



2 Policy success for whom? A framework for analysis

3 Allan McConnell¹ · Liam Grealy² · Tess Lea²

4 Accepted: 11 September 2020

5 © Springer Science+Business Media, LLC, part of Springer Nature 2020

6 Abstract

7 This article develops a heuristic framework to help analysts navigate an important but
8 under-researched issue: 'policy success for whom?' It identifies different forms of policy
9 success across the policy making, program, political and temporal realms, to assess how a
10 specific policy can differentially benefit a variety of stakeholders, including governments,
11 lobbyists, not-for-profits, community groups, and individuals. The article identifies a three-
12 step process to aid researchers in examining any policy initiative in order to understand the
13 forms and extent of success experienced by any actor/stakeholder. Central to these steps
14 is the examination of plausible assessments and counter assessments to help interrogate
15 issues of 'success for whom.' The article demonstrates a practical application of the frame-
16 work to a case study focused on the Fixing Houses for Better Health (FHBH) program in
17 Australia—a time-limited Commonwealth government-funded program aimed at improv-
18 ing Indigenous health outcomes by fixing housing.

19 **Keywords** Policy success · Policy evaluation · Power relations · Australia · Indigenous
20 housing

21 Introduction

22 The issue of whether a policy is "successful" has been the subject of particular debate over
23 the past two decades (Baggott 2012; Bovens et al. 2001; Marsh and McConnell 2010;
24 McConnell 2010, 2017a; Newman 2014). Recent work on the topic reminds us that govern-
25 ments can frequently succeed and so provides a counterweight to research which focuses
26 predominantly on failure, fiascos and policy disasters (Compton and 't Hart 2019; Luetjens
27 et al. 2019). This paper is sympathetic to such approaches and seeks to build on them, but it

A1 Liam Grealy
A2 liam.grealy@sydney.edu.au

A3 Allan McConnell
A4 allan.mcconnell@sydney.edu.au

A5 Tess Lea
A6 tess.lea@sydney.edu.au

A7 ¹ Department of Government and International Relations, The University of Sydney, Sydney,
A8 Australia

A9 ² Department of Gender and Cultural Studies, The University of Sydney, Sydney, Australia

28 also offers some important nuance. It is not commonplace to directly address the idea that
29 a routine focus on formal policy success (based largely on stated government goals) can
30 mask the significantly different ‘success’ experiences of various stakeholders. Such issues
31 are an undercurrent in policy success research but are rarely upfront. Consideration of the
32 uneven distribution of success moves us beyond thinking of policy success in relation only
33 to government goals and toward a focus specifically on ‘policy success for whom?’

34 The goal of this paper, therefore, is to develop a basic framework—a heuristic—that
35 will allow researchers to approach the issue of ‘success for whom?’ and apply it to a par-
36 ticular policy. Its contribution constitutes what Ostrom (2007) refers to as a framework that
37 aids our understanding via the development of working assumptions, rather than a theory
38 for diagnosis, or a model for testing. It can help analysts assess the extent of a policy’s suc-
39 cess or otherwise from the perspective of a particular actor. Although beyond the scope of
40 this initial article, it can be used as the basis for assessing success for multiple actors in
41 relation to the same policy or for relevant case comparisons, such as the extent to which
42 different policies succeed (or not) for the same actor.

43 The paper begins by examining how the attention given to the issue of ‘success for
44 whom?’ in policy studies has been fragmented across different intellectual endeavors. It
45 then develops a three-step process to aid researchers in examining any policy initiative and
46 seeking to address the successes (or lack thereof) from the perspectives of any particular
47 ‘actor,’ such as a government, lobbyist, not-for-profit company, community group or social
48 class. Step 1 develops actor success criteria across the policy making process, program
49 and political aspects of policy. Doing so allows the success (and its extent) for a particular
50 actor to be mapped. Step 2 involves a broad examination and weighing-up of the multiple
51 outcomes in Step 1 in order to produce a plausible assessment of the extent of success for
52 a the particular actor under question. Step 3 is a ‘test’ of Step 2 and involves identifying
53 the credibility of potential counter assessments. The final section applies this approach to
54 a case study: The Fixing Houses for Better Health (FHBH) program, a Commonwealth-
55 funded Indigenous housing initiative in Australia, focused on fixing housing components
56 essential for health (Pholeros et al. 2000). The case study applies the three-step framework
57 to examine the nature and extent of success from the perspective of the founders of the
58 FHBH program (the not-for-profit company Healthabitat), rather than appraise the FHBH
59 program overall, or to generalize from a single case.

60 **Success for whom as an under-analyzed issue**

61 A central concern of policy studies, or policy sciences, is the distribution and effects of
62 power. This concern informs analyses of numerous phenomena, including the role of evi-
63 dence, appraisal of policy options, community consultation, coalitions of interest, deci-
64 sion-making venues, and choice of policy instruments (Cairney 2020). Lasswell (1936)
65 famously stated that politics is about ‘who gets what, when, how.’ The same attribution
66 may be applied to ‘policy.’ Yet many writers who address the distribution of benefits from
67 particular policies prioritize other analytical concerns, with commentary on ‘success for
68 whom?’ often lacking a conceptual framework for detailed assessment. Reflections on suc-
69 cess might be introduced as an adjunct to other specific issues of concern, such as adver-
70 sarial views of public health strategies in England (Baggott 2012), the mobilization of
71 competing ideologies in Australia to influence health policy reform (Kay and Boxall 2015)
72 or interpretations of the effects of public–private partnerships (Hodge and Greve 2017).

73 While such studies provide insightful analyses of differentiated social power and success,
 74 they do not provide a framework that can be scaled up to generate analyses of 'success for
 75 whom?' in diverse contexts.

76 Policy evaluation is a pertinent field to such issues. It addresses diverse models and
 77 methodologies that, with additional attention, can be broadened to capture differentiated
 78 experiences of success. Bovens et al. (2006) neatly capture two extremes in their distinc-
 79 tion between rationalist and interpretive traditions. The former assumes that the outputs
 80 and outcomes of policy can, by and large, be objectified and captured in the form of data
 81 and evidence. The role of the policy analyst in this tradition is to gather such evidence and
 82 evaluate it in a neutral, unbiased manner. If a policy program is more successful for some
 83 stakeholders than others, this can be determined in a rigorous, value-free way.

84 By contrast, the interpretivist or constructivist tradition approaches policy evaluation
 85 with differences in perspective in mind (Fischer 1995, 2003). The interpretivist tradition
 86 is certainly not devoid of 'facts' or data, but it is attuned to different interpretations of spe-
 87 cific policy outcomes and to the limitations of (and exclusions within) assessment practices
 88 and formal success measures. Wicked issues such as climate change, domestic violence,
 89 and intergenerational poverty exemplify the difficulty of determining any policy's success
 90 and the potential conflict of defining success itself. However, the interpretivist tradition
 91 often only indirectly addresses the issue of 'success for whom?' Perhaps the best precedent
 92 for our aim here is Balloch and Taylor's (2005) work, which emphasizes the social con-
 93 struction of evaluations, arguing that evaluations are neither 'blank slate' nor apolitical but
 94 instead reproduce power asymmetries.

95 The evaluation literature tends to focus specifically on programs, but recent literature
 96 on policy success and failure (Marsh and McConnell 2010; McConnell 2017a; Compton
 97 and 't Hart 2019; Luetjens et al. 2019) operates with broader definitions of policy and
 98 also includes issues of process, politics and time, or the sustainability of success over a
 99 defined period (points to which we will return). While useful in thinking about policy suc-
 100 cess and failure, this literature is typically government-centric in its assumptions about
 101 'policy,' eschewing more complex systems of structured interactions within and between
 102 public governance networks—including public–private partnerships and the subcontracting
 103 of 'public' services (Colebatch and Hoppe 2018). Such work also pays little attention
 104 to broader issues of 'success for whom' as a matter of social power and power imbalances
 105 within policy making. As we will see, understanding whose policies are successful for
 106 requires insights beyond narrow assessments of only one aspect of policy (programs) and
 107 one aspect of public governance (governments).

108 The issue of power is centrally important to issues of 'success for whom?' Power is cer-
 109 tainly central to several models of the policy process. For example, the Advocacy Coalition
 110 Framework (ACF) focuses on how policy systems are dominated by coalitions of inter-
 111 est that shape decision-making institutions, policies and their impacts (Sabatier and Jen-
 112 kins-Smith 1993; Sabatier and Weible 2014). By and large, according to the ACF, policy
 113 sub-systems (including who gets what) remain relatively stable over time. An alternative,
 114 albeit overlapping, approach is the Punctuated Equilibrium Framework (PEF) developed
 115 by Baumgartner and Jones (2009). In this model, policy systems are dominated by policy
 116 monopolies, including governments, whose dominant values shape policy images (condi-
 117 tioning how policies are understood and discussed), as well as the institutional venues of
 118 debate and decision. Compared to the ACF, the distribution of power in the PEF is more
 119 fluid, with long periods of policy stability punctuated by rapid changes. Rapid transforma-
 120 tion emerges through factors such as political realignments and infrastructural or environ-
 121 mental crises—such as the 2011 Fukushima disaster shifting Japan's reliance on nuclear

AQ1

122 power. Howlett (2009) adopts a third approach to issues of power by focusing on how
123 policy choices and instruments are nested in and reflect broader governing regimes and
124 ideologies (such as market governance). While none of these meta-perspectives on public
125 policy directly address the issue of success for whom, they all infer that policy and political
126 success for one group or interest is rooted in deeper distributions of social power.

127 Overall, the issue of ‘success for whom’ has received little direct attention in policy
128 studies. However, there is work to build on, in ways that accommodate differing methodo-
129 logical approaches, nuanced forms of policy evaluation and broader conceptions of power
130 within policy systems—including a link between policy instruments and broader govern-
131 ance trajectories.

132 **Success for whom? A primer for navigation**

133 A useful starting point for our approach is the separation of policy into its process, program
134 and political realms (Marsh and McConnell 2010; McConnell 2010, 2017a; Compton and
135 ’t Hart 2019; Luetjens et al. 2019). Governments manage all three aspects of policy. They
136 design and steer policy processes, and they design, ratify and implement programs. All the
137 while, they do politics, through concern for their reputations, agenda control and the pro-
138 motion of ideological trajectories. The process/program/political distinction helps us look
139 beyond a narrow understanding of government and conceive of different realms in which
140 various actors may be more or less successful. In the spirit of the incremental development
141 of the policy sciences more generally, recent work by Compton and ’t Hart (2019) and
142 Luetjens et al. (2019) adds a temporal dimension, as apt recognition that sustaining per-
143 formance across time is also a measure of success. Our framework, therefore, incorporates
144 outcomes over time as an important factor in assessing ‘success for whom’.

145 To aid researchers, we propose a three-step process for examining the extent of a poli-
146 ccy’s success for a particular actor and how such an examination might aid reflexivity. Each
147 step is detailed below but as an initial summary, the process involves:

148 *Step 1* Mapping an actor against ‘success for whom’ criteria across the policy making
149 process, program, political and temporal realms.

150 *Step 2* Producing a plausible ‘success for whom’ assessment, addressing issues of
151 imbalance, trade-offs, normalization and stability.

152 *Step 3* Testing the positionality of this assessment with the plausibility of a ‘success for
153 whom?’ counter-assessment.

154 **Step 1: A framework to map ‘success for whom’?**

155 Table 1 provides a series of common measures concerning the extent to which a policy has
156 been successful from the perspective of any actor. We should note that success for a par-AQ2
157 ticular actor can take two main forms. A policy can benefit an actor directly: for example,
158 a community group lobbying and succeeding in preventing a waste disposal facility being
159 built in its area. Or, a policy can benefit an actor indirectly, if the explicit policy goal is that
160 others benefit. For example, a trade union could succeed in campaigning for new work-
161 place regulations at construction sites, resulting in the installation of measures that mitigate
162 the risk of accidents for pedestrians, in addition to construction workers.

Table 1 A framework to map the extent of a policy's success from the perspective of any policy actor

Realm	Core issue	Success measures for any actor	Degree of actor success		
			High	Medium	Low
<i>Policy Making Process</i>	The ability of an individual, group, institution, network or community to shape and steer the direction of the policy development process	Degree of control over problem construction Degree of control over format of policy development Degree of control over final decision			
<i>Program</i>	The congruence between a program and the actor's goals or expectations	Degree of actor ability to shape legitimacy of policy development Degree to which program outputs match the aims of the actor			
<i>Politics</i>	The political benefits of the policy or program	Degree to which program outcomes match the aims of the actor Degree to which the policy enhances the actor's reputation Degree to which the policy enables the actor to control the short-term agenda on this issue			
<i>Time</i>	The sustainability of policy benefits	Degree to which the policy enables the actor to control the broader ideological agenda behind on this issue Degree to which the policy benefits (process, program, politics) for the actor are sustainable over time			

163 Actor success in the realm of the policy making process

164 The core issue here is the extent to which an actor shapes and steers the direction of policy
165 development. The capacity to steer and influence the policy making process is crucial to
166 success, because it constitutes the power to transform an issue from a generalized ‘social
167 problem’ to a specific legal or authoritative instrument (a program) to address that problem
168 (Hoppe 2010).

169 One measure of actor success in the policy formation process is the degree of control
170 over how a problem is constructed in the public arena. Myriad ideological, socioeconomic,
171 institutional and chance-based factors produce policy problems, but an authoritative fram-
172 ing of the policy process (as the recent turn to policy design indicates) involves narrowing
173 and prioritizing specific factors over others (Howlett and Mukherjee 2018). Hence, policy
174 problems are routinely defined as a problem of ‘X.’ For example, unemployment can be
175 framed as an issue of welfare disincentives to engage in paid work, and (in)action on a
176 public health issue framed as a problem of insufficient scientific evidence. Problem defi-
177 nition contains the seeds of a solution, to the extent that it steers the trajectory of policy
178 formation toward certain narratives and practical responses (Bacchi and Goodwin 2016).
179 For example, in the wake of global Black Lives Matters protests that followed the killing
180 of George Floyd by police in Minneapolis, success for activists would include persuad-
181 ing governments that Floyd’s death (and similar examples) did not simply concern issues
182 of inadequate policing protocols or policy accountability, but instead represented deeper
183 issues of institutional and societal racism.

184 Another measure of actor success is the degree of control over the format of policy
185 development. Policy development can vary in multiple ways, based on forums for dis-
186 cussion (such as legislatures, internal working groups and town hall meetings), tools for
187 facilitating dialogue (consultation papers, draft legislation and citizen juries), the number
188 of options under consideration and the degree of transparency. Some policy development
189 processes are legal requirements (such as environmental impact assessment in granting
190 mining exploration licenses), while others are inherited institutional processes, and others
191 still represent strategic choices by governments. Such actors are typically at the forefront
192 of exercising control of policy direction, although other actors can compete to control the
193 format of policy development. For example, the UK Parliament was successful in October
194 2019 when it did not approve the timetable for the government’s bill to withdraw the UK
195 from the EU; hence, the bill lapsed and ‘Brexit’ was delayed at least initially. Short-term
196 success for Remainers became long-term failure when, in December that year, a new gov-
197 ernment with a larger majority introduced a revised bill that was approved by Parliament.

198 A further measure of process success from the perspective of a particular actor is their
199 degree of control over the final policy decision. In plural systems with checks and balances,
200 the legislature, the judiciary and other government networks typically make final policy
201 decisions (enacted via means such as legislation, secondary regulations and policy state-
202 ments) but their activities are not immune from influence. As the culmination of the policy
203 development process, the holding of formal decision-making powers may mask the real-
204 ity of constrained action. Departures from ‘comprehensive rationality’ permeate virtually
205 every corner of policy studies, from bounded rationality and the advocacy coalition frame-
206 work to punctuated equilibrium, path dependency and complexity theory.

207 Finally, an additional measure of an actor’s success is the degree of control over whether
208 the process is deemed legitimate. Such legitimacy can stem from the fact that constitutional
209 or quasi-constitutional processes were followed, but it can also depend on the inclusion

210 of scientific expertise (Cairney 2016). Governments and public institutions do not always
211 have a monopoly in establishing a dominant legitimacy narrative, as Hong Kong Chief
212 Executive Carrie Lam experienced in 2019. For the Hong Kong government, banning
213 face masks and sanctioning police repression generated a decline in international support,
214 constituting a short-term success for the protest movement. This example also illustrates
215 how consideration of temporal matters (Compton and 't Hart 2019; Luetjens et al. 2019)
216 helps us avoid rushing to judgment, given Hong Kong's subsequent introduction of a strict
217 national security law in June 2020.

218 **Actor success in the realm of programs**

219 Does a program match an actor's goals or expectations? A classic way of dissecting a pro-
220 gram is to differentiate between outputs and outcomes. The former refers to the tangible
221 product of a policy initiative. Hence a medical association, for example, would be suc-
222 cessful if it lobbied for, and obtained, funding for new hospitals and increases in nurses'
223 salaries. Yet such quantitative measures do not necessarily indicate whether the impact,
224 efficacy or benefit of those outputs align with the desired goals of the actor. Hence a sec-
225 ond indicator is 'outcomes,' referring broadly to determinations about the value or effect
226 of outputs (for example, improving patient health and improving the lives of nursing staff).
227 Outcomes can be assessed in different ways, such as via benefit–cost analysis, public value
228 appraisals and before-after studies (Vedung 2017). For present purposes, the common
229 thread is that the evaluation of an actor's program success depends on both the benefits
230 flowing to that actor and others whose interests they represent.

231 **Actor success in the realm of politics**

232 Table 1 indicates three main ways in which policy actors can succeed politically. All policy
233 actors have an interest in their reputations, and reputations can be protected or enhanced
234 within the process and program realms. For example, a study by Werner (2015) of over
235 500 corporations in the US found that enhanced corporate reputation was instrumental in
236 allowing access to and influence in the policy process.

237 **Actor success over time**

238 Policy outcomes, for good or ill, and from any vantage point, can be temporary or epi-
239 sodic. Short-term success can slide into long-term failure, captured in an analysis by Urban
240 (2012) of many modern high-rise 'cities of hope' tower blocks of the 1960s becoming
241 symbols of disrepair through active neglect or 'de facto demolition' (Arrigotia 2014). The
242 opposite may be the case where long-term success emerges after a faltering or failed start,
243 such as the iconic Sydney Opera House which began its life dramatically over-budget and
244 featured in Peter Hall's work on 'great planning disasters' (Hall 1982). One of the key
245 signs of influence and/or reward for any actor or institution, therefore, is long-term returns
246 (Compton and 't Hart 2019; Luetjens et al. 2019). This may occur in the realms of pro-
247 cess—for example, irrigators continually benefiting from the framing of water rights as a
248 'market' issue, to the detriment of other environmental stakeholders. It also may occur in
249 the political sphere, where an actor manages to sustain its reputation as a credible agenda-
250 setter in a policy area over a long period of time. As an example of the latter, in 2008–2009,
251 Uruguay introduced extensive controls on cigarette packaging. A coalition of civil society

252 anti-tobacco groups was successful in preventing a subsequent attempt to reverse many of
253 the reforms (Crosbie et al. 2018).

254 Mapping actor success outcomes against all the foregoing measures requires recognizing
255 that success is not 'all or nothing.' Actor successes are by degree and by type (Compton
256 and 't Hart 2019). Taking our cue from the policy success literature, high actor success
257 may include an outright success, but realistically it also includes tolerable shortfalls that
258 are capable of being absorbed because the successes dominate. Medium actor success is
259 mixed, with successes and failures in fairly equal measure. Low actor success may include
260 small achievements but on balance the failings predominate. Categorizing actor success as
261 high, medium or low involves judgment, or 'art and craft,' as famously proposed by Wil-
262 davsky (1987). These categories may be used to code cases, with the caveat that seeking
263 inter-coder reliability for qualitative research is best considered as a means for reflection
264 and obtaining robust insights, rather than creating a (false) sense of scientific precision
265 (O'Connor and Joffe 2020).

266 **Step 2: Producing a plausible 'success for whom' assessment**

267 The next step after mapping actor success outcomes, as per Table 1, is to combine the
268 (often differing) outcomes into a plausible assessment of the extent and causes of an actor's
269 success.

270 What constitutes plausibility is not an exact science in the eclectic discipline of policy
271 sciences as it seeks to understand public policy underscored by different moral and world
272 views, and with incomplete knowledge (Wildavsky 1987). Understanding public policy
273 involves informed subjectivity, creativity and imagination, as does understanding 'plausi-
274 bility' (Dunn 2016). It is well understood that knowledge in the policy sciences proceeds
275 incrementally (de Leon 1988). Cairney (2013) contributes to this tradition in his argument **AQ3**
276 that we can best proceed via multiple insights, rather than searching for a universal, rigid
277 standard. Our approach here is consistent with Cairney, providing an initial framework
278 to guide and aid investigation, acting as a primer for further analysis rather than seeking
279 to close it off. We are conscious that any assessment may need to engage with the issue
280 of hidden policy agendas, particularly because there is always the possibility that driv-
281 ers of a particular policy can be more than the stated goals of policy makers. As McCo-
282 nnell (2017b) indicates formal and publically available motives may mask (at least in part)
283 deeper motives such as managing a difficult issue down or off the agenda and/or helping
284 to cultivate the impression that the policy is 'doing something' to tackle a social issue.
285 'Plausibility' also factors into McConnell's article on how to approach the tricky issue of
286 researching something that cannot easily be 'seen' (following in the tradition of research-
287 ing the second and third dimensions of power, as per Lukes Lukes 2005). While such mat-
288 ters would require extended analysis beyond this article, we should be aware that the issue
289 of 'success for whom' can involve engaging with the concept of hidden agendas and that
290 the plausibility of an actor's 'success' or otherwise can flow from objectives that are not in
291 the public domain.

292 How, therefore, do we practically construct a plausible assessment about the extent of
293 a policy's success for a particular actor? One of the challenges is that outcomes are fre-
294 quently variable and inconsistent. To aid researchers, as depicted in Fig. 1, we propose
295 three issues that can usefully be addressed *en route* to formulating an assessment of success
296 (or lack thereof) for any particular actor. The common thread is a consideration of relative
297 power in policy making. The three oppositions in Fig. 1 are not exhaustive of issues to be

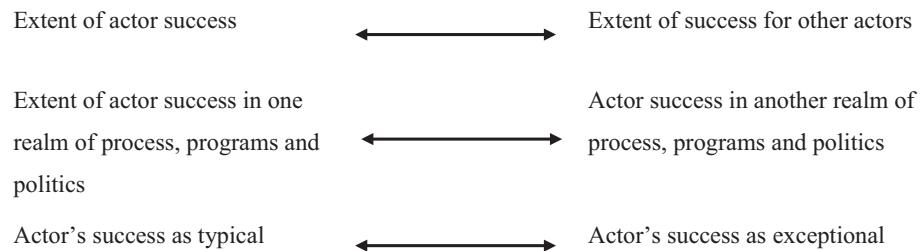


Fig. 1 Issues to be addressed in assessing policy success for a particular actor

298 considered, but they provide a guide for ensuring that an assessment addresses (1) issues of
 299 variable success across a range of actors; (2) trade-offs and tensions between actor success
 300 in different realms; and (3) whether actor success is typical or exceptional for that sector.
 301 Assessing such issues allows us to locate actor success in any particular policy initiative, as
 302 part of broader issues of systemic power and long-term policy trajectories.

303 Extent of actor success in relation to success for other actors

304 The key issue here is explaining the degree of success for one particular actor in relation to
 305 success for others. While not all policies affect a zero-sum game, the predominant pattern
 306 is one of variable benefit. Almost all policy problems have multiple potential interventions,
 307 and therefore, every program initiative involves a process of excluding some options and
 308 working toward a particular configuration of aims and distributions (Mahoney and Goertz
 309 2004). An environmental group may be successful in persuading a government agency to
 310 introduce an old forests conservation program, but the result would not be successful for
 311 logging industry advocates who campaigned against the reform. Importantly, a policy can
 312 impact an actor's success whether or not it campaigned on that issue. For instance, a teach-
 313 ers' union might be successful in influencing government to increase personal income tax
 314 to fund high schools, but the government might distribute that additional tax revenue to pri-
 315 vate education providers while freezing public funding levels. For shareholders of private
 316 education companies, this would represent a success. By contrast, the generalized result for
 317 citizens who supported public schools would be a higher marginal tax rate, and the irony of
 318 increased pressure to enter the private education market. Nuances and differentiated effects
 319 such as these should be addressed in any assessment of actor success.

320 Differing success levels for an actor across the three main realms of policy

321 The key issue here is how to explain actor success outcomes which differ across the pro-
 322 cess, program and political realms. An example is drought relief policy, where an agricul-
 323 tural industry lobby might be highly successful in shifting the agenda of the policy process
 324 and persuading government to adopt financial incentives for farmers to vacate drought-
 325 stricken land. Nonetheless, this actor may achieve low levels of program success (outputs
 326 and outcomes), with few farmers sufficiently incentivized (or politically convinced) to
 327 vacate. Alternatively, a government can be politically successful in its management of a
 328 wicked issue via a token or placebo policy (McConnell 2020), without shifting outputs or

329 outcomes. An assessment should be able to provide a plausible explanation for tensions
330 and trade-offs such as these.

331 **Actor success patterns: typical versus exceptional**

332 In gauging the issue of policy success for whom, it is also important to determine whether
333 an actor's success is typical or exceptional within that sector. Doing so illuminates issues
334 of power (or lack thereof) of a particular actor in terms of the broader political context
335 within which it operates. For example, a lack of program success for many, particularly
336 non-government actors, is routinely tolerated by governments. As Edelman (1977) noted in
337 his characterization of 'words that succeed and policies that fail,' the business of govern-
338 ing routinely invokes language that normalizes some degree of policy failure, such as 'we
339 have to consider the broader national interest' or 'we can't please everyone.' The banality
340 of such political language has an agenda-marginalizing effect, because it helps reproduce
341 a policy norm that 'losers' are inevitable in pursuing public interest goals. Similarly, Sch-
342 neider and Ingram (1997, 2005) identify the perpetuation of an underclass by the dominant
343 framing of certain groups as unentitled to citizenship rights and program benefits. Actor
344 success in the policy making process (particularly from the perspectives of government,
345 public organizations, and networks that have quasi-constitutional legitimacy in leading
346 such processes) involves problematizing issues in particular ways, effectively marginaliz-
347 ing the capacity of other actors to be successful (Bacchi and Goodwin 2016; Colebatch
348 and Hoppe 2018; Rose and Miller 1992). The corollary of success patterns is the degree to
349 which an actor's success is stable over time. An assessment should be capable of producing
350 a plausible explanation for short- and long-term patterns.

351 **Step 3: Testing the assessment with the plausibility of a 'success for whom?' 352 counter-assessment**

353 The essence of Step 3 is that it seeks to find a plausible critique of the assessment estab-
354 lished in Step 2, using the same analytical issues. For some, assessments and counter-
355 assessments may seem too ephemeral to be the subject of serious examination. Sabatier
356 (2000, 135), for example, is unsympathetic to the centrality of policy narratives for under-
357 standing policy processes, arguing that they are often not 'clear enough to be wrong.' Cer-
358 tainly, belief systems are central to explanations, and different individuals will not neces-
359 sarily agree on explanations (Jones et al. 2014). But the task in this article is not one of
360 determining truth or falsifiability, but of providing a framework to help describe and plau-
361 sibly explain actor success in relation to a particular policy initiative. Assessing claims and
362 counter claims is central to plausibility analysis (Dunn 2016). No new criteria or question-
363 ing is needed here. This process simply involves taking each of the issues outlined in Step
364 2 and interrogating whether an alternative perspective plausibly 'rings true' (Fulton 2012).

365 **Case study: success for Healthabitat in relation to the fixing houses 366 for better health program**

367 We now illustrate the application of our three-step framework to the Fixing Houses for Better
368 Health (FHBH) program. Our concern is not whether FHBH was successful when evalu-
369 ated against specific standards, such as formal goals, industry best practice or before-and

370 after impacts. Rather, our focus is the issue of ‘success for whom,’ from the perspective of
371 Healthabitat, the not-for-profit company that lay the foundations for FHBH. Healthabitat in
372 turn understand success in terms of impact on Indigenous communities facing continuing
373 poor infrastructure and amenity. This case is a complex and contentious one, but we have
374 chosen it deliberately to illustrate how our framework can be applied to a multifaceted pro-
375 gram and diverse cultural contexts. Our analysis builds on ethnographic research conducted
376 by AUTHORS with Healthabitat and supplemented by documentary analysis. Some histori-
377 cal context is first required to situate the question of ‘success for whom?’ as it pertains in this
378 case.

379 FHBH began in 1999 but its origins lie with the earlier ‘Housing for Health’ (HFH) ini-
380 tiative, which began in 1985, and has since been applied in almost 10,000 Indigenous houses
381 across Australia. HFH is a repair and maintenance methodology designed to restore amen-
382 ity to government-supplied Australian Indigenous housing, which is licensed by Healthabitat.
383 By testing, fixing and upgrading ‘health hardware’—including taps, showers, pipes, wiring,
384 power points, and so on—the HFH intervention increases the habitability of existing housing.
385 Based on a comprehensive analysis of epidemiological and infectious diseases data, the pro-
386 gram targets a list of nine ‘Healthy Living Practices’ (HLPs) and prioritizes items for fixing
387 based on their proximate health impacts (Pholeros et al. 1993). Together, the HLPs constitute
388 the practices which, if enabled, contribute most directly to maintaining residents’ health. In
389 any specific HFH intervention, trained local teams assess about 250 household items, fixing
390 what they can during the initial survey (Survey Fix One). Once immediate physical safety is
391 ensured, HFH fix-work continues according to the top-ranked HLPs, ‘washing people,’ ‘wash-
392 ing clothes and bedding,’ ‘removing waste water safely,’ and so on. A capital upgrade phase
393 follows licensed tradespeople employed and supervised for more complex electrical, plumbing
394 or structural work. Once capital upgrades are complete, a second survey is conducted, which
395 measures the improvement in functionality of health hardware (Survey Fix Two). The ‘survey-
396 and-fix’ dyad follows ophthalmologist Fred Hollows’ injunction that there should be ‘no sur-
397 vey without service.’

398 In 1999, a landmark agreement between Commonwealth, State and Territory Housing
399 Ministers established a new direction in Indigenous housing policy that specified the impor-
400 tance of safe and healthy housing, represented in the *National Framework for the Design,*
401 *Construction and Maintenance of Indigenous Housing* (1999). Healthabitat’s successful pol-
402 icy advocacy led Australia’s then peak Indigenous representative body, the Aboriginal and
403 Torres Strait Islander Commission (ATSIC), along with the Commonwealth department of
404 housing, to accept their proposal to fund the HFH program in 1000 houses across Australia
405 (Pholeros 2002a). Thus began the FHBH program, with administration transferred to the
406 Commonwealth Department of Family and Community Services in 2001. An initial roll-out
407 was followed by FHBH phases 2, 3 and 4, until the program stopped in 2011. FHBH is the
408 focus of our case study, considered through the lens of ‘success for whom’ and applying our
409 three-step approach. Table 2 provides initial mapping of Healthabitat’s success in relation to
410 FBFH, while our subsequent elaborations show success from one point of view can be failure
411 from another, and vice versa.

Table 2 Fixing houses for better Health (FHBH): mapping policy success for not-for-profit company Healthhabitat

Realm	Core issue	Success measures for any 'actor'	Degree of actor success		
			High	Medium	Low
<i>Policy making process</i>	The ability of Healthhabitat to shape and steer the direction of the policy development process	Healthhabitat's degree of control of problem construction	X		
		Healthhabitat's degree of control over format of policy development		X	
		Healthhabitat's degree of control over final decision			X
<i>Program</i>	Congruence between the program and Healthhabitat's goals or expectations	Healthhabitat's ability to shape legitimacy of policy development	X		
		Degree to which program outputs match Healthhabitat's aims	X		
		Degree to which program outcomes match Healthhabitat's aims	X		
<i>Politics</i>	The political benefits of the policy or program for Healthhabitat	Degree to which the policy enhances Healthhabitat's reputation	X		
		Degree to which the policy enables Healthhabitat to control the short-term agenda on this issue	X		
		Degree to which the policy enables Healthhabitat to control the long-term agenda on this issue		X	
<i>Time</i>	The sustainability of policy benefits	Degree to which the policy benefits (process, program, politics) for the actor are sustainable over time		X	

412 Step 1: Mapping the extent of success for Healthabitat

413 Policy making process

414 The ability to shape and steer the direction of the policy development process is an
 415 important indicator of success, and Healthabitat was highly successful in problem con-
 416 struction. The key basis of Commonwealth support for FHBH was the government's
 417 acceptance of the relationship between substandard housing and poor Indigenous health
 418 outcomes. As a result of tagging surveys to fix work throughout the 1990s, Healthabitat
 419 had assembled a database on housing hardware faults in Australia, thus establishing the
 420 leading causes of house decay (Lea et al. 2018). Contrary to dominant popular (and
 421 political) perceptions, these data demonstrate that dilapidation in Indigenous housing is
 422 seldom caused by tenants. Houses need fixing because of 'poor initial construction' (19
 423 percent), 'lack of routine maintenance' (73 percent) and 'damage, vandalism, misuse
 424 or overuse by tenants' (8 percent) (Torzillo et al. 2008). The uptake of this policy was
 425 testament to wider recognition of what Healthabitat had demonstrated through the HFH
 426 program.

427 By contrast, Healthabitat had a medium level of influence over the process by which the
 428 Commonwealth developed its decision to support and fund FHBH. Through its projects
 429 and its advocacy, Healthabitat gained a place on the national policy stage, submitting the
 430 original proposal to ATSIC. By virtue of its status as a not-for-profit company external
 431 to government, Healthabitat's success in influencing the final decision to support FHBH
 432 was relatively limited. This decision was influenced by Healthabitat's recommendations,
 433 but was essentially a top-down one, dependent on agreements between the Commonwealth,
 434 States, and Territories, and also between ATSIC and the Commonwealth Department of
 435 Housing. The low impact over the final policy decision was replicated years later at the
 436 program's conclusion, and the failure to integrate the HFH approach into all Common-
 437 wealth-funded housing provision, for either Indigenous or other public housing tenancies.
 438 While many aspects of the policy development process were beyond Healthabitat's con-
 439 trol, the diverse professional expertise within the organization's network, and its history of
 440 working with Indigenous communities, meant it was highly successful in legitimating the
 441 Commonwealth's funding of FHBH as a particular, time-limited, policy intervention.

442 Program

443 The dual benchmarks of output and outcomes were highly successful from Healthabi-
 444 tnat's perspective. Across the initial phase of FHBH, 969 houses in 29 communities were

Table 3 Fixing houses for better health outputs

FHBH phase	Houses involved	Communi- ties involved	Cost (AUD) (million)
FHBH1 1999–2000	969	29	3.5
FHBH2 2001–2003	434	11	9
FHBH3 2003–2004	446	12	3
FHBH4 2004–2005	545	19	3

Statistics drawn from McPeake and Pholeros (2006)

445 surveyed and fixed for a cost of \$3.5 million, and Table 3 summarizes subsequent out-
446 puts. With projects often taking place in remote and very remote Indigenous communi-
447 ties, this is an especially significant program delivery achievement.

448 Two years into FHBH, a preliminary assessment of 792 houses subject to HFH projects
449 showed significant increases in function according to Healthabitat's criteria: for 'Safety:
450 Safe electrical system,' an increase from 13 to 64 percent of houses; for 'Washing people:
451 Shower,' from 33 to 74 percent; and for 'Removing waste safely: WC, from 52 to 78 per-
452 cent (Pholeros 2002a, 36). These results were achieved for approximately \$3000 per house.
453 Across the projects, over 400 Indigenous people were employed on the survey-fix teams
454 and trained in basic maintenance (McPeake et al. 2006).

455 Regarding outcomes, Healthabitat was also highly successful for the Indigenous com-
456 munities involved. An evaluation of Housing for Health projects delivered by NSW Health
457 (2010) found that the program lowered hospital separations for infectious diseases for
458 residents in houses where the projects were delivered by 40 percent, as compared to the
459 larger rural NSW Aboriginal population. Data for housing hardware failures subsequently
460 informed industry design groups and organizations for future construction, in such issues
461 as the selection of hot water system and tap performance (Pholeros 2002b, 36). Such con-
462 struction and maintenance lessons are represented in Healthabitat's *National Indigenous*
463 *Housing Guide*, the premier guide for Indigenous housing, funded by the Commonwealth
464 Department of Housing and endorsed by all states and territories in 1999. Broadly, evalua-
465 tions of FHBH established that the program improved health hardware, reduced child-
466 hood infections, created local Indigenous employment and was economical relative to other
467 state-run housing and population health programs (SGS 2006; ANAO 2011).

468 Politics

469 Healthabitat's success was less evident in this realm. The organization's reputation within
470 Indigenous communities, among housing providers and among some policy makers was
471 already strong, based on the well-regarded and widely applied HFH approach. The agree-
472 ment with government allowed for significant scaling up in program delivery and an associ-
473 ated positive impact on reputation. The conclusion of FHBH did not damage Healthabitat's
474 reputation, but it ended the benefits that accrue from partnering in the delivery of a large-
475 scale nationwide program, including memorability among high turnover policy personnel.

476 Regarding the measure of exercising control over the short-term policy agenda,
477 Healthabitat achieved medium success. The innovative approach to population health cap-
478 tured the interest of the Commonwealth government, and the need to ensure functioning
479 hardware within existing housing, rather than only relying on new construction, was a les-
480 son that was often recited during the years of FHBH (Pholeros et al. 2013). The symbolic
481 uptake of Healthabitat's terminology was evident throughout the policies of various Aus-
482 tralian governments, but it was less clear that Healthabitat's insistence on 'no survey with-
483 out service' was also observed, let alone the rigor of the HFH methodology.

484 Time

485 Healthabitat's participation in the program was terminated in 2011. The initiative was
486 replaced by unproven approaches, subject to limited auditing, overseen by state and ter-
487 ritory governments using incommensurate reporting criteria. This ad hoc reform signaled
488 that Healthabitat's success was partial and temporary. Indeed, in the years following

489 FHBH, the agenda did not shift as far as Healthabitat had hoped. The pivot in Commonwealth
490 government policy toward devolving responsibility for funding the supply and
491 maintenance of assets in Indigenous communities to states and territories indicated that
492 over the longer term, Healthabitat had not been successful in securing an effective national
493 approach to planned (rather than reactive) repair and maintenance of health hardware
494 within Indigenous housing. That said, the Housing for Health methodology has continued
495 to be licensed to NSW Health for the maintenance of Indigenous housing in that state, and
496 the Northern Territory has recently also pursued 'pilot' Housing for Health projects. While
497 Healthabitat's involvement in FHBH concluded, these instances indicate the waxing and
498 waning of approaches to Indigenous housing over time and across jurisdictions and thus
499 shifting assessment's of the actor's 'success.'

500 Overall, therefore, as per the initial mapping in Table 2, FHBH provided mixed results
501 from Healthabitat's perspective. With its decades of widely recognized experience in establishing
502 and enacting a methodology to intervene in housing hardware dysfunction, it catalyzed
503 policy development and a program that delivered significant outputs.

504 **Step 2: Producing a plausible 'success for whom' assessment for Healthabitat**

505 Table 2 demonstrates that Healthabitat's success in relation to FHBH was not uniform
506 across the three interconnected measures outlined in the previous section. Healthabitat was
507 particularly successful in getting housing 'health hardware' on the Commonwealth agenda
508 and improving health hardware function in communities where FHBH was delivered. By
509 contrast, decision making regarding funding for the initiative and its ongoing support was
510 largely top-down. Healthabitat had limited control over the policy making process, and
511 even less political control over the long-term housing agenda. An explanation partly rests
512 with our earlier contention that success for one actor can come at the expense of another.
513 It is plausible to suggest that FHBH was expedient and politically successful for the Commonwealth
514 government. The government gained reputational advantage through its support
515 of an established, 'ground up' initiative and achieved an agenda management success by
516 signaling that a wicked problem was being addressed by a proven method. The mixed success
517 for Healthabitat was dependent, in part, on the Commonwealth government maintaining
518 a tight grip on policy development and funding on this issue. Indeed, the conclusion of
519 FHBH upheld the legitimacy of intermittent government attention.

520 The second and related aspect of an assessment relates to achieving success in one
521 aspect of policy (process, program, politics) but not others. Healthabitat's greatest achievement
522 was in program terms, including significant outputs and outcomes. However, it was
523 unable to reorient the balance of power in Australian Indigenous social policy, including
524 short-termism in government funded contracts, nor to punctuate the long-term agenda on
525 Indigenous housing toward funding sustained planned repairs and maintenance. To some
526 extent, FHBH's success depended on its circumscription from competing historical and
527 ad hoc approaches to Indigenous and other public housing policies, meaning it was not a
528 politically risky venture for the Commonwealth government.

529 The final aspect of developing a policy success assessment involves explaining whether
530 Healthabitat's experience is a typical or exceptional phenomena. We suggest the mixed
531 success of FHBH is typical of Indigenous housing policies. Its development and implementation
532 involved some hard fought on-the-ground program successes, for Indigenous
533 communities and their advocates, in a sector where the Commonwealth does just enough to
534 reap the reputational benefits of 'doing something,' but not enough to effect deep structural

535 change (Lea 2020). FHBH epitomized the durability of government as a policy-setting
536 agent, played to public tolerance of poor Indigenous living conditions, and did little to
537 disrupt a widespread 'back room' view that tenants were the cause of damage (Lea and
538 Pholeros 2010). It is a paradox of Indigenous housing that amid an abundance of data on
539 infrastructural breakdown and its causes, evidence-based policy is wanting.

540 Healthabitat's mixed degrees and forms of success through FHBH reflect entrenched
541 long-term asymmetries of power between governments and Indigenous Australians and
542 organizations that work on their behalf. To be clear, Healthabitat's decade long involve-
543 ment in FHBH significantly exceeds the typical life of most novel approaches that claim
544 to 'solve' Indigenous housing provision through new partnerships or designs, but quickly
545 disappear. Surveying and fixing houses across four phases of FHBH also made a significant
546 impact on existing housing stock for limited economic investment. Nonetheless, Healthabi-
547 tnat's blunted aspirations for long-term policy change toward health-focused, cyclically
548 funded repair and maintenance programs for Indigenous housing signal the difficulty of
549 shifting orientations. This is a policy landscape replete with multiple competing interests,
550 funding mechanisms that encourage short-term and unproven approaches, and an overall
551 public acceptance of ongoing poor outcomes for Indigenous people (Lea 2020).

552 **Step 3: Testing the Healthabitat 'success' assessment with the plausibility 553 of a 'success for whom?' counter-assessment**

554 As indicated above, Step 3 looks for a plausible critique of the findings in Step 2. A strong
555 counter-assessment would offer an alternative perspective on the nature and extent of an
556 actor's success in relation to a particular policy (doing so by addressing the same issues
557 that forged the Step 2 assessment).

558 The first issue in this regard concerns the relationship between the success of one actor
559 (in this case Healthabitat) as compared with another (such as the Commonwealth govern-
560 ment). A counter-assessment to the perspective that Healthabitat's 'mixed' success was a
561 product of the Commonwealth's success in keeping tight control over policy development
562 and funding would need to re-envise this trade-off as a 'win win.' Setting aside consid-
563 eration of the lasting effects of government policy orientations toward Indigenous housing
564 and the exclusion of Healthabitat from final decisions in the policy making process, FHBH
565 can be framed as such. This is the perspective taken by various FHBH evaluations (SGS
566 2006; ANAO 2011), which emphasize the considerable improvement in housing standards
567 for funding outlay, and even that greater funding per house would likely have achieved
568 even better results (SGS 2006, xii).

569 A second aspect of a plausible counter-assessment would address the issue of differing
570 success levels for an actor across the three main realms of policy (process, program and
571 politics). Arguably, it is unrealistic to imagine consistent successes across those catego-
572 ries for any actor, but especially for a small not-for-profit company like Healthabitat. This
573 argument would reject a supposed false equivalence made between all actors, suggesting
574 it is unreasonable to compare the success of the Commonwealth government with smaller
575 organizations. Thus some shortfalls and inequities in influence are a natural feature of pol-
576 icy advocacy, and indeed Healthabitat was 'successful enough.'

577 Finally, there is the issue of whether Healthabitat's success in relation to the FHBH pro-
578 gram was typical or exceptional in that sector. To counter the argument that the evidence-
579 based HFH methodology was not incorporated into mainstream housing programs at the
580 conclusion of FHBH, and thus Healthabitat's success is tempered, one might emphasize

581 that FHBH was in fact a unique and landmark program, intended as a showcase, not as a
582 substitution for state and territory government responsibilities. The return of Healthabitat's
583 HFH methodology to pilot projects under the current Northern Territory 'Our Commu-
584 nity. Our Future. Our Homes.' housing program signals ongoing regard for its rigorous
585 approach. In sum, therefore, a counter-assessment of the findings in Step 2 might suggest
586 that Healthabitat, via FHBH, experienced as much success as it reasonably could have
587 within the broader context of Commonwealth government policy for Indigenous housing.

588 Which of these assessments (as contained in Steps 2 and 3) is most plausible? To reiter-
589 ate, our three step 'success for whom?' framework is not intended to provide unimpeach-
590 ably objective answers. It is a means to an end, supporting researchers to develop analy-
591 ses that navigate complex, multifaceted policy phenomena, as we have done here. There is
592 some plausibility in both assessments and so the arbiter here is our normative assumptions
593 regarding the obligation and capacity of government to address complex, deep-rooted and
594 'wicked' problems (Head 2008), such as Indigenous housing and health outcomes. In this
595 context, we consider the assessment in Step 2 to offer the most plausible explanation. The
596 counter-assessment in Step 3 relies on dampening expectations of what we should expect
597 from liberal democratic governments, while inflating the 'wins' for policy actors (in this
598 case Healthhabitat) who achieved some modest levels of success within a broader context
599 of ongoing inequality. In a sense, these dual forces are typical of the long-term normali-
600 zation of Indigenous disadvantage and the policy presumption that First Nations people
601 should be thankful for any policy benefits that arise—however limited those may be.

602 Conclusion

603 This paper has examined one Indigenous housing program in Australia as an illustration of
604 how a broader 'success for whom' heuristic can add value to our understanding of public
605 policy outcomes more generally. Clearly, further research is needed, and in particular we
606 need to focus on three sets of issues. One is *capturing* actor 'success' in both individual
607 and multiple case studies, using as a starting point the three-step process as detailed in this
608 article. Doing so does not negate formal evaluations which are routinely oriented toward
609 traditional benchmarks focusing on stated policy goals. Rather, by explicitly factoring in
610 the issue of power toward a classic 'who gets what' (and indeed 'who thinks what') anal-
611 ysis, analytical value is added. There are opportunities for major comparative work, not
612 only cross-national and cross-sectoral, but also intra-sectoral, looking (to extend our own
613 case, for example) at Indigenous housing programs in Australia, New Zealand, Canada and
614 the USA. Second, we need to *explain* such differentials, and in particular address whether
615 comparative actor success is episodic and fleeting, or more systemic, reflecting deeper
616 social power asymmetries. As Lasswell (1971) argued 'The policy scientist is often able
617 to make a significant contribution to the assessment of government institutions by stress-
618 ing the degree of difference between the conventional language of the body politic and the
619 facts of power' (27). Third, and finally, we need to *evaluate* such differentials. Normatively,
620 power imbalances take us into the realm of human rights, justice and democracy. We can
621 expect some disagreement, given the plurality of approaches in political science, but we
622 also advance our understanding with a more systematic study of the benefits and trade-offs
623 of 'policy successes.' We argue that doing so helps us better understand issues such as the
624 continuation of policies which have to a large extent 'failed' target groups, as well as how
625 weak programs can in fact be politically successful for political and policy elites.

626 **Acknowledgements** The Housing for Health Incubator is partnered with Healthabitat and is funded by the
627 Henry Halloran Trust, the University of Sydney Faculty of Arts and Social Sciences, the University of Sydney
628 Medical School, the Marie Bashir Institute for Infectious Diseases and Biosecurity, and The Fred Hollows Foundation.
629

630 **Funding** This article is part of the research program of the Housing for Health Incubator, which is funded
631 by the Henry Halloran Trust, the University of Sydney Faculty of Arts and Social Sciences, the University
632 of Sydney Medical School, the Marie Bashir Institute for Infectious Diseases and Biosecurity, and The Fred
633 Hollows Foundation.

634 **Compliance with ethical standards**

635 **Conflict of interest** No financial interest or benefit has arisen from the direct applications of this research.
636 The Housing for Health Incubator is partnered with the not-for-profit company, Healthabitat, which licenses
637 the Housing for Health methodology.

638 **References**

639 Arrigoitia, M. F. (2014). UnMaking public housing towers. *The Journal of Architecture, Design and Domestic Space*, 11(2), 167–196.

640 Australian National Audit Office. (2011). *Indigenous housing initiatives: The fixing houses for better health program*. Audit Report No. 21. Canberra: Department of Families, Housing, Community Services and Indigenous Affairs, Australian Government.

641 Bacchi, C., & Goodwin, S. (2016). *Poststructural policy analysis: A guide to practice*. New York, NY: Palgrave Macmillan.

642 Baggott, R. (2012). Policy success and public health: The case of public health in England. *Journal of Social Policy*, 41(2), 391–408.

643 Balloch, S., & Taylor, D. (2005). What the politics of evaluation implies. In D. Taylor & S. Balloch (Eds.), *The politics of evaluation: Participation and policy implementation* (pp. 249–252). Bristol: Policy Press.

644 Baumgartner, F. R., & Jones, B. D. (2009). *Agendas and instability in American politics* (2nd ed.). Chicago, IL: Chicago University Press.

645 Bovens, M., 't Hart, P., & Kuipers, S. (2006). The politics of policy evaluation. In M. Moran, M. Rein, & R. E. Goodin (Eds.), *The Oxford handbook of public policy* (pp. 319–335). Oxford: Oxford University Press.

646 Bovens, M., 't Hart, P., & Peters, B. G. (Eds.). (2001). *Success and failure in public governance: A comparative analysis*. Cheltenham: Edward Elgar.

647 Cairney, P. (2013). Standing on the shoulders of giants: How do we combine the insights of multiple theories in public policy studies? *Policy Studies Journal*, 41(1), 1–21.

648 Cairney, P. (2016). *The politics of evidence-based policy making*. Basingstoke: Palgrave Macmillan.

649 Cairney, P. (2020). *Understanding public policy: Theories and issues* (2nd ed.). London: Macmillan International/Red Globe Press.

650 Colebatch, H. K., & Hoppe, R. (Eds.) (2018). Introduction to the handbook on policy, process and governing. In *Handbook on policy, process and governing* (pp. 1–13). Cheltenham: Edward Elgar.

651 Compton, M., & 't Hart, P. (Eds.) (2019). *Great policy successes: How governments get it right in a big way at least some of the time*. Oxford: Oxford University Press.

652 Crosbie, E., Sosa, P., & Glantz, S. A. (2018). Defending strong tobacco packaging and labelling regulations in Uruguay: Transnational tobacco control network versus Philip Morris. *Tobacco Control*, 27, 185–193.

653 Dunn, W. N. (2016). *Public policy analysis* (5th ed.). New York, NY: Routledge.

654 Edelman, M. (1977). *Political language: Words that succeed and policies that fail*. New York, NY: Academic Press.

655 Fischer, F. (1995). *Evaluating public policy*. Chicago, IL: Nelson-Hall.

656 Fischer, F. (2003). *Reframing public policy: Discursive politics and deliberative practices*. Oxford: Oxford University Press.

657 Fulton, C. L. (2012). Plausibility. In A. J. Mills, G. Durepos, & E. Wiebe (Eds.), *Encyclopaedia of case research* (pp. 683–684). London: Sage.

678 Hall, P. G. (1982). *Great planning disasters*. Berkeley, CA: University of California Press.

679 Head, B. W. (2008). Wicked problems in public policy. *Public Policy*, 3(2), 101–118.

680 Hodge, G. A., & Greve, C. (2017). On public private partnership performance: A contemporary review. *Public Works Management and Policy*, 22(1), 55–78.

681 Hoppe, R. (2010). *The governance of problems: Puzzling, powering and participation*. Bristol: Policy Press.

682 Howlett, M. (2009). Governance modes, policy regimes and operational plans: A multi-level nested model of policy instrument choice and policy design. *Policy Sciences*, 42(1), 72–89.

683 Howlett, M., & Mukherjee, I. (Eds.). (2018). *Routledge handbook of policy design*. New York, NY: Routledge.

684 Jones, M. D., Shanahan, E. A., & McBeth, M. K. (Eds.). (2014). *The science of stories: Applications of the narrative policy framework in public policy analysis*. New York, NY: Palgrave Macmillan.

685 Kay, A., & Boxall, A. (2015). Success and failure in public policy: Twin imposters or avenues for reform? Selected evidence from 40 years of health-care reform in Australia. *Australian Journal of Public Administration*, 74(1), 33–41.

686 Lasswell, H. D. (1936). *Politics: Who gets what, when, how*. New York, NY: Whittlesey House.

687 Lasswell, H. D. (1971). *A pre-view of policy sciences*. New York, NY: American Elsevier.

688 Lea, T. (2008). Housing for health in indigenous Australia: Driving change when research and policy are part of the problem. *Human Organization*, 67(1), 77–85.

689 Lea, T. (2020). *Wild policy: Indigeneity and the unruly logics of intervention*. Stanford: Stanford University Press.

690 Lea, T., Grealy, L., & Cornell, C. (2018). *Housing policy and infrastructural inequality in indigenous Australia and beyond*. Issues Paper. Sydney: Housing for Health Incubator. <https://www.hfhincubator.org/wp-content/uploads/2018/05/Incubator-Issues-Paper-May-2018-1.pdf>.

691 Luetjens, J., Mintrom, M., & 't Hart, P. (Eds.). (2019). *Successful public policy: Lessons from Australia and New Zealand*. Canberra: ANZSOG.

692 Lukes, S. (2005). *Power: A radical view* (2nd ed.). Basingstoke: Palgrave Macmillan.

693 Mahoney, J., & Goertz, G. (2004). The possibility principle: Choosing negative cases in comparative research. *American Political Science Review*, 98(4), 653–669.

694 Marsh, D., & McConnell, A. (2010). Towards a framework for establishing policy success. *Public Administration*, 88(2), 586–587.

695 McConnell, A. (2010). *Understanding policy success: Rethinking public policy*. Basingstoke: Palgrave Macmillan.

696 McConnell, A. (2017a). Policy success and failure. In B. G. Peters (Ed.), *Oxford research encyclopaedia of politics*. Oxford: Oxford University Press.

697 McConnell, A. (2017b). Hidden agendas: Shining a light on the dark side of public policy. *Journal of European Public Policy*, 28(12), 1739–1758.

698 McConnell, A. (2020). The use of placebo policies to escape from policy traps. *Journal of European Public Policy*, 27(7), 957–976.

699 McPeake, T., & Pholeros, P. (2006) Fixing Houses for Better Health in remote communities. *Australian Social Policy 2006*, 111–124. Canberra: Department of Families, Community Services and Indigenous Affairs.

700 National Framework for the Design, Construction and Maintenance of Indigenous Housing. (1999). Canberra: Department of Family and Community Services.

701 Newman, J. (2014). Measuring policy success: Case studies from Canada and Australia. *Australian Journal of Public Policy*, 73(2), 192–205.

702 NSW Health. (2010). *Closing the gap: 10 Years of housing for health in NSW: An evaluation of a healthy housing intervention*. Sydney: NSW Department of Health.

703 O'Connor, C., & Joffe, H. (2020). Intercoder reliability in qualitative research: debates and practical guidelines. *International Journal of Qualitative methods*, 19, 1–13.

704 Ostrom, E. (2007). Institutional rational choice: An assessment of the institutional analysis and development framework. In P. A. Sabatier (Ed.), *Theories of the policy process* (2nd ed., pp. 21–64). Boulder, CO: Westview Press.

705 Pholeros, P. (2002a). Fixing houses for better health. *Architecture Australia*. July/August, pp. 78–79.

706 Pholeros, P. (2002b). Housing for health and fixing houses for better health. *Environmental Health*, 2(4), 34–38.

707 Pholeros, P., Lea, T., Rainow, S., Sowerbutts, T., & Torzillo, P. (2013). Improving the state of health hardware in Australian Indigenous housing: Building more houses is not the only answer. *International Journal of Circumpolar Health*, 71(Supplement 1), 435–440.

708 Pholeros, P., Rainow, S., & Torzillo, P. (1993). *Housing for health: Towards a healthy living environment for aboriginal Australia*. Newport Beach: Healthabitat.

738 Pholeros, P., Torzillo, P., & Rainow, S. (2000). Housing for health: Principles and projects, South Australia,
739 Northern Territory and Queensland, 1985–1997. In P. Read (Ed.), *Settlement: A history of Australian
740 Indigenous housing* (pp. 199–208). Canberra: Aboriginal Studies Press.

741 Rose, N., & Miller, P. (1992). Political power beyond the state: Problematics of government. *The British
742 Journal of Sociology*, 43(2), 173–205.

743 Sabatier, P. A. (2000). Clear enough to be wrong. *Journal of European Public Policy*, 7(1), 135–140.

744 Sabatier, P. A., & Jenkins-Smith, H. (Eds.). (1993). *Policy change and learning: An advocacy coalition
745 approach*. Boulder, CO: Westview Press.

746 Sabatier, P. A., & Weible, C. M. (Eds.). (2014). *Theories of the policy process* (3rd ed.). Boulder, CO: West-
747 view Press.

748 Schneider, A. L., & Ingram, H. (1997). *Policy design for democracy*. Lawrence, KS: University Press of
749 Kansas.

750 SGS Economics and Planning. (2006). *Evaluation of fixing houses for better health projects 2, 3 and 4*.
751 Occasional Paper No. 14. Canberra, Department of Families, Community Services and Indigenous
752 Affairs, Australian Government.

753 Torzillo, P., Pholeros, P., Rainow, S., et al. (2008). The State of health hardware in Aboriginal Communities
754 in rural and remote Australia. *Australian and New Zealand Journal of Public Health*, 32(1), 7–11.

755 Urban, F. (2012). *Towers and slab: Histories of global mass housing*. Abingdon: Routledge.

756 Vedung, E. (2017). *Public policy and program evaluation*. Abingdon and New York: Routledge.

757 Werner, T. (2015). Gaining access by doing good: The effect of sociopolitical reputation on firm participa-
758 tion in public policy making. *Management Science*, 61(8), 1989–2011.

759 Wildavsky, A. (1987). *Speaking truth to power: The art and craft of policy analysis* (2nd ed.). New Brun-
760 swick, NJ: Transaction.

761 **Publisher's Note** Springer Nature remains neutral with regard to jurisdictional claims in published maps and
762 institutional affiliations.

763