

**The Authority of Meta-organisations: Making the International Association of National
Public Health Institutes Attractive to Prospective Members**

Valtteri Vähä-Savo*

Jukka Syväterä

Leena Tervonen-Gonçalves

Faculty of Social Sciences, Tampere University, Kalevantie 4, 33014 Finland.

This work was supported by the Academy of Finland under Grants 276076 and 292353 and by the
Kone Foundation.

*Corresponding author. Email: valtteri.vaha-savo@tuni.fi

Abstract

International organisations are key actors in global governance. Among them is a growing group of international meta-organisations (IMOs) – organisations whose members are themselves organisations. Understanding how IMOs become worth joining demands an explanation of how they try to gain value in the eyes of prospective members. The article analyses the case of the International Association of National Public Health Institutes, which rapidly amassed a membership in excess of 100 organisations from more than 90 countries. The analysis identifies different aspects of epistemic work through which an IMO may accumulate and assert its authority while it aims to become an attractive body to belong to for potential members. Drawing on the theoretical framework of epistemic governance, the article suggests that IMOs are accumulations of authority that can be utilised in national policy-making.

Keywords: authority, epistemic governance, global governance, meta-organisations, neo-institutionalism

Introduction

The world has seen a dramatic increase in the number of international organisations within the last hundred years, which has been particularly pronounced since World War II (Archer, 2014; Boli & Thomas, 1997; Drori, Meyer, & Hwang, 2006). When examining the proliferation of policy-oriented international organisations, many accounts point to such organisations' utility in facilitating collaboration among national governments or within particular stakeholder groups across national borders (Abbott & Snidal, 1998; E. B. Haas, 1980). Importantly, scholars have pointed to the role of transnational networks of professionals and activists in contributing to the formation of 'international regimes' in all the various domains of policy-making (P. M. Haas, 1992; Haggard & Simmons, 1987). They take part in devising, justifying and disseminating policy models and standardised solutions to various problems across nation-states (Boli & Thomas, 1997; Djelic & Sahlin-Andersson, 2006; Schofer, 1999). They pressure corporations and national governments to follow specific ethical guidelines and principles of appropriate behaviour (Finnemore, 1993; Keck & Sikkink, 1999; McNeely, 1995). IGOs and INGOs are also carriers of cultural scripts, classifications and models that institutions and individuals use to define identities for themselves and for others (Finnemore & Sikkink, 2001; Meyer & Jepperson, 2000).

Among international organisations there is a growing group of 'meta-organisations' (Ahrne & Brunsson, 2005), associations whose members are not individuals but other organisations. For example, the EU, NATO, the UN, and other international governmental organisations are in fact meta-organisations whose members are nation states (Ahrne, Brunsson, & Kerwer, 2016; Kerwer, 2013). International meta-organisations (IMOs) differ from individual-based organisations with regard to their resources and makeup (Ahrne & Brunsson, 2008, pp. 57–61). First of all, the number of potential members of an IMO is typically quite small. Usually the members also have larger resources available to them than their international association. Whereas individual-based IOs often carry out campaigns that aim to keep them in the public eye, IMOs may strive to reach their objectives quietly with the support of a small group of members, and by getting recognition from a select group of powerful external institutions. Instead of presenting themselves as spearheads of global political movements that demand radical reforms, they may, in many cases, operate through mundane governance that does not call much attention to itself. This is why the power that IMOs exercise may easily go unnoticed by those who are not directly involved.

Meta-organisations now flourish in almost all sectors of policy-making, but there is surprisingly little research on the dynamics between IMOs and their members. This article turns attention on international meta-organisations, whose members are public policy-related organisations. Public policy-related organisations are typically expert organisations that advise

policy-makers or engage in discussions concerning policy-development. They may be partly or completely funded and steered by national or local governments. Organisations that can be considered ‘national public health institutes’, which we deal with here, are in most cases non-departmental public bodies, meaning that they have their own budgets and enjoy relative autonomy. However, they are often tied to governmental bodies (ministries of health in many countries), which can influence their activities, funding and organisational structures to a very large extent, as is typical with non-departmental public bodies. According to the International Association of National Public Health Institutes (IANPHI 2007a, 3) – an organisation we are studying – national public health institutes ‘provide science-based leadership and public health services, and they help catalyse the responses of countries to important public health challenges’ in collaboration with other public agencies. They may tackle both infectious and non-infectious public health threats.

The purposes and activities of public policy-related organisations tend to be linked mostly to national objectives. This does not mean that they would be inattentive to global issues and interconnections between countries in various policy matters. However, if compared to NGOs committed to solving global problems or companies that operate internationally, it is not obvious that public policy-related organisations become interested in establishing and maintaining international meta-organisations. For NGOs claiming to tackle global issues it is obviously important to create at least an impression of global reach and worldwide support, if they are to be taken seriously. For companies with international operations, IMOs provide a way to set global standards, without which competition and trade in products and services across national borders would be extremely difficult (Ahrne & Brunsson, 2008, p. 152). For companies, setting standards within IMOs can also be a form of self-regulation that protects them from external governmental interventions and hence reduces uncertainties (Berkowitz, Bucheli, & Dumez, 2017).

However, it is difficult to ascribe similar incentives to public policy-related organisations, which advise local governmental bodies and are tied to national policy issues. Public policy-related organisations are not typically expected to directly affect the world on a global level or to compete with international rivals in the world markets. Their main duty is to serve local decision-makers. Given the challenges of establishing successful IMOs and running them effectively (Ahrne & Brunsson, 2008, pp. 62–90, 108–122), a decision to set one up is probably not taken lightly. If one is simply interested in exchanging ideas with similar organisations in different countries – instead of engaging in the more serious business of devising global standards for all the members – there are much less demanding forms of networking available for communicating and disseminating information, ranging from informal contacts to the organisation of conferences.

For a prospective member organisation, joining an IMO is not necessarily always a worthwhile decision. As previous studies (Ahrne & Brunsson, 2005; 2008, pp. 107–113; Jacobsson & Sahlin-Andersson, 2006; Karlberg & Jacobsson, 2015) have shown, joining a meta-organisation involves a risk of decreased autonomy: being a member may entail losing some freedom to determine one's own purposes and modes of action. A meta-organisation may try to assume some of the tasks previously handled by the members, seek to impose norms on them or engage in a struggle for power with the members. Joining an IMO can be interpreted as a sign of support for the meta-organisation. Unless an organisation is sure that the international meta-organisation will support its agenda, joining and paying the fees may not seem worth the effort. For this reason, each meta-organisation needs to convince potential members about the significance of the meta-organisation and of the benefits involved in becoming a member.

Our interest lies in the role of organisations as authorities in *epistemic governance* (Alasuutari & Qadir, 2014). Earlier work (Alasuutari, Rautalin & Syväterä 2016) suggests that domestic policy actors are eager to create and be active in international organisations because they can capitalise on the authority of such organisations in struggles that are played out in the national political arena. Acknowledging this, IMOs are likely to emphasise this authority in order to recruit new members. In light of this, we propose that in order to understand why organisations decide to join an international meta-organisation, one needs to look at how IMOs strive to construct themselves as valued sources of authority with regard to potential members. Because successful recruitment is vital for the existence of meta-organisations, they need to be able to present the benefits obtained through membership in an evocative yet credible manner. We show here how a recently established IMO constructs itself as such an authority while it seeks to recruit members.

Our conceptualisation of authority is based on the emerging analytical framework of epistemic governance (Alasuutari, 2016; Alasuutari & Qadir, 2014). We use the term 'authority' to refer not to domination in a Weberian sense (Weber, 1978) but to any culturally legitimated source of expertise, capability, or norms (Alasuutari, 2018). Considered from the epistemic governance perspective, the politics of policy-making consists of attempts to influence hegemonic understandings of the current situation, of the actors involved and of what constitutes desirable and acceptable goals for policy-making. In these attempts, actors must either use their own authority or rely on that of others. In any case, this authority depends on its recognition by other actors. Such attempts to shape future policies by influencing others' conceptions of social reality can be characterised as 'epistemic work'. Such epistemic work acts on three objects: ontology of the environment, actors and identifications, and norms and ideals (Alasuutari & Qadir 2014, pp. 72–78). When actors involved in policy-making suggest and justify policy moves, they perform epistemic work that extends across all

three of these objects. All justifications are related to hegemonic understandings as to what is an accurate way to comprehend the situation at hand; who are the relevant actors to be taken into account; and which norms and ideals should be applied.

In this article, we unpack how an international meta-organisation accumulates and asserts its authority while it aims to become an attractive body to belong to for public policy-related organisations. This means examining the forms of epistemic work that the meta-organisation carries out, which are presented as beneficial for the national organisations and which can only be carried out through an international meta-organisation. It also includes paying attention on concrete activities, carried out by the international meta-organisation, which are portrayed as useful to the members, given their mostly-national scope of operations. The article provides an in-depth analysis of a single case, that of the International Association of National Public Health Institutes (IANPHI). Analysing the self-presentations and activities of this recently established meta-organisation gives a fruitful perspective on how a recently-formed international meta-organisation may try to accumulate authority and build itself into a prestigious actor.

The contribution of our article is twofold. Firstly, we advance the understanding of international meta-organisations by illustrating concrete practices through which they attempt to become recognised authorities in their field. Specifically, it throws light on epistemic work actually done by such an organisation – which can also be used in order to convince potential member organisations about the benefits and rationales of joining it. Secondly, while earlier studies have considered how domestic policy actors use the authority of organisations as a rhetorical resource, this article focuses on the ways in which organisations accumulate and assert that authority. Thus the study adds a further layer to the neo-institutional account of worldwide organisational expansion. World society scholars have previously relied on macro perspective statistical studies, seeking to explain the diffusion of different organisational models across nation-states (Boli & Thomas, 1999; Bromley & Meyer, 2015; Meyer & Bromley, 2013). How international meta-organisations themselves contribute to the ‘theorization’ (Strang & Meyer, 1993) of the benefits of international associations has not been sufficiently analysed, and little attention has been paid to their ways of promoting institutional solutions for local actors.

In the next section, we introduce our case study. Then we present our main findings in four sections, focusing on techniques the IANPHI utilised in accumulating authority, and the way it has aimed to assert its usefulness for its members. By way of conclusion, we discuss the implications of the results for a more comprehensive understanding of the role of meta-organisations in global governance.

The Case Study

The IANPHI was established in 2006 and soon amassed a membership base of 100-plus organisations from more than 90 countries. The organisation has been very successful in recruiting members and gaining recognition, which makes it an intriguing case to study from our viewpoint. The IANPHI was set up in the wake of global outbreaks of SARS (severe acute respiratory syndrome) and avian influenza, which shook the world in the early 2000s. There was a strong feeling of urgency around the globe to tackle such public health risks by any means available (Rodier, Greenspan, Hughes, & Heymann, 2007; WHO, 2008). The representatives of the newly established IANPHI offered their association as one remedy. As an international organisation dedicated to public health it could spread useful information and foster links between relevant organisations across the world.

However, the IANPHI is not an institution designed to fight for global health by any means necessary. It was established specifically as an organisation for national public health institutes. This means that other types of institution, such as university departments and private research units, which specialise in matters of public health, cannot join the association if they are not regarded as proper national health institutes by the IANPHI, as is stated in its constitution (IANPHI, 2006, p. 4).

At the time of the establishment of the IANPHI there did not appear to be any lack of international organisations dealing with issues of public health¹. In fact, two years later in the United Kingdom, a report by the House of Lords (2008, pp. 32–34) specifically criticised the crowded and fragmented field of international organisations dealing with public health issues. What was novel about the IANPHI was that it was to be an association of the NPHIs, by the NPHIs and for the NPHIs. Its mission of promoting public health globally was to be carried out by promoting national public health institutes.

However, since a universally accepted definition of a national public health institute did not exist, the IANPHI set itself the task of constructing a globally applicable definition of an NPHI and getting it recognised by others. The IANPHI (2007a, p. 9) explains the need for this endeavour in the following way:

We hope that by defining critical characteristics of an NPHI, we can bring specificity to IANPHI's vision, align IANPHI's efforts to assist low-resource countries to build NPHIs [...] and provide benchmarks and tools that will help any country assess and

¹ Before the IANPHI, there were already several international governmental organisations (e.g. World Health Organization, the Pan American Health Organization and the European Centre for Disease Prevention and Control), and international non-governmental organisations (e.g. the World Federation of Public Health Associations, the International Union for Health Promotion and Education, the Association of Schools of Public Health in the European Region, the International HIV/AIDS Alliance, the International Society for Infectious Diseases, the International Union Against TB and Lung Diseases, the Malaria Consortium, the Target TB and the TB Alert) tackling public health issues and infectious diseases.

improve the functioning of its NPHI. [...] Because the definition will be easily accessible on the IANPHI website, it can provide a framework and clarification of important considerations for any country that is developing public health infrastructure, regardless of IANPHI involvement, and for other organisations seeking to assist countries in enhancing the public's health.

We shall present in more detail what this definition consists of in the following sections.

Administratively the IANPHI is built around an Executive Board, a secretariat, and a foundation. Its overall management is handled by the first of these, a 12-member body accountable to the General Assembly, which, in turn, is composed of representatives of all member organisations. The General Assembly convenes annually. The Executive Board decides on which institutions shall host the association's secretariat and offices, which are currently co-located on two continents: the US office is hosted by Emory University's Global Health Institute, and the secretariat is housed at France's Institute of Public Health Surveillance (IANPHI, 2016b). Finally, the IANPHI Foundation is hosted at the National Institute for Health and Welfare in Finland. This foundation serves as a technical body that manages the IANPHI's resources. With the membership fees modest, IANPHI's development projects remain dependent on external funding. By 2016, the association had leveraged, in total, \$68.7 million to support NPHI projects in resource-poor countries (IANPHI, 2016a). Low membership fees may help in recruiting members, many of whom are from low-resource countries, but this of course limits the resources of the organisation.

Our dataset consists of documents published on IANPHI's website between the years 2006–2017. The organisation publishes a wide spectrum of documents on its web pages from technical advice and best practice guidance to newsletters, from exemplary NPHI mission statements and strategies to various kinds of follow-up reports, surveys, histories, and case illustrations. In addition to collecting and disseminating information about the member organisations and advocating the NPHIs to international and national governmental bodies, the IANPHI is involved in several projects to establish, develop and evaluate national public health institutes in various countries. Altogether we gathered over 380 pages of material for analysis from the web pages. In addition, we analysed five articles written by representatives of the IANPHI (Adigun, Dusenbury, & Schoub, 2007; Binder, Adigun, & Greenspan, 2008; Binder & Laing, 2009; Koplan, Dusenbury, Jousilahti, & Puska, 2007; Rodier et al., 2007) which were published in scientific journals between 2007–2009 in order to promote the association and legitimise its existence for the relevant research-oriented audience. To get an understanding of how the meta-organisation is perceived and utilised by the members, we also searched the websites of the member organisations for references to the meta-organisation.

Our analysis draws on the theoretical framework of epistemic governance (Alasuutari, 2016; Alasuutari & Qadir, 2014; 2016). This framework offers not detail-oriented methodological tools but, rather, a set of key concepts and a certain perspective on analysis, which have guided our study on the construction of objects of knowledge and the justification strategies used to influence people's beliefs and epistemic assumptions. This framework follows the more general analytical approach of discursive institutionalism (Schmidt, 2010; Alasuutari, 2015) as it examines the discursive processes by which ideas are constructed, conveyed and exchanged through discourse, while taking into account the power relations involved. In the analysis we have drawn on the tool box of discourse analysis (Fairclough 2003; Wood & Kröger, 2000) to scrutinize how identities are shaped, policies are justified and moral principles are evoked in the interaction between international meta-organisations, their members and external institutions.

Our interest in how the IANPHI justifies itself to its members and builds itself into a recognised authority led us to scrutinise how the statements made by the IANPHI legitimate the meta-organisation. We examined what kinds of rationales the IANPHI offers – more or less explicitly – for potential members to join. We analysed statements made by the organisation with a focus on the three objects of epistemic work: ontology of the environment, actors and identifications, and norms and ideals. In practice this meant analysing, for example, how these statements outline legitimate expertise concerning different issues and how the organisation defines its own competence in making truth claims. We looked at what kinds of categories of actors were constructed in the statements and what types of identities and attributes were assigned to different actors. Finally, we analysed how the statements constructed ideas of what should be conceived as just and desirable.

Accumulation of Authority

Controlling Knowledge about the Members

The IANPHI is an organisation expressly dedicated to improving global health. It has been involved in efforts to establish new national public health institutes in many low-income countries by offering finance and advice in these endeavours and by trying to convince local decision-makers of their necessity. The organisation claims to contribute to the enhancement of global public health through producing and disseminating knowledge. However, many of its functions and a large amount of its knowledge production are, in fact, focused on drawing out the defining features of its member organisations. In these efforts, it seems at least as interested in who its members are, and how they should be viewed, as it is in tackling public health issues. This makes sense when one realises that the organisation is not only engaged in solving global public health issues but also in defining and constructing a coherent model for certain types of actors in the field of public health.

Formulating a common model happens through three steps. The first involves labelling all the member organisations of the IANPHI as national public health institutes (NPHIs). An elucidative distinction is drawn by Ahrne and Brunsson (2008, pp. 95–97), between ‘first names’ and ‘last names’ of organisations, where the former is the proper name used by an individual organisation and the last name designates the category of organisations it belongs to. Organisations bearing different first names may still share a common last name. Since the IANPHI is a relatively young organisation and many of its members were established several decades earlier, the members are not expected to change their names in taking on this label. For instance, both Cameroon’s Department of Disease Control and Madagascar’s Institute of Health Monitoring and Disease Surveillance are defined as instances of NPHIs by the IANPHI. However, when a new institution dedicated to public health issues is established or an old one reformed with the IANPHI’s aid and guidance, they are likely to be baptised as national public health institutes. Good examples are the establishment of the Ethiopian Public Health Institute (EPHI) in 2014, the Zambian National Public Health Institute (ZNPHI) in 2015 and the National Public Health Institute of Liberia (NPHIL) in 2016 with IANPHI’s support. Through this epistemic work, meta-organisations not only affect the self-image of their members but also reinforce the common label in the eyes of the wider public.

The second step is forming a standard blueprint for an NPHI, addressing how one is built, what it ought to aim for, and how it should operate. For this purpose, the website of the IANPHI provides an ‘NPHI tool kit’ that describes how to establish a new NPHI or develop an existing one in the right direction. One of the tools is a key document called the Framework for the Creation and Development of National Public Health Institutes (IANPHI, 2007a). This outlines nine core attributes and eleven core functions of any NPHI, stating what an NPHI should be like and what criteria can be used in evaluating such organisations. Examples of key attributes are: having influence on major national public health problems; and, contributing to policy planning while making sure that political influence in return does not undermine the organisation’s scientific foundation. Also, among the core attributes mentioned are having adequate infrastructural support and sufficient human and financial resources. The eleven core functions of an NPHI are (ibid, p. 14):

1. Evaluation and analysis of health status,
2. Public health surveillance, problem investigation, and control of risks and threats to public health,
3. Prevention programmes and health promotion,
4. Social participation in health,
5. Planning and management,
6. Regulation and enforcement,
7. Evaluation and promotion of coverage and access to health services,
8. Human resource development and training,
9. Quality assurance in personal and population-based health services,
10. Public health research,
11. Reduction of the impact of emergencies and disasters on health.

Setting such criteria for qualifying to be an NPHI enhances both the prestige of the meta-organisation as a selective entity and the stature of each member; being deemed to have satisfied them is a sign of international recognition, as can be seen in a document presented for the board of Public Health Wales, when it gained associate membership in 2012 (Public Health Wales, 2012):

The issues debated and collaborated upon in IANPHI span the breadth of interests of Public Health Wales, illustrating that in becoming a member, Public Health Wales as a whole is considered a NPHI.

As the quotation shows, the acceptance of the institute as an associate member of IANPHI is considered to solidify the organisational identity of Public Health Wales as a proper NPHI. Later, when Public Health Wales is accepted as a full member of IANPHI in 2018, the organisation (Public Health Wales, 2018, p. 23) again underlines how it has ‘gained international recognition through full membership of the International Association of National Public Health Institutions’. In both statements the value of being accepted in an international meta-organisation is not derived from being able to collaborate with similar institutes in other countries but from international confirmation of an organisational identity and from the entailing recognition gained on the international scene.

In reality, several organisations considered to fall in this category do not really adhere to the model constructed by the IANPHI. However, this seems to be of little importance. What matters is the existence of a model that delineates their ideal shared essence. Widespread divergence from the model is insignificant because the model is characterised as describing the pinnacle of evolution for NPHIs. When presenting the model, the IANPHI supplies a definition for a ‘well-developed’ and ‘comprehensive’ NPHI. In this framework, variation in form does not mean that one is dealing with different types of organisations. It simply means that individual organisations are at different points on their evolutionary path. The IANPHI (2011b, p. 21) describes the phenomenon as the ‘NPHI continuum’:

It often takes decades from the time an NPHI is first created until it can perform many or most of the core NPHI functions and address a range of health problems. [...] As NPHIs move along the NPHI continuum, they should be envisioning a future in which they address infectious and non-communicable diseases and conditions, as well as injury and violence prevention, environmental and occupational health, health inequalities and health systems and health services research.

From this evolutionary viewpoint the diversity among the NPHIs appears as just a natural stage on the path to a globally unified group of comprehensive NPHIs. The IANPHI (2012, p. 17) presents itself as a key actor in strengthening national health systems ‘by moving NPHIs forward along a continuum toward more technical depth and comprehensive capacity’.

What is important here is that an international meta-organisation can have a pivotal role in constructing a global, unifying model for numerous organisations. This work involves re-codifying many already existing organisations into empirical examples of the constructed model. When constructing a model, a meta-organisation does not necessarily come up with an idea for a completely new type of institution, one that takes care of tasks never conceived of before. Instead, most of the organisations that can take up the mantle may already be part of the landscape, with the meta-organisation just aiming to re-label them comprehensively, thereby rendering them fitting candidates for membership. In this sense, the NPHI model is an example of how a well-defined global model can be used to re-conceptualise and re-label a group of existing organisations (see Syväterä & Qadir 2015). The model is utilised to construct a common purpose and shape for organisations that are already in place. When effective, this type of epistemic work shapes the organisational identity of the institutes involved and affects the way other actors perceive those organisations and their main functions. After a while, the novel nature of the model and the process of its construction may be forgotten and the category starts to appear as part of the natural order of things. Successful conceptual re-codification leads to all the relevant organisations being considered as local enactments of a universal organisational type, instead of the model itself being seen as a conceptual re-codification of already existing organisations on the global level.

The third step in constructing the model and ‘making it stick’ is to take control of the knowledge pertaining to the member organisations and their activities. The IANPHI has put considerable effort into making itself known as the ‘go-to expert’ for consultation on assessing or organising public health institutions worldwide. Besides codifying a standard model and constructing an evaluation tool for NPHIs, the IANPHI has been actively involved in creating and reforming NPHIs in, for example, Pakistan, France, Guatemala, Sierra Leone and Guinea-Bissau. All this work contributes to the project of validating the IANPHI as the predominant authority in the members’ field of operation.

The meta-organisation also produces and disseminates information about the members, thereby improving their visibility. For example, the IANPHI collects and presents basic facts about member organisations and publishes case studies illustrating the creation and development of NPHIs in various countries. Through this knowledge production and dissemination of information, the members are rendered observable both as individual organisations and as a united group of organisations with a shared identity and mission. The goal is to guarantee that the members and the association they represent are acknowledged nationally and globally. The IANPHI (2007b, p. 7) has also emphasised its own importance in ‘drawing attention to and increasing support for the public health institutes of the world’ by building this knowledge base.

The activities of the IANPHI can be described in general as engagement in defining what it is to be an NPHI and by what criteria such bodies should be evaluated. It is very unlikely that any of the members could take on these tasks unaccompanied in an authoritative manner that would be accepted by other organisations working in the field of public health or by national decision-makers. Together, though, these institutes can form an international organisation potentially capable of this, because the meta-organisation, not being tied to any specific country, region, or individual institute, can more easily be presented as a ‘disinterested other’ (Meyer, Boli, Thomas, & Ramirez, 1997) with regards to expertise concerning the NPHIs. Following world society scholars (see Buhari-Gulmetz, 2010), by ‘disinterested others’ we refer to international organisations that act as script writers and carriers of global cultural models. These organisations disseminate discourses and offer universalistic policy advice to national policy-makers and individuals with the idea that the models they propagate are globally-applicable best practices. Many international organisations, like the OECD, may not be considered objective by everyone, but the knowledge they produce, such as the PISA results, can often be utilised in national policy debates as seemingly apolitical facts (Berényi & Neumann, 2009; Grek, Lawn, & Ozga 2009; Rautalin & Alasuutari 2009) as the organisations are not entangled in national political battles and they present themselves as expert organisations. In the case of the IANPHI, the meta-organisation may not have all the material resources that the member organisations have, but it has potential to become a widely recognised authority whose views cannot be easily sidestepped.

Manufacturing Political Ammunition

The IANPHI promises to support its members and to act as their advocate worldwide. A big part of this is equipping the members with arguments that are effective in promoting NPHIs nationally. In a sense, the IANPHI can be seen as manufacturing political ammunition for local debates wherein the destinies of these organisations are at stake. It advises on what the national organisations should tell their national decision-makers and funders in order to keep them investing in public health and, in turn, keeping the NPHIs alive. The IANPHI (2007a, p. 6) has also highlighted its usefulness in this regard:

Because many public health interventions [...] take years to show benefit, positive reinforcement for decision-makers who invest in public health may be slow in coming. IANPHI can help by providing training and tools to help public health officials make the case in their countries and with donors for investment in public health.

An important part of this effort is to outline the prerequisites for appropriate national policy-making. Not surprisingly, the IANPHI recommends that decision-makers rely on the NPHIs and offer

them adequate resources to handle matters of public health. It is typical for meta-organisations to define appropriate member behaviour (Ahrne & Brunsson, 2008), but we suggest that they also engage in epistemic work seeking to specify how relevant external actors should behave if desiring to be considered legitimate actors – for example, how national decision-makers should act and on what kind of knowledge they should rely if they are to be seen as fulfilling their responsibilities. For instance, if decision-makers wish to appear to care about the population's health, they must secure proper resources for the national NPHI:

An NPHI represents a long-term, sustained commitment to the country's population. It must have a dedicated and separate budget, which is largely predictable from year to year and includes adequate funding to carry out the Core NPHI Functions (IANPHI, 2007a, p. 13).

The IANPHI details how the decision-makers should view their relationship with the NPHIs and the way in which their ability to make competent judgments depends on the expertise and guidance provided by NPHIs. Furthermore, an NPHI's government funding can easily be used as a benchmark indicator of the value accorded to public health by the government in comparison to other countries. If a government is run properly, the 'NPHI should be a main source of technical and scientific information for the Ministry of Health, legislators, and other parts of government' (IANPHI, 2007a, p. 11).

Providing the codified model as a leverage for members

There are also less straightforward ways in which the authority of the IANPHI can be perceived as beneficial for the NPHIs. The codified standard model of NPHI, which we discussed above, can offer a useful guide for establishing a new NPHI, but the model can also be used as a leverage by the members when they are demanding improvements from the government. A good example of NPHIs using the authority of the IANPHI and its codified model is the long-lasting effort to merge the Institut Pasteur du Maroc (IPM), the Institut National d'Hygiène (INH) and the Directorate of Epidemiology and Fight Against Diseases (DELM) in Morocco² (IANPHI, 2007c; 2011a; 2011d). All of these organisations are members of the IANPHI. The endeavour was initiated by the directors of the IPM and INH and it received strong support – including financial³ – from the IANPHI. According to the accounts presented by the IANPHI and the director of the IPM (Hassar, 2008), the DELM, which is

² The Poison Control Centre of Morocco has also been considered as one of the institutes to be merged in some plans (IANPHI, 2011c).

³ The IANPHI Executive Board approved a \$200,000 grant to the Moroccan Ministry of Health to make this 'transformative effort' happen in 2011 (IANPHI, 2011c).

an agency under the Ministry of Health of Morocco, was not an enthusiastic participant. The proponents (Hassar, 2008; IANPHI, 2007c; 2011a; 2011d) depicted the merger as a way to create a public health institute in Morocco that would resemble the standard model codified by the IANPHI; it could be considered a ‘comprehensive’ NPHI and there would only be one national NPHI instead of three.

Despite all the financial and normative support by the international meta-organisation, creating a ‘comprehensive NPHI’ in Morocco has languished without any final solution. Nonetheless, it is important to note how the authority of the IANPHI and the codified model were invoked from very early on. The IANPHI released a case study in 2007 (IANPHI, 2007c), which proposed consolidating the ‘IPM, INH, and DELM into a single NPHI’. A year later, the director of the IPM, Mohammed Hassar (2008) published a paper in the *Journal of Public Health Policy* promoting the merger. In the paper titled *NPHIs and Public Goods: A Perspective from Morocco* the director of Institut Pasteur du Maroc, Mohammed Hassar (2008, p. 22-23), notes that his institute is one of the founding members of the IANPHI and that:

Since the publication of the NPHI Framework in Spring 2007, NPHIs have used the concept of Core Functions to help describe key public health activities of national governments. In some countries, most Core Functions reside in a single organisation. Morocco’s public health infrastructure is not simple, because the Core Functions are split among three organisations: IPM, Institut National d’Hygiène (INH), and the Directorate of Epidemiology and Fight Against Diseases (DELM).

As the excerpt shows, the director evokes the guidelines set by the IANPHI as something that has been generally accepted and endorsed by NPHIs. In the paper, the director mentions that NPHIs ‘provide critical functions that protect the public health’ (Hassar, 2008), but, according to him, in Morocco these functions are untypically divided among three organisations, which ought to be merged into a single agency. The IANPHI’s *Framework for the Creation and Development of National Public Health Institutes* is presented as a globally shared view of what NPHIs are and how they should operate. Evoking the standard model of an NPHI, which has been constructed and made to appear as a universal solution to certain problems by the IANPHI, makes the situation in Morocco seem like an anomaly that should be corrected by merging the three national institutes into one.

The Moroccan case illustrates two sides of the authority of international meta-organisations. On the one hand, the directors of IPM and INH could invoke the status of an international expert organisation in trying to push through their agenda nationally. The guidelines presented by the IANPHI gave their claims added strength as the international meta-organisation appeared to present factual and disinterested views on how NPHIs should be built up and operate. These members of the

IANPHI could borrow the authority accumulated in the international meta-organisation and use it to their advantage (cf. Alasuutari, Rautalin & Syväterä 2016).

On the other hand, the model of one NPHI per nation, which the IANPHI advocates, could appear problematic for some members. In 2016 there were ten countries that had several organisations as members of the IANPHI. There are likely even more cases where various organisations dealing with public health issues have been competing for recognition within the same country, but only one organisation is a member of the international meta-organisation. For many of these institutions, the ideal of ending up with only one NPHI per country could appear daunting – especially if they are not the strongest national candidate for the position. The more the model gains recognition, the more likely there are demands to do away with ‘unnecessary’ institutions through mergers or funding cuts and focus only on one NPHI in a country. As some organisations, like the IPM in Morocco, are utilising the authority of the IMO, they are at the same time offering further validation for that authority and for the model it is propagating. By applying the authority of the international meta-organisation, they are making it even stronger, and in the process, they are making themselves more vulnerable to its authority in defining what a proper NPHI should look like. If the IANPHI is to promote one of the national institutes as the predominant NPHI in a country, the local government may be inclined to share the view and merge the competing organisations into it.

Another example of the potential problems posed by the authority of the IANPHI and the standard NPHI model it defines can be seen in IANPHI’s (2017) evaluation report of Public Health England. The report mainly compliments Public Health England, but it also raises some concerns. One is the question of Public Health England’s reliance on outside revenue to carry out its functions. According to the report this practice diverges from the way NPHIs are typically funded as ‘in most countries’ NPHIs, funding for public health functions, a public good, is the sole responsibility of Government or comparable public bodies’ (ibid., p. 10). The situation at Public Health England does not fit well with one of the core attributes of NPHIs, which requires that an NPHI should have predictable funding from year to year to carry out their core functions.

The evaluation report (IANPHI 2017, pp. 10–12) also takes up the issue of whether it is acceptable for NPHIs to charge for products and services they have developed. It was noted that Public Health England had been developing patents on its products and services, which made those inaccessible to some countries. According to the evaluation team ‘such products should be available globally for the public good’ (ibid., p. 11). The report recommends that Public Health England should ‘support an international workshop led by IANPHI to consider when it is appropriate for NPHIs to charge for products and services they develop’ (ibid., p. 12). While the acceptability of developing patents is not yet explicated in IANPHI’s standard model for national public health institutes, the

report shows IANPHI taking a stance on the issue. The report also mentions an international workshop led by IANPHI, which will tackle the issue. If the workshop leads to IANPHI defining new rules of appropriate behaviour for NPHIs, it may make it hard for some members to legitimate their current practices. In this case the standard model can be turned into a leverage that the meta-organisation may use in efforts to guide its members.

Then again, as much as the standard model can be used to demand reforms by the NPHIs or to guide the members by the IANPHI, it can also be used strengthen organisational identity. It is easy to see why many NPHIs may have been tempted to construct a strong organisational identity and solidify the family name 'NPHI' as the 2000s began to unfold. The threat of pandemics at the dawn of the millennium was without doubt a significant factor in building support for establishment of the IANPHI, but there was another rapidly spreading menace in the air at the time. The state research institutes of various nations came under threat as Europe was swept by a trend towards reforming public research organisations by merging them with each other or privatising them (Cruz-Castro & Sanz-Menéndez, 2007; OECD, 2011; PREST, 2002; Senker et al., 1999). The NPHIs were among many entities struggling to retain their status and independence.

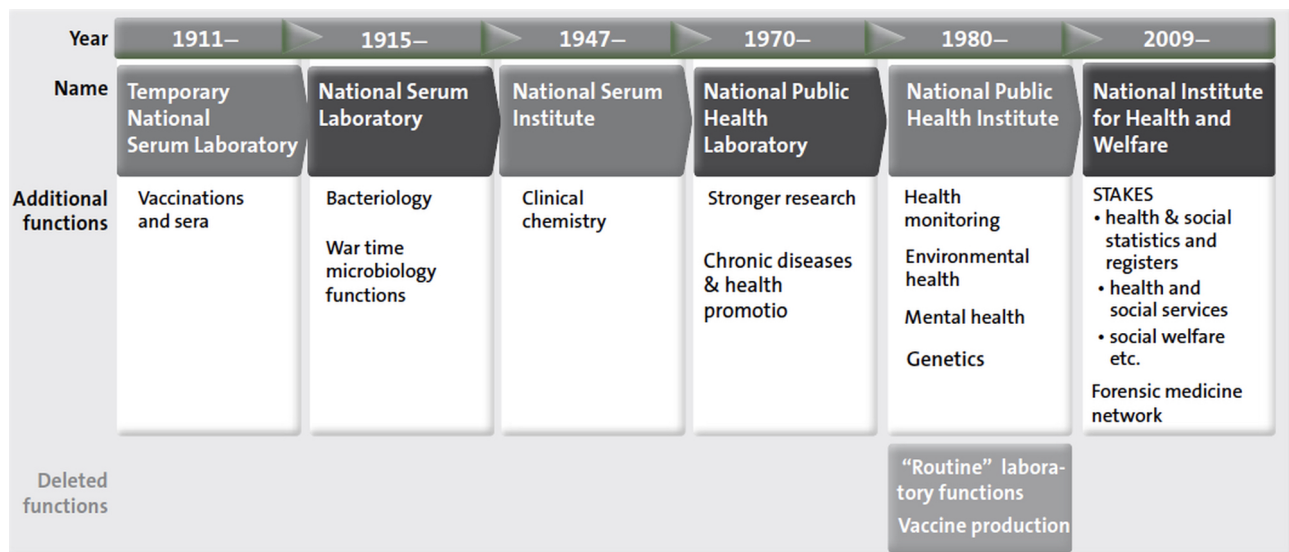
Typically, NPHIs act under the authority of a national health ministry or are otherwise public research organisations; therefore, they can be reformed against their will by legislators. They may be merged with other research institutes, cut into smaller pieces and shuffled around, moved to universities' jurisdiction, or privatised. For example, for a few years post-2000, plans were made to do away with all state research institutes in Denmark by merging them with universities (Danish Agency for Science, 2009, pp. 64–66; Danish Government, 2006).

The start of the millennium saw many NPHIs facing the problem of going by two different family names. An organisation that might be seen as an NPHI by some actors could be considered a part of the well-established group of state research institutes by national policy-makers. National decision-makers might view these institutes as just another group of organisations within the national research system made up of universities, private research units and state research institutes. When national policy-makers were deliberating reforms to the domestic research system, they were likely to view NPHIs first and foremost as members of the state research institute family rather than as part of the global group of NPHIs. As the specific organisational identity of NPHIs was not well-recognised and defined, local policy-makers could find it reasonable to merge national public health institutes with universities as happened in Denmark, or to merge them with other state research institutes as happened in Finland (see below).

What the IANPHI could bring into play in this situation was highlighting the special characteristics of NPHIs and distancing them from the other state research institutes, so that it would

seem logical to safeguard them against unwanted reforms. By establishing an international meta-organisation consisting only of NPHIs and by describing the defining features of NPHIs, these organisations were presented as having a very special organisational identity, which should not be meddled with. Their identity as NPHIs outweighed their identity as state research institutes. Even when an organisation is unable to avoid a merger, a strong and widely recognised organisational identity may help it hold on to its identity in the wake of reorganisation. A merger might even make the organisation stronger and more influential, as seems to have occurred with the former NPHI of Finland. In Finland, the National Public Health Institute was merged with the National Research and Development Centre for Welfare and Health in 2009. Although it lost the title ‘national public health institute’ in connection with the merger, the newly established institute is still recognised as an NPHI by the IANPHI. Hence, the larger organisation formed in the merger is more likely to be considered an expanded version of the old NPHI than a new type of organisation. An example of epistemic work aimed at giving just this impression is shown below in Figure 1, which appeared in the IANPHI report on European NPHIs (2011b, p. 6)⁴.

Figure 1. The IANPHI’s depiction of the history of the Finnish National Institute for Health and Welfare



According to the report, the figure presents ‘the development of the Finnish National Institute of Health and Welfare from a Temporary Serum Laboratory into a comprehensive NPHI in 100 years’. What the figure lacks is an account of the history and development of the other institute involved in the merger, the National Research and Development Centre for Welfare and Health. Here, the latter institution is characterised merely in terms of ‘additional functions’ that were annexed to

⁴ Although the document is officially an IANPHI report, it was written by two former directors general of the National Public Health Institute of Finland, one of whom was also the director general of the merged entity when the report was published.

the National Public Health Institute of Finland, whose organisational identity is depicted as remaining fundamentally intact. Accordingly, the newly established National Institute for Health and Welfare is portrayed as just a more comprehensive version of the old National Public Health Institute of Finland.

Aligning Interests

An important part of the accumulation of authority is to align interests by building a global network of actors with shared interests. A key aspect of this is getting oneself *certified*⁵ (Ancelovici & Jenson, 2013; Tilly, 2003, p. 85) as an authority by other actors. The IANPHI draws on two sources for recognition and support of its actions. Firstly, its broad membership base attests to its authority. The number and quality of members show that the meta-organisation is backed up by the organisations it claims to represent. That is why the IANPHI has engaged in extensive marketing work on its own behalf and attempted to prove its usefulness to potential members, as can be seen from the following statement in which the IANPHI (2007b, p. 2) describes its activities:

In our first year of activity, we created a vibrant global network for knowledge sharing and information exchange, as well as a series of evolving regional activities. We initiated nearly 20 projects in low-resource countries to build and enhance NPHIs, and we published numerous reports and articles about NPHIs and what they do.

The pace at which the number of members has risen demonstrates that the IANPHI has succeeded well in this task. A mutually reinforcing dynamic exists between international meta-organisation and national member organisations. The more groups join the meta-organisation, the more prestige and authority it gains. Simultaneously, the greater the prestige and authority the meta-organisation gains, the more the member organisations look to benefit from it in the national and international field. The way the number of members affects the prestige of an IMO can be seen in the case of Public Health Wales joining the IANPHI. Public Health Wales was accepted as an associate member of the meta-organisation during the annual meeting of IANPHI in October of 2012. Afterwards, the board of Public Health Wales was presented with a report of the meeting that noted:

The level of attendance at this meeting confirmed that IANPHI is a credible, high level and global network that Public Health Wales should benefit from. (Public Health Wales, 2012, p. 5)

As the excerpt shows, simply the number of attendees at the annual meeting was taken as proof of the credibility, quality and reach of the meta-organisation. Together these were interpreted as a sign

⁵ By 'certification' we refer to public political endorsement by another prestigious institution, not to any official procedure.

of the usefulness of the IANPHI for its members. Public Health Wales became a full member of IANPHI in 2016. It has also been noted (Ahrne & Brunsson, 2008, p. 88) that when the membership of a meta-organisation grows large enough, it can reach a threshold beyond which the remaining candidates are likely to join purely because they do not want to be left 'outside the loop' or stand out as being somehow idiosyncratic.

Secondly, the IANPHI is certified by significant external authorities and alliances. The Gates Foundation has provided funding and recognition since the meta-organisation's inception and, indeed, has made its very establishment possible. Another important endorsement comes from the World Health Organization (WHO), swiftly giving the IANPHI the global recognition it sought:

WHO Director-General Margaret Chan intends to be actively engaged in promoting IANPHI's projects to create national public health institutes, which she views as a much-needed way to develop sustainable public health systems over the long term [...] IANPHI and WHO signed a Memorandum of Understanding in October 2009 that includes a focus on NPHI development projects and a framework for NPHIs (IANPHI, 2010).

It would be difficult to find a more powerful partner than the WHO to legitimate a new actor in the field of global public health. The IANPHI can use this collaboration to present itself as a formidable global player, whose views cannot be brushed aside easily.

For the Gates Foundation and the WHO, the IANPHI provides an interface that facilitates reaching numerous NPHIs, around the world at the same time. Instead of contacting a host of individual organisations spread over numerous countries, and attempting to spark collaboration with or among them, those seeking a partnership can approach just one organisation, an interface that can take care of the rest. Adding further value from the perspective of an entity seeking a partnership, the meta-organisation possesses the expertise necessary for judging whether a given institute is capable of seeing specific public health initiatives through and is using the right tools for that job.

Certification by outsiders such as the Gates Foundation and the WHO gives the IANPHI a certain amount of independence: it is not reliant on its members alone to affirm its authority. In addition, setting up the IANPHI Foundation to manage the meta-organisation's funds has increased the meta-organisation's financial independence and placed it on firmer ground in this respect. Both of these factors also create more room for the IANPHI to make demands of the member organisations without having to fear how they might respond (for example, by resigning membership). This points to a crucial issue for any meta-organisation: even though there is a dynamic of reinforcement between its strength and that of its members, there is also potential for a battle over control between the two (Ahrne & Brunsson, 2008).

From the perspective of a meta-organisation, the goal behind aligning interests is to build a conception of a unified interest group and a network of actors tied together by a seemingly shared agenda while positioning oneself as an intermediary between members and external stakeholders. This process bears a close resemblance to what actor-network theory scholars (Callon & Law, 1982; Latour, 1987, pp. 108–120) have referred to with the concepts of *enrolment* and *interessement*. The ideal situation for a meta-organisation is one in which insiders and the outsiders alike go through the meta-organisation if they wish to have any impact on each other. A meta-organisation such as the IANPHI can also gather resources and form alliances with other international meta-organisations and funders that would be quite difficult for national institutes to construct on their own.

If a meta-organisation manages to align the interests of member organisations and of influential external actors and to establish itself as a recognised go-between, it has a good chance of becoming a stable feature of the global institutional order in the relevant field. While the IANPHI has had a successful start in recruiting members and accumulating authority, it remains to be seen whether it will prove useful enough for its members to maintain their steady support and whether it succeeds in finding and maintaining the necessary balance of power by gaining enough independence from its members via financial security and external certification.

Conclusions

In this article, we set out to study how the IANPHI accumulates and asserts its authority while it aims to become an attractive body to belong to for potential members. The analysis identified aspects of epistemic work through which this IMO has constructed itself not only as able to enhance public health globally, but also as an authority with the potential of being very beneficial for its members. This is partly due to the advocacy work carried out directly by the IANPHI and partly on account of its role as an authoritative voice on matters concerning the NPHIs and public health issues in general. The members of an IMO can utilise the evaluations and recommendations produced by it to further their interests on their national turf. Statements that cite a seemingly disinterested global authority carry more weight than statements solely from local actors. For this leverage to function, however, the meta-organisation must have amassed recognised authority in the eyes of others.

Our analysis reveals various concrete methods that a meta-organisation may apply as it strives to present itself as a source of authority to prospective members. We identified four ‘techniques’ through which a meta-organisation accumulated authority in our case: (1) controlling knowledge about the members; (2) manufacturing political ammunition; (3) providing a codified model as a leverage for members; and (4) aligning interests. We expect that a more or less similar set could be found from other cases of successful international meta-organisations, whose prospective

members are national policy related organisations. The meta-organisation is not presented simply as a tool for cooperation, a standard-setting body, or an advocate for the members. Although it is marketed by mentioning all of these, the organisation is also depicted as a prestigious actor whose authority may be utilised – and in a sense borrowed – by the members. The accumulation of authority is a key element in developing a large membership base, which, in turn, aids in the accumulation of further authority, in a cyclical process.

The dynamics between a meta-organisation and its members can vary greatly, depending on, for example, whether the members are private companies, semi-public organisations, or public agencies. Public institutes such as NPHIs are reliant on external funding from national governments, which also have a role in steering their operations. To some extent, this leaves them more vulnerable than private companies – they must constantly convince funders of their significance. Even a sterling ‘performance review’ cannot shield them, because the criteria for judging a public institute’s performance can change and are ultimately determined by the administrative body under whose aegis it operates. Such a position may give national policy-related organisations an especially strong incentive to acquire some say in determining those criteria and seek sources of rhetorical support for their own existence. Sometimes the best way to achieve this is by investing in an ‘international authority fund’ that takes the form of a meta-organisation that then ‘loans’ prestige for persuasion in local settings.

That said, one should not underestimate the agency of a meta-organisation. In efforts to influence their members, meta-organisations can establish rules, standards, and codes of ethics that declare what constitutes proper behaviour for all the member organisations (Ahrne & Brunsson, 2005, 2008; Karlberg & Jacobsson, 2015; Vifell & Thedvall, 2012). They define what the members should look like, what they should do, and what their capabilities should be. However, these rules and models can also be put to use by the members themselves. Public institutes that are members can, for example, appeal to these rules and models as they negotiate on organisational reforms with local government entities. Recognising this, we argue, the meta-organisations emphasise such authority when they seek to become attractive in the eyes of potential members.

Our analysis illustrated how the epistemic work conducted by a meta-organisation is interwoven with all three objects of epistemic governance. The IANPHI operates in the realm of actors and identifications by trying to affect how a group of organisations is identified and how these bodies should identify themselves and their best interests. Also, the IANPHI seeks to define the norms and ideals that should govern the behaviour of the NPHIs and, thereby, that of the national decision-makers responsible for their funding and steering. In this, it works on people’s conceptions of appropriate behaviour and desirable goals. Finally, it strives to influence the ontology of the

environment by codifying a model for a category of organisations and attempting to solidify this organisational category as a distinguishable part of the order of things in the field of public health. At the same time, it is building itself into the leading ontological authority pertaining to NPHIs.

Our study showed how the authority of an international meta-organisation can be built on many fronts at the same time. In some cases, it may even be an unintended side-product of activities carried out with other objectives in mind. Future studies are needed for ascertaining whether a similar set of modes of building authority is at work in the operations of other international meta-organisations. Further research could also shed light on the power dynamics between international meta-organisations and their members, and the ways in which member organisations and other domestic policy actors utilise the authority of meta-organisations locally.

We argue that analysing the role of epistemic governance in processes of global organisational expansion is important for allowing us to see how these organisations become sources of authority in other actors' eyes. It also holds great value for revealing how they themselves engage in the epistemic work, aiming to convince others about their authoritative position.

References

- Abbott, K. W., & Snidal, D. (1998). Why states act through formal international organizations. *Journal of Conflict Resolution*, 42(1), 3–32.
- Adigun, L., Dusenbury, C., & Schoub, B. D. (2007). Public health in Africa - the role of national public health institutes. *South African Medical Journal*, 97(11), 1036–1039.
- Ahrne, G., & Brunsson, N. (2005). Organizations and meta-organizations. *Scandinavian journal of Management*, 21(4), 429–449.
- Ahrne, G., & Brunsson, N. (2008). *Meta-organizations*. Cheltenham: Edward Elgar.
- Ahrne, G., Brunsson, N., & Kerwer, D. (2016). The paradox of organizing states. *Journal of international organizations studies*, 7(1), 5–24.
- Alasuutari, P. (2015) The Discursive Side of New Institutionalism. *Cultural Sociology*, 9(2), 162–184.
- Alasuutari, P. (2016). *The synchronization of national policies. Ethnography of the global tribe of moderns*. London: Routledge.
- Alasuutari, P. (2018). Authority as epistemic capital. *Journal of Political Power*, 11(2), 165–190.
- Alasuutari, P., & Qadir, A. (2014). Epistemic governance: an approach to the politics of policy-making. *European Journal of Cultural and Political Sociology*, 1(1), 67–84.
- Alasuutari, P., & Qadir, A. (2016). Imageries of the social world in epistemic governance. *International Sociology*, 31(6), 633–652.

- Alasuutari, P., Rautalin, M., & Syväterä, J. (2016). Organisations as epistemic capital: The case of Independent Children's Rights Institutions. *International Journal of Politics, Culture, and Society*, 29(1), 57–71.
- Ancelovici, M., & Jenson, J. (2013). Standardization for Transnational Diffusion: The Case of Truth Commissions and Conditional Cash Transfers. *International Political Sociology*, 7(3), 294–312.
- Archer, C. (2014). *International organizations*. London: Routledge.
- Berényi, E., & Neumann, E. (2009). Grappling with PISA. Reception and translation in the Hungarian policy discourse. *Sisifo*, 10, 41-52.
- Berkowitz, H., Bucheli, M., & Dumez, H. (2017). Collectively designing CSR through meta-organizations: A case study of the oil and gas industry. *Journal of Business Ethics*, 143(4), 753–769.
- Binder, S., Adigun, L. E., & Greenspan, A. L. (2008). NPHI Creation: Lessons Learned and Future Directions. *Journal of public health policy*, 29(4), 459–466.
- Binder, S., & Laing, A. M. (2009). The national public health institutes of the world—Update. *Journal of public health policy*, 30(4), 467–468.
- Boli, J., & Thomas, G. M. (1997). World culture in the world polity: A century of international non-governmental organization. *American Sociological Review*, 62(2), 171–190.
- Boli, J., & Thomas, G. M. (Eds.). (1999). *Constructing world culture. International nongovernmental organizations since 1875*. Stanford: Stanford University Press.
- Bromley, P., & Meyer, J. W. (2015). *Hyper-organization: Global organizational expansion*. Oxford University Press.
- Buhari-Gulmetz, Didem. (2010). Stanford School on Sociological Institutionalism: A Global Cultural Approach. *International Political Sociology* 4(3), 253–270.
- Callon, M., & Law, J. (1982). On interests and their transformation: enrolment and counter-enrolment. *Social Studies of Science*, 12(4), 615–625.
- Cruz-Castro, L., & Sanz-Menéndez, L. (2007). New legitimation models and the transformation of the public research organizational field. *International Studies of Management & Organization*, 37(1), 27–52.
- Danish Agency for Science, T. a. I. (2009). *Danish University Evaluation 2009: Evaluation Report*. Copenhagen: The Danish University and Property Agency.
- Danish Government. (2006). *Denmark's National Reform Programme: First Progress Report. Contribution to EU's Growth and Employment Strategy (The Lisbon Strategy)*.

- Djelic, M.-L., & Sahlin-Andersson, K. (Eds.). (2006). *Transnational Governance. Institutional Dynamics of Regulation*. Cambridge: Cambridge University Press.
- Drori, G. S., Meyer, J. W., & Hwang, H. (2006). *Globalization and Organization: World Society and Organizational Change*. Oxford: Oxford University Press.
- Fairclough, N. (2003). *Analysing discourse: Textual analysis for social research*: Psychology Press.
- Finnemore, M. (1993). International organizations as teachers of norms: the United Nations Educational, Scientific, and Cultural Organization and science policy. *International Organization*, 47(4), 567–597.
- Finnemore, M., & Sikkink, K. (2001). Taking Stock: The constructivist research program in international relations and comparative politics. *Annual Review of Political Science*, 4, 391–416.
- Grek, S., Lawn, M., & Ozga, J. (2009). PISA and the policy debate in Scotland: policy narratives about Scottish participation in the international comparison. *Sísifo*, 10, 73-84.
- Haas, E. B. (1980). Why collaborate? Issue-linkage and international regimes. *World Politics*, 32(3), 357–405.
- Haas, P. M. (1992). Introduction: epistemic communities and international policy coordination. *International Organization*, 46(1), 1–35.
- Haggard, S., & Simmons, B. A. (1987). Theories of international regimes. *International Organization*, 41(03), 491-517.
- Hassar, M. (2008). NPHIs and Public Good: A Perspective from Morocco. *Journal of public health policy*, 29(1), 22–25.
- House of Lords (2008). *Diseases Know No Frontiers: How effective are Intergovernmental Organisations in controlling their spread? Select Committee on Intergovernmental Organisations*. 1st Report of Session 2007–08. HL Paper 143–I.
- IANPHI (2006). *Constitution of the International Association of National Public Health Institutes*.
- IANPHI. (2007a). *Framework for the Creation and Development of National Public Health Institutes*.
- IANPHI. (2007b). *IANPHI annual report 2007*.
- IANPHI. (2007c). *NPHI case study - Profile of creation and growth. Morocco: Institut Pasteur du Maroc*. Retrieved from [http://www.ianphi.org/_includes/documents/CS_Pasteur Institute of Morocco.pdf](http://www.ianphi.org/_includes/documents/CS_Pasteur%20Institute%20of%20Morocco.pdf)
- IANPHI. (2010). *WHO Director Advocating for NPHI Creation As Way to Develop Sustainable Public Health Systems*. IANPHI News Archives 4.5.2010.

- IANPHI. (2011a). Comprehensive NPHI moves forward in Morocco. *IANPHI World: Update from the International Association of National Public Health Institutes* (13), 1.
- IANPHI. (2011b). *National Public Health Institutes: European perspective*. Report 40/2011. Helsinki: National Institute for Health and Welfare.
- IANPHI. (2011c). Plan for NPHI development. Retrieved from <http://www.ianphi.org/whatwedo/projects/morocco.html>
- IANPHI. (2011d). Saving lives through NPHIs. Retrieved from http://www.ianphi.org/_includes/images/resources/IANPHI_Long term projects_8_31_11_FINAL.pdf
- IANPHI. (2012). *Transforming Public Health. Progress Report 2010–2012*. Retrieved from http://www.ianphi.org/_includes/documents/progressreport20102012
- IANPHI. (2016a). IANPHI 10 year report. Retrieved from <https://indd.adobe.com/view/2fc92296-5160-40ec-b8dc-ad8332efe162>
- IANPHI. (2016b). *The International Association of National Public Health Institutes*. Retrieved from <http://www.ianphi.org/>
- IANPHI. (2017). *Public Health England (PHE) Evaluation and Recommendations*. https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/661350/PHE-Evaluation_and_Recommendations.pdf
- Jacobsson, B., & Sahlin-Andersson, K. (2006). Dynamics of soft regulations. In M.-L. Djelic & K. Sahlin-Andersson (Eds.), *Transnational governance: Institutional dynamics of regulation*. Cambridge: Cambridge University Press, 247–265.
- Karlberg, E., & Jacobsson, K. (2015). A Meta-organizational Perspective on the Europeanization of Civil Society: The Case of the Swedish Women’s Lobby. *VOLUNTAS: International Journal of Voluntary and Nonprofit Organizations*, 26(4), 1438–1459.
- Keck, M. E., & Sikkink, K. (1999). Transnational advocacy networks in international and regional politics. *International Social Science Journal*, 51(159), 89–101.
- Kerwer, D. (2013). International organizations as meta-organizations: The case of the European Union. *Journal of international organizations studies*, 4(2), 40–53.
- Koplan, J. P., Dusenbury, C., Jousilahti, P., & Puska, P. (2007). The role of national public health institutes in health infrastructure development. *BMJ: British Medical Journal*, 335(7625), 834.
- Latour, B. (1987). *Science in action: How to follow scientists and engineers through society*. Cambridge, MA, Harvard university press.

- McNeely, C. L. (1995). *Constructing the nation-state: International organization and prescriptive action*. Westport, CT: Greenwood Publishing Group.
- Meyer, J. W., Boli, J., Thomas, G. M., & Ramirez, F. O. (1997). World society and the nation-state. *American Journal of Sociology*, *103*(1), 144–181.
- Meyer, J. W., & Bromley, P. (2013). The worldwide expansion of "organization". *Sociological Theory*, *31*(4), 366–389.
- Meyer, J. W., & Jepperson, R. L. (2000). The "actors" of modern society: the cultural construction of social agency. *Sociological Theory*, *18*(1), 100–120.
- OECD. (2011). *Public Research Institutions: Mapping Sector Trends*. Paris: OECD Publishing.
- PREST. (2002). *A comparative Analysis of Public, semi-public and recently privatised Research Centres*. Brussels: CEC, July.
- Public Health Wales (2012) *International Association of National Public Health Institutes - Annual Meeting*. Report by Consultant in Public Health, Susan Mably. Board meeting of the Public Health Wales, 25 October 2012.
- Public Health Wales (2018) *IHCC Progress Report 2015-2017: Working towards a globally responsible, resilient and prosperous NHS in Wales*.
- Rautalin, M., & Alasuutari, P. (2009). The uses of the national PISA results by Finnish officials in central government. *Journal of Education Policy*, *24*(5), 539–556.
- Rodier, G., Greenspan, A. L., Hughes, J. M., & Heymann, D. L. (2007). Global public health security. *Emerging infectious diseases*, *13*(10), 1447–1452.
- Schofer, E. (1999). Science associations in the international sphere, 1875–1990: The rationalization of science and the scientization of society. In J. Boli & G. M. Thomas (Eds.), *Constructing world culture: international nongovernmental organizations since 1875* (pp. 249–266). Stanford: Stanford University Press.
- Senker, J., Balázs, K., Higgins, T., Laredo, P., Munoz, E., Santesmases, M., . . . di Marchi, M. (1999). *European comparison of public research systems. Final Report TSER-Project European Comparison of Public Research Systems*.
- Schmidt, V. A. (2010). Taking ideas and discourse seriously: explaining change through discursive institutionalism as the fourth 'new institutionalism'. *European political science review*, *2*(1), 1–25.
- Strang, D., & Meyer, J. W. (1993). Institutional conditions for diffusion. *Theory and Society*, *22*(4), 487–511.

- Syväterä, J., & Qadir, A. (2015). The construction and spread of global models: Worldwide synchronisation and the rise of national bioethics committees. *European Journal of Cultural and Political Sociology*, 2(3–4), 267–290.
- Tilly, C. (2003). *The politics of collective violence*. Cambridge: Cambridge University Press.
- Vifell, Å. C., & Thedvall, R. (2012). Organizing for social sustainability: governance through bureaucratization in meta-organizations. *Sustainability: Science, Practice, & Policy*, 8(1), 50–58.
- Weber, M. (1978). *Economy and society: An outline of interpretive sociology*. Berkeley: University of California Press.
- WHO. (2008). *International Health Regulations (2005)*. Second Edition. Geneva: WHO.
- Wood, L. A., & Kroger, R. O. (2000). *Doing discourse analysis: Methods for studying action in talk and text*. Thousand Oaks: Sage Publications.