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When we think of policy as mobile, what is it we think is moving? Asking after the mobility of policy is important not least for the ontological questions it raises: what is policy such that it moves? Ordinarily, we might think of policy as existing in time and space while, given certain conditions, some policies move from one time and/or space to another. This paper, by contrast, begins by describing policy as resulting from movement, setting out a model or heuristic which takes its mobility as prior to its existence. For policy is made in communicative interaction, both oral (in meetings) and textual (in documents). We might think of it in wave form, which helps to explain both its mobility and its mutability. The paper illustrates this conception in a study of WHO activity in respect of mental health in Europe, exploring aspects of translation - understood as the generation of messages in interaction - and of iteration, as those messages are reformulated and repeated in different contexts. The policy concept reverberates, and it is in this way that collective sense is consolidated and reproduced.

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When we think of policy as mobile, what is it we think is moving? Asking after the mobility of policy is important not least for the ontological questions it raises: what is policy such that it moves? Ordinarily, we might think of policy as existing in time and space while, given certain conditions, some policies move from one time and/or space to another. This paper, by contrast, begins by describing policy as resulting from movement, setting out a model or heuristic which takes its mobility as prior to its existence. For policy is made in communicative interaction, both oral (in meetings) and textual (in documents). We might think of it in wave form, which helps to explain both its mobility and its mutability. The paper illustrates this conception in a study of WHO activity in respect of mental health in Europe, exploring aspects of translation - understood as the generation of messages in interaction - and of iteration, as those messages are reformulated and repeated in different contexts. The policy concept reverberates, and it is in this way that collective sense is consolidated and reproduced.

Almost two generations ago, in his seminal study of policy making across countries, Hugh Heclo wrote: 'In both its self-instruction and self-delusions, the cobweb of socioeconomic conditions, policy middlemen, and political institutions reverberates to the consequences of previous policy... in a vast, unpremeditated design of social learning' (Heclo, 1974, p 316). Though we might tell it differently now, in different words (evidence, discourse, framing, networks, mediators, consultants and path dependency, perhaps) his story is still, in outline, the one with which we are concerned. For there is movement here, too, and it is of a particular kind: his cobweb 'reverberates'. His image is intriguing: reverberation is a sound which endures even after its source is interrupted or removed, as waves bounce back and forth and across each other in a given space, and Heclo meant it to express something about the persistence of policy over time. In doing so, he privileges sound over source, emphasizing - if perhaps inadvertently - the movement by which it is sustained rather than any fixed point of origin or orientation. The purpose of this paper is to ask what it might take to think of policy, like this, in wave form.

Let us begin by thinking of policy as the shared understanding of a problem, of what is to be done in response to it, how, by whom and to what effect - something like a collective script. It may be formally expressed in writing or implicitly understood; what matters is this sense of shared sense. It is
important to recognize that this may not entail agreement: knowing what policy is means knowing what everybody else knows it to be. So policy exists, but it has no being, no essence; it exists only in the extent to which it is called up in the words and actions of those concerned with it. For what we think of as policy to move, then, shared understandings formed in one place must be reproduced in another.

But think, first, of what is entailed in policy making, of how policy is produced before it is reproduced. Shared understandings develop (are developed) in two ways, in meetings and documents: we might think of these as the essential components of the policy process, its archetypes. The meeting, whether in a community centre or at the cabinet table, is where policy conceptions are built, tested and rebuilt in communicative interaction. Meetings invariably generate documents; in being written down, committed to paper, a policy concept is both fixed and made mobile. The document makes the matter of the meeting available to others who may be more or less distant in time and space (Freeman, 2008; Freeman and Maybin, 2011). Invariably, too, what is generated collectively is interpreted collectively, in further meetings at which documents are discussed. Meetings make for documents which make for more meetings and so on. We illustrate this conception of policy in a study of WHO's 2005 Ministerial Conference on Mental Health (a meeting) and the Mental Health Declaration and Action Plan for Europe (a document) which it promulgated (Freeman, Smith-Merry and Sturdy, 2009). We show how each was predicated on other meetings and other documents, including conferences, workshops, research reviews and international conventions.

**a Mental Health Declaration for Europe**

By the end of the 1990s, the place of mental illness in the 'Global Burden of Disease' had been newly recognized (Murray and Lopez, 1996). WHO's World Health Report of 2001, Mental Health: New Understanding, New Hope (WHO, 2001) began to set a global agenda in mental health. In Europe, WHO Regional Director Marc Danzon identified 2005 as a prospective date for an interministerial conference on mental health, negotiating with the Finnish government to sponsor and host it. The conference would invite ministers to sign a Mental Health Declaration for Europe (WHO EUR/04/5047810/6).

WHO has long had an agenda in Europe in respect of mental health, which is to change the standard pattern of the treatment and care of mental illness from one based on hospital provision to one of community psychiatry. In promoting it, the organization plays to two principal constituencies: to its member states, and specifically to their health ministers, and to a diverse epistemic community largely detached from states and based in delegated health agencies, universities and NGOs. Across countries, relevant actors in mental health policy include public officials at national, regional and district levels, psychiatrists and other health care professionals, university researchers and representatives of users and carers. In some countries, however, notably in eastern Europe, the politicization of mental health –
meaning that mental health and illness have become objects of policy and politics, issues of public concern and subject to state regulation – has barely begun; in others, this process is much more advanced. Across countries, too, the tensions of mental health politics hold not simply between professions and states but within psychiatry, between proponents of clinical and community provision, and within states, between welfare and judicial functions, between national, regional and local competences and between governmental and non-governmental actors. These conflicts are mediated in turn by the presence, in many countries, of professional psychiatrists in key public offices.

Danzon’s proposal for an interministerial conference was approved by his Regional Committee in September 2003 (EUR/RC53/R4). It would be co-organized by the European Commission, under its public health mandate. A conference steering committee had already been convened and was to meet every 2-3 months. Finnish project officers formed its nucleus, and recruited representatives of those who had organized successive EU Presidency conferences in Greece and Belgium. Members from Germany, Slovakia and the UK were added, being countries which agreed to sponsor additional preliminary meetings, as well as the Council of Europe and Mental Health Europe, a federation of national associations of mental health which now also included a range of other NGOs among its members.

The Ministerial Conference on Mental Health in Europe took place in Helsinki from 12-15 January 2005, and was attended by over 450 delegates and observers. Approximately half of the 52 member states were represented by their respective health ministers, and others by a ministerial delegate. Most countries also chose to include in their delegations psychiatrists and departmental heads with responsibility for mental health services. The participant list also included representatives from the Council of Europe, the European Commission and ‘representatives of nongovernmental organizations in official relations with WHO’. Individual invitations to attend were extended to representatives of local and international NGOs, service users and carer groups.

After Helsinki, the Declaration was disseminated and discussed at other meetings, such as that of the Leaders of European Psychiatry which took place a few months later. Follow-up conferences were held on specific issues, led by WHO Collaborating Centres such as those in Lille and Edinburgh. Bilateral initiatives were undertaken with countries in eastern Europe. WHO also invested in a survey of activity across member states in the areas outlined in the Declaration and Action Plan, meaning to establish a ‘baseline’ against which continued progress might be measured (WHO Europe, 2008). The European Commission, meanwhile, issued a Green Paper on mental health in October 2005 (European Commission, 2005), which led to further rounds of consultation and new projects.

_translation_
The work of policy (Colebatch, 2006) described here is essentially that of meeting, talking and writing. Policy appears as a continuing process of articulation, in its dual sense of both expressing or formulating an idea and connecting it with others. Policy makers make connections, with other actors and other ideas, as a message is passed on, stated and restated in one context and then another.

Its reproduction, however, is highly contingent and always imperfect. We might think of it as a kind of translation: the knowledge brought to meetings is transformed as it is expressed in words; it is set down differently again in writing, as words on paper, and reinvented in the actions of professionals, practitioners and public officials. At each instance, the meaning or substance of policy is underdetermined (Barnes, Bloor and Henry, 1996): the sense of the meeting must be called up and applied to the writing of the document, the document interpreted in action. Neither meeting nor document nor previous action prescribe or fully determine the understanding or action which follow from them. The message is made up - each time for 'another first time' (Garfinkel, 1984, p 9) - as it is passed on.

The work of the conference Steering Committee, for example, was to define the subject matter of the conference as well as who was to attend. It commissioned and reviewed working papers, convened a series of developmental 'pre-conferences' and engaged other projects, meetings and networks. The principal problems faced by the Committee were theoretical and conceptual as much as political, and had to do with the diversity of philosophy and provision of mental health care across countries. What could be said and discussed in Helsinki that would be interesting and meaningful even to most, let alone all participants? As WHO Europe’s Regional Adviser for Mental Health put it later, 'An area that required attention at the drafting stage was the scope of mental health care. It proved necessary, considering the expansion of responsibilities of mental health well beyond the traditional roles of psychiatry in hospitals and outpatient settings, to clarify boundaries and to determine priorities' (Muijen, 2006, p 114).

It was Matt Muijen who drafted the Declaration, redrafting it in consultation with the Steering Committee, with his line manager, WHO’s Director of Health Programmes, and in consultation meetings. This made for 19 different versions. The early drafts were clearly internal documents, but after version 9 the document was formatted to resemble an official WHO document. It was circulated for comment at this time, and in September 2004 WHO hosted a meeting of international NGOs and user and carer groups to review and comment on it. Its wording changed considerably at this point, while time-limited targets were removed in favour of less immediate aspirations. A meeting of key representatives of member states in Brussels in November went through the document line by line, making further changes of wording, and accepting the amendments made in September. This final version was approved and promulgated at the November meeting without further revision or negotiation in Helsinki in January.
In turn, much later, when progress against the *Declaration and Action Plan* was to be assessed, a first draft of a questionnaire was produced by the Regional Office in Copenhagen, drawing in part on available WHO instruments. Its design mapped the structure of the Helsinki documents, their different themes operationalized by asking what it was 'that can be turned into a variable and to an indicator eventually'. A draft went to a consultative meeting with counterparts in Vienna at the end of the month: 'We again had the text of the questionnaire on the big screen and went through it question by question, participants made comments that were added with track-changes and after the meeting we produced an updated questionnaire incorporating the comments'.

Meanwhile, a consultation process was to follow the EC's Green Paper. This included a series of expert seminars, which in turn were to generate and inform 'consensus papers'. An expert group identified a set of research experts and other stakeholders: researchers led the development of the papers, with feedback both from the expert group and others in what was an interactive, 'step-wise' process. Each began with an initial seminar, with further drafting and revision continuing by email. Meetings involved '12-14 key organizations and individuals over a 24-hour period, from lunchtime to lunchtime, gave them a chance to talk about what they were doing to the others who don't necessarily get a chance to hear about what the others are doing because they all exist in their silos, and then to spend time talking about how they coalesced or how the strands ran together and what therefore might be the key ways of moving forward'. Each meeting produced 'a report, a set of conclusions, some interesting things'.

In this way, key moments in the development of WHO's work on mental health in Europe might best be described - again with Hugh Heclo - as instances of 'collective puzzling' (Heclo, 1974, pp 305-6). But what is it that is being puzzled over? It is what is known or might be known about a given problem and about what action might reasonably follow from that. It is about the relationship between what seems to have been said or written by someone else somewhere else and about what might be written or said here and now, for present and future purposes. This puzzling entails multiple acts of translation, but only to the extent that we can think of translation as generative, an active process of the production of meaning (Freeman, 2009). It seems impossible to ask, at any given moment, 'Where is policy?', for it seems to be always incipient, mobile, somewhere between. And it is not simply somewhere between one country and another but more specifically between one articulation of itself, one statement and discussion of itself, and another.

Meanwhile, similar processes were in train in different national contexts. In Hungary, for example, the Ministry of Health undertook to develop a National

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1 interview, 18 November 2008a
2 interview, 25 May 2009
3 interview, 4 March 2009
4 interview, 16 October 2008
5 ibid
Programme for Mental Health, within the framework of its Biennial Collaborative Agreement with WHO for 2006-2007. In the event, the National Programme was drafted by the professional leaders of the Hungarian Psychiatric Association, and emphasised the institutional development of clinical psychiatry, translating WHO's precepts about mental health into their own terms (Fernezelyi and Erőss, 2009). In Belgium, the Declaration and Action Plan were extensively used in justifying, supporting and rationalizing new initiatives. They were cited in a report on workplace health and have been repeatedly used to promote the government's policy of 'care networks' in mental health. At the beginning of 2009, WHO was much cited in the discussion of mental health policy which followed a young man's killing three people while being treated for schizophrenia. In this and other ways, 'The WHO's various recommendations only seem to exist through being retranslated into present concerns' (Vrancken, Schoenars and Cerfontaine, 2009, p 1).

iteration

In this way, in the course of our case study, we form an image of an organization with particular concerns acting or operating in particular ways. WHO is a distinctively knowledge-based organization and, over time, has evolved a set of standard instruments which define its work practices and organizational culture (Peabody, 1995). In developed countries, these are almost wholly concerned with the production and distribution of knowledge, information and expertise, including scientific and professional colloquia, research and training. In Europe, its work is done by talking and writing: by convening meetings of different scope and scale, from the working group to the interministerial conference; by producing documents, from practice-oriented guidelines to international declarations; by conducting surveys of policy and provision in different countries and contexts (Freeman, Smith-Merry and Sturdy, 2009).

There is much movement here: people move in coming to meetings; documents move in being sent to people. The existence of policy is inextricable from its extension and diffusion to others, and from its evolution in the course of that movement. There is plurality, too: meetings, if successful, are rarely one-off: their participants, motivated and mobilized - moved - invariably seek other meetings. Documents invoke and reference others, if only the minutes of previous meetings, and generate others as they are adopted or rejected, amended or operationalized. Our sense is of policy being translated and retranslated, iterated and reiterated, bouncing almost bagatelle-like between instances of its articulation.

For example, one of our respondents described the Declaration aptly as a 'source document'. It was less a single, discrete entity than the nexus of a set of interrelated statements. This wider corpus of documents included an

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6 interview, 23 July 2008
agenda paper written for WHO Europe's Regional Committee meeting in Vienna in September 2003 (EUR/RC53/7) and its subsequent Resolution (EUR/RC53/R4); a set of 14 briefing papers, and the Declaration and Action Plan themselves, all of which were bound together with the conference report. They reference, in turn, a wide range of other sources, including other WHO documents, academic research, organizational and best practice material as well as evidence from service users and others. The Declaration does not stand alone and is not read alone; its meaning is emergent in the array of documents on which it rests and which, in turn invoke it.

Many of these documents take pains to rehearse the story of their production, to identify the documents and decisions which preceded and paralleled them. Many are reports of conferences and other meetings, and think back to the previous meetings and background statements which provide their rationale. What we infer from this is that their status remains always uncertain, that it cannot be taken for granted but must always be achieved anew. In time, of course, the importance and effect of the document is gauged in terms of the documents which refer to it. The meaning and function of the text is discovered in the intertext.

Similarly, one of the goals of those promoting the Declaration and Action Plan was to have them presented and discussed at other conferences: 'The success or otherwise of conclusion documents is how well you as an officer manage to infiltrate the professional system'. The project officer seconded by the Finnish government to organize the ministerial conference, for example, spoke at a meeting of Leaders of European Psychiatry the previous year in order to present its planned programme. The Regional Adviser then spoke at the equivalent meeting a year later, outlining what was now the Declaration.

In seeking to realize the commitments made in the Declaration and Action Plan, WHO's European Office has sponsored a series of conferences and meetings, such as those in Edinburgh and Lille (above). These meetings, co-chaired by WHO and an in-country host organization, are conceived as occasions for knowledge transfer, sharing best practice and 'technical assistance'. And when the Regional Adviser visits countries to attend conferences in this way, he will arrange to meet national contacts at the same time. He makes a presentation on the Declaration and Action Plan, which will be followed by a presentation on the situation in the respective country. This juxtaposition, meant to provide some impulse to policy development, is 'a very imprecise process'.

In this way, documents are drafted and redrafted, mobilized and translated in and for meetings; meetings, meanwhile, take place because documents must be discussed. Those discussions are recorded in new, revised or amended

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7 interview, 30 July 2008
8 Leaders of European Psychiatry is a joint initiative of the Association of European Psychiatrists (AEP), the European Union of Medical Specialists (UEMS), the World Psychiatric Association (WPA) and WHO.
9 interview, 18 November 2008b
documents, which in turn become objects of new discussions. It is this process of 'symbolic encoding' (Weick, 1995, p 125) that makes a meeting mobile, makes it present again (represents or re-presents it) in another. By the same token, to involve actors in the production of one document makes it more likely that it will be discussed at other meetings in which those actors are engaged. In this way, documents find platforms beyond the conferences and meetings at which they were produced. What we might describe as 'intercolloquiality' is as important as intertextuality.

More than this, though, meetings, documents and meanings are each predicated upon the others. Policy emerges not simply in the interaction of meeting, but in the interaction between meetings; not in the immediacy of the text but in the intertext - and then in the iterative relationship between interaction and intertext. Call this reverberation.

**summary discussion**

In this account, policy appears as an echoing, shimmering, wave-like phenomenon. Policy, like the wave, exists only because the elements of which it is composed are moving. And the theoretical re-imagining we have embarked on here is consistent with our empirical case: it takes place in the interstices between disciplines, drawing variously - and imperfectly - on literary theory (the intertext), the sociology of knowledge (underdetermination) and science and technology studies (translation) as well as history and policy studies.

The concern of this paper has been with ontology as much as with explanation - with what policy is, with how it happens rather than why - though it necessarily leaves something to be said about power, or at least about the conception of power it entails and implies. As some of those who have used it acknowledge, a sociology of translation is predicated on a post-Foucauldian view of power (Gherardi and Nicolini, 2000). It is discourse theory, broadly speaking, which 'adds power' to translation theory (Newman, 2006). For translation takes place within discourses in which some kinds of representation and association are legitimated and authorised just as others are excluded or denied. But this is not to say that discourse is wholly determining. Discourse constitutes the frame of reference within which actors make sense of their worlds: as they do so, making translations, a dominant discourse may be reproduced and renewed but also adapted and changed. It is reconstituted in another place in another form, with different implications: '(C)onsultants, reports, experts, power point presentations, textbooks, benchmarks, policy documents and so on... produce new discursive articulations that imply new orderings of power' (Newman, 2006, p 18). In this way, discursive regimes themselves appear wave-like, sustaining themselves through the myriad movements of meaning they entail.

By the same token, translation 'adds practice' to discourse theory. This relates closely to the principal methodological implication of the paper, which is to take the 'practice turn' in policy studies (Freeman, Griggs and Boaz,
This means no longer treating practice as the object of policy, something to which it is addressed and on which it works, but as its subject, that is by interrogating more closely the practices of policy making themselves, to think about and ask after what it is that policy makers do when they go to work. There is nothing unusually sophisticated or magical about this; to follow the terms of discussion established here, it means attending to what does and doesn't happen in meetings, to what is and isn't committed to paper, reproduced and distributed in documents. For this we must have recourse to interview and observational methods, and to close textual analysis. What matters is what we ask and/or look for, and what matter particularly are those points of transition and translation between meetings, between documents and between meetings and documents. We need to know what was said, agreed, contested, puzzled over or simply passed over at any given moment, and then how that was invoked in the next meeting or document. For power lies in the capacity to direct these movements one way rather than another, to control the mechanics of talking and writing: to determine who attends and who speaks, who records and who writes. And this with a crucial caveat about the third dimension of power afforded by discourse, which generates the capacity sometimes to say and do nothing yet still protect an interest: the power not to be there, not to move.

To conclude, recall that reverberation time is proportional to the size of the space in which a sound is emitted. As the space of policy making opens up, and as chains (Heclo's cobwebs) of communication extend, so does the possibility of talk and text, meetings and documents in one place reproducing, necessarily imperfectly, the shared understanding produced previously in another. In this way, thinking of translation is consistent with conceptions of governance and the 'pluralisation' of politics in democratic societies. And this makes for one more essential point. What happens at the level of the international is not qualitatively or categorically different from what happens anywhere else. The international mobility and mutability of policy is not a function of the international, it is a function of policy as such. Mobility is an inherent characteristic of policy, not an epiphenomenon.

Policy changes as it moves, and the more it moves the more it seems to change. It is this that alerts us to matters of mobility and contingency in policy making. Our case study duly shows policy moving and changing as it moves - but it also tells us that that this is to put things too simply. It must change in order to move, and it must move in order to exist.

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