser Permanente. Retrieved 03/2007, from <http://newsmedia.kaiserpermanente.org/kpweb/historykp/entrypage.do>
- Kass, N. E. (2001). An ethics framework for public health. *Public Health Matters*, 91(11), 1776-1782.
- Kawachi, I. (2001). Social capital for health and human development. *Development*, 44(1), 31-35.
- Khan, U. (Ed.). (1999). *Participation beyond the ballot box: European case studies of state-citizen political dialogue*. London: UCL Press.
- Khilnani, S. (2001). The development of civil society. In S. Kaviraj & S. Khilnani (Eds.), *Civil society: history and possibilities*. Cambridge: Cambridge University Press.
- Kingdon, J. W. (1995). *Agendas, alternatives, and public policies* (2 ed.): Harper Collins College Publishers.
- Kirby, D. (2003). Science advisors, representation, and Hollywood films. *Molecular Interventions*, 3(2), 54-60.
- Koehler, D. J., & Harvey, N. (Eds.). (2004). *Blackwell handbook of judgement and decision making*. Oxford: Blackwell Publishing.
- Kogan, M., & Henkel, M. (1983). *Government and research: the Rothschild experiment in a government department*. London: Heinemann.
- Kogan, M., Henkel, M., & Hanney, S. (2006). *Government and research: thirty years of evolution* (Second ed.). Dordrecht: Springer.
- Kuruvilla, S. (2005). Civil society participation in health research and policy: a review of models, mechanisms and measures. *Overseas Development Institute (ODI) Working Paper 251*. Retrieved 03/2007, from http://www.odi.org.uk/RAPID/Publications/RAPID_WP_251.html
- Kuruvilla, S., & Joseph, A. (1999). Identifying disability: comparing house-to-house survey and rapid rural appraisal. *Health Policy and Planning*, 14(2), 182-190.

- Kuruvilla, S., Dzenowagis, J., Pleasant, A., Dwivedi, R., Murthy, N., Samuel, R., et al. (2004). Digital bridges need concrete foundations: lessons from the Health InterNetwork India. *BMJ*, 328, 1193-1196.
- Kuruvilla, S., & Mays, N. (2005). Reorienting health-research communication. *Lancet*, 366, 1416-1418.
- Kuruvilla, S., Mays, N., Pleasant, A., & Walt, G. (2006). Describing the impacts of health research: a Research Impact Framework. *BMC Health Services Research* 6:134. Retrieved 03/2007, from <http://www.biomedcentral.com/1472-6963/6/134>
- Kuruvilla, S., Mays, N., & Walt, G. (2007). Describing the impacts of health services and policy research. *J Health Serv Res Policy*, 12(Suppl 1), 23-31.
- Lasswell, H. D. (1948). The structure and function of communication in society. In L. Bryson (Ed.), *The Communication of Ideas* (pp. 37-51). New York: Harper and Row.
- Lasswell, H. D. (1951). The policy orientation. In D. Lerner & H. D. Lasswell (Eds.), *The policy sciences*. Palo Alto: Stanford University Press.
- Lasswell, H. D. (1971). *A pre-view of policy sciences*. New York: Elsevier.
- Lavis, J. N., Robertson, D., Woodside, J., McLeod, C. B., Abelson, J., & The Knowledge Transfer Study Group. (2003). How can research organizations more effectively transfer research knowledge to decision-makers? *The Milbank Quarterly*, 81(2), 221-248.
- Le Grand, J. (2003). *Motivation, agency and public policy: of knights and knaves, pawns and queens*. Oxford: Oxford University Press.
- Leach, M., Scoones, I., & Thompson, L. (2002). Citizenship, science and risk: conceptualising relationships across issues and settings. *IDS Bulletin*, 33(2), 40-48.
- Leichter, H. M., & Tyrens, J. (2002). *Achieving better health outcomes: the Oregon Benchmark experience*. New York: Milbank Memorial Fund.
- Leshner, A. L. (2003). Public engagement with science. *Science*, 299, 977.
- Lindblom, C. E. (1959). The science of "muddling through". *Public Admin Rev*, 19, 79-88.
- Lindblom, C. E. (1979). Still muddling, not yet through. *Public Admin Rev*, 39, 517-526.
- Lippman, W. (1922/ 1991). *Public opinion*. New Brunswick: Transaction Publishers. Originally published by The Macmillan Company.
- Lippman, W. (1927/ 1993). *The Phantom Public*. New Brunswick: Transaction Publishers. Originally published by The Macmillan Company.
- Lipsky, M. (1976). Towards a theory of street-level bureaucracy. In W. Hawley & M. Lipsky (Eds.), *Theoretical perspectives on urban policy*. Englewood Cliffs: Prentice Hall.
- Litva, A., Coast, J., Donovan, J., Eyles, J., Sheperd, M., Tacchi, J., et al. (2002). 'The public is too subjective': Public involvement at different levels of health-care decision making. *Social Science and Medicine*, 54, 1825-1837.

- Lomas, J. (1990). Finding audiences, changing beliefs: the structure of research use in Canadian health policy. *J Health Polit Policy Law*, 15, 525-542.
- Lomas, J. (2000). Using 'Linkage and Exchange' to move research into policy at a Canadian foundation. *Health Aff*, 19, 236-240.
- Longino, H. E. (2002). *The fate of knowledge*. Princeton and Oxford: Princeton University Press.
- Lukes, S. (1974). *Power: a radical view*. London: Macmillan.
- MacIntyre, S., Chalmers, I., Horton, R., & Smith, R. (2001). Using evidence to inform health policy: Case study. *BMJ*, 322, 222-225.
- Mahowald, M. B. (1997). What classical American philosophers missed: Jane Addams, critical pragmatism, and cultural feminism *The Journal of Value Inquiry*, 31, 39-54.
- Majone, G. (1989). *Evidence, argument, and persuasion in the policy process*. New Haven: Yale University Press.
- Manandhar, D. S., Osrin, D., Shrestha, B. P., Mesko, N., Morrison, J., Tumbahangphe, K. M., et al. (2004). Effect of a participatory intervention with women's groups on birth outcomes in Nepal: cluster-randomised controlled trial. *Lancet*, 364, 970-979.
- Manicas, P. T. (2002). John Dewey and American psychology. *Journal for the Theory of Social Behaviour*, 32(3), 268-294.
- Maturana, H. R., & Varela, F. (1980). *Autopoiesis and cognition*. Dordrecht: D. Reidel.
- Mays, J. B. (1968). *The poetry of sociology: an inaugural lecture*. Liverpool: Liverpool University Press.
- Mays, N. (2000). Legitimate decision making: the Achilles' heel of solidaristic health care systems. *J Health Serv Res Policy*, 5(2), 122-126.
- Mays, N., & Pope, C. (2000). Assessing quality in qualitative research. *BMJ*, 320, 50-52.
- Mays, N., Pope, C., & Popay, J. (2005). Systematically reviewing qualitative and quantitative evidence to inform management and policy-making in the health field. *J Health Serv Res Policy*, 10(Suppl 1), 6-20.
- Mays, N., Wyke, S., & Evans, D. (2001). The evaluation of complex health policy: lessons from the UK Total Purchasing Experiment. *Evaluation*, 7(4), 405-426.
- McCombs, M., E, & Shaw, D. L. (1993). The evolution of agenda-setting research: twenty-five years in the marketplace of ideas. *The Journal of Communication*, 43(2), 58-67.
- McIver, S., & Ham, C. (2000). Five cases, four actors and a moral: lessons from studies of contested treatment decisions. *Health Expect*, 3(2), 114-124.
- Mead, G. H. (1913/ 1982). The social self. In H. S. Thayer (Ed.), *Pragmatism: the classic writings*. Indiana: Hackett Publishing Company, Inc.
- Merton, R. (1973). *The sociology of science*. Chicago: Chicago University Press.

- Morrison, T., & Lane, M. B. (2004). *The rise and rise of environmental NGOs: unforeseen risks to democratic environmental governance in Australia*. Paper presented at the Australasian Political Studies Association Conference, Adelaide.
- Mosse, D. (2001). People's knowledge', participation and patronage: operations and representations in rural development. In B. Cooke & U. Kothari (Eds.), *Participation: the new tyranny?* (pp. 16-35). London: Zed Books.
- Mousavi, S., & Garrison, J. (2003). Toward a transactional theory of decision making: creative rationality as functional coordination in context. *Journal of Economic Methodology*, 10(2), 131-156.
- Nakicenovic, N., Alcamo, J., Davis, G., de Vries, B., Fenhann, J., Gaffin, S., et al. (2000). Special Report on Emissions Scenarios (SRES). Working Group III of the Intergovernmental Panel on Climate Change (IPCC). Retrieved 04/2007, from <http://www.grida.no/climate/ipcc/emission/index.htm>
- Narayan, U. (1997). *Dislocating cultures, identities, tradition, and third world feminism*. New York: Routledge.
- Nelkin, D. (1975). The political impact of technical expertise. *Social Studies of Science*, 5, 37-54.
- Nussbaum, M., & Sen, A. (Eds.). (1993). *The quality of life*. New York: Oxford University Press.
- Nutbeam, D. (1998). Evaluating health promotion - progress, problems, and solutions. *Health Promotion International*, 13(1), 27-44.
- OHCHR. (1996 - 2007). *International law*. The Office of the United Nations High Commissioner for Human Rights. Retrieved 04/2007, from <http://www.ohchr.org/english/law/index.htm>
- OHCHR. (2004). *Human rights and poverty reduction: a conceptual framework*. The Office of the High Commissioner for Human Rights. Retrieved 05/2007, from http://www.ohchr.org/english/about/publications/docs/Broch_Ang.pdf
- Oliver, A., & Exworthy, M. (Eds.). (2003). *Health inequalities: evidence, policy and implementation*. London: The Nuffield Trust.
- Oliver, S., Clarke-Jones, L., Rees, R., Milne, R., Buchanan, P., Gabbay, J., et al. (2004). Involving consumers in research and development agenda setting for the NHS: Developing an evidence-based approach. *Health Technology Assessment*, 8(15), 1-148.
- Oliver, T. R. (2004). Policy entrepreneurship in the social transformation of American medicine: the rise of managed care and managed competition. *Journal of Health Politics, Policy and Law*, 29(4-5), 701-733.
- Oommen, J. (2003). *Health for all and Alma Ata: relic or reality*. Paper presented at the World Health Assembly: NGO Forum. Geneva: World Health Organization.
- Oommen, J., Henry, V. K., & Pidikaka, M. (1999). Prevention and control of malaria through community effort: experiences of a tribal

- community in rural Orissa, India. *Regional Health Forum, WHO South-East Asia Region*, 3(1), 9-12.
- Ostrom, E. (1986). An agenda for the study of institution. *Public Choice*, 48, 3-25.
- Ostrom, E. (1999). Institutional rational choice: an assessment of the institutional analysis and development framework. In P. A. Sabatier (Ed.), *Theories of the Policy Process* (pp. 35-71). Boulder, Colorado: Westview Press.
- Pang, T., Sadana, R., Hanney, S., Bhutta, Z., Hyder, A., & Simon, J. (2003). Knowledge for better health - a conceptual framework and foundation for health research systems. *Bull World Health Organ*, 81, 815-820.
- Parsons, W. (1995). *Public policy: an introduction to the theory and practice of policy analysis*. Cheltenham: Edward Elgar Publishing Limited.
- Patton, M. Q. (2001). *Qualitative research & evaluation methods*. Thousand Oaks: Sage Publications.
- Pawson, R., Greenhalgh, T., Harvey, G., & Walshe, K. (2005). Realist review - a new method of systematic review designed for complex policy interventions. *J Health Serv Res Policy*, 10(Suppl 1), 21-34.
- Pawson, R., & Tilley, N. (1997). *Realistic evaluation*. London: Sage Publications Ltd.
- Peckham, M. (1999). Developing the National Health Service: a model for public services. *Lancet*, 354, 1539-1545.
- Peirce, C. S. (1931-1935). *Collected Papers Vol. I-VI*. In C. Hartshorne & P. Weiss (Eds.). Cambridge: Harvard University Press.
- Pinker, R. (2006). From gift relationships to quasi-markets: an odyssey along the policy paths of altruism and egoism. *Social Policy and Administration*, 40(1), 10-25.
- Piot, P. (2000). Global AIDS epidemic: time to turn the tide. *Science*, 288, 2176-2178.
- Platt, J. (1987). Research dissemination: a case study. *The Quarterly Journal of Social Affairs*, 3(3), 181-198.
- Pleasant, A., Kuruvilla, S., Zarcadoolas, C., Shanahan, J., & Lewenstein, B. (2003). *A framework for assessing public engagement with health research. Technical Report to WHO*. Geneva: World Health Organization.
- Pollard, A., & Court, J. (2005). *How civil society organisations use evidence to influence policy processes: a literature review*. London: Overseas Development Institute (ODI).
- Polyani, M. (1962). The Republic of Science: its political and economic theory. *Minerva*, 1(54), 73.
- Pressman, J. L., & Wildavsky, A. (1984). *Implementation: how great expectations in Washington are dashed in Oakland; or why it's amazing that federal programs work at all, this being a saga of the Economic Development Administration as told to two sympathetic observers who seek to build morals on a foundation of ruined hopes* (Third, expanded ed.). Berkeley: University of California Press.

- Putnam, H., & Conant, J. (1995). *Words and life*. Cambridge: Harvard University Press.
- Rae, D. (1993). Book review: 'The quality of life' Eds. Martha Nussbaum and Amartya Sen. *The American Political Science Review*, 87(4), 1006-1008.
- Ramaley, J. (2000). Renewing the civic mission of the American university. The John Dewey Lecture. Retrieved 03/2007, from www.umich.edu/~mserve/faculty/resources/Dewey-Ramaley.doc
- Rawls, J. (1971/ 1999). *A theory of justice*. Oxford: Oxford University Press.
- Rawls, J. (1985). Justice as fairness: political not metaphysical. *Philosophy and Public Affairs*, 14(3), 223-251.
- Reich, M. R. (1996). Applied political analysis for health policy reform. *Current issues in public health*, 2, 186-191.
- Richardson, H. S. (2002). *Democratic autonomy: public reasoning about the ends of policy*. New York: Oxford University Press.
- Robbins, A. (2006). Film review: The Constant Gardener. *Journal of Public Health Policy*, 27(2), 211-212.
- Rorty, R. (2003, March 9, 2003). The invisible philosopher. Book review, 'The education of John Dewey: a biography' by Jay Martin. 2002. Columbia University Press. *The New York Times*.
- Rosenhead, J., & Mingers, J. (Eds.). (2001). *Rational analysis for a problematic world revisited: problem structuring methods for complexity, uncertainty, and conflict* (2 ed.). Chichester: John Wiley & Sons.
- Roth, A. L., Dunsby, J., & Bero, L. A. (2003). Framing processes in public commentary on US federal tobacco control regulation. *Social Studies of Science*, 33(1), 7-44.
- Rothschild Report. (1971). *The organisation and management of government R&D*. London: HMSO.
- Ruger, J. P. (2006). Health, capability, and justice: toward a new paradigm of health ethics, policy and law. *Cornell Journal of Law and Public Policy*, 15(2), 101-187.
- Ruger, J. P. (2007). Rethinking equal access: agency, quality and norms. *Global public health*, 2(1), 78-96.
- Russell, B. (1954). *Human society in ethics and politics*. London: Allen & Unwin.
- Ryan, A. (1995). *John Dewey and the high tide of American liberalism*. New York, London: W.W. Norton & Company.
- Ryan, A. (2000). What did John Dewey want? In J. Haldane (Ed.), *Philosophy and public affairs*. Cambridge: Cambridge University Press.
- Sabatier, P. A. (1988). An advocacy coalition framework of policy change and the role of policy-oriented learning therein. *Policy Sciences*, 21(2-3), 129-168.
- Sabatier, P. A. (1992). Political science and public policy: an assessment. In W. N. Dunn & R. M. Kelly (Eds.), *Advances in policy studies since 1950* (pp. 27-58). New Brunswick: Transaction Publishers.

- Sabatier, P. A. (Ed.). (1999). *Theories of the policy process*. Boulder: Westview Press.
- Sabatier, P. A., & Jenkins-Smith, H. (Eds.). (1993). *Policy change and learning*. Boulder: Westview Press.
- Sabin, J. E., & Daniels, N. (2001). Strengthening the consumer voice in managed care: I. Can the private sector meet the public-sector standard? *Psychiatric Services*, 52(4), 461-464.
- Salwen, M. B., & Stacks, D. W. (Eds.). (1996). *An integrated approach to communication theory and research*. Mahwah: Lawrence Erlbaum Associates.
- Sandford, A. (2006, 27 September 2006). French film aims to unite nation. *BBC News online*. Retrieved 03/2007, from <http://news.bbc.co.uk/1/hi/world/europe/5386356.stm>
- Schilpp, P. A., & Hahn, L. E. (Eds.). (1939/ 1989). *The philosophy of John Dewey* (Third ed.). La Salle: Open Court.
- Schumpeter, J. (1942). *Capitalism, socialism and democracy* (Second ed.). London: George Allen & Unwin, Ltd.
- Scruton, R. (1982). *A dictionary of political thought*. London: Pan Books.
- Seigfried, C. H. (1996). *Pragmatism and feminism: reweaving the social fabric*. Chicago: Chicago University Press.
- Sen, A. (1993). Capability and well-being. In M. Nussbaum & A. Sen (Eds.), *The quality of life* (pp. 30-53). New York: Oxford University Press.
- Sen, A. (2006). What clash of civilisations? Why religious identity isn't destiny. Retrieved 03/2007, from <http://www.slate.com/id/2138731/>
- Senge, P., Kleiner, A., Roberts, C., Ross, R., Roth, G., & Smith, B. (1999). Timeline of learning organisation concepts. *Dance of Change: the challenges of sustaining momentum in learning organisations*. Retrieved 03/2007, from <http://www.fieldbook.com/DoC/DOCTimeline.html>
- Shakespeare, W. (1924). The complete works of William Shakespeare. In W. J. Craig (Ed.), *The Oxford Shakespeare*. London: Humphrey Milford, Oxford University Press.
- Shields, P. M. (1996). Pragmatism: exploring administration's policy imprint. *Administration & Society*, 28(3), 390-411.
- Shields, P. M. (2003). The community of inquiry: classical pragmatism and public administration. *Administration & Society*, 35(5), 510-538.
- Shook, J. R. (2003). Entrepreneurship and values in a democratic and pragmatic economics: commentary on 'A transactional view of entrepreneurship'. *Journal of Economic Methodology*, 10(2), 181-190.
- Shook, J. R. (2004). Deliberative democracy and moral pluralism: Dewey vs. Rawls and Habermas. In J. Ryder & K. Wilkoszewska (Eds.), *Deconstruction and reconstruction. The Central European Pragmatist Forum* (Vol. 2). Amsterdam, New York: Rodopi.
- Simon, H. (1996). *The sciences of the artificial*. Cambridge: MIT Press.
- Simon, H. A. (1957). *Administrative behavior* (2 ed.). New York: Free Press.

- Simon, H. A. (1983). *Reason in human affairs*. Stanford: Stanford University Press.
- Singer, P. (Ed.). (1994). *Ethics. Oxford Readers*. Oxford: Oxford University Press.
- Singer, P. (Ed.). (1993). *A companion to ethics*. Malden, Oxford, Carlton: Blackwell Publishing.
- Singh, A., & Kuruvilla, S. (Working paper). *Assessing participation and accountability in public affairs: a framework of human rights standards in international law*. London: London School of Economics and London School of Hygiene and Tropical Medicine.
- Smith, J., Dixon, J., Mays, N., McLeod, H., Goodwin, N., & McClelland, S. (2005). Practice based commissioning: applying the research evidence. *BMJ*, 331(7529), 1397-1399.
- Smith, R. W., Brian (Ed.). (1989). *Expert evidence: interpreting science in the law*. London: Routledge.
- Snider, K. F. (2000a). Expertism or experimenting? *Administration & Society*, 32(3), 329-354.
- Snider, K. F. (2000b). Response to Stever and Garrison. *Administration & Society*, 32, 487-489.
- Steele, M. (2005). Hiding from history: Habermas's elision of public imagination *Constellations*, 12(3), 409-436.
- Steiner, H. J., & Alston, P. (2000). *International human rights in context: law, politics and morals* (Second ed.). Oxford: Oxford University Press.
- Thayer, H. S. (Ed.). (1982). *Pragmatism: the classic writings*. Indianapolis: Hackett Publishing Company, Inc.
- The Economist. (2006). Health-care performance in Britain. *The Economist*, October 12th 2006.
- The Royal College of Surgeons, The British Association of Otorhinolaryngologists – Head and Neck Surgeons Comparative Audit Group, & The Clinical Effectiveness Unit – The Royal College of Surgeons of England. (2005). *National prospective tonsillectomy audit: final report of an audit carried out in England and Northern Ireland between July 2003 and September 2004*. London: The Royal College of Surgeons.
- The Royal College of Surgeons of England, & Clinical Effectiveness Unit (Health Services Research Unit of the London School of Hygiene and Tropical Medicine). (2006). The national comparative audit of sino-nasal surgery. Retrieved 03/2006, from http://www.rcseng.ac.uk/surgical_research_units/ceu/projects/proj_sinonasal.html
- The Wellcome Trust. (2006). The Wellcome Trust. Wellcome Collection. 20/07/06, from <http://www.wellcome.ac.uk/node6500.html>
- Titmuss, R. (1968). *Commitment to welfare*. London: Allen & Unwin.
- Tollefsen, C. (2004). What would John Dewey do? The promises and perils of pragmatic bioethics. *The Journal of Medicine and Philosophy*, 25(1), 77-106.

- Tomasevski, K. (2001). Indicators. In A. Eide, C. Krause & A. Rossas (Eds.), *Economic, social, and cultural rights: a textbook* (Second revised ed.). London: Martinus Nijhoff.
- U.S. Department of Health and Human Services. (2000). *Healthy People 2010: understanding and improving health*. Washington D.C.: Government Printing Office.
- UNDP. (2002). *Deepening democracy in a fragmented world*. United Nations Development Programme. Human Development Report. New York: Oxford University Press.
- UNICEF. (2005). *Regional Office for Eastern and Southern Africa (ESARO). Regional analysis report*. New York: UNICEF
- University of Warwick, London School of Hygiene & Tropical Medicine, & Office of the Deputy Prime Minister. (2003). *Statistical evidence to support the Housing, Health and Safety Rating System*. London: Office of the Deputy Prime Minister (ODPM).
- Uvin, P. (2004). *Human rights and development*. Bloomfield: Kumarian Press
- Verzilli, C. J., Stallard, N., & Whittaker, J. C. (2006). Bayesian graphical models for genomewide association studies. *Am J Hum Genet*, 79(1), 100-112.
- Vickers, G. (1965). *The art of judgement: a study of policy-making*. London: Chapman & Hall.
- Walt, G., & Gilson, L. (1994). Reforming the health sector in developing countries: the central role of policy analysis. *Health Policy and Planning*, 9(4), 353-370.
- Wanless, D. (2002). Securing our future: taking a long-term view. Retrieved 03/2007, from http://www.hm-treasury.gov.uk/consultations_and_legislation/wanless/consult_wanless_final.cfm
- Wanless, D. (2004). Securing good health for the whole population. Retrieved 03/2007, from http://www.hm-treasury.gov.uk/consultations_and_legislation/wanless/consult_wanless04_final.cfm
- Webster, J., Lines, J., Bruce, J., Armstrong Scellenberg, J. R., & Hanson, K. (2005). Which delivery systems reach the poor? A review of equity of coverage of ever-treated nets, never-treated nets, and immunisation to reduce child mortality in Africa. *Lancet Infect Dis*, 5(11), 709-717.
- Weiss, C. (1979). The many meanings of research utilization. *Public Administration Review*, 39, 426-431.
- Weiss, C. (1980). Knowledge creep and decision accretion. *Knowledge: Creation, Diffusion, Utilization*, 1, 381-404.
- Werner, D. (2002). Communication as if people mattered: adapting health promotion and social action to the global imbalances of the 21st century. *People's Health Assembly, Background paper 5*. Retrieved 03/2007, from phmovement.org/pdf/background/phm-pha-background5.pdf
- Wertheim, M. (1996). *Pythagoras' trousers: God, physics, and the gender wars*. New York: W.W. Norton & Co.

- Westbrook, R. (1991). *John Dewey and American Democracy*. Ithaca: Cornell University Press.
- Wildavsky, A. (1979). *Speaking truth to power: the art and craft of policy analysis*. Boston: Little, Brown and Co.
- Wilson, B., Thornton, J. G., Hewison, J., Lilford, R. J., Watt, I., Braunholtz, D., et al. (2002). The Leeds University Maternity Audit project. *International Journal for Quality in Health Care*, 14, 175-181.
- Winston, R. (2005). Should we trust the scientists? *Start the Week, an interview with Andrew Marr*. Retrieved 02/2007, from http://www.bbc.co.uk/radio4/factual/starttheweek_20050620.shtml
- Woolf, S. J. (1932/ 1999). John Dewey surveys the nation's ills. An interview in the New York Times Magazine. In J. A. Boydston & L. A. Hickman (Eds.), *The Collected Works of John Dewey, 1882-1953. The electronic edition*. Carbondale and Edwardsville: Southern Illinois University Press; Charlottesville: Intellex 'Past Masters' series.
- Worcester, R. (2003). Whom do we trust? Neither politicians nor journalists! Retrieved 21/07/06, from <http://www.ipsos-mori.com/publications/rmw/whomdowetrust.shtml>
- World Health Organisation. (2004). Chapter 4. Linking research to action. In *World Report on Knowledge for Better Health* (pp. 97-129). Geneva: World Health Organization.
- World Health Organisation, London School of Hygiene and Tropical Medicine, & Daphne Programme of the European Commission. (2003). *WHO Ethical and Safety Guidelines for Interviewing Trafficked Women*. Geneva: WHO.
- World Health Organization. (1946). Constitution of the World Health Organization. Retrieved 7/02/2007, from http://www.who.int/governance/eb/who_constitution_en.pdf
- World Resources. (2004). *World Resources 2002-2004*. United Nations Environment Programme (UNEP), United Nations Development Programme (UNDP), World Bank, and the World Resources Institute (WRI).
- Wright, J., Parry, J. M., & Scully, E. (2005). Institutionalizing policy-level health impact assessment in Europe: is coupling health impact assessment with strategic environmental assessment the next step forward? *Bull World Health Organ*, 83(6), 472-477.
- Wynne, B. (2003). Seasick on the Third Wave? Subverting the hegemony of propositionalism. *Social Studies of Science*, 33(3), 401-417.
- Yin, R. (1994). *Case study research: design and methods* (2 ed.). Thousand Oaks, CA: Sage.
- Young, I. (2000). *Inclusion and democracy*. Oxford: Oxford University Press.
- Young, I. (2001). Activist challenges to deliberative democracy. *Political Theory*, 29(5), 670-690.
- Zarcadoolas, C., Pleasant, A., & Greer, D. (2005). Understanding health literacy: an expanded model. *Health Promotion International*, 20(2), 195 - 203.

