NEGOTIATING ABOUT POWER, FRAMES, AND CONTINUING EDUCATION: A CASE STUDY IN PUBLIC HEALTH

KARL E. UMBLE
University of North Carolina at Chapel Hill

RONALD M. CERVERO
CHRISTINE A. LANGONE
University of Georgia

Drawing on the Cervero and Wilson theory of program planning as the negotiation of interests, the purpose of this study was to examine the utility of the distinction between meta-negotiation and substantive negotiation. A case study approach was used to examine a continuing education course in public health. Historically, the course had represented an attempt to implement federal immunization policy. After the course was under way, stakeholders whose interests were not being fully met engaged in meta-negotiations to change the power relationships at the planning table and in substantive negotiations to change the content of the course and audience for it. The redesign and implementation of the course represented a recurring series of substantive negotiations of personal, organizational, and societal interests within relations of power and meta-negotiations about the power relations themselves as stakeholders sought to have their interests represented at the planning table.

In an ongoing series of studies, Cervero and Wilson (1994, 1996, 1998) have argued that adult educational program planning is a social activity whereby people construct programs by negotiating personal, social, and organizational interests in contexts marked by socially structured power relations. In their view, the interests of people are causally related to the educational programs that are produced. The central activity and ethical responsibility of planning practice is to negotiate whose interests will be represented at the planning table.

Sork (1996) observed that the theory could be strengthened by describing the actual character of those negotiations. His suggestion was to use Elgstrom and
Riis’s (1992) combination of frame theory and negotiation to refine the analysis. Cervero and Wilson (1998) subsequently found Elgstrom and Riis’s work useful in distinguishing types of negotiations that occurred when an American business planned a management development program. The present study builds on Elgstrom and Riis (1992) and the Cervero and Wilson (1998) study. By analyzing the types of negotiation these authors describe, this study shows how substantive negotiations and meta-negotiations occurred over several years as a government health agency developed and implemented a continuing education program.

THEORETICAL FRAMEWORK AND RELATED LITERATURE

For several years, Cervero and Wilson (1994, 1996, 1998) have been developing a theory of adult educational program planning that emphasizes the social and political dimensions of the process. They have stressed that people, rather than theories and guidelines, plan programs (Forester, 1989). Those people have varying power and resources, have sometimes diverging and sometimes converging interests, and work within complex organizations. Whether or not they are data-driven or systematic, all planning procedures and the programs they produce will be deeply shaped by these power relationships and interests. Programs thus fundamentally result from the interests of the people and organizations involved in planning. Cervero and Wilson (1994) have thus held that “negotiation is the central form of action that planners take in constructing programs” (p. 29).

Sork (1996) suggested that Cervero and Wilson’s theoretical work might be strengthened by a more detailed description of the types of negotiations that planners undertake. Sork suggested as a model the work of Elgstrom and Riis (1992), who used a combination of frame-factor theory and negotiation theory to explain a curriculum revision process in Sweden.

Elgstrom and Riis make a distinction between meta-negotiations and substantive negotiations in curriculum planning. In their work, meta-negotiations are attempts to change the frame factors that shape a curriculum. They define frame factors as “such factors that constrain the intellectual space and the space for action within a process, which the actors at each point of time during the process cannot influence or perceive that they cannot influence in the short run” (p. 104). Frame factors can be both material and conceptual. Material frame factors limit the space for action and include the limits on resources such as funding, equipment, rooms, time, and personnel. Conceptual frame factors limit the intellectual space and include the ideational structure that surrounds a planning situation. Elgstrom and Riis define the ideational structure of a given planning situation as “that configuration of norms, standards, values, and views of life and realities held by a number of interacting actors at a certain point of time” (p. 104). In Elgstrom and Riis’ terminology, meta-negotiations are conducted with respect to both the material and conceptual frame factors, and all frames are continually subject to meta-negotiation.
The second type of negotiation that Elgstrom and Riis (1992) describe is substantive negotiation, which refers to negotiations about the specific content, audience, format, and other details of a program. Planners will have some power to shape these aspects but will always be limited because “substantive negotiations take place under the umbrella of existing frame factors” (Elgstrom & Riis, 1992, p. 105).

Elgstrom and Riis (1992) point out that for existing programs, meta-negotiations that attempt to change frame factors will also require changes in (and therefore negotiations about) the power relationships in the planning situation. That is because organizations and people with power will have already forged the ideational structure and designated a certain amount of resources for the program. For example, Elgstrom and Riis show how group and organizational interests defined technology curriculum goals in two case studies. They also describe how groups with differing views of the proper curriculum goals tried to change the planning committees for many years to obtain adequate representation of their interests. The objective of these groups was meta-negotiation of the curriculum goal, but they had to change the power relationships (in this case, planning committee memberships) to succeed. Elgstrom and Riis formally define meta-negotiation as trying to change material and conceptual frame factors, rather than the power relationships per se, but it is difficult or impossible to change the frame factors without first or simultaneously changing the power relationships among the actors shaping the program. Probably for that reason, the authors seem to conflate negotiation about frame factors and negotiation about power relationships. For example, they state, “By engaging in meta-negotiations, actors make attempts to change power relations and to reach a more favorable negotiatory position in re-opened substantive negotiations” (p. 105).

As Sork (1996) points out, most of the studies using the Cervero and Wilson framework (Cervero & Wilson, 1994, 1996; Mills, Cervero, Langone, Wilson, 1995; Rees, Cervero, Moshi, & Wilson, 1997) have described meta-negotiations and substantive negotiations but have not distinguished them. In a recent study, Cervero and Wilson (1998) made this distinction and described how meta-negotiations directly influenced substantive negotiations about the content and format of an adult education program. That study, diverging slightly from Elgstrom and Riis (1992), defined meta-negotiations as negotiations about the power relationships at the planning table, rather than negotiations about frame factors. Cervero and Wilson did not take into account the frame factors that derive from the wider social context, nor did they follow the program from its initiation through several years of development and implementation. These social and historical perspectives warrant further study because they should be crucial in understanding the meta-negotiations that characterize all program planning.

These perspectives in the educational planning literature are consistent with the organizational behavior literature that has used a political perspective (Burgoyne, 1994; Frost & Egri, 1991). Frost and Egri’s extensive review overlaps considerably with Cervero and Wilson’s (1994) explanations of adult education program planning. They show (p. 236) how surface politics (akin to substantive negotiations) and
deep structure politics (akin to meta-negotiations) of an organization affect one another; the deep structure (akin to ideational and social structures) is not static. Political theories of management (Lax & Sebenius, 1986) also describe types of negotiations and interests and advise managers about negotiation. Lax and Sebenius describe meta-negotiation as “changing the game” by altering issues or parties, evoking or avoiding interests, persuading, learning, transforming through leadership what is seen as desirable or possible, and changing values. Lax and Sebenius also point out that “managers must negotiate and renegotiate over purposes, support, authority, and resources” (p. 267). The purposes must be negotiated because “a manager’s preferred goals normally need to be reconciled with those of authorizing entities” (p. 270). Authority must be negotiated because managers must stay within the limits of their organizational mandates, and resources must be negotiated because their superiors want good returns on organizational investments.

The theoretical framework of the current study is an amalgam of Cervero and Wilson (1998) and Elgstrom and Riis (1992). This framework suggests that as adult education programs are planned, people engage in two forms of negotiation: meta-negotiation and substantive negotiation (see Figure 1). Furthermore, there are two types of meta-negotiations: (a) those that are primarily about power relations, or more specifically, which actors have the most influence over the planning process; and (b) those that are primarily about frame factors, or more specifically, the fundamental ideational structure and material limits for the program being planned.

These types of negotiation may be related in myriad ways, but several major patterns may be as follows (see Figure 1). First, meta-negotiations about power relationships are often required to succeed with meta-negotiations about conceptual or material frame factors. That is because one cannot normally change a program’s fundamental purpose without first altering the power and influence dynamics among actors shaping a program. Similarly, improving the budget, space, and other resources for a program often requires strategies that increase the program’s influence with budgetary decision makers within an organization or political entity. Second, when a new program is being developed, meta-negotiations about power relationships, and sometimes meta-negotiations about frame factors, normally are undertaken before or during substantive negotiations about content, audience, formats, and so on. Planners developing a new program will construct some form of power structure (whether simple like a designated planner or complex like an inter-agency committee) that allows some parties to influence the plans. Depending on the situation and organization, those planning the program will have much or little opportunity to determine the basic conceptual and material frames around the program, that is, to engage in meta-negotiation about frames. Either way, they will then engage in substantive negotiations to determine the details of the program, within the frames they have established or within which they find themselves. Third, people who seek to change an existing program by engaging in substantive negotiations about its details or by changing its conceptual or material frames must either already have power with respect to the program or organization or find a way to obtain it,
Figure 1. The Relationships Between Meta-Negotiation and Substantive Negotiation
that is, engage in meta-negotiations about power relationships. (As a cautionary note, the danger of illustrations such as Figure 1 is that they convey the notion of a linear sequence over time, whereas in fact many of these processes occur simultaneously. The arrows run in both ways to try to convey that in observing any given situation, the various forms of negotiation sometimes occur at the same time, often influence one another, and may be difficult to distinguish.)

In summary, the framework characterizes the connections between the negotiations about power, frames, and the educational program as follows: (a) meta-negotiations about power and frames and substantive negotiations about specific features of the program form a complex web that affects the final outcomes of the planning process; (b) the power relationships and frames, as well as the substantive details of the program, may all be subjected to renegotiation by various stakeholders; (c) power is required to make changes in the frames or substantive details of a program, so that actors wanting to make those changes must use their power or undertake meta-negotiations to alter the power balance; (d) people sometimes conduct one or both types of meta-negotiations concurrently with substantive negotiations.

The purpose of the current study was to show how meta-negotiations about power relations and frame factors and substantive negotiations about the program itself shaped a continuing education program.

METHOD

A case study approach (Yin, 1994) was used to examine a continuing education program in public health. The case was the course, “Vaccine-Preventable Diseases” (VPD course), presented by the Federal Immunization Program (FIP) of the United States Health Agency (USHA). All personal and organizational names in this study are pseudonyms. The USHA is a large federal public health research and policy development center. The FIP develops and implements immunization policy for the United States. The FIP Director, Andrew Luca, and Deputy Director, Henry Brouillard, are respected medical epidemiologists. The FIP Immunization Services Section was charged with implementing policies and was headed by Roger Burrell, also a medical epidemiologist. Within this section, the Training Branch offered many courses and was managed by a nurse, Carolyn James. The primary instructors for the VPD course were Jack Brown, a medical epidemiologist and the course’s major architect, and Jim Bankston, a health educator.

For many years, the FIP had presented courses for public health professionals. In 1994, the Training Branch condensed, updated, and standardized previous courses into the VPD course. The course was first a traditional, face-to-face classroom or “land” course. The traveling 2 ½-day land course had been offered 25 times each year at the invitation of state health departments. After 1995, the Training Branch adapted the course for a satellite videoconference format. Since 1995, this 4-day (3.5 hours per day) satellite course had been offered once or twice annually to large
national audiences. Both versions of the course taught basic principles of vaccination, general recommendations, and standard FIP policies for pediatric and adult immunization.

Data for this study were collected using interviews, observations, and document review during the second half of 1996. The interviews were conducted with 40 stakeholders in the FIP and in the field. The field stakeholders included state coordinators, local program coordinators, and course participants. During field observations of the land and satellite courses, detailed fieldnotes were taken describing the physical facilities, formal activities, and informal interactions. Documents including work agreements, FIP program briefing books, program marketing materials, and the course textbook were used to analyze the roles and interests of key stakeholders.

A modified form of explanation building (Yin, 1994) was used to analyze the data. In explanation building, a theoretical perspective is brought to the analysis, which the case can verify, fail to verify, or further develop. In this case, the data were analyzed to interpret how various types of negotiations described by Cervero and Wilson (1994) and Elgstrom and Riis (1992) had produced the course.

**FINDINGS**

These findings describe (a) how the societal and organizational context of the course created the basic power relationships among stakeholders and the strong conceptual and material frames surrounding the course; (b) how meta-negotiations within the Training Branch established the initial power relationships among the staff who produced the course; (c) how additional meta-negotiations and substantive negotiations were carried out by actors interested in changing specific aspects of the course’s content and audience; (d) whose interests were represented in these various negotiations; (e) how the power relationships among the stakeholders shaped how the negotiations were carried out and their success; and (f) how substantive negotiations and meta-negotiations affected the course initially and over time. To present these overall findings, we describe how meta-negotiations were occurring simultaneously within the context of two substantive negotiations about content and audience.

**Negotiating About Content**

This section first describes how the organizational and societal context of the course created the basic power relationships and strong conceptual and material frames surrounding the course. It then describes how the interests of various groups were supported by the course’s basic frame. Then, it describes how a particular staff member secured the power to construct the specific content of the course and put his own stamp on it, yet within the frames around the course. Finally, it describes a renegotiation about course content and a simultaneous meta-negotiation that occurred after the course was under way.
Historical development of power and frames. A series of broad societal developments occurred over many years that gave the FIP and its Training Branch the power and resources to plan courses that taught the standard immunization policy for the United States. First, scientific knowledge became the only sound basis for medicine (Flexner, 1910). The scientific point of view thoroughly infused every USHA activity. Since its mid-century founding, the USHA had built an international reputation as a public health research and policy-making organization. The USHA’s scientific opinions carried great weight among health professionals; one state administrator called USHA the “public health Mecca.” Third, the FIP had been well funded by recent administrations to supply training. Finally, the FIP had created a Training Branch in the 1980s and endowed it with authority to plan courses. In these ways, the USHA had obtained the authority and resources to develop and implement a national immunization policy, and the Training Branch had been given the specialized power to support policy implementation through training. More theoretically speaking, the power of the FIP and the Training Branch to teach standard immunization knowledge was structural and socially systematic (Cervero & Wilson, 1994). These organizational structures and power relations were, in turn, sedimented within cultural beliefs in the efficacy of science.

Interests supported by the course. This broader mandate to teach immunization policy gave the Training Branch the authority and resources to plan courses; it also provided a strong conceptual frame to which the course purposes and content had to conform: FIP policy implementation. That mandate affected the Training Branch course planners through two mechanisms. First, that purpose was part of the scientific worldview of the USHA, and the Training Branch staff who designed the course adhered to this worldview. The course’s lead designer was Jack Brown, a medical epidemiologist who strongly represented the organizational interest in policy implementation because he believed it was legitimate and in the public interest. Second, Training Branch educators wanted to keep “happy” the top-level FIP managers who funded their branch, who believed, in their words, that it was a “fundamental obligation” to get FIP policy information to “every nook and cranny” of the nation. In this way, although there really was no choice about the course’s main purpose, the substantive negotiations in which the staff placed FIP policies at the center of the course were simultaneously strategies of meta-negotiation that would maintain or improve the Training Branch’s resources and authority to plan courses.

The course reflected the Training Branch’s interest in increasing support for its training mission. Soon, the branch had grown into a well-funded operation offering more than 20 land and 2 satellite VPD courses each year, plus several additional courses. As Bankston, the Training Branch educator declared, the branch staff was now seen as the FIP’s “best troops” in the “war” to implement new immunization recommendations. He said, “Our mission has expanded now, because we’re going to take the lead on (new recommendations) . . . So we’re going to be taking a greater role in getting the message out.”
In addition to directly reflecting the major interest of the three top FIP managers—
Luca, Brouillard, and Burrell—in policy implementation, Training Branch educa-
tors and courses also supported the related interest in strengthening the national
credibility of the USHA and the FIP. All three managers agreed that the course in-
creased FIP credibility and “establish[ed] USHA as the technical group that people
will come to with [policy] questions.” As a result, one said, “Even if the course it-
self doesn’t [change behavior], people can remember that ‘USHA, they’re the ex-
erts. If I have a question, I’ll ask them.’” One of these senior managers also be-
lieved that the course increased the importance and authority of FIP policies,
because people associated the policies with the credible and authoritative course
trainers:

Hence, when we come out with recommendations, there’s more motivation that
“these guys know what they’re talking about.” There’s a real face behind that Preven-
tion Bulletin, and “they’re a real unit, and they know their stuff. So I can take what
they say very literally.” It’s more acceptable.

Another agreed, saying the course “paves the way for other things that come along,
and that’s extremely important.” This credibility would thus improve the success of
all FIP policy implementation efforts. The interest in having the course credibly
present FIP policies was thus related to an interest in increasing the FIP’s general
capacity to implement policies.

How Brown obtained the power and designed the specific course content. This
section shows that Jack Brown, the medical epidemiologist and lead trainer, under-
took meta-negotiations that enabled him to bring his own interests and those of oth-
ers to the planning table to negotiate the specific course content within the policy
frame. To explain how these meta-negotiations about power relations took place, it
is necessary to briefly review the course history.

As noted above, Jack Brown was the chief architect of the course. As educator
Bankston said, Brown had “the real vision” for the course:

I played a secondary role, really, more operational than technical. Jack wrote the
course. Jack is the lead expert in the field. We defer . . . plus, he’s been doing this for-
ever, so he knows about the training and so on. While he certainly listens to my sug-
gestions, we tend to go with his thoughts.

The meta-negotiations by which Brown became the chief designer were actions
that he took over several years. First, after joining the FIP in 1989 as an epidemiolo-
gist, Brown set the stage by becoming a highly respected trainer, both within the
FIP and in the field, through traveling with the teams to meet field requests for train-
ing. Second, in 1994, he joined the Training Branch as a full-time trainer. Third, he
said he then “took over” redesigning the course, on his own initiative. Brown and
the other FIP trainers had identified significant training needs as they interacted
with professionals at the courses. First, there were widespread problems with “low vaccination coverage, and just massive things being done wrong and missed opportunities,” said Brown. Second, there was a strong demand for updates and correct information because of “the extraordinarily rapid change in vaccine science, if you will, over the past 2 to 3 years particularly,” Brown explained. Indeed, during that period, a plethora of new vaccines had entered the market. The FIP recommendations changed repeatedly, and it was difficult for professionals to keep up and to be confident that they were giving immunizations safely and correctly. Brown put it this way:

We had all these new vaccines, we had new recommendations, things just seemed to come and come and come. People felt overwhelmed and I was convinced that when people didn’t understand what they were doing, they did nothing. And consequently, everybody needed to be retrained basically every year because there had been so much significant change.

Other reasons for the training need were “the obligatory 10% to 15% turnover that takes place in the vaccination work force” and the fact that “no training programs exist for people, beyond basically what we do and a few limited places in schools of public health.”

Brown explained that he “took over” because he believed so strongly in the need and because no one else was stepping forward to do it. By “taking over” he meant that he completely revised, updated, and sequenced the material and slides, wrote the textbook, and “tried to make [the course] more practical.” He also developed and added the first segment on the basic principles of vaccination and general recommendations to provide a foundation for the other material. In that way, the meta-negotiations by which Brown claimed the power to plan the course content occurred simultaneously with the substantive negotiations by which he planned the course. We describe his actions to “take over” as a meta-negotiation not because it changed any frames but because Brown intentionally and dramatically changed the power relationships among those involved in course planning.

Brown used his position as course architect to represent learner interests, which he identified as he traveled. In fact, this was one of the reasons he gave for taking over the course design. He saw significant needs and wanted to meet them by improving the course. Brown’s personal stamp on the course became evident in several ways. First, the course was not simply a statement of FIP policy; reading policy aloud from a podium could have done that. It was a succinct overview of the knowledge Brown and his fellow trainers were convinced providers needed to confidently act in the face of ever-changing and confusing policies. It was designed to address common questions and misconceptions and to provide a foundation for understanding the policies. Second, both Brown and Bankston emphasized that the course’s specific purpose was to “empower” practitioners to make “appropriate” decisions and carry out “proper” practices. Brown put it this way:
If you want to take the long view of this, the big goal is to empower providers with knowledge such that they can make appropriate decisions . . . to wade through the jargon and the sometimes totally uninterpretable recommendations made by the FIP, and to put it in a form that is understandable so that they can internalize it and can take it out and use it in their practice.

Or as Bankston remarked,

We're trying to teach one nurse [at a time] to not withhold vaccine when you should give it . . . we're trying to break down all the barriers that would improperly stop a nurse from giving a vaccine when it's truly indicated. And to give them a confidence and the background and the knowledge to defend that, to support that, and to be able to believe themselves and stand up for it. So what we're trying to do is make them missionaries for the cause, for them to defend the right way to do it, as opposed to a clearly wrong way or hedging.

Several factors aided Brown in gaining the power to plan the course. First, his medical degree and background as a well-published epidemiologist gave him credibility; a nurse or a health educator would not have had the same power to step in and reformulate the course. Second, no other members of the organization had comparable expertise. In an agency known for research, it was highly unusual for a recognized scientist to desire a role in service delivery, let alone as a trainer. Brown's supervisor was Carolyn James, a nurse without comparable substantive expertise, and the person above James had only a bachelor's degree. Thus, no one around Brown or above him through two layers of authority had questioned his expertise. It was only when Burrell, also a respected medical epidemiologist, became Director of the Immunization Services Section in 1995 that someone had enough power to begin to question the dominance of the VPD course in the scope of FIP training and to ask whether it changed behavior and was being most effectively constructed.

Renegotiation about content. Although there was considerable evidence that the course content met the interests of many stakeholders, Roger Burrell, Immunization Services Section Director, and other members of his staff said the course should include material on practice-level procedures designed to change provider behavior more directly. The Services Section had developed and tested reminder-recall and computer procedures to prompt providers to give the correct shots during patient visits. Most other stakeholders believed the course's focus on basic knowledge was sufficient and appropriate, but Burrell began to ask questions about the content after becoming director, leading to some conflict. By questioning the absence of material on practice-level procedures, Burrell was challenging the sufficiency of the course content to promote policy implementation, a purpose with which everyone agreed. He believed that changing knowledge through training was only a minor part of implementing policies. He was raising the possibility that changing provider
behavior, as opposed to simply diffusing policy information, should be more strongly incorporated into the course’s specific content.

In this controversy, Burrell was undertaking a substantive negotiation about the course content from his position of power as section director. In addition, however, he was simultaneously engaging in a meta-negotiation by trying to change the power relationships at the planning table for the program. After all, Burrell had not been a collaborator with Brown from the beginning but rather had come into his position a few years after Brown had reshaped the course. For this reason, Burrell and Brown needed to negotiate in some way about who would have the final say on course content, at the same time that they were discussing the substantive content issue. Burrell could probably not have simply ordered Brown to make the change but rather needed to try to find a way to influence Brown.

Burrell mainly undertook his negotiations by asking if the Training Branch had evidence that the course was changing behavior and by repeatedly advocating that the course include the additional content to make it more likely to do so. He was partly successful in his negotiations, as the Training Branch gradually began including some of the content Burrell wanted. Brown and the Training Branch countered with a meta-negotiation strategy of their own, sponsoring an impact evaluation, hoping the findings would give them more influence in arguments for keeping the course basically the way it was.

Negotiating About Audience

This section shows that the policy implementation frame largely shaped the audience but that some state and local stakeholders also had some ability to influence the audience in accord with their interests. It then describes how a manager who wanted to challenge this frame obtained some success.

*How the frames shaped the audience.* The primary intended audience was the public health nurses who regularly gave immunizations. This audience was a product of the process that had established the USHA as the leader in public health research and policy development, as well as its historic partnership in policy implementation with state and local public agencies. The USHA had historically implemented many of its programs, such as cancer prevention, through partnerships with state and local public health departments. The USHA frequently funded these agencies and trained them to ensure research-based practice. Since the early 1990s, the FIP had contracted with state immunization programs to distribute vaccines, hire extra field staff, and train the state’s public health workforce. The state programs had been urgently calling on the FIP for training courses, so that almost all of those courses were directed toward public sector personnel. Thus, Brown and the other Training Branch educators had identified training needs within the public sector and
designed the course to meet public sector needs. As seen above, these organizational relationships and precedents had created a frame in which the course was initially planned: policy implementation. Having been planned by a federal agency dedicated to implementing its policies through collaboration with state and local governments, the course had to serve the interests of all of these levels of government. Having this primary initial audience served the interest in policy implementation held in consensus by all levels of government.

Still, state and local authorities had some power to shape the audience. Usually, the land courses were held when the FIP accepted a state’s invitation to come. The FIP allowed states to determine land course sites. For example, one state administrator invited the FIP training team to her state for 2 weeks each year to deliver land courses and chose the site and marketing approach to get the desired personnel trained. In so doing, she was representing her strong interest in improving staff knowledge and behavior. “I’m astounded, every single time I go out and do something, [with] the lack of knowledge,” she said. “We have all these [immunization schedule] changes coming up . . . and every year we continue to put into the system people who don’t know much.”

In sponsoring training, state program leaders were also representing their interests in improving their credibility, resources, and influence within and beyond their departments. One state administrator said that these by-products of having the FIP training team come to their state were even more important than the course’s direct effects on participants. Those interests were related closely to their ultimate interests in improving community-wide immunization coverage rates and preventing disease. In addition to sponsoring the courses, states represented their interests for the audience by promoting the course. This was because an important organizational responsibility of the course coordinator, as a public employee, was to train public health staff. In promoting the course to public sector providers, course coordinators thus represented the interests of public sector providers in receiving training and the interests of FIP leaders who wanted the public sector to be trained. They also represented their primary interest in training their own staff, for which they were held accountable.

**Renegotiation about course audience.** After the course was under way, a challenge to the intended audience emerged. Training Branch Chief Carolyn James, who took her job after the course was up and running, held a strong interest in making sure Training Branch services equitably served racial minority communities. James acknowledged that a substantial portion of branch activities should train the large public sector audience, but she believed some portion could be targeted at specific minority populations. She thought the course might be too general to benefit minority communities. If partners serving such communities were asked for their opinions, they would likely say,
It may be a good program, but does it serve our needs? We need this in terms of technical assistance. We have this (to offer). We think that we also should be a part of this training network, and the USHA should recognize us.

James, therefore, advocated that the training staff should develop targeted courses and assistance. James said that the Association of Black Churches, for example, received FIP Outreach Branch money and might need help in reaching church-based Head Start centers. Likewise, Hispanic groups might need “culturally competent and linguistically specific training to help in human service organizations and their representatives in their network.” She contended, “We ought to take a look at experimenting with the idea of traditional partners. We have to recognize they have needs in terms of training that are different.” In one sense, this concern was not directly about the VPD course, because James and the others approved of its general role. Rather, this was a concern about the dominance of that general training model and the absence of culturally specific training. Around the same time, an initiative was launched throughout the FIP to increase services to minority populations and to target urban areas called “pockets of need” that had multiple risk factors for having low immunization rates.

Brown, Bankston, and other Training Branch staff had not explicitly represented this specific interest. One reason was that many states had successfully used the course to reach professionals serving Hispanic and African American populations. Then, too, the trainers were accustomed to training professionals rather than lay people, time was limited, and considerable health services research had shown that changing provider behavior would do more to raise immunization coverage rates than would educating parents.

James’s power to influence the courses after joining the branch was limited somewhat by the fact that she had joined the branch after the courses had been developed. The dominant flagship course was steaming strongly ahead. It had developed appreciative audiences and demand from the states, and it had increased Training Branch funding. This may have produced some conflict for James. Her interest in strengthening the Training Branch would have been met by continuing the general courses, but these courses did not further her interest in developing courses for special populations. In addition, James, as a nurse, may not have found it easy to influence the broader efforts led by Brown, the physician, even though she was formally his supervisor. When the FIP-wide initiative to reach “pockets of need” was launched, James found support for reaching these areas among the rest of the branch staff, and the branch began planning to put land courses in targeted cities. In addition, the branch soon made plans to increase services to Spanish-speaking populations, including hiring staff to translate materials into Spanish and to develop new initiatives. Like Burrell, James had come in after the course was up and running and had to change the basic power relationships around the program. That is, she had to find a way to influence Brown and others involved in course site selection, to successfully
argue for substantive change in the course’s audience. Supported by the wider organizational mandate to reach needy cities, she simultaneously engaged in meta-negotiations and substantive negotiations mostly, it appeared, by repeatedly advocating for changes and suggesting approaches to making them.

**DISCUSSION**

The results show that the course was a product of historical processes and organizational relationships that created a strong conceptual frame into which the course had to fit: policy implementation. That frame strongly shaped the course content and audience. Within that frame, however, there was some “wiggle room” for substantive negotiations about specifics. With recognized expertise and medical credentials, Brown successfully gained the power to plan the specific content of the course and put his stamp on the content, meeting the needs of the audience in the process. Burrell, with similar credentials, influenced the specific content to some degree but still within the policy frame. Meanwhile, the audience was also strongly framed, but state personnel could influence it to some degree. James’s efforts to change the audience had some success as well, although because she lacked a medical degree, her meta-negotiations were not as easily pursued. The course emerged, then, from a social process of negotiation of personal, organizational, and societal interests within relations of power and from negotiations about those relations of power.

These findings are in broad alignment with the growing stream of adult education program-planning literature that explains how programs are created and re-created over time by negotiations (Archie-Booker, Cervero, & Langone, 1999; Cervero & Wilson, 1994, 1996, 1998; Elgstrom & Riis, 1992; Mills et al., 1995; Rees et al., 1997; Sessions & Cervero, 1999). Study findings also supported and added nuances to some of the recent findings in that stream. More specifically, the study (a) showed how social and organizational processes over time, rather than specific course-related meta-negotiations, had developed strong material and conceptual frames surrounding the course; (b) reinforced the utility of the distinction between meta-negotiation and substantive negotiation; (c) showed how these types of negotiation affected each other over several years in an ongoing program; and (d) demonstrated an important distinction between meta-negotiations about power relations and meta-negotiations about conceptual and material frame factors.

One difference between this case and Elgstrom and Riis (1992) and Cervero and Wilson (1998) was that the frames were established not by course-related meta-negotiations but rather by historic processes and organizational relationships. Because the wider society and interagency relationships had developed in ways that supported FIP policy implementation, there was virtually universal consensus among stakeholders that the conceptual frame was appropriate. Nurses in clinics, state program managers, and everyone in between held that implementing USHA policy was simultaneously in their own interest (if they wanted to conceive of themselves as knowledgeable providers), their organization’s interest (because FIP...
policy was almost always their organization’s policy), and the public interest (because FIP policy was the best synthesis of the available scientific evidence). It would be hard to imagine an organization more powerful than this one, which had the capacity to define and implement policy in a national system in which virtually every other part was committed to implementing the policies. Even so, the study saw that USHA and state and local programs were interested in improving USHA’s credibility, to reinforce and strengthen this power.

Because there was relatively little conflict about the major purposes, content, and audience for the course, the meta-negotiations that occurred were about power relationships rather than about conceptual frame factors. The meta-negotiations undertaken by Brown were primarily about “taking over” so that he could engage in substantive negotiations about content. Those undertaken by Burrell and James were in the interest of influencing the content and the audience. Elgstrom and Riis (1992) also describe a case in which the presence of consensual ideas minimized overt conflict and led to “integrative bargaining . . . linked to positive, problem-solving attitudes, stressing joint gains, common interests, and non-confrontational techniques” (p. 102). In this FIP case, although the conflicts described above may have generated some spirited discussions, they were not about the policy implementation frame; instead, struggles involved details of content and extension of the benefits of policy implementation to other stakeholders. There were no major political battles about restructuring basic goals. This was also as would be predicted by the organizational behavior literature. As Frost and Egri (1991) point out,

When a proposed innovation [such as the course] is congruent with the organizational and societal deep structure, political activity remains primary on the surface, is benign or at a low level. Consequently, the probability of the acceptance and diffusion of such an innovation is enhanced with the support of the deep structure. (p. 259)

The study also pointed out that the relative power of stakeholders trying to bring new interests to the table influenced the relative amount of change they could bring about in the courses. It was relatively easy for Burrell, a medical epidemiologist who had considerable sway over the training budget, to influence the course, but more difficult for James, a nurse, to gain the same hearing, although both had some influence.

Although previous adult education planning research has shown how negotiations develop one-time courses, none have followed a particular course from its initial development through several years of renegotiation. Following Elgstrom and Riis (1992), this study has added that analysis. It has shown that interests, power relations, and programs are not static but continually renegotiated. It has shown that not only do power relationships and frames deeply shape courses and substantive negotiations, but that those substantive negotiations create courses that do not fully meet the interests of some stakeholders. Those stakeholders will then mount new negotiations to change the power relations and the courses.
More generally still, this research and theoretical framework highlights how adult educational planners are constrained in their actions by power relationships rooted in complex historical and organizational processes, as well as by the material and conceptual frames in which they find themselves (Fine, 1991). Because practice is so manifestly shaped by these dynamics, it is worthwhile to try to “name” them, to reflect on their significance, and to build theories of practice that consider them. Practitioners need not only technical skill and knowledge, but also theories of practice that help them identify and deal constructively and reflectively with the most important tasks and constraints that they face within their contexts from day to day. For example, further research could describe in more depth the negotiation strategies that planners employ to deal with different types of power relationships and frames they encounter. Then, too, by highlighting how the interests of various parties are differently satisfied, the framework facilitates reflection on the ethical dimensions of practice. We agree with Forester (1993),

Not only must an adequate account of planning practice be empirically fitting [with what planners actually do in their daily work], it must also be practically appropriate to the settings in which planners work and ethically illuminating, helping planners and citizens understand and assess the ethical and political consequences of various possibilities of action, policy, or intervention. (p. 15)

It is our hope that the current article contributes to building theory that helps planners better understand their task and more wisely serve the many stakeholders affected by their work.

REFERENCES


