P257 / Collaborative Governance in Social and Health Policies: limits, outcomes and reconceptualization

Topic : Governance, Policy Networks and Coalition

Chair : Patrick Hassenteufel (Université Paris-Saclay)

Second Chair : Marie ASSAF (Institut d'Etudes Politiques de Paris (Sciences Po))

Third Chair : Axelle Peltier (Institut d'Etudes Politiques de Paris (Sciences Po))

GENERAL OBJECTIVES, RESEARCH QUESTIONS AND SCIENTIFIC RELEVANCE

The notions of “collaborative governance” (Ansell, Gash, 2008) and “collaborative public management” (Mac Guire, 2006; Meek, 2021) have been developed in a context of growing complexity of policy issues and the diffusion of new public management (Osborne, 2010). In a broad sense collaborative policies can be defined as horizontal inter-institutional, inter-organizational, inter-professional and multi-level policies aiming to tackle wicked public problems (Head, 2022), bridging historically established sectoral boundaries, by the shaping of new boundary-crossing agencies and boundary-spanning roles (Williams, 2011).

Coordination issues between different policy sectors, policy actors and policy levels are particularly relevant for health and social policies. The blurring of the historically strong compartmentalization of these policies, between sectors related to different social risks concerns especially the issue of poverty, which has been increasingly tackled in relation to unemployment policies, housing policies and family policies (with the rise of lone-parent families). More generally social (and health) policies have been coupled with anti-discrimination measures concerning gender and/or racial equality. Ageing has also become a key cross-sectional issue related to social policies (long-term care), healthcare policies (including mental health) and disability policies. The increasing intersection between social and/or health issues with environmental issues is another important trigger of collaborative policies.

In this panel we are looking for papers analyzing empirically, in a relational policy process studies perspective, collaborative public policies linked to wicked problems and intersectoral issues (such as poverty and social exclusion, ageing, disability, mental health…) concerning social and/or health policies. Comparative papers (between countries and/or territories) are especially welcome. Yet, to go beyond the empirical finding of the development of collaborative institutions, instruments and networks, the focus of this panel is on three main questions:

1. What are the limits and obstacles to collaborative governance in a context of increased budgetary constraints on social and health policies and the rise of right-wing and populist oriented policies challenging these policies? This new context triggers new vertical and hierarchical (even authoritarian) dynamics opposite to the bottom-up logic of collaborative governance.

2. What are the outcomes of collaborative governance in social and health policies? Policies focused on inter-sectoral policy coordination, by giving more autonomy and a new policy role to local or private actors, can produce new inequalities (not only socio-economic, gender and racial inequalities but also territorial or generational inequalities).

3. How is it possible to reconceptualize collaborative governance by considering these limits and outcomes. We also welcome theoretical oriented papers in this panel.

References

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CALL FOR PAPERS

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