# Translating Policy and Practice

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Postprint / Postprint
Zeitschriftenartikel / journal article

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# Translating Policy and Practice

## Day Care for People with Dementia in Kerala, India

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ABSTRACT Global influences and demographic changes are leading policy makers in less developed countries to look to more developed regions for policy and service ideas. Policy and services ideas may then be 'borrowed' via processes such as policy transfer (Dolowitz and Marsh, 1996). This article explores the establishment of day care for people with dementia in Kerala, India. During the development of this service policy, information and practice ideas were transferred from different countries, particularly the UK. During the transfer of information and also within the following processes of implementation and enactment of policy, translation processes take place. In order to understand these translation processes, this article describes the development of day care in Kerala and compares its current functioning with that of similar day care centres in the UK. The concept of translation is found to illuminate and explain the process of service development in Kerala and could be used elsewhere to explain examples of policy and practice development.

KEYWORDS  *dementia, less developed countries, policy transfer, translation*

## Introduction

The need for increased understanding and formal care for people with dementia in less developed regions is expected to increase due to changes in social, medical and economic factors (Chandra, 1998). A decline in fertility rate and mortality is taking place across the world leading to an increase in the relative and actual number of older people (United Nations, 2003). The increase in the number of people over 60 will be more dramatic in less developed regions.

Between 2000 and 2050 this population in more developed regions is predicted to increase by 70% but in less developed regions it is predicted to rise by over 300% (United Nations, 2003). Dementia has an age-related prevalence, around 5% of people over 65 in Europe have dementia and the proportion increases with age (Lobo et al., 2000). Prevalence figures found for India range from 1.7% (Chandra et al., 1998) to 5.2% of those over 65 (Shaji et al., 1996). The broad range found may be related more to methodological and cultural issues relating to testing rather than actual differences in prevalence rates, which are estimated to be just slightly lower than rates in more developed countries (10/66 Dementia Research Group, 2000). Clearly the ageing of the world's population is leading to an increase in the number of people with dementia in the less developed regions of the world (United Nations, 2003; Wilson, 2000a). Chandra (1998: 7) cites increased life expectancy as a major factor 'leading to the problems and illnesses of old age emerging as major social and medical issues' in the less developed regions of the world. As countries develop and change so do their epidemiological profiles (Larkin, 1998).

At the same time other demographic changes are affecting the traditional forms of care for older people in less developed regions (HelpAge International, 2002; Heslop, 1999; Wilson, 2000a, b, 2001a). Processes described as globalization and modernization are changing the society and family structure in Kerala leading to changes in the way older people are cared for. Kerala, in south India, is an example of a demographically advanced region within a less developed country (Parayil, 2000). The numbers of people with dementia are increasing at the same time as the breakdown of the extended family network and other forms of informal support. A fuller discussion of the current situation of people with dementia in Kerala is given in McCabe (2006).

The definition of globalization is contentious and much debated. Giddens (1990: 64) describes globalization as 'the intensification of world wide social relations'. It is often thought of as the compression of time and space allowing closer relations across wide distances (Hoogvelt, 2001; Kiely, 1998). Globalization can be described on different levels, as economic, political or social (Hoogvelt, 2001). Social globalization encourages transfer and provides an environment in which learning between countries can take place. The development of day care for people with dementia in Kerala came about following and in part because of the development of social relations between countries. In summary 'globalisation refers to a world in which societies, cultures, polities and economies have, in some sense, come closer together' (Kiely, 1998: 3). This compression increases access to information from around the world. In addition, globalization invites comparison, leading actors to search in other places for ideas and information (Wilding, 1997: 420). Much information about people with dementia in more developed regions is available to individuals in less developed regions such as Kerala through, for example, the Internet and international non-government organizations (NGOs).

Globalization is, however, not a neutral concept (Mittelman, 2000). Global power balances affect how globalization works. It is usually thought of and described as a push from West to East; from more developed to less developed. This shift is governed by global power imbalances, both financial and cultural. The cultural characteristics of more developed countries are 'globalized'. In the development literature, power and knowledge in the West is used to facilitate (or impose) change through development in the South and East (Crush, 1995). In this example the transfer of information takes place from West to East, from the UK to Kerala. This reflects the general trend of globalization and the historic view that the West is the location of knowledge (Tuhiwai Smith, 1999).

There is increasing evidence that policy makers look out with their own context for policy ideas, with examples of policy transfer and other related concepts becoming more common (Common, 1998; Dolowitz, 2000; Evans and Davies, 1999). Policy transfer describes the process by which policy makers use policy in different countries to develop policy in their own. Globalization in general has 'increased the demand for policy transfer' (Wilson, 2001b). Globalization increases the opportunities for policy transfer and policy transfer itself facilitates globalization (Evans and Davies, 1999: 371). In a study of quality assurance policy in education, Vidovich (2004) found that policy makers actively sought ideas and information from other countries. The process she describes is not as simple as global influences asserting themselves at a national level; 'national policy making involved selecting and filtering global influences that were then adapted' for the local or national context (Vidovich, 2004: 350).

The perceived need for care services for people with dementia due to societal changes led key actors in Kerala to look for information from around the world in order to develop services in Kerala. The process by which day care for people with dementia was developed in Kerala is complex and it is the aim of this article to describe and explain it. In order to do this two theoretical constructs are used: policy transfer and translation. Policy transfer is a concept commonly used within policy literature and is found here to explain the mechanistic elements of the process. During the data analysis, discussed later, it became clear that the concept of policy transfer could not provide a full explanation for what has occurred. The data suggested a process more akin to translation. The idea of 'translation' used here is not in reference to the literal translation of words and text but to the translation of concepts and practical elements of policy and practice. However, the following discussion does draw on literary translation theories.

## THE DATA

This article discusses the development and enactment of day care for people with dementia in Kerala. Two main sources of data are drawn upon. First, a series of seven in-depth interviews were conducted with key actors in Kerala, all

of whom had been, and some who still were, actively involved in the development of services for people with dementia. These individuals included the current chairman, past governing board members and service managers of an Indian NGO. Second, case studies were compiled of four day centres, two in Kerala and two in the UK. The day centres in the UK are used as a representation of the original practice of day care, which was transferred and translated in order to develop day care in Kerala. It was not possible to actually describe the idea of day care transferred by the key actors in Kerala. The idea of day care was based on information collected by the key actors from different sources including visits to day centres in other countries. The centres in the UK were chosen as a best approximation. As discussed further later, the UK was a key source of information and the day centres there shared many organizational similarities to those in Kerala. These case studies used observation and in-depth interviews along with analysis of grey literature to give an in-depth picture of each of the day centres.

TRANSFERRING POLICY AND PRACTICE TO KERALA

Analysis confirmed that policy and practice information and ideas had been transferred from a variety of countries, most significantly the UK, to Kerala. This information was used by the key actors to design and establish day care services for people with dementia. This transfer of information was found to fit well with the concept of policy transfer (Dolowitz, 2000; Evans and Davies, 1999). Policy transfer is defined as: 'a process in which knowledge about policies, administrative arrangements, institutions etc. in one time and/or place is used in the development of policies, administration arrangements, institutions etc. in another time and/or place' (Dolowitz and Marsh, 1996: 344). The key actors described similar processes during the development of day care in Kerala. Evans and Davies (1999: 366) clarify their definition of policy transfer as 'an action-orientated intentional activity' involving an 'agent of transfer'. They stress that analysis of policy transfer should be limited to these types of transfer. This example was found to be intentional and the key actors acted as 'agents of transfer'. The interviews with key actors in Kerala confirmed a process of policy transfer had taken place.

The key actors developed their model of day care using information collected on visits to day care in the UK, collaboration with organizations in the UK and attendance at international conferences particularly the annual conference of Alzheimer's Disease International (ADI). ADI provides an international network of expertise, something like an epistemic community (Haas, 1992). ADI was a crucial channel of information for the transfer process described here. The perceived superiority of Western knowledge (Tuhiwai Smith, 1999) is clear in the focus of the key actors' search for policy ideas and service models. Actors in less developed countries have a choice to learn from either or both more developed and less developed countries (Mishra, 1998: 488). In this case the key actors did not look to other Eastern or Southern countries that may have shared more cultural similarity but

instead looked to the West, to the UK. This type of transfer seems different to that between two Western countries where cultural similarity is often cited as a factor facilitating transfer (Dolowitz, 2000; Rose, 1991). One key actor relates that he looked for what he perceived as the leaders in the field and went to them for information and ideas. It is as if he assumed that the West would provide the best solutions for caring for people with dementia. The specific link with the UK may be in some way related to the colonial links. A fuller account of the who, why, what and when elements of the policy transfer process can be found in McCabe (2003). It is not the intention to describe the policy transfer process within this article but to look in more detail at the data to draw conclusions on the nature of the translation processes that have also taken place.

What were less clear from the analysis of policy transfer were the degree to which the policy information had been used and the factors which had constrained or facilitated the process. The somewhat mechanistic approach of the policy transfer framework used appears to limit understanding of the policy development process and does not allow for the emergent nature of policy.

It was evident that what was being transferred was being significantly altered by the policy transfer process. The processes of transfer and implementation of policy and practice involve a chain of communication and interpretation processes. During these processes information about day care in the UK and other countries was transferred or communicated in two main steps to produce the model of day care found in Kerala. Policy and practice ideas from the UK are transferred and interpreted by key actors in Kerala. These individuals use these ideas to form their own images of what day care is. This stage takes place cross-nationally. They in turn communicate their model of day care to the staff who are involved in the running of the day care centres. The staff running the centres translate and interpret this information and put it into action. This involves a vertical transfer of information. These steps may be more clearly understood if thought of in terms of translation processes. Individual interpretation alters or 'translates' the information so that each of the two steps involves translation. This translation process depends on the individuals involved; their position, knowledge, motivation, as well as their perceptions and interpretations of the information involved. Latour (1986) and Johnson and Hagstrom (2005) discuss translation relating to policy and organizations and all emphasize the importance of the individual in the translation process.

Translation is most commonly thought of within literature, the translation of the written word of one language into another. Put simply, to translate is to 'express the sense of (words or text) in another language' (Oxford English Dictionary, 1999). Translation also has a secondary meaning as 'the process of moving something from one place to another' (Oxford English Dictionary, 1999). So there is both a language or meaning component and one of movement

between two contexts. Freeman (2003: 6) argues that 'the critical element in translation, crucial to understanding it, is the change it brings about: change in the substance or significance of the source and in the character of the target'. The process of translation alters the text as it is translated. In the same way the process of translation of policy or practice alters the policy and practice as it is translated. The policy translators in this article create new policy and practice in Kerala as they translate the UK policy and practice.

Comparative analysis of the day care case studies elucidated the similarities and differences between service models and practice in the two locations. It can be argued that the similarities and differences between the two contexts relate to the translation processes that have taken place during the information transfer and the subsequent establishment of services. These translation processes are explored within this article and the concept of translation is further developed using theories of literary translation.

Day care as a concept constitutes a range of practical components including staff structure, transport arrangements, the number and type of service user, the physical layout and the use of time each day. Each of these components is translated to some degree within this scenario. Appendix A includes a table comparing key features of the four day centres. There are similarities as well as differences between the day centres in the two locations. All the day centres provide socially based care for people with dementia and they all fit with the basic definition of day care for older people:

> a day service offers communal care, with paid or voluntary care givers present, in a setting outside the user's own home. Individuals come or are brought to use the services, which are available for at least four hours during the day, and return home on the same day. (Tester, 1989: 37)

They have similar numbers of service users and staff and follow similar patterns of activity through each day. Three centres, one in Kerala and two in the UK, have drivers who take on multiple roles and project coordinators who are also responsible for other services run from the same building. There are also similarities in the level of staffing, daily routine and the types of activities undertaken.

The differences between the models of day care are found to fall into two groups. Some differences relate to straightforward adaptations made by key actors to the policy and practice. Other differences are subtler and seem to relate to the influence of local culture in the new context. This division appears to relate to the two stages of translation, the first taking place cross-nationally and the second vertically between key actors and staff in Kerala. The cross-national stage was found to involve direct adaptations made by key actors to the policy and practice. The vertical translation processes were found to be more subtle and complex. As highlighted earlier, there were different individuals involved in these two stages. The discussion later emphasizes how the motivations of these individuals shape the translation processes.

## Cross-National Translation

The key actors here were involved in the cross-national transfer of policy and practice information acting as 'agents of transfer' (Evans and Davies, 1999: 366). They reflect on the ways in which they used contacts and networks such as ADI to collect information on day care, which they adapted to fit the situation in Kerala. It is apparent that their personal motivations as well as organizational, structural and cultural constraints in Kerala shaped how they translated their ideas about day care.

Walt et al. (2004) illustrate how individuals utilize their position and contacts to influence policy and practice development. The key actors acted within a global network to collect the policy ideas and service model, which they transferred to Kerala. This transfer could be described as contributing to the globalization of knowledge from West to East. Global actors, including NGOs, may promote a consensus on best practice at a global level (Stone, 2004). Orenstein (2003: 188) describes these types of actor/network as 'global policy advocates' who effectively drive diffusion and the transfer of policy. The ADI takes this role within this scenario. The ADI provides an international network of expertise on dementia. As evidenced by the author at one ADI annual conference, they promoted mainly Western knowledge and expertise. As Tuhiwai Smith (1999: 63) reminds us, 'the globalisation of knowledge and western culture constantly reaffirms the West's view of itself as the centre of legitimate knowledge'. In addition Alvares (1992: 230) states that 'power decides what is knowledge and what is not knowledge'. The more powerful Western influences within the epistemic community of dementia set the knowledge agenda. Similarly for many the medical model of dementia has maintained its status above other more social models of dementia. Because the key actors are working on a global stage they are influenced by these processes of globalization and power imbalances with regard to knowledge. These influences are reflected in the nature of the translation processes they undertake.

Cross-national translations were explicitly described by the key actors as changes they had been forced to make due to logistical constraints and cultural differences. Their translations relate mainly to logistical limitations including a lack of funds and poor transport systems. The main adaptations were related to the buildings and location of the day centres. Compromises were made by the key actors in order to save money as there were few financial resources available. Changes were also made to fit with the climate in Kerala, for example, the provision of beds for service users to sleep on during hot afternoons. The style of the rooms also fitted with local building styles. Large, cool, often partly open rooms were used for the main activities of day care in both Kerala centres.

The decision to translate aspects of the UK model of day care to fit the local culture was seldom voiced. Only one comment was made related to this. One key actor mentions that they do not encourage dancing at the day centres in

Kerala as this is not culturally appropriate for older people in Kerala. He mentions this as he has seen dancing as an activity at day centres in the UK. Another key actor does not mention culture as an influence on her design for day care although she states that she does wish to hire people to offer non-allopathic therapies for the service users in the future at the centre, such as traditional *Ayurvedic* treatments. The motivation to adapt the model of day care to the local culture does not appear strong. In this case cross-national translation appears to be undertaken with reluctance and only when necessary. The acceptability and 'betterness' of the UK model means that they do not appear to want to change it. They uphold the superiority of the UK model of day care as would be expected from the global balance of knowledge and power.

When interviewed, it appeared some of the key actors desired to keep the model of day care the same as that in the UK or at least different to anything found in Kerala. During one interview there was a strong sense that the first day centre in Kerala was to be unique and new in India and that it was to resemble those seen in the UK. It was set up using ideas from outside India and the staff were trained especially to work there.

One key actor talks of having to sell the day care to the people in the local community; he had to explain what it was. The idea of day care for older people or people with dementia was not familiar in Kerala. The day centres in Kerala mirrored those in the UK in many ways, for example: the activities undertaken, the numbers of staff, transport arrangements and the structure to each day. The key actors have clearly applied their knowledge of day care in the UK to design and develop day care in Kerala. Although apparently similar, on a range of aspects differences were found in staff behaviour between the two locations and these can be attributed to vertical translations. The day care staff translate the information they are given by the key actors. These day care staff in Kerala are working in a local arena and are less affected or motivated by global networks or international ideas about dementia care. Stone (2004) finds that international ideas about best practice may not take root at the local level due to local culture and conditions. Similarly Green (1999) in a study of education policy found similarities in policy rhetoric across countries at a global level but many differences at national and regional levels suggesting a global convergence at the same time as regional divergence. Green (1999) attributes these regional differences to the local culture and current local education policies and procedures.

## Vertical Translation

The translations that took place vertically involved the staff in Kerala trying to understand and utilize the information they had been given by the key actors on what day care is. This information gave details on its structure and function and related concepts such as dementia and importantly the roles of

the staff. The staff that work at the day centres undertake translations as they enact their role within day care. The staff within the day centres in Kerala are referred to as community geriatric nurses (CGNs). The cultural perspectives of the CGNs affect the way in which they use the knowledge about day care and dementia that they are given. This in turn affects their behaviour at day care, how day care is enacted and ultimately the service that the service users receive. The CGNs 'make sense of' or translate the information they are given and find a way to enact day care within their local setting.

During interviews the CGNs did not reflect on adapting information, as the key actors had done, they just talked about what they did and observation data confirmed their practices. The translation processes undertaken by the CGNs are reflected in their practice, specifically in how this practice differs from that in the UK. Comparative analysis of all aspects of day care highlighted differences in specific practices and activities. The following comparative discussion focuses on the behaviour of the different individuals in Kerala and the UK both undertaking the same activity at day care centres. The example of reading newspapers is given here as it is typical of the types of differences found and is illustrative of the translation processes.

Newspapers and magazines are used in activities with the service users in all the centres. A brief summary follows describing how these activities are undertaken at each of the four day centres.

In the first Kerala day centre most of the service users sit in a large circle in the mornings while one CGN reads from the newspaper. Starting by giving the day's date, she then reads stories usually starting with the lead article. On occasion a male service user may be asked to read aloud and the CGNs suggest which stories to read. Most of the other service users appear to listen although some may read another newspaper or chat to one another. Service users and CGNs ask questions about the news stories and there are often short discussions as the reading goes on. The following example is taken from observation notes at the day centre; the names of CGNs begin with L, female service users with M and male service users with R and V.

> Lata starts to read from today's paper, she sits close to Vinu and leans towards him as she talks making sure he is following. Lata also looks over at the other service users as she is reading, Mary sits forward as if she is listening intently. Lakshmi and Raja have a short quiet conversation about something in yesterday's paper, which Lakshmi has … Lata talks over to Raja and Rohit also joins in the conversation … Meena is talking and muttering to herself and no one is responding … Lata goes back to reading the paper. Malini is disturbed and gets up, starting to wander around the room … Lakshmi follows her and brings her back leading her by the arm talking softly to her … Lata has continued reading from the paper, drawing Raja and then Varun into conversation about things in the paper. Lata then asks Rajeev about a story about Anthrax, which she has read out, Rajeev replies talking for a minute or so. Lata then asks Rohit a question, which he answers, Mary asks Lata a question and Lata talks at length. It all appears to be related to the news.

In the second day centre in Kerala the newspaper is taken round in the morning to each service user in turn. The service user is asked if they want to read the newspaper and then shown and told what is in the newspaper that day. As the service user reads, there may be discussion with other staff and service users about the news. Sometimes the staff ask the service user to read a story out loud so others can listen or a staff member reads an article to the whole group. The other service users may listen or may be chatting or singing. The newspaper is presented in a flexible and focused manner. The reading of newspapers is central to Kerala culture as there is almost 100% literacy and the local newspaper is the most widely read local language paper in India (Prakash, 1999). Older men commonly meet together in the mornings to read the newspaper.

Newspapers and magazines are also used in the UK day centres. Newspapers and magazines in one centre are used mainly with one particular service user who does not appear to enjoy many of the other activities offered. Occasionally other service users may look at the newspaper or a magazine. In the second centre two newspapers are provided daily, which may be used in activities and are more often read by the staff at their breaks. When the newspapers are used for an activity this involves a member of staff reading articles from the newspaper and then discussing the news with the service users. The service users are prompted with questions and encouraged to take part in the discussion. Particular members of staff try to find what they think are 'nice' stories and try to avoid stories they feel would be distressing for the day care service users. These newspaper discussions appear to reflect a reluctance to expose the service users to anything that might upset them. The tendency was to use stories from current newspapers to prompt discussion of the past, often with the theme that things were much better then. In the first UK day centre although newspapers were not used directly the staff and service users often discussed current events, particularly sporting events and local news if they knew it to be of interest to particular day care users.

Comparative analysis of the data from the four centres on newspaper reading highlights some key differences between the UK and Kerala, which are also found in other aspects of day care. In Kerala the newspaper discussions were based on the current news with active participation by service users. The reading of newspapers is integral to daily life in Kerala and makes a popular activity for the day centre. It is also approached in an straightforward manner. The newspaper is read by CGNs and service users alike and news is discussed as it appears and in a current context. In the UK this is not the case. Newspapers are presented in a manner to avoid distressing the service users or in an effort to stimulate conversation about the past. The newspaper reading is altered to become an *activity*. This type of alteration takes place with many aspects of day care in the UK including mealtimes, tea times and time spent on transport. The day care staff in the UK appear to have a social construction of what it means to be a person with dementia. They then interact with the service users

in a manner they feel is appropriate. They are fulfilling a role rather than just spending time with the service users. This is not the case in Kerala where the approach is less affected but may be confusing or distressing for the service users. The CGNs just spend time with the service users, reading and discussing the news. They do not alter their behaviour because they are talking to someone with dementia who attends a day care centre.

The staff in Kerala appear to have translated the activity of reading newspapers in a manner that makes sense to them. It does not seem to occur to the CGNs that they should alter or filter what is in the newspaper. The service users are treated as adults and a 'normal' atmosphere prevails. This translation process is unplanned and takes place through the behaviour of the CGNs. This example highlights the differences in the construction of 'care' in the two contexts. In Kerala less effort is made to construct every aspect of day care as an 'activity', which is appropriate for people with dementia. Within Kerala the culture of care is focused within the family and, therefore, not conceptualized as 'work'. The staff and service users read the newspapers together to learn about the news. In the UK the staff use newspapers to promote social activity among the service users as part of their role as day care workers. Similar differences relating to the culture of care in Kerala are seen in other aspects of day care including rest times, time spent on transport (service users in the UK are expected to take part in lively sing-songs on the bus) and the physical touch between staff and service users as well as the different activities mentioned above.

The Kerala day care staff are responsible for how day care is actually delivered to the service users and their behaviour shapes this. They translate into action the information and ideas given to them by their managers regarding the functioning of day care. The staff do not actively adapt aspects of day care. They simply enact them in a manner that makes sense to them. The CGNs are trying to make day care fit within their culture.

## Translation Theory

To further understand these translation processes and the differences between those undertaken by the key actors and the day care staff it is useful to examine literary translation theories. When considering literal translation it is clear that it is not a linear or purely logical process. Translation is strongly is influenced by the perspective of the translator. Translation methods relate to ideology and therefore to the individual translator's culture and perspective (Toury, 1995: 65). How a text is translated also depends on the original context/culture and the new or target context/culture. The relationship between the two contexts affects the approach to translation and the resulting translated text. The approach taken by individuals translating policy depends on their cultural perspective. Translation has also been considered in relation to organizational

change (Latour, 1986) and to policy change (Johnson and Hagstrom, 2005). These authors also focus on and emphasize the importance of the individual perspectives of the translators involved. Latour (1986) describes translation as a process of social interpretation.

Literary translation is much debated and many theories have been put forward to explain and provide methods for translation (France, 2000). It is possible to describe these as a continuum from word-for-word translation and literal translation through to free translation and adaptation (Newmark, 1988: 45). Word-for-word translation is where word order is maintained and words are translated singly using their most common meanings. This approach may be used to understand the mechanics of the original or as a first stage in translation. At the other end of the spectrum adaptation is the 'freest form of translation' often used for plays and poetry where themes and plots within the original are preserved while the detail is not (Newmark, 1988: 46). To think of these in policy and practice terms word-for-word translation might represent a situation where each element of a service is copied in the target context. An adaptation would represent the development of a new service in the target context based on the general aims and outcomes of the original service. These different approaches to translation often reflect different aims of translators. In this research there are two different levels at which translation takes place and the actors at each level have different motivations and aims and, therefore, have different approaches to translation.

The main agent in the translation process, the translator, is the source of that particular text for the target context or audience. The translation proceeds according to what the translator decides is appropriate and feasible dependent on culture and ideology (Hermans, 2000: 11). The policy maker in a new context translates the policy in a manner that is influenced by his/her culture, ideology and personal motivations. The translated text should fit in the new culture, although it is unlikely that the 'otherness' of the source will be lost altogether (Hermans, 2000: 13). The new model of day care should fit in Kerala. It seems likely, however, that it will retain some accent from the original source, the UK. 'Translated texts invariably signal to textual models of at least two cultures at once' (Hermans, 2000: 13).

The different types of translation result in very different outcomes. When using a word-for-word approach translation the outcome does not look familiar within the target context, it retains much of the original. This type of outcome results from a translation aim known as 'foreignization' (France, 2000: 8). This approach is more commonly used for translations of poetry rather than fiction for which the story is more important than the structure and detail of the text (France, 2000). Maintaining aspects of the original language and trying to replicate specific features of the original results in a text that may strike the reader in the target language as odd. Foreignization may be a product of poor translation but it may also be a deliberate choice of the translator. The translator may want to 'confront the reader with a new or alien world'

(France, 2000: 9). This approach to translation suggests a respect for the original text and a desire to maintain as much of the original as possible within the translated text. It may also issue a challenge to the norms of the target culture (France, 2000: 9).

When using this analogy for services it could be the case that policy makers in the target context think that services in other places are better than those in their context. Alternatively there may be no such services in their context. Policy makers would be expected to pursue a process of foreignization if they want to produce something new and original for their country and to produce something that would stand out from what other people were doing. It may also imply that they have strong respect for other countries and so seek to emulate services in another country. When describing a translation process where the translator has respect for the original some would say that there is subjugation to the original. There is a power relationship with the original text where its author subjugates the translator (France, 2000). Others argue that this respect implies dialogue with the original rather than subjugation to it (France, 2000: 8). Translation generally, however, can be described as a hierarchical relationship whereby the original author of the text is higher than the translator (Simon, 2000). In this example there is a clear power imbalance between the two countries between which the translation processes take place.

At the opposite end of the continuum of approaches to translation there is adaptation. Where a process of adaptation is used the translated text fits within the target culture. The text looks familiar in the new context. This type of approach relates to the ideas of 'acceptability', 'annexation' and 'domestication' and is a common approach to translation (France, 2000: 9). These terms all relate to the fact that the translated text fits well within the target culture. The result of such an approach is a text which creates the illusion 'of a text originally, "naturally" written in the target language' (France, 2000: 4). In this type of translation the original source is hidden and the resultant text familiar and culturally appropriate. However, it lacks all elements of the original. The motivation of a translator using this approach is to produce a user-friendly text that can be widely read and appreciated in the target culture. When thinking about policy and practice the motivation of a translator adapting policy may be to produce services that are appropriate and useful in the target context. Another reason may be that the translator is trying to make sense of the original text. They translate it so that it is easier to understand and makes sense in the target context.

These two extremes of translation suggest a tension between the original and the translated text. Translators could be described as either resisting the original, in the case of domestication, or having an affinity with the original, in the case of foreignization. These tensions affect the outcome, in this case the enactment of day care in Kerala. Whether an individual pursues an aim of foreignization or domestication depends on their personal perspective and motivations. In addition the social, cultural and political context in which they

are operating affects the process of translation through its influence on individuals and the social organizations they operate within.

## Revisiting the Data

The process of cross-national translation discussed in this article involves key actors who reflect on active changes made by themselves to the policy and practice of day care. They have made changes to their perceived model of UK day care with reluctance. The logistical limitations discussed earlier are seen as negatively affecting the resulting day care centre. Their aim as translators appears to be foreignization. They appear enthusiastic for the resulting translated day care centres in Kerala to appear foreign and to retain many similarities with day care in the UK. One key actor often stresses the uniqueness of the two day centres in India and their importance as models for the rest of India. He has brought something from outside India and is keen for this to be apparent. Put simply, the key actors could be described as resisting translation and simply transferring policy and practice from the UK with small changes. However, it is only through analysing their actions within the framework of translation that these motivations and aims become clear. The key actors operate in the global arena and as well as personal motivations they are affected by the push of globalization from the West.

The vertical translations undertaken by the CGNs seem quite different. They do not explicitly reflect on processes of change and adaptation. They adopt ideas about day care and translate these as they enact them. The differences between the behaviour of staff in the UK and Kerala seem to result from the aim of domestication by the CGNs. The CGNs alter aspects of the model of day care to fit with their own culture and social context. They alter the activity of reading a newspaper from that followed in the UK. The CGNs translate this activity to fit with their own expectations of what it means to read the newspaper with others. These differences are also seen in other aspects of day care such as having a cup of tea and travelling on the bus. In the UK these elements are constructed as activities but in Kerala they are 'domesticated' and undertaken in a culturally appropriate manner. In contrast to the key actors the CGNs are not resisting the translation process, they are in effect resisting the introduction of ideas from the UK.

## Discussion

As the processes of globalization continue examples of policy transfer and related concepts are becoming more common. This and the evidence within this article suggest a need for more sensitive and flexible approaches to modelling these processes. Purely mechanistic and rational models do not provide

enough detail to explore the effect of culture and personal motivations on these processes. The concept of translation explored within this article appears to be useful in helping to elucidate the aims and motivations of individuals involved in policy transfer. It seems clear that different individuals involved at different stages of the policy transfer process may have widely differing aims and expectations. The use of translation theory also helped to explore more closely the impact of such transfer processes on the policy and/or practice that is transferred. Johnson and Hagstrom (2005) agree that different concepts such as translation can add to our understanding of policy change and development. They argue that there is room for different theories to fit the many different examples found.

In the earlier discussion it was clear that there were two different types of translation taking place. Cross-national translation undertaken by the key actors appeared fairly straightforward and focused on structural, organizational elements of day care. This process of foreignization was influenced by the motivations of the key actors to produce innovative services but also by globalization processes. The vertical translations undertaken by the CGNs were more subtle and appeared to be undertaken almost unconsciously as the staff enacted day care. The vertical translations resulted from individual behaviour. The CGNs interpret or translate the model of day care they are given and through a process of domestication form a new, more culturally appropriate model of day care. It seems the CGNs 'muddy' the process of globalization. The push of information and ideas from the West is messed up at the local level. Johnson and Hagstrom (2005) also describe different levels of translation and Green (1999) finds that agreement about policy and practice at an international level does not necessarily lead to similarities at a local level.

The concept of translation seems a useful and informative approach to understanding the process of policy and practice development during and following policy transfer between different cultures. The concept of translation allows exploration of the aims of the individuals involved as well as the influence of wider cultural, societal and political factors. By using translation it is possible to include the subtleties of change between cultures and explain the policy and practice outcomes observed.

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APPENDIX A    *Details of the four day centres*

|  | *Day care 1 – Kerala* | *Day care 2 – Kerala* | *Day care 1 – UK* | *Day care 2 – UK* |
|---|---|---|---|---|
| Cost to clients | 0–1500 rupees per month (0 – £20) | 35 rupees per day for lunch and travel (50p) | £1.50 per day for food | £2.00 for food and £1.00 for travel per day |
| Staff title | Community geriatric nurses (CGNs) | No official title | Day care organizers and day care workers | Day care organizers and day care workers |
| Age of staff | 24–36 | 38–48 | 47–67 | 31–63 |
| Staff sex | All female except driver | All female | All female except driver | Day care workers both male and female, driver male and day care organizers female |
| No. of care staff each day | 3 or 4 and the driver | 2 | 2 plus 2 students | 3 plus 2 students or volunteers |
| Staff education and training | Basic school plus one year CGN training course | Older member of staff is qualified nurse, other has basic education | Basic school education plus some unrelated qualifications and organizational training | Basic school education plus some staff have SVQ Level II and others have unrelated qualifications and organizational training |
| Age of clients | 63–86 | 78–90 | 67–99 | 61–92 |
| Gender ratio of clients | 2 men to 1 woman | 1 man to 3 women | 1 man to 5 women | 4 men to 5 women |
| Average no. of days each client attends | 6 | 5 | 3 | 3 |
| No. of clients each day (capacity) | 7–10 (15) | 4 (N/A) | 8 (8) | 12 (12) |

RÉSUMÉ

## La Politique et Pratique Traduit: Les Soins Quotidiens pour les Personnes Atteintes de Démence à Kerala, Inde

Les influences globales et les changements démographiques amènent les gouvernements des pays moins développés à rechercher le soutien des régions plus développées pour obtenir des idées de politique et de service. Celles-ci peuvent être "empruntées" par des processus tels que le transfert de politique (Dolowitz and Marsh, 1996). Cet article examine l'établissement des soins quotidiens pour les personnes atteintes de démence à Kerala, Inde. Pendant le développement de cette politique, des informations et des idées pratiques ont été transférées de pays différents, particulièrement du Royaume-Uni. Des processus de traduction ont lieu pendant le transfert d'informations, ainsi que dans l'implémentation et la promulgation de la politique. Afin de comprendre ces traductions, cet article décrit le développement des soins quotidiens à Kerala et le compare au fonctionnement de centres de soins quotidiens similaires au Royaume-Uni. La mise en évidence de ces processus de traduction est essentielle pour expliquer le développement de services à Kerala et pourrait être utilisé ailleurs pour comprendre d'autres exemples de développement de politiques et de pratiques.

RESUMEN

## Traduciendo la Política y la Práctica: El Cuidado Diario de las Personas con Demencia en Kerala, India

Las influencias globales y los cambios demográficos están conduciendo a los políticos de los países en vías de desarrollo a copiar ideas sobre política y servicios procedentes de regiones más desarrolladas. Dichas ideas pueden, por tanto, ser "copiadas" a través de procesos como la transferencia política (Dolowitz and Marsh, 1996). Este artículo analiza el establecimiento del cuidado diario de las personas con demencia en Kerala, India. Durante el desarrollo de este servicio, diversas informaciones políticas e ideas prácticas son transferidas desde diferentes países, en especial desde el Reino Unido. Estas transferencias implican diversos procesos de traducción. Con el objetivo de comprender dichos procesos, este artículo describe el desarrollo del cuidado diario en Kerala y compara su funcionamiento actual con otros casos similares en el Reino Unido. El concepto de traducción es utilizado para iluminar y explicar los procesos de desarrollo de servicios en Kerala y también puede ser usado para explicar ejemplos de desarrollo de politica y práctica en otros lugares.

BIOGRAPHICAL NOTE

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