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based on a widely shared agreement as to what are the choices over which we might be disagreeing. Institutionally, the key to acting on this insight is a pre-negotiation stage that creates a template about the naming and framing of what is to be addressed and what is to be ignored in an actual negotiation. The institutional solution is the invention of an “art of convening” that generates a way to map the terrain of what is discussable and non-discussable in the later stage of direct negotiations (Raiffa, Richardson, and Metcalfe 2003).

One can hire an outsider, a trusted person to map actionable terrain. The aim is not to reach a philosophical clarification of what is at issue but rather to define a practical way to deal with this specific situation. It is a case of “learning by monitoring:” “an institutional device for churning, amidst the flux of economic life, the pragmatic trick of simultaneously defining a collective-action problem and a collective actor with a natural interest in solving it” (Sabel 1994, 272).

3. SECONDARY REFRAMING: THE CASE OF OFFLOADING UNWANTED CLIENTS

While some institutional approaches try to adapt a practical way to cope with the problematic ends that they confront in their practice, other institutions act in ways that exacerbate them. The strategies of offloading and secondary reframing that I review next are not really new, but are much older ideas that can be recognized under different names.⁵

The basic intuition is illustrated by the following example. Suppose a government does not wish to make the level of its unemployment of older workers politically visible, as a problem of “people without jobs sufficient to provide an adequate income to live on.” It may try to mask or hide the phenomenon by “renaming” it, and by giving it a somewhat different name shifting the problem a different institutional spheres. I call this the “transfer” from one policy domain to another. One well-known way of dealing with the problem of older workers is to pass it on to another institutional domain as a problem, not of the weakness of the labor market, but of “disability” or where the institutional rules permit, as a problem of “ageing” and “retirement” (Kohli et al. 1991). In Germany the formal retirement age is sixty-five, but the average age of actual entry in the Old Age Pension System was around age fifty-five (Schön and Rein 1994, ch. 4). In the Netherlands, where the pension system had rigid rules of entry by age, in practice flexibility was established by using the disability system as the port of entry into retirement for those below the age of

⁵ On framing and reframing more generally, see Schön and Rein 1994.

sixty-five, No one seriously believes that a healthy and affluent country of 15 million people also has a population close to one million disabled persons, even though that is the number receiving public and private disability benefits.

This attempt to reframe the mission of a policy domain occurs not only at the national level but also at the local level, where a different dynamic of “offloading” is visible. Consider next the flow across domains of “security” and “services” in the case of prison incarceration, mental illness, or homelessness. In the United States and other advanced industrial societies, we find that the local jail is the largest manager of care for the mentally ill.⁶ No one seriously believes that the best way to deal with the mentally ill is to place them in local jails or prisons. Instead, it is an institutional process of “secondary reframing” that leads to such problematic ends.

Some providers of homeless shelters anecdotally report that the proportion of formerly incarcerated people in shelters is as high as 70 per cent. Furthermore, a national survey shows that—judging from the fact that it is now increasingly “people leaving state prisons, as opposed to city jails, who are entering the shelter system”—“the bouts of correctional involvement are no longer the result of vagrancy or the benevolent sheltering function of local jails” (Cho 2004, 1–2). Cho’s diagnosis is that this institutional failure derives from “the growing fragmentation of government . . . stemming from isolated policy making.” He goes on to argue that homeless shelter is a default category, the last residual institution that manages to provide some care and service when the others have turned away.⁷

The conventional approaches for coping with these problems usually consist of three main ideas: more resources are needed; less organizational fragmentation is needed; or more coordination is needed. Resource scarcity suggests that the problem derives from a passive process that no one intended and no one wanted, but no one noticed or was capable of altering. But this type of reframing can also be a byproduct of an intended process of the administrative classification of individuals based on the “primary cause” of their condition. In other words, secondary reframing can be partly created by a process of categorization (Douglas 1986, ch. 8).

Here I want to stress three less well-known interpretations of the mechanisms in play (Rein 2000):

1. Professional and institutional “creaming.”
2. The institutional dynamics of “offloading.”
3. A professional commitment to “ideals,” in which the commitment to “do good” is not balanced with an equally strong commitment to responsibility in a way that requires a realistic assessment of what is doable (Weber 1919).

⁶ “There are now far more mentally ill in the nation’s jails and prisons (200,000) than in the state hospitals (61,700). With 3,000 mentally ill inmates, Riker’s Island in New York has, in effect, become the state’s largest psychiatric facility” (Winship, this volume).

⁷ His paper explores three strategies for dealing with the default: “frame reflection, transformative learning and boundary spanning,” categories that he developed from the literature on collaborative learning and policy making, and from his engagement in a program in New York designed to cope with the problem.

3.1 Creaming

“Creaming” is a mechanism whose importance has long been recognized in the administration of professional programs in many domains. Creaming involves both a passive process of drift through indifference and an active process where professionals “pass over” or reject unwanted clients, either at the initial point of contact or intake or some time after some service has begun through a process known as “information and referral.” In this process of “creaming,” one could identify specific actions of agents that make the phenomenon happen, namely, the passing on clients that they cannot or do not want to handle “on their watch.” There is an impressive body of literature which identifies “creaming” as one of the most important keys to understanding how, perversely, those most in need are not served by a program that takes that objective as its main mission.

In one of the earliest sociological studies of creaming, “Creaming the poor,” Miller, Roby, and Steenwijk (1970) focus on the dynamics of organizational exclusion, and how it came about organizationally and became normal professional practice. Miller and his colleagues studied a French religious organization called in the 1960s “Aide à Toute Détresse” (“Help for All in Need”); under its new name, the “Fourth World Movement,” the organization is still alive and active today with a worldwide agenda. I recently discovered another service organization with a similar mission.

The Alliance for the Mentally Ill is an advocacy group in Boston formed by the families of the mentally ill, whose goal is to challenge the “resource scarcity” view of drift. This is a group of parents who had family members with severe mental illness and which is committed to an alternative, non-creaming agenda. They argued that professional mental health practice is organized to serve the “worried well.” The Alliance sponsors propose an alternative frame: mental illness is a brain disease; the condition requires treatment by drugs and not conventional therapy; and the mentally ill require lifelong chronic care, even though the severity of the condition fluctuates periodically. The Alliance strongly objects to the priority allocation of resources to the “worried well,” and aspires to become an important political force pressing the mental health community to reform present practice, committing itself to the care of the severely mental ill and eschewing the current professional practice of creaming. The Alliance has had some success in creating “continuity of care” by creating therapeutic teams (consisting of members of several professional groups including nurses, social workers, rehabilitation counselors, and so on), with the same team being available, in principle, to the severely mentally ill for their lifetime.

3.2 Offloading

In this section I want to call attention to “offloading,” and its two different types, “diversion” and “shedding,” without an explicit organizational commitment to redefine who it services. “Diversion” is illustrated by the professional movement to

promote diversion in the criminal justice domain. This example illustrates an active, self-reflective dimension of getting other domains to help in solving a “practice problem.” That is in contrast to the other common form of “shedding,” or aggressively offloading, which is an only partially visible policy that operates in the twilight, without discussion or debate.

The mechanism of diversion can be seen as an opposite one to that involved in the earlier example of prisons as temporary guardians of the mentally ill. The strategy of diversion involves an explicit decision to divert clients away from the criminal justice system into or back to the mental health system. This is an instance of an intentional rather than passive policy of dealing with clients that overlap both the health and security domains. The difference between offloading and diversion may be difficult to distinguish in the complicated world of practice, with its demands for a quick decision.

Police are almost always accused of excessive use of authority in carrying out their law-enforcement mandate. This antagonism can create community backlash, with the public charge of “police harassment” taking on strong racial overtones. When this occurs in minority communities with a predominately white police force, the charge of harassment can undermine the legitimacy of the police. The police then have a strong incentive to reduce the tension by passing on responsibility and authority to non-police domains.

There is a fundamental, and to a degree inescapable conflict between strategies designed to cut street crime (saturation patrols, close surveillance) and those designed to minimize tensions (avoid “street stops,” reduce surveillance, ignore youth groups). Ultimately, the best way to minimize tensions is to find non-police methods for reducing street crime. To the extent that better economic opportunities, speedier court dispositions, more effective sentencing decisions, and improved correctional methods can reduce street crime, the burdens on the police and the tensions between police and citizen can be greatly reduced.⁸

The basic idea is that the domains overlap and are linked in ways that require a broader policy focus, not on the autonomy of a single domain to realize its unique mission, but on the interdependencies and linkage across domains. Accordingly, only some diversion strategies might be an appropriate forum to address problems of professional practice in the criminal justice domain.

While it is difficult to see the general case for actively managing mental illness in prisons and homeless shelters, the case can certainly be made in specific situations. Consider where two very different labels can be aptly applied to describe the same condition. A phenomenon need not be either A or B; it can be, or it can represent the so-called “missing middle” by being both A and B. The behavior of a mentally ill person, in a specific situation, may both signal a deep mental disorder and express itself in law-violating behavior.

The practical question becomes: what is the appropriate strategy for dealing with this person, at this specific time, and in this situation? This way of viewing the

⁸ This is a restatement of the writing of James Q. Wilson (1972, 139).

process of is as “redefining the case,” not as one of offloading or diversion. It is as a more practical matter of “reclassification,” based on professional discretion. That does not need to presume that there exists a deliberative forum for a practitioner to make a reflective decision about which is the more appropriate classification and hence which is the more appropriate course of action to follow. Such a system can also be regulated, if there are standards that could be applied in this situation, which has in the legal context been dubbed an “intelligibility principle.”

3.3 Idealization

There is a subtle tension between an idealized commitment to goals of “doing good” and an idealized goal of “being responsible.” The commitment to the good can have the unintended effect of initiating a dialectic that resulted in its opposite, the creation of “evil.” Max Weber creatively transformed this dialectic into an important insight about policy and practice, when he articulated a very useful distinction between the ethics of conviction and the ethics of responsibility in his famous essay on “Politics as a vocation” (1919).⁹ The ethics of conviction insists that it is our duty to do certain things that we believe are the right things to do, regardless of whether these right actions actually have the effect of producing good results. “Here I stand, I can do no other.” The crucial point is that one must do the right thing regardless of its consequences. The ethic of responsibility contrasts sharply; it insists that “it is irresponsible to settle on what one ought to do apart from what others are likely to do as a result . . . so this ethic is equivalent to consequentialism.” Weber thus argued that doing right things can actually lead to intentional or non-intentional evil, at some later stage in the process.

The challenge then is how to strike a balance between these two ethics. We need to know how to make moral judgements about choice or balance in concrete situations, so that it can actually lead to something constructive. After all, the concrete judgements might be based on the overselling of the idealized vision, or the failure to enquire about the internal contradictions of the two idealized norms, or the inability to take seriously and to reflect on current actual practice and to learn from practice the history of past failures.

Many mental health workers practice within the context of institutional policies that give prominence to their role in the social control of the behavior of the poor (such as protecting public housing from irresponsible tenants who damage property (e.g. continuously clogging toilets), protecting the integrity of the rationing system that is designed to develop queues so as to allocate scarce housing to families that are in greatest need, and discouraging practices like social workers advising their clients to enter a haveless shelter with their children in order to jump the queue). However, in their own view, their everyday practice of mental health can occur in a policy

⁹ This interpretation draws freely on the discussion in Larmore (1987, 144–50).

environment that can be antagonistic to their idealized, preferred practice. Not infrequently their practice is guided by the idealized logic of a mental health frame that enjoins them to “help” their clients get what they need, based on need and without attention to actual constraints. This definition of their mission sets the stage for an idealized practice that fails to recognize the conflict between the ethics of commitment and of responsibility.

4. CONCLUSION

Thus, at least three quite different mechanisms might plausibly account for secondary reframing, leading one domain to take on the functions of another. These are, of course, not necessarily alternative interpretations, and the relative importance of each varies depending on the specific domain under consideration.

- The first and most conventional interpretation is that of resource scarcity: drift across domains occurs because the domain lacks the personnel and the material resources to provide the appropriate service within the domain. Since these are largely public programs, the main causal agent becomes the failure of government to allocate the needed resources.
- Secondly, “creaming” occurs when professionals keep the clients they want, especially those that can be most successfully helped, and the unwanted population drifts or is actually pushed into other domains.
- A third mechanism arises from an active process of offloading. The simple case is when behavior poses multiple and overlapping problems, and “naming” the appropriate category requires professional judgement. But there are other cases where “secondary renaming” originates from positive motives, as in the case of diversion programs designed to separate the system to promote security (like courts and prisons) and the system designed to promote mental health. In general, the commitment to prevention is an example of an active design, believed to offer the best chance of reducing a specific problem by moving to a different domain than that of the presenting problem.¹⁰
- The fourth and perhaps least understood mechanism is that of an idealized practice which neglects to balance the practical consequences of an “ethics of

¹⁰ Delinquency prevention offers an example, where a federal anti delinquency program assumed that apathy and blocked opportunity caused crime. This program allocated Community Action funds to local communities to empower the poor, to overcome apathy, and to create new programs that provided employment and training opportunities as a way of overcoming blocked opportunity. But the responsible outcome can be different from the idealized desire “to do good” and “to help.”

conviction” with an “ethic of responsibility.” This occurs, for example, where the risks of offloading are widely understood but seldom acknowledged in the vocabulary of professional practice.

The challenge we now face is how to reduce secondary reframing and the problems it creates by permitting creaming, offloading, and idealization. The problem of idealization may be more elusive, because we do not yet have any deep understanding of the underlying dynamics at play. But regulatory agencies with oversight responsibility for social policy might be able to take first steps to deal with creaming and offloading by formulating some “intelligible principles” to guide the conduct of those to whom they delegate tasks of service delivery. This chapter is a preliminary attempt to lay the intellectual framework. What is now needed is a detailed, well-documented study of practice, which offers concrete examples of how all these processes are actually played out in everyday practice in the administration of social and other public services.

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P A R T V

INSTRUMENTS
OF POLICY
