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The NHS Brexit bus: comparing narratives of accountability and legitimacy in post-referendum health governance

Introduction

Thanks etc. Report on some of the findings from our project. What the project does is to take just one aspect of the consequences of Brexit – but a really important and multifaceted one – and compare the views of relevant 'insider' 'elites' in that policy sector with the views of 'ordinary people' in 'left behind' places.

Slide 2:

As a symbol of the promise of Brexit, there isn't much to beat the 'Brexit bus'.

In just 18 words, the Vote Leave campaign embodied and encoded a huge range of sentiment designed to appeal to Leave voters and to persuade those who were unsure how to vote of the benefits of the Leave position.

1.   membership of the EU is costly to the UK.
2.   there is a trade-off between EU membership and domestic spending.
3.   the promise of the NHS Brexit bus is that domestic politicians can be trusted to invest in the NHS, and, by extension, other domestic priorities, and will do so once unencumbered by obligations flowing from EU membership.
4.   the bus message embodies the notion that the obligations of social solidarity end at national borders – it implies 'our' experiences of overstretched GP services and hospital waiting lists have arisen because of these 'others' who are present in UK clinics and hospitals.
5.   Finally, we could argue that, by invoking the NHS, and placing it in competition with the EU, the bus message implies that the values that are most dear to the British are anti-European.

These – and perhaps more – are the messages encoded in the NHS Brexit bus. They are a particularly clever (or insidious, depending on your point of view) implied promise, that at least according to the author of the bus, Dominic Cummings, was probably a crucial factor in the referendum vote. So – who is accountable for delivering on that promise? To be legitimate, a future UK health policy needs to do so.

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Here's a standard definition of accountability and legitimacy, that frames the analysis in our project. Of course, all these modes of accountability are limited in the context of a referendum, which makes the promises of Brexit, and future legitimate UK law and policy, all the more tricky.

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Quick word about methods – we used standard social science methods to capture the views of our elite/experts, and we worked and are working with them to coproduce deep legal and policy analysis of how Brexit as it unfolds is affecting health and the NHS.

But for the 'non-elite', 'left behind' data we used a novel ethnographic method – I can talk more about it in Q&A – but basically it seeks to alleviate some of the known difficulties in getting information from this group of people, but also some of the difficulties of using long-form 'deep' ethnography for a specific focused and time-bound event. We've got a journal article submitted to the British Journal of Political Science which elaborates more.

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The other thing that is central to our method is metaphor and narrative.

In short, our method is to compare the language used in our different data sources. Metaphor and narratives (which operate as extended metaphors) are central to our approach, as they are replete with information about how people make sense of the world and themselves. Metaphors are not just a matter of pure words: cognitive linguists[1] have shown that human thought processes are largely metaphorical, because thinking about abstract concepts (such as politics or society) is easier if one thinks in terms of more concrete concepts (such as the human body).[2] Metaphors structure our thought, in ways that escape our conscious reasoning, and that conceptual system plays a central role in defining everyday realities.

Metaphors and stories both reveal and obfuscate, enable and constrain. Metaphors operate as framing devices, expressing what is seen as possible and impossible, likely and out of the ordinary. By extension, they are mirrors onto epistemology and ontology.[3]

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Our elite/expert interviewees repeatedly stressed the lack of detailed and specific governmental understanding of the aspects of health and the NHS in which they are expert. Much of the language used here resonates with ideas of the realms of the unreal and the impossible: 'fantasy', 'unicorns', 'cake-and-eat-it', 'magical thinking'. Some indicates superficiality by references to the difference between 'surface' understandings and the need our interviewees perceive to 'dig down' and 'go deeper'. Others suggest that broad brush understandings of 'the big picture' mean that the particular (for example, specific patients and their needs) get 'lost'.

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[1] G Lakoff & M Johnson, *Metaphors We Live By* (University of Chicago Press, 1980); see also Z Kövecses, *Metaphor: A Practical Introduction* Oxford University Press, 2010).

[2] A Deignan, *Collins Co-Build English Guides 7: Metaphor* (Collins 1995); see also G Lakoff, J Esperson and A Goldberg 1989; G Lakoff, J Esperson A Schwarz 1991, Master Metaphor List http://araw.mede.uic.edu/~alansz/metaphor/METAPHORLIST.pdf.

[3] Goffman, E (1974) *Frame Analysis: An Essay on the Organisation of Experience* (Cambridge MA: Harvard University Press); Rein, M, and Schön, D (1977) 'Problem Setting in Policy Research' in C Weiss (ed) *Using Social Research in Public Policy Making* (Lexington MA: Lexington Books); Sammut, G, Andreuoli, E, Gaskeil, G, Valsiner, J (2015) *The Cambridge Handbook of Social Representations* (Cambridge: Cambridge University Press); LeBaron, M (2016) 'Is the Blush off the Rose? Legal Education Metaphors in a Changing World' 43 *Journal of Law and Society* 144-165,

Relatedly, our interview data includes language that suggests infantilization - both of the health professional and expert community by the government; and to the effect that the government is behaving in an infantile manner. These expressions are sometimes used in combination with language resonating with the unreal: the phrase 'fairy tales' appears several times in the transcripts. Likewise, 'the idea that we're going to come out of free movement but somehow can keep all the jelly babies that were attached to it'; 'like some kid going "you can't see me"'; 'dragged kicking and screaming' are narrative figures of speech that suggest that the government is behaving like a toddler, with all the irrationality that implies. Indeed one interviewee describes the government's Brexit analyses as 'an almost childlike summary of the issues'. Our interviewees also describe some MPs as being irresponsibly childlike: 'putting the whole thing [Brexit and its impacts on health] into the "too difficult box"'.

At the same time, the government's response to scrutiny by the health professional community is described as patronising ('just warm words') and dismissive ('blank faces'). There is a strong sense from these metaphors that parliamentary scrutiny of government action, and the ways in which stakeholders such as health professionals can hold government to account through ordinary parliamentary processes, is entirely deficient in the context of Brexit and its impact on health and the NHS. And, further, we can discern from the silences on this matter in the interview data, there is no sense that law or legal modes of accountability could, or even should, make matters different.

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Metaphors and narrative tropes used in our 'elite' data resonate with those in other legal and elite discourses (like Brexit litigation eg Miller/Cherry/McCord etc:
- justify, rationalize and make sense of UK's political constitution
- decentre courts and the law

And their practical effect: render government and other holders of public office unaccountable for the implied promise on the NHS Brexit bus

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By contrast, our conversations in 'left behind places' suggested a belief in law and accountability. To be sure, some conversations suggested political ('don't vote them in') or moral accountability ('shame on him'), and others said that politicians could not be held to account or that they did not know how.

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But a stronger theme in our conversations was *legal* accountability. There should be 'a law to remove Johnson', we heard; or Johnson should 'be arrested', be 'taken to court', 'prosecuted', 'sent to jail', and we should 'get a top lawyer on him'. Some thought of criminal liability, such as for fraud; others of civil liability, such as a wage deduction, compensation for false or misleading advertising, or insurance payment; and some resonated

with the transparency associated with legal and quasilegal proceedings: Johnson should be 'made to tell the truth and show his papers'; 'present [his] figures and analysis'.

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Metaphors and narrative tropes used in 'non-elite' discourses:
- seek and believe in the power of legal (as well as other) forms of accountability
- show unexpected faith in legal process, courts and the law

So the practical effect here is to increase gap between perception / promise / narratives of Brexit ('take back control', address the concerns of 'the left behind') and reality of unaccountable government and other holders of public office for the implied promise on the NHS Brexit bus.

And if this is true for that aspect of Brexit, which goes across so many aspects of the UK's future relationship with the EU – movement of people (NHS staffing), trade in products (medicines, PPE, devices) and services, public health standards, and so on – why would it not be true for any other aspect of Brexit?

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So – preliminary conclusions

- Metaphors of post-Brexit health governance reveal:
    - Significant gap between notions of accountability embodied in 'elite' data, and that embodied in 'non-elite' data: 'ordinary people' expect stronger role for law than expected
    - But also unexpected aspects of data: vast majority of 'non-elite' discussions suggest very few believe(d)the implied promise on the bus
- Strong theme among 'ordinary people' of disaffection with political constitutionalism
- Perhaps one of the effects of Brexit should be increased attention to legal forms of accountability and legitimacy