
Expertise, truth, and urban policy mobilities: global circuits of knowledge in the development of Vancouver, Canada's 'four pillar' drug strategy

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Abstract. There is growing attention across the social sciences to the mobility of people, products, and knowledge. This entails attempts to extend and/or rework existing understandings of global interconnections and is reflected in ongoing work on policy transfer—the process by which policy models are learned from one setting and deployed in others. This paper uses a case study of the development of an innovative approach to drug policy in Vancouver, British Columbia to deepen our understanding of what I call 'urban policy mobilities.' It details the often apparently mundane practices through which Vancouver's 'four-pillar' drug strategy—which combines prevention, treatment, enforcement, and harm reduction—was learned from cities outside North America and is now increasingly taught elsewhere. In doing so it draws on a neo-Foucauldian governmentality approach to emphasize the role of expertise (specialized knowledge held by many actors, not just credentialed professionals) and the deployment of certain powerful truths in the development of the policy. The paper concludes by discussing the spatialities of urban policy mobilities and raising questions about the political and conceptual importance of also maintaining a focus on the causes and consequences of policy *immobilities*.

Introduction

In May of 2001, Vancouver, British Columbia adopted a 'four-pillar' drug policy that defines drug addiction as a medical, rather than as a criminal, issue and combines treatment, education, and enforcement with a fourth pillar: harm reduction. This entails efforts to reduce drug-related harm (including overdose deaths and the spread of blood-borne diseases), the use of public spaces for using drugs and discarding drug paraphernalia (eg syringes), high rates of theft, and the impact of high-risk drug use on health care costs. By adopting this comprehensive strategy, which is not dominated by enforcement and abstinence-based treatment agendas, the city stands closer to the Australian and some European approaches to the use of heroin, cocaine, and other drugs than to the prevailing legal paradigm in the rest of Canada or to the 'War on Drugs' approach in the United States. The four-pillar strategy is outlined in the city's document, *A Framework for Action*, written by the city's full-time Drug Policy Coordinator (MacPherson, 2001), and has been supported by health and law enforcement agencies and by higher levels of government. It seeks to improve drug users' health by stabilizing their lives while closing down open drug scenes in urban public spaces and freeing police resources to focus on other aspects of public order (British Columbia Ministry of Health, 2005; City of Vancouver, no date; Erickson et al, 1997; *International Journal of Drug Policy* 2006; Kübler and Wälti, 2001; Marlatt, 2002).

After the adoption of the new drug policy, 'Insite'—North America's first legally sanctioned, medically supervised injection facility for injection drug users—was opened in Vancouver's Downtown Eastside neighborhood in 2003. This facility is seen as a key element of the harm reduction pillar (Small, et al, 2006; Vancouver Coastal Health, no date; Wood et al, 2004; 2005). It is not a methadone clinic. Nor is it a free heroin distribution site, although a separate prescription heroin trial—the North American

Opiate Medication Initiative (NAOMI)—is ongoing in the city (Moreau, 2006; NAOMI, no date). Insite, which currently operates on a trial basis, is a facility where users can inject their own drugs in a setting with sterile equipment and emergency care in case of overdose. It is also a low-threshold entryway into a range of counseling and health services.

The four-pillar policy and the supervised injection facility have attracted a great deal of attention, both positive and negative. As a result, many of those who shaped the policy now find themselves acting as experts—defined broadly in terms of specialized knowledge, not narrowly in terms of formal credentials or institutional position—in a national and global context. They teach the lessons of their search for a “Vancouver solution” (Campbell, quoted in Greater Vancouver Television, 2000) to public health professionals, activists, politicians, police officers, and others interested in Vancouver as an exemplar of comprehensive drug policy. Yet, for a number of years, many of the same Vancouver-based actors were students, not teachers. They sought out international case studies and experts from whom to learn a new drug strategy. The adoption of the four-pillar approach was prefaced by vigorous political mobilization within the city and by negotiations between city authorities and provincial and federal agencies, whose cooperation was crucial. During this process, examples of and policy experts from European cities—including Swiss cities and Frankfurt, Germany—were mobilized in local politics to illustrate best practices and to urge the benefits of a new, ‘evidence-based,’ approach to drug policy.

Drug policy in Vancouver is one illustration of how cities are increasingly connected through and produced by complex relations of teaching, learning, and cooperation. These relations involve urban actors thinking and acting regionally, nationally, and, increasingly, globally. While cities compete, urban policy actors—from politicians to public and private policy professionals to representatives of a range of activist organizations—also cooperate, sharing ideas, expertise, policy models, and best practices through overarching state structures, national and international organizations, interpersonal contacts, and fact-finding visits. Yet, despite a general acceptance that cities are central parts of a ‘globalizing’ world, there are still many gaps in our understanding of how urban policy actors act beyond their own cities—we do not fully understand the range of practices and representations through which cities are constituted in a wider relational context.

The purpose of this paper is to use case-study evidence to deepen our understanding of how urban actors act globally in the context of policy transfer. It speaks to what I will call ‘urban policy mobilities’—the ways in which policy knowledge and policy models move from city to city (compare Peck, 2003; Sheller and Urry, 2006; Urry, 2000; Ward, 2006). Thus, it addresses three ongoing critiques of contemporary literatures. First, Stone’s (2004) point that the policy transfer literature has focused too narrowly on the activities of formal state actors is pertinent in this case where a range of actors and practices can be seen to have influenced the global teaching and learning of the ‘Vancouver solution’. Second, Larner emphasizes the paucity of detailed critical-geographical knowledge of *how* policy making works. She urges more awareness of “the *apparently mundane practices* through which neoliberal spaces, states and subjects are being constituted in particular forms” (2003, page 511, my emphasis). Third, this approach builds on and extends critiques of the narrow definition of urban ‘globalness’ in some ‘global cities’ literatures (McCann, 2002; 2004a; Rae, 2005; Robinson, 2002; N Smith, 2002). It is possible to use an analysis of ‘globalized’ urban policy, and drug policy specifically, to explore the numerous aspects of the globalization–urbanization nexus. Following Larner, among others, I will turn to the growing literature on governmentality, with its emphasis on new assemblages of expertise and mundane

practices of government, in order to understand urban policy both as produced by and as producing global relational geographies (Massey, 2005).

The paper begins with a discussion of contemporary theoretical approaches to the role of expertise and apparently mundane practices in contemporary government, focusing particularly on the relationship between expertise and truth in policy making and on the ways in which policies are made mobile. The paper then briefly sets Vancouver's urban policy making within global context and provides a brief and necessarily partial history of the development of the four-pillar policy. The following section discusses three elements of Vancouver's interaction with global circuits of policy knowledge that shaped the development of the new drug policy—local actors learning from elsewhere, the practices of actors who traveled in and out of the city carrying the four-pillar model, and the work of a series of mediating institutions in and through which these policy mobilities operate. The paper concludes by discussing the spatialities of urban policy mobilities and raises questions about the power relations involved in mobilizing certain policies, truths, and forms of expertise while reinforcing the immobilities of others.

Government and urban policy practice

How government gets done—through what rationalities, technologies, discourses, and practices—is a key question in governmentality literatures. For instance, Larner's approach involves the development of what she and Le Heron (2002a, page 415) term "reflexive post-structural political economies" (see also Larner, 2002; Larner and Le Heron, 2002b, 2004; Larner and Walters, 2004). This neo-Foucauldian approach stems from Foucault's lecture on governmentality (Foucault, 1991). Governmentality concerns "all the more or less explicit, purposive attempts to organize and reorganize institutional spaces, their routines, rituals and procedures, and the conduct of actors in specific ways" (Dean, 1999, page 32; see also Barry et al, 1996; Burchell et al, 1991; Rose and Miller, 1992). "[N]otions of governmentality support", as MacKinnon (2000, page 295, his emphasis) puts it, "a focus on the *how* of government, on the specific mechanisms, techniques and procedures which political authorities deploy to realize and enact their programmes."

Elements of a neo-Foucauldian perspective can inform the study of how urban policy actors are engaged in mobilizing policies by utilizing expertise, invoking authority and/or legitimacy, and conducting their daily activities. These interactions form the basis for programmatic interventions that seek to shape contemporary urbanism in particular ways:

"designs put forward by philosophers, political economists, physiocrats and philanthropists, government reports, committees of inquiry, White Papers, proposals and counterproposals by organizations of business, labour, finance, charities and professionals, ... seek to configure specific locales and relations in ways thought desirable" (Rose and Miller, 1992, page 181; see also Dean, 1999, pages 31–32; Raco and Imrie, 2000, page 2190).

These problematizations, designs, and proposals are frequently the product of urban policy expertise—specialized knowledge of a policy-related topic. For my purposes, I am concerned with expertise as it relates to the complex assemblage of people, concepts, models, initiatives, and techniques that define urban policy and in the way expertise plays a role in orienting the imaginations and practices of urban policy actors in certain directions, to certain scales, and to specific problematizations and programmatic responses (Raco and Imrie, 2000). Rose and Miller (1992, page 175) believe that

“government is intrinsically linked to the activities of expertise, whose role is not that of weaving an all-pervasive web of ‘social control’, but of enacting assorted attempts at the calculated administration of diverse aspects of conduct through countless, often competing local tactics of education, persuasion, inducement, management, incitement, motivation and encouragement.”

All these tactics of expertise are deployed regularly within, and in reference to, the institutions that govern contemporary cities.

Yet, in the context of urban policy making, questions remain. First, which practices and discourses frame the actions of urban actors as they seek to learn about policies from elsewhere and to shape urban policy in relation to global circuits of policy knowledge? Second, how do experts mobilize policies—and knowledge about policies—from city to city? Third, how are these policy mobilities mediated and facilitated by organizations and institutions operating at various scales? These three questions will structure the empirical discussion below. First, however, it is worth elaborating on the relationship between expertise and the definition of what counts as truth in urban policy and how this relationship frames urban policy mobilities.

Expertise, truth, and policy mobilities

The figure of the expert recurs throughout Rose’s (1999) book *Powers of Freedom*. He discusses how the welfare state’s enclosed, bureaucratized expertise has been opened up to scrutiny and has been reformed, via such movements as the ‘New Public Management’ (Barzelay, 2001; Box, 1999; Hood, 1991), into what Larner (2002, page 659) calls “post-welfarist” expertise—that which has grown in importance as the welfare state has been dismantled in favor of neoliberalization. The contemporary postwelfarist expert is not a state functionary but a knowledge worker operating, for example, as a private consultant or as a specialist, or a new public manager in a quasi-autonomous state agency defining truths about, providing information on, and implementing techniques that facilitate governmental programs. In this regard, two further points can be made about contemporary governmental programs: (1) they are tied up with a widely held understanding of certain forms of expertise as sources of legitimate and actionable truth that is, from a Foucauldian perspective, synonymous with power (Foucault, 1980); (2) the various vehicles, resources, and products of expertise—from reports to powerpoint presentations—are potentially and, in many cases, actually mobile. They have their own complex mobilities and powerful spatialities.

‘Experts of truth’

Truth, for Foucault (1980, page 132), is “the ensemble of rules according to which the true and false are separated and specific effects of power attached to the true.” Furthermore, he understands the “‘political economy’ of truth” to mean that

“‘Truth’ is centered on the form of scientific discourse and the institutions which produce it; it is subject to constant economic and political incitement (the demand for truth as much for economic production as for political power); it is the object, under diverse forms, of immense diffusion and consumption (circulating through apparatuses of education and information...); it is produced and transmitted under the control, dominant if not exclusive, of a few great political and economic apparatuses (university, army, writing, media); lastly, it is the issue of a whole political debate and social confrontation...” (Foucault, 1980, pages 131–132, my ellipses).

Rose, for his part, is interested in examining what counts as truth in modern government. He examines the conditions of possibility for and practices through which individual or collective authorities produce and circulate truths about policy.

“Government,” he argues, “has both fostered and depended upon the vocation of ‘*experts of truth*’ and the functioning of their concepts of normality and pathology, danger and risk, social order and social control, and the judgements and devices which such concepts have inhabited” (1999, page 30, my emphasis).

What counts as truth—about the best approach to illicit drug use, for instance—and who can speak that truth are questions of power.

The influence of contemporary experts of truth is evident to Larner in her study of the New Zealand call center industry. She identifies experts operating at the global level and their relationship to local economic practice, referring to them as a “new specialist elite” engaged in the “marketing of ‘hard facts’” (Larner, 2002, page 663). This expertise is tied to an array of related experts, including “conference organizers, people in marketing, public relations...” and so on (page 663). This type of expertise has, according to the governmentality perspective, come to characterize advanced liberal government, not because private sector experts have never before been involved in public policy—of course they have—but because state and nonstate actors are reworking their relationships in ways that are, among other things, reshaping urban policy and cities’ relationships to wider geographical scales. I would suggest that consultants, journalists, and activists, as well as politicians and government officials, are all experts of truth who create powerful narratives of cities’ relationships to each other and to their populations and who work to mobilize policies through these relational geographies.

Policy mobilities

In order to understand how the apparently mundane practices and “messy actualities” (Larner, 2000, page 14), of contemporary urban policy making shape policy actors’ interactions at wider scales, a discussion of the role of expertise and truth must be accompanied by an analysis of what practices, representations, and actors constitute urban policy as mobile (Peck, 2003; Sheller and Urry, 2006; Urry, 2000; Ward, 2006). This question necessitates an analysis which does not rely on the a priori definition of ‘local’ or ‘global’ actors but that emphasizes situated practices that shape and are shaped by “a relational geography focused on networks and flows” (Olds, 2001, page 6; Massey, 2005).

In the context of urban policy more specifically, there is growing attention to networks of policy transfer (Dolowitz and Marsh, 2000; Evans, 2004; Mossberger and Wolman, 2003; Peck and Theodore, 2001; Stone, 2004; Theodore and Peck, 2000) and to what Ward (2006, page 70) identifies as “strong diffusion channels and distribution networks, that exist to facilitate the transfer of policies of a particular type from one place to another.” For Peck (2003, page 229) “the methodological challenge” for this approach is:

“to develop adequate conceptualizations and robust empirical assessments of policies ‘in motion’, including descriptions of the circulatory systems that connect and interpenetrate ‘local’ policy regimes. This calls for an analytical shift of sorts, away from the traditional method of focusing on the internal characteristics of different regimes—*qua* taxonomically defined ‘systems’—and towards the transnational and translocal constitution of institutional relations, governmental hierarchies and policy networks.”

Analyses of “interlocal policy transfers” (Peck and Theodore, 2001, page 429) are ongoing and many point to the political and spatial contingencies of policy transfers

(Ward, 2006; Wolman and Page, 2000). Furthermore, they resonate with Peck's (2003, page 223) call for more empirical analysis that will "generate critical cases and counter-cases" to inform the ongoing mapping of the policy mobilities.

Larner and Le Heron's (2002a; 2002b; 2004) work complements this approach. For them the practices of experts constitute global spaces of emulation and competition; "new fields of competition made up of 'best practice' peers that other individuals and organizations seek to emulate" (Larner and Le Heron, 2004, page 215). Comparison and learning produce and bolster particular forms of representation and apparently mundane practices, such as fact-finding trips. They also create their own spatialities, marked by the circulation of knowledge through certain networks and sites, or "centers" (Peet, 2002, page 60), of persuasion and by the creation of specific spatial imaginaries—ways of seeing and acting in the world which "'stabilise' (become rationalities, metadiscourses, logics) as they are communicated in some way, discussed with others, and then instituted as the basis for action" (Larner and Le Heron, 2002b, page 760).

The products of expertise are crucial to the circulation of policy knowledge and the related production of global relational geographies. These products—speeches, reports, powerpoint presentations, documentary films, spreadsheets, models, rankings, maps, lists of best practices, and the like—travel in briefcases, are passed around at conferences and meetings, move from place to place on laptop hard drives or other electronic storage devices, are transferred electronically as email attachments and through downloading from websites, are purchased at bookstores, and are repeatedly the topic of discussion among a broad range of urban policy actors—from politicians, to policy professionals, to political activists and journalists. These mobilities facilitate the production of a particular form of relational knowledge in and through which policy actors understand themselves and their cities' policies to be tied up in wider circuits of knowledge—regional, national, and global networks of teaching and learning, emulation, and transfer. Using the case of drug policy in Vancouver, the following sections will draw upon the themes outlined above to analyze the *how* of urban policy mobilities. They will focus on the ways in which various experts, including drug users and allied activist groups, reach out beyond city limits to connect with wider circuits of policy knowledge and transfer ideas and policies to and from the city.

Vancouver's urban policy in context

Vancouver is a useful case study of how urban policy actors position themselves in global context. While the city is left off the map of many global cities analyses, Vancouver is characterized by a certain global profile. By making this point I am not interested in arguing for Vancouver's induction into an elite pantheon of 'global cities'. Instead, I would argue that all cities are global but that their relationships to global processes differ. The point is to elaborate on *how* cities are global, the internal and external impacts of their globalness, and the politics and 'messy actualities' through which their particular forms of globalness are constructed. In this regard, Vancouver has a global reputation for livability for certain sections of the population (*Vancouver Sun* 2004) and it successfully bid for the 2010 Winter Olympics—an event many expect to seal the city's 'world class' reputation (Berelowitz, 2005; Vancouver 2010 Bid Corporation, 2002) a quarter of a century after the Expo '86 world's fair began the process (Ley and Olds, 1988).

This global entrepreneurialism is paralleled by more tangible connections: Vancouver's landscape is shaped by flows of transnational migration and investment (Olds, 2001), as is its population (Hiebert, 2000; Hiebert and Ley, 2003) and its politics (Mitchell, 1998). The city's global dreams are counterweighted, however, by severe poverty, the negative

effects of neighborhood change, and struggles for inclusion in an urban region that contains some of the richest and one of the poorest urban postal codes in Canada (Blomley, 2004; Hasson and Ley, 1994; Ley, 1996; H Smith, 2003; Sommers, 1998). Specifically with regards to policy, Vancouver has developed a global reputation in the areas of drug policy and urban planning. In terms of the latter, many see the city as a global leader in sustainable urban design (Punter, 2003). Space does not permit an exploration of the ways in which Vancouver's planners and designers act globally, although they undoubtedly do. Rather, I will focus on the case of drug policy.

A brief history of the development of the four pillar drug strategy

It is impossible to provide a complete history of the evolution of the four-pillar strategy here (but see *International Journal of Drug Policy* 2006). I will provide a necessarily brief, partial, and preliminary account of how this approach to drugs became policy. In 1997 Vancouver's local health board declared a public health emergency after evidence revealed an annual HIV incidence rate of 18% among the city's intravenous drug users (IDUs)—the highest rate ever recorded among IDUs in the developed world. This epidemic was concentrated in the city's Downtown Eastside neighborhood (DTES) and was paralleled by an alarming level of overdose deaths—1200 documented cases from 1992–2000 in a neighborhood with an estimated population of 16 000 people (Wood and Kerr, 2006). These circumstances were the result of a confluence of factors, as Wood and Kerr (2006) and MacPherson et al (2006) explain. Since the 1980s the number of IDUs injecting heroin and cheap powder cocaine rose dramatically, reflecting increased marketing in an open-air drug market in the DTES streets and alleys. The availability of cocaine is significant because the speed with which its effects dissipate, compared to those of heroin, means it can be injected twenty times a day or more, thus straining supplies of sterile needles (Wood and Kerr, 2006).

The growth in the illicit drug economy in the DTES, a historically poor place characterized by a concentration of single room occupancy hotels (SROs) (Blomley, 2004), coincided with cuts in government funding for social housing and the mass deinstitutionalization of the mentally ill. People displaced by these policies congregated in the alleys and SROs of the DTES—spaces that fostered “high risk network formation” (Wood and Kerr, 2006, page 56). The effects of these unstable housing conditions—including SROs that imposed fees for reentry in the evening—were compounded by recurring police crackdowns on users in the streets and a restricted supply of needles from a needle exchange program, among other factors. In combination, IDUs were dissuaded from seeking sources of sterile needles, especially at night. By 1997 the DTES had become “a vortex of drug related harm” (page 55).

Indications of the crisis and proposed policy responses to it had begun to emerge in the early 1990s. In 1994 a report by British Columbia's Chief Coroner (Cain, 1994), responding to the growing number of overdose deaths, criticized existing policies and advocated approaching addiction as a health issue. This report moldered on government shelves (MacPherson et al, 2006), but as conditions worsened in the next three years a remarkable political coalition emerged that articulated a similar critique of the status quo and eventually fostered the four pillar strategy. By 1995 Mayor Philip Owen, whose relatively conservative, business-oriented party had been elected on a platform including proenforcement language (Wodak, 2006), began to look for an alternative approach, having felt pressure from constituents who criticized the status quo and having been influenced by his participation in conferences at Stanford University's Hoover Institute in which police chiefs, conservative political figures, and neoliberal economists including Milton Friedman, criticized the US War on Drugs (interview with former senior politician, July, 2005). At the same time, activists working with

IDUs in the DTES began organizing a network of drug users. By 1998 the Vancouver Area Network of Drug Users (VANDU) had received operating funding from the local health board—due to the actions of one of its founding members who was also a member of the board—and began advocating for changes to drug policy. Owen at City Hall and VANDU on the DTES were joined in 1999 by From Grief to Action (FGTA), an organization formed in Vancouver’s wealthy West Side to provide support for families and friends of drug users who frequently used the DTES streets to buy and inject drugs.

A “very, very important political alliance” quickly developed between VANDU and FGTA, based on their common support for harm reduction (interview with activist, July, 2005). Both groups’ lobbying efforts—ranging from speaking out in the media to attending public fora—were complemented by VANDU’s “a-legal” civil disobedience, which included running unauthorized injection sites in the DTES (Kerr et al, 2006; Osborn and Small, 2006; Small et al, 2006). The actions of these groups were accompanied by those of other individuals and organizations, such as Vancouver’s strong HIV/AIDS activist community (interview with activist, October, 2006; see Brown, 1997), and, as I will discuss below, they were paralleled by visits to Europe by city staff, activists, and others, and by meetings in Vancouver featuring European harm reduction experts. By late 2000, as VANDU and others’ activism continued to prompt the politicians, a report on harm reduction models elsewhere (MacPherson, 1999) and a draft of the *Framework for Action* had been produced by city staff. These formed the basis for discussions among politicians and policy professionals and became resources in numerous public meetings convened by Owen in 2000 and 2001, leading up to the policy’s eventual approval by council in the May of 2001.

The adoption of the four-pillar strategy, its ongoing development and implementation, including the opening of the safe injection facility, do not mean that the new policy developed in a political vacuum, however. Opposition emerged early in the process, particularly from the Community Alliance, a coalition of business and residents groups from neighborhoods around the DTES. Owen, for his part, was eventually ousted by his party, prior to the 2002 municipal election, in a move the electorate perceived to be motivated by opposition within the party’s executive to his support for harm reduction. The party’s replacement mayoral candidate was then trounced in the election by a coalition led by Larry Campbell, a charismatic former coroner and police drug squad officer whose platform advocated harm reduction and the opening of a legal injection facility. Internal struggles also emerged within the emergent four-pillar coalition. Most striking was when, in September 2000, forty VANDU members carried a coffin into council chambers, disrupting a city council meeting. They were protesting Owen’s decision to place a ninety-day moratorium on new social services on the DTES—a decision prompted by Community Alliance lobbying (Bula, 2000a; Wild, 2002).

Urban drug policy and global circuits of knowledge

The implementation of the four-pillar policy thus entailed political struggles and profound changes in what counted as truth about drug policy and drug users in Vancouver. The character of policy making was changed, as were its politics, the activists involved, and the object of policy—the IDUs themselves. The IDUs are now officially regarded as a primarily sick, rather than primarily criminal, population whose lives must be stabilized, so that they stay healthy and alive, if they are eventually to overcome their addiction. Early data—which Foucault would see as a particular form of scientific truth—suggest that some progress has been made in reducing harm, while arguments continue on the efficacy and future of the policy (Vancouver Coastal Health, no date; Wood et al, 2004; 2005; 2006). One powerful aspect of this process since its earliest days has been the continual appeal to expertise from and about drug policy in other cities.

It is possible to distinguish three related elements of Vancouver's connection to global circuits of drug policy knowledge. The practice of local actors who sought to learn from other cities about alternative drug policies is the first. The second involves the activities and rhetorics of a variety of experts who transferred policy knowledge—discursive truths that do causal work—from elsewhere into the city while also mobilizing the 'Vancouver model' and inserting it into global discussions of urban drug policy. These two sets of practices are intersected by a third: the work of mediating organizations and institutions that provide frameworks, technologies, and settings in and through which policy mobilities operate. The discussion of each of these draws from archival research into policy documents and media accounts and is supplemented by semistructured interviews with key actors.

Learning from global circuits of policy knowledge

A provisional and heuristic definition of the types of learning strategies employed by local policy actors aids in a discussion of the relationally produced, simultaneously 'global' and 'local' character of urban policy, even when bearing in mind the problematic nature of distinguishing 'local' from 'global'. In the Vancouver case the formulation of policies that will be implemented locally involves at least two searches for global inspiration: one involving local policy professionals and politicians and the other involving activists and nonprofits based in the city. Contemporary urban policy professionals are charged by politicians with negotiating and implementing new and changing governmental rationalities, such as the New Public Management's vision of government being 'run like a business' (Barzelay, 2001; Box, 1999). They are, as Rose (1999) suggests, also subject to changing 'scopic regimes' (Gregory, 1994; Pickles, 2004) in which their practices are opened up to public scrutiny through, for example, auditing (Power, 1997). These changing circumstances create new subjectivities including new types of policy professional who act as global 'policy entrepreneurs,' seeking out best practices to adopt, 'cutting edge' cities to emulate and with which to compete, and 'hot' experts from whom to learn the latest, most successful policies. Their daily practice involves identifying commensurate practices and policy models in an increasingly global space, while participating in and constructing extralocal connections. These may be more or less formal, ranging from official intergovernmental alliances to individual relationships with colleagues elsewhere.

The adoption of the four-pillar approach was partially facilitated by the travels of one official in the city's social planning department. His itinerary in the late 1990s, which was funded by the city, included Geneva and Frankfurt as he searched for alternative approaches to urban drug use. Describing his search he said:

"[W]e have a huge injection drug problem, and... I heard of European cities who had been through the same, very similar situations. Growth of open drug scenes, growth of open injection, higher overdose drug rates, HIV... And it didn't take much to go on the Internet and make a few phone calls and find out that these cities, German cities, Dutch cities, all had very similar experience... So in March of '99 I went to Geneva and Frankfurt to follow-up... So it was really, 'Okay, let's go look at these, let's go look at what they've done. Let's go, let's go look at a safe injection site. What does it look like? How does it work? How do they manage to implement this? What was their story?' Because it's all very political, this business. And so, what was the Frankfurt story? What was the Zurich story? Those stories became very powerful" (interview, senior drug policy official, Vancouver, July, 2005; see also MacPherson, 1999; 2001).

Fact-finding trips to cities including Frankfurt, Amsterdam, and Liverpool by local politicians followed (Bula, 2000b), as did a trip organized by activists and including representatives of the local press and media (interview with activist, May, 2006).

As local policy professionals and politicians act in ways that tie their city to others, their construction of relational geographies is intertwined with a second set of practices: the work of political activists and nonprofit organizations who also act ‘entrepreneurially’ by identifying alternative policy models being used or promoted elsewhere and advocating for their local implementation. This advocacy entails, among other things, the publication of reports and other literature detailing alternative policy models and the staging of conferences, workshops, and guest speaker appearances aimed at broadening the scope of local policy discussions (Larner, 2002). As such, it emphasizes two aspects of the production of global policy mobilities: the importance of travel, first-hand experience, and face-to-face connections in policy transfer and the importance of representational strategies because, as the quote above suggests, policy transfer entails the mobilization and continual repetition of truths and stories about best places and best practices (compare McCann, 2004b).

The narrative power of particular representations of place can have a great deal of influence on local policy debate. For example, in November 1998 a coalition of DTES activist organizations held a one-day conference on harm reduction under a tent in a neighborhood park, sparking a number of important connections and opportunities for the exchange of stories among key actors in a face-to-face context. As one participant—the same official quoted above—described it:

“[T]hey brought some people from Bern, Switzerland, Frankfurt, and ... Merseyside, Liverpool, to an event here. And that was the first time I actually got to talk to other people from the local government level. They brought the chief of police from Frankfurt to Canada because they wanted to show that police can be part of the solution in terms of the new sort of harm reduction efforts and those sorts of things [see Kübler and Wälti, 2001]. So they brought in a drug policy coordinator from Frankfurt ... And they brought in a drug policy coordinator from Bern, Switzerland ... It was a real watershed in terms of making connections. And so people like me, who were at that point really interested in this issue and had heard of these cities, suddenly got to talk to the chief of police from Frankfurt and make these connections and exchange business cards with people...” (interview, senior drug policy official, Vancouver, July, 2005).

As the process of convincing city council and other regulatory agencies of the merits of the four-pillar approach continued, the use of examples from elsewhere was a central persuasive strategy. As one activist said:

“it was terrifically empowering, this stuff, to have people from elsewhere—Bern, Switzerland ... You know, they were very encouraging to the user-group as well” (interview with activist, July, 2005).

In this persuasive politics, positive examples and encouragement were complemented by visiting experts who criticized the existing policies toward drug use in the city. For instance, in early 2000, *The Province*, one of the city’s two daily newspapers, published an interview with two visiting drug policy professionals from Amsterdam and Bern who criticized the city for being “in the Dark Ages” and advocated for a comprehensive drug strategy backed by strong political will (Middleton, 2000). The appeal to outside examples and experts has continued. Since the adoption of the four-pillar strategy, *Keeping the Door Open*, a group advocating for the harm reduction approach has organized a number of public fora in which invited experts from elsewhere have shared evidence, examples, and ideas about drug policy implementation and reform (British Columbia Centre for Excellence in HIV/AIDS, 2006; *Keeping the Door Open*, no date). The ‘Vancouver solution’ is, then, produced via a complex global relational geography in and through which expertise and truth are mobilized.

Circulating knowledge and mobilizing policies

This geography is not organized only by those working within the city, however. A study of the *how* of globalized policy making must also identify practices and experts who move policies from city to city—‘transfer agents’, as Stone (2004) calls them. These experts—members of what might be called, following Saint-Martin (2000), the ‘global consultocracy’—are central to the circulation of policy knowledge from one part of the world to another, via numerous agencies, institutions, and settings (Ward, 2006). Two sets of practices are particularly relevant here: those that involve the transfer of policy knowledge from elsewhere and those that entail the insertion of a city’s story into global conversations.

This form of global policy expertise—one that can easily speak to and speak about policy in a range of cities—revolves around particular truths. These truths rest on the discursive construction and practical mobilization of certain forms of evidence to produce their own moral geographies in which cities are portrayed as ‘good’ or ‘bad’ depending on their adoption of certain best practices. The mobility of experts involved in this circulation process makes them particularly powerful conduits of information between far-flung and, in many cases, incommensurate cities. The work of outside experts in Vancouver is a clear example of a process of policy ‘importation’ (compare Nasr and Volait, 2003), which operates, as Foucault suggests, through a political economy of truth, tied to certain key institutions and practices of government.

I have already illustrated the power of incoming experts and truths in the city. Yet Vancouver’s relationships with global circuits of drug policy knowledge are also produced through the insertion of the so-called ‘Vancouver model’—a particular type of truth in itself—into these networks. Actors with specialized knowledge of the Vancouver case travel with the model, discussing it with other experts, teaching it to politicians, activists, and the general public, and suggesting how evidence and lessons from it might be applied elsewhere. For example, in April 2004, Larry Campbell (the mayor at that time), accompanied by local drug policy professionals, traveled to Melbourne, Australia to give the keynote address at the 15th International Conference on the Reduction of Drug Related Harm. Campbell planned to encourage his conference audience to learn the steps necessary to make such an approach politically feasible and to teach about what he argues are the successes of the injection site in reducing deaths. Framing his comments around his own expertise, he said:

“[The conference organizers] were interested in the Vancouver experience.... I’ll talk about the transition from recognizing we had a huge problem to the citizen involvement, political involvement and how we went about solving the concerns of the citizens.... We want to show the differences that have taken place. We know there have been at least 100 interventions and while the health authority may not be able to say that they are lives saved, I think I am more than qualified as a former chief coroner to say people are alive as a result of this” (quoted in Carrigg, 2004; see Vancouver Coastal Health, no date).

Campbell’s actions parallel his predecessor Philip Owen’s efforts to encourage other cities in Canada to adopt similar policies. Owen’s reputation and specialized knowledge have allowed him access to senior urban politicians across the country (interview with former senior politician, July, 2005; interview with activist, July, 2005).

The proselytizing of senior politicians is only one way—although a very important way—in which the city’s experience has been inserted into global discussions over the future of urban drug policy. For instance, while Campbell, Owen, and others are happy to talk about the successes of Vancouver’s model, they continue to see opportunities to learn from global interactions. The Melbourne conference was, for Campbell, an opportunity to “compare notes to see what they are doing that is working that we’re

not [doing] and vice versa.” This was also the focus of the bureaucrats who accompanied Campbell to Australia. The city’s drug policy coordinator saw Australia, and particularly Sydney, which has had a supervised injection site since 2001, as a model worth studying, despite Vancouver’s recent progress. “They’ve had success limiting the spread of Hepatitis C”, he said, “and their needle exchanges are more diverse and widespread than ours. They also have a coherent national drug strategy, which we don’t” (quoted in Carrigg, 2004). Policy knowledge is, then, mobilized at the global scale through the practices, travels, discourses, and interactions of a wider range of experts, motivated by a variety of interweaving interests. They simultaneously teach about their own practice and learn about the practice of others through these fact-finding trips. As such, their apparently mundane practices are involved in the continual production and reproduction of what Lerner and Le Heron (2004, page 215) characterize as a global space of emulation and competition, through the creation of connections among “‘best practice’ peers”.

Mediating policy mobilities

Yet, while these experts clearly play a powerful role in shaping policy mobilities, their ability to do so is mediated and facilitated by a set of informational infrastructures— institutions, organizations, and technologies that, in various ways, frame and package knowledge about best policy practices, successful cities, and cutting-edge ideas and then present that information to specific audiences. In the case of Vancouver’s drug policy, the practices and discourses of professional organizations and the popular media are particularly important since they operate in and beyond the city, while packaging and repeating stories about policy expertise, framing debate, and building coalitions around specific governmental strategies.

A particularly important professional organization in this regard is the International Harm Reduction Association (IHRA) which engages health and policy professionals, activists, the police, and others in dialogue about harm-reduction approaches to drug use. The Association’s mission statement emphasizes its foci on advocating in the area of public health, on facilitating discussion about drug policy and health, on encouraging the global transfer of best practices, and on education and training in these topics (IHRA, no date). The Association’s journal—the *International Journal of Drug Policy*—and its website are crucial elements of this mission. Its annual conferences, with their field trips, workshops, and public dialogues, have been central to Vancouver’s involvement in global discussions; the association’s 1999 conference in Geneva provided an early opportunity for learning about European strategies, the 2004 conference in Melbourne hosted Mayor Campbell and others, an officer of VANDU attended the Belfast conference in 2005, and Vancouver hosted the conference in 2006 with Owen and Campbell as honorary cochairs (IHRA, 2005).

The locations that organizations choose for their conferences and the speakers that they invite to present plenary addresses are not insignificant because they anoint certain cities as worthy of attention. For a senior Vancouver policy professional, speaking in anticipation of the 2006 IHRA conference, its location in Vancouver is important both as a recognition of its drug policy and also as an opportunity to think in explicitly urban, as well as global, terms:

“[O]ne of the reasons it is coming to Vancouver is because of what we’ve accomplished here.... There will be some presentations about what’s done in Vancouver, but it’s an international conference, so there will be people from all over the world presenting. Both coming here to see Vancouver but also bringing their own context and presentations. And there will be some focus on cities.... A city has an identity... is it a good city, is it an awful city, is it a caring city? You know, they have different

brandings, different cities... [T]here's lots of opportunities for cities to carve out their direction in this area" (interview, senior drug policy official, Vancouver, July, 2005).

Professional organizations package information about good urban policies and disseminate it through global informational networks. Their frequent focus on best practices and comparable cases allows policy actors to think about individual cities not as unique cases, as Wolman and Page (2000) found in their study of British officials, but as commensurate nodes within a global policy space (Larner and Le Heron, 2004; Ward, 2006).

The Vancouver case also emphasizes the role of the popular media in channeling flows of policy knowledge. Publications as diverse as personal finance magazines (McCann, 2004b), lifestyle magazines (Greenberg, 2000), and newspapers (Martin, 2000; Mitchell, 1996; Wakefield and Elliott, 2003) construct narratives and moral geographies of good and bad policies, cities, and neighborhoods. These and other popular media also report on and consult with renowned experts, as they discuss urban policy. Furthermore, their constant repetition of specific arguments about cities aids in the diffusion of these forms of truth, since they are taken seriously by local policy actors (McCann, 2004b). Beyond these forms of popular media, urban policy is also the topic of popular books, websites, blogs, and documentary films, all of which popularize and disseminate specialized forms of knowledge and recommendations for action.

The role of the media in framing discussions of drug policy in Vancouver is evident in a number of ways. First, websites were a primary source for those in the city who, in the late 1990s, said "There are answers to be found somewhere else. And we need to know" (interview, senior drug policy official, Vancouver, July, 2005). Now, due to concerted efforts by activists, the local media is attuned to changing approaches to drug policy across the globe and report on them regularly (eg Farrington, 2005). Second, the story of Vancouver's shift toward a four-pillar approach has been popularized in Canada by the documentary film, *Fix: The Story of an Addicted City* (Wild, 2002), which follows two members of VANDU and Mayor Owen during the campaign for a new drug policy. The film drew large audiences across Canada—selling out mainstream cinemas in Vancouver, Victoria, and elsewhere for days on end—and formed the basis of tours around the country by Vancouver's drug policy advocates. In combination with *A Framework for Action* it is credited with encouraging politicians in other cities to address similar problems (interview with former senior politician, July, 2005; interview with activist, July, 2005). As one of the main political actors put it:

"Well, the movie *Fix* came out. In the fall of 2002... [We] traveled across the country and we would show the film, 92 minutes, and then open up for an hour discussion for questions and answers and you'd have media and some politicians... [S]howing of the movie across the country was an introduction. And the media liked it. And that was a big boost for us and opportunity for us to raise it in the public realm" (interview with former senior politician, July, 2005).

A third aspect of the media's role entails the internal, rather than external, dissemination and legitimization of the policy. In the run-up to the city council's decision on whether to approve the four-pillar strategy, the *Vancouver Sun*, one of the city's two daily newspapers, ran an extensive series of articles on the issue entitled "Fix: searching for solutions on the Downtown Eastside" (*Vancouver Sun* 2000). This series was generally supportive of the new approach, provided personal narratives of addicts in the neighborhood, and offered a description of the experience of harm-reduction-oriented drug policy in Frankfurt. In a second case of media framing the Greater Vancouver Regional District, the regional governance body of which the city of

Vancouver is one member municipality, has produced a series of television segments dealing with the four-pillar policy that are shown on local television and are available on the Internet (Greater Vancouver Television, 2000). They present the policy in a positive light and include interviews with local actors and with drug policy experts from Amsterdam, Frankfurt, and Bern who present quite detailed discussions of the operation and successes of harm-reduction initiatives, including safe injection facilities, in those cities. Thus, the media frames the story of the city's emerging drug policy with a particular local audience in mind (just as the IHRA frames it for a global expert audience) by underlining the origins of the policy in other successful cities. This emphasizes that the city is not alone in the world, even if it is in North America, in terms of its approach to urban drug use. Indeed, the *Vancouver Sun* (2005), in an editorial critical of the prohibition of marijuana, has recently gone further, arguing that Vancouver's innovative policies can allow Canada to "help unify the globe in its efforts to minimize the harms caused not only by drugs but by drug laws."

Documentary filmmakers, journalists, television producers, and organizations like the IHRA mediate and facilitate the learning and teaching processes—the apparently mundane practices—that constitute the global transfer of urban policy knowledge. They are an important element of urban policy mobilities but one that, as Stone (2004) suggests, are neglected by the majority of the policy transfer literature. They provide informational infrastructures in and through which relational geographies of best practice peers are produced. Furthermore, as the present case suggests, their role extends, crucially, to persuasion—they are frequently involved in the legitimization of new policies, packaging and presenting concise, consumable, and repeatable narratives that highlight the origins and successes of exemplary policy models in other cities. These infrastructures are, then, highly political rather than merely informational. To return to the language of the governmentality literature, they discursively construct problematizations and programmatic solutions by invoking certain truths about other cities and their policies.

Spatialities, (im)mobilities, policies

"[W]e actually still know very little about the details... and the mechanisms through which 'local' policies, practices and programmes are constructed as 'models'."

Ward (2006, page 71)

This paper has sought to deepen understanding of the practices and representations through which urban actors engage with global circuits of policy knowledge and transfer. I suggest, through a case study of the development of an innovative comprehensive drug policy in Vancouver, that: (1) the ways in which policy transfer occurs are much more diverse, involving a much wider range of expertise (from credentialed professionals to grassroots activists), practices, and representations, than has generally been acknowledged; (2) the practices that constitute policy mobilities, while apparently mundane, are tied closely to powerful definitions of truth about best cities and best practices that profoundly shape policy; and (3) the relationship between expertise and truth in urban policy-making positions cities globally, within particular relational geographies or spatialities, thus allowing us to continue to expand our analysis of the relationship between urbanization and globalization. In the Vancouver case, the *how* of policy making in global relational context entails a range of locally based actors, from politicians to policy professionals to activists and drug users, developing connections with experts from elsewhere and with related flows of knowledge in order to operationalize a new strategy to fight drug related harm. These mobilities were mediated and

facilitated by actors and institutions such as the IHRA, a documentary filmmaker, and local journalists who packaged and repeated the ‘Vancouver story’ both to audiences elsewhere and also to the Vancouver public.

The emergence and continuing development of the four-pillar policy is, therefore, fundamentally spatial and political. Yet the spatiality involved is not simply ‘local’ or ‘global’—the practices of ‘local’ actors are not necessarily more or less important to the development of the policy than are those of ‘global’ actors. What are crucial are their relationships that produce geographies of policy mobilities—relationships that are always constituted in and through multiple spatialities and scales. The study of urban policy in global relational context can address the multiple spatialities that shape how ‘local’ urban policies are made to become ‘global’ models (Ward, 2006). These policy mobilities can be characterized in terms of the “intertwined openended trajectories” that constitute global space (Massey, 2005, page 113). The trajectories along which urban policies operate are created by specific actors, motivated by particular imperatives at certain times. Drug policy activists and professionals developed and maintain connections between Vancouver and Frankfurt for particular reasons. These connections are manifested in the travels of these and other experts, carrying policy knowledge back and forth. These connections are both a practical resource—Vancouver actors benefited from policy models developed elsewhere and now seek to share their experiences with others—and a political resource—the existence of the connections has been used to advocate for, legitimize, and normalize local policy innovation.

Yet, while my primary purpose in this paper has been to focus on connections between Vancouver’s policy experts and their counterparts outside of Canada, it is important not to neglect scales ‘closer in’ than the ‘global’ (McDowell, 2001). Federal and provincial support—including an exemption from the Federal Controlled Drugs and Substances Act, funding from both levels of government, and the support of politicians at both levels—has been crucial for the development of Vancouver’s four-pillar strategy, particularly the injection facility. Furthermore, longstanding contacts across British Columbia and Canada have facilitated the advocacy of those, such as former mayor Owen, who have sought to encourage other cities to adopt a four-pillar approach. In turn, national-level organizations, such as the Federation of Canadian Municipalities (FCM) have facilitated global connections. In 2001 the FCM, partnering with the Canadian International Development Agency (CIDA), invited the City of Vancouver to develop a link with the Bangkok Metropolitan Administration, under the FCM’s Municipal Partnerships Program. The intent of the program is to engage Canadian cities in development projects in developing world cities. Vancouver was partnered with Bangkok due to their similar concerns with illicit drug use, prostitution, and social housing. A number of CIDA-funded trips by politicians and bureaucrats from both cities eventually laid the groundwork for a pilot comprehensive drug strategy in Bangkok (City of Vancouver, 2003; Federation of Canadian Municipalities, 2004). All of these interactions with provincial and federal state agencies is, of course, overshadowed by the United States government’s strong disapproval of the four-pillar approach, drawing Vancouver to the forefront of international geopolitics on the drug issue (Bula, 2003; Gandey, 2003).

The role of national-level agencies like FCM and CIDA, as well as other state regulatory bodies, is very important to the development and global dissemination of urban policy models. While it would not be helpful to privilege the role of national contexts or state institutions as the originators of urban policies and the conduits through which policy ideas flow back and forth from global and local sources—hence the reason I use the term ‘global’ rather than ‘international’—it would be similarly

problematic to ignore the continued, if changing, role of national states in shaping urban policy. An attention to the wide array of practices and actors involved in contemporary policy transfer, not only formal state actors, emphasizes the complex institutional spatialities that shape contemporary cities.

These spatialities are, as Lerner and Le Heron (2002b, page 765) emphasize, intertwined with “globalizing ‘microspaces’”, where experts work, connections are made, and where truths are deployed, legitimized, questioned, and operationalized, can also be found in urban policy. They include, among others: the rooms where local policy makers and incoming experts or city delegations meet; the spaces of professional and activist conferences and forums; the cars, buses, planes, dinner tables, etc of fact-finding trips and field visits. These microspaces frame the ways in which policy actors imagine their practice and their policies in global context—as commensurate with those in a different, far off city, for instance—thus emphasizing that imagination, including the geographical imagination, is a “crucial—indeed the most crucial—form of social construction, of productive work” (Buell, 1994, page 314; quoted in Olds, 2001, page 48).

The work of constructing policy and of producing the multiple spatialities of globalized urban policy is worthy of continued study.

“Policies do not appear from nowhere. They are introduced into real and lived places first, and then through a range of human and non-human actors are ‘made’ into a success. This process of ‘making-up’ policy is an acutely political one: there is nothing natural about which policies are constructed as succeeding and those that are regarding as having failed...” (Ward, 2006, page 70).

The politics to which Ward refers is a politics of truth where the factuality of policy success and failure, of best and worst practices, is determined by ensembles of rules through which, to return to Foucault (1980, page 132), “specific effects of power [are] attached to the true”. *Which* policies experts pick up, mobilize, and offer in packaged form to other cities is one central question in any investigation of policy mobilities, because it gets to the heart of the power relations that these global geographies reflect.

Finally, following Massey (2004; 2005), it is worth tempering talk of policy *mobilities* with investigation into policy *immobilities*. Indeed, as Sheller and Urry’s (2006) introduction to what they characterize as a “new mobilities paradigm” cautions, the danger of privileging and fetishizing mobility needs to be avoided. “Mobility and control over mobility both reflect and reinforce power. Mobility is a resource to which not everyone has an equal relationship” (Skeggs, 2004, quoted in Sheller and Urry, 2006, page 211; see also Adey, 2006). In terms of policy mobilities, a number of questions follow: which policies are not mobilized, why, and who is impacted positively or negatively by this immobility?; how do the subjectivities of experts—class, gender, ethnicity, professional status, etc—influence which policies are, or are not mobilized?; is the global spread of the harm-reduction model, and its adoption in Vancouver, an aberration or can similar ‘nonmainstream’ policies take advantage of global circuits of policy knowledge? These questions get at the ‘power geometry’ (Massey, 1993; 2005) of contemporary globalized urban policy. If we are to understand more clearly the details of how urban policy shapes and is shaped by global policy expertise and its multiple spatialities, they are questions worth asking and answering.

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