Neoliberalism and Neoliberals: **What are we talking about?**

Abstract
The terms neoliberalism and neoliberal play a variety of roles ranging from major to trivial in the papers they appear in. Both phrases carry pejorative connotations in nurse writing. Yet irrespective of the role assumed in argument, readers are rarely provided with enough information to determine what the descriptors mean in a substantive or concrete sense. It is proposed that scholars who use these terms in their work should consider expressing themselves more carefully than often occurs at present. Virtue signalling in academic writing should, absent critical argument, be discouraged.

Keywords

Introduction
In an editorial that Thorne describes as “superb” (2019), McKeown (2018) claimed that “public health and welfare services are ever more precarious in the face of the onslaught of neoliberal austerity policies” (p. 2521). Further, neoliberalism consolidates “global wealth in the hands of a tiny few” (p. 2521) and, following Galbraith, this represents or can be called “a war waged by the rich against the poor” (p. 2521). These are bold assertions. They are linked with calls for nurses to organise politically and act collectively against neoliberalism and, thus, neoliberalism is clearly something McKeown believes nurses need to take seriously.

Editorials frequently express personal views. There is nothing wrong in this or, indeed, well-crafted polemics. Editorials are supposed to stimulate. This is one of their functions. That said McKeown’s comments (which are certainly rousing) appear in the *Journal of Clinical Nursing*. This is a respected peer reviewed publication, and it is therefore not unreasonable to consider them from within a scholarly ‘frame’.

Scholarship need not be frumpy. When dealing with contentious issues it does not have to be neutral or balanced, and great scholarship often vigorously and unapologetically advances political or other evaluative positions. Yet – equally – distinctions can be drawn between work that does and does not engage thoughtfully with its objects of study/comment and, perhaps, problems emerge when opinion overbears.

I cannot quantify or formally prove the next comment; however, in tone, stridency and orientation McKeown’s proposals are not unrepresentative of a great deal of nurse writing on the subject of neoliberalism. Given this, and in view of the significance of what is advanced, we should perhaps seek to understand what the descriptor means, as well as the purpose that its use accomplishes.

The terms neoliberalism and neoliberal play a variety of roles ranging from major to trivial in the papers they appear in. Both phrases carry pejorative connotations in nurse writing. Yet irrespective of the role assumed in argument, readers are rarely provided with enough information to determine what the descriptors mean in a substantive or concrete sense. Potentially this matters. Bar disapproval and excepting opprobrium, nurses who, in their writing, introduce neoliberalism and neoliberal without articulating what is meant or conveyed by their use risk producing nonsense (i.e. arguments without sense). Additionally, when political opinion leads and dominates what is said, and when the directive function exercised by opinion passes without comment or acknowledgement, something of importance is jeopardised.

Kay (2019) warns that, “Ideological polarization has become a growing problem in many sectors of society”. This statement primarily references journalistic outlets rather than academic publications. Nonetheless, polarization corrodes discourse when organizations ‘take sides’ in debates they purport to chair and, we might add, unreflective or extravagant partisanship in
academic writing coarsens argument. Mindful of these dangers, my criticism of McKeown (2018) and others who plough similar furrows is not that he or they are incorrect. Instead I propose that, absent sufficient clarification (an admittedly question begging statement), readers have no way of determining ‘correctness’ (argumentative coherence), and many of the comments made about neoliberalism might, in consequence, be considered intemperate.

**What is neoliberalism?**

A variety of explanatory and descriptive histories of neoliberalism exist and, for example, Mirowski and Plehwe’s (2009) *The Road From Mont Pèlerin* is – outside of nursing – widely respected and referenced. Texts are therefore available which might be recruited to give form to nursing arguments. However, first, it is noticeable that within ‘our’ literature substantive histories of this sort are rarely cited – at the time of writing I can locate only two references to Mirowski and Plehwe in CINAHL. And, second, engagement with this material (with all material?) should in scholarly writing presumably be critical in nature. Thus, for example, Mirowski and Plehwe’s authoritative text might be challenged insofar as (perhaps) it overly restricts the compass or remit of study too narrowly. Yet to develop this point, to elaborate on why contributors to Mirowski and Plehwe’s edited work could productively have expanded upon the definitions they use would require extensive and detailed analysis and, possibly, expertise of this sort is unavailable and/or not required from nurses? This statement raises interesting and complex questions about the way references are employed (i.e. their functions and limitations), as well as the robustness of nursing outputs. Nonetheless, here I simply want to highlight the decidedly woolly nature of neoliberalism.

Plehwe (2009) begins the Introduction to the aforementioned work with the following statement: “Neoliberalism is anything but a succinct, clearly defined political philosophy” (p. 1). Likewise, Boas and Gans-Morse (2009) “document three potentially problematic aspects of neoliberalism’s use: the term is often undefined; it is employed unevenly across ideological divides; and it is used to characterize an excessively broad variety of phenomena” (p. 137). Thorsen (2010) concisely states that “Prolific employment of the term [neoliberalism] does not signify . . . that it is clearly defined . . . [and] the concept itself has become an imprecise buzzword” (p. 188).

Terminological inexactitude is unrelated to ontology. That is, just because a precise definition cannot be given or agreed does not mean the object referenced lacks substance. Nonetheless, if the above claims hold, what then – if anything – can sensibly be said about neoliberalism? What is described by those who bandy the term around?

Neoliberalism is in the first instance a theory of political economic practices that proposes that human well-being can best be advanced by liberating individual entrepreneurial freedoms and skills within an institutional framework characterized by strong private property rights, free markets, and free trade. The role of the state is to create and preserve an institutional framework appropriate to such practices. (Harvey, 2007, p. 2)

Harvey (2007) provides a starting point for understanding. Neoliberalism’s valorisation of individual choice is here highlighted, as is a preference for voluntary (free) rather than state regulated (coerced or controlled) exchange. It is noted that the state (government) has a legitimate role to play in creating and maintaining the ‘rules of the game’ (e.g. ensuring adverts are broadly truthful, enforcing contract law). However, by implication, political (collective or non-market) interventions aimed at protecting favoured industries and professions, or redistributing wealth between groups according to perceptions of merit or worth are problematic (they may be impermissible) from a neoliberal standpoint because, supposedly, such actions interfere with and skew market operations.

**Markets, morals, values**
Concepts invoke or allude to other concepts. Here one complex and reified concept (neoliberalism) makes use of other complex and reified concepts (freedom, individuals, markets, the state) and – moreover – moral and normative associations invest every one of these terms.

From a neoliberal perspective, markets display and reveal the aggregated choices of individuals pursuing their self-determined and freely chosen albeit constrained ends. Absent distortion, markets increase choice, lower prices, and enhance individual liberty. They therefore have material and moral appeal. Problematically, however, markets are corrupted (captured) when dominant actors such as monopoly industries or powerful professional bodies erect or institute the erection of barriers to entry and trade. Nurse registration/licencing and prescribed educational courses might be considered barriers of this sort since they limit access to membership of the profession. Markets are also rendered inefficient or void by government interference. This occurs, for example, when legislators create and enforce laws that support the barriers favoured by industrial and professional monopolists (e.g. when they enable regulators or quangos to direct and control nurse education and/or entry to relevant registers).

Subsumed within these assumptions, it is believed that, since agents are motivated to choose wisely when they profit or suffer consequent to the outcome of choices, choice enables and promotes responsibility. Thus, crucially, responsibility encourages wise choosing and responsibility is 'good' because, from a neoliberal vantage, markets (left to their own devices) do not just maximise utility, they also actively facilitate a version of moral behaviour (resting on ideas concerning trust and reputation) that advantages individuals and society (apprehended as the combined product of individual behaviour).

Alternatively, the very opposite is true for those whose values and beliefs lead them to prize collective (group) over individual rights. In this case, markets and market operations are synonymous with or negatively linked to concepts such as alienation, exploitation, and inequality. Further, the reasoning applied by neoliberals to, for example, ‘responsibility’, does not, for opponents, take into account factors such as asynchronous knowledge differentials (e.g. between buyers and sellers) or unequal power relations and, hence, no necessary connection ties detrimental outcomes (the product of unwise choices) to legitimate or sustainable claims regards culpability.

These statements drastically simplify and thereby distort complicated and interesting ideas which, in their articulation, take many and various forms (they ignore, for example, arguments concerning positive and negative conceptions of freedom). But – the point I wish to stress – for proponents, complex concepts such as neoliberalism rest on other concepts (e.g. market functioning), that in turn reference ideas (involving material and moral goods) which presume notions of ‘right’ action that in turn rely on still further ideas (e.g. pertaining to trust and reputation) and at each stage in understanding/reasoning, evaluative consideration is operative. Moreover, similarly elaborate and extended chains of normatively charged logic describe the thinking of those who are hostile to neoliberalism.

Given the role of values in judgement, the claim (above) that McKeown (2018) fails to specify what he means by neoliberalism and, therefore, readers cannot determine the ‘correctness’ (or otherwise) of his position, requires unpacking. What must be recognised is that meaningful understanding cannot occur or be provided in a moral or evaluative vacuum. There is no disinterested position. For neoliberals, markets maximise utility and provide moral “goods”. That is, they generate wealth and promote individual and social forms of desirable behaviour. For those who oppose neoliberalism, however, markets are “bad”. They entrench and exacerbate division, they encourage egotistical individual conduct, and they expedite social dissolution.

Facts and values are intimately intertwined whenever politicised ideas are considered, and it is foolish to imagine that an objective or non-evaluative description of neoliberalism should or indeed could be attempted. Facts pertaining to human conduct and the reasons for conduct can and will not – however high they are piled – dissolve political/evaluative dispute because our definition and understanding of facts are necessarily and inextricably values laden or values encrusted. Values identify “objects of desire and attitude” (Weissman, 1993, p. 3). They dispose us
to accept and reject reasons for belief, and they influence decisions about what counts as evidence. Values structure and give direction to thinking, argument, and behaviour. And, while it is asserted (and contested) that professional groups embrace or possess values, it is indisputable that individuals differ in the values that they hold. Sound arguments can be mustered by those who support and decry neoliberalism, and while those favouring our side are ‘obviously’ correct, and those boosting their side are ‘obviously’ flawed, there is no value free way of settling disagreement of this sort.

That said, recognising fact-value entanglements does not sanction the uncritical recourse to crude remonstration that we see in some of the nursing literature. By this I mean, nurse writers generally deploy neoliberalism as an abusive term, abuse signals personal political opinion, and there is nothing untoward in such declarations. The concept cannot, as noted, be approached non-evaluatively or apolitically. Yet a balance must be struck. Writers should be clear and open about what is critiqued and the form that critique takes. This is what I intend by ‘correctness’. Virtue signalling or conspicuous displays of piety will not, on their own, do. Criticism involves reasoned albeit values informed argument (without this component writing is not scholarship), and while the juxtaposition of values and reason contained or presumed in this comment can be objected (it might, for example, be accused of foundationalism or, alternatively, if stretched, of permitting values to collapse into psychology); nonetheless, those who wish their work to be taken seriously ought to deploy concepts judiciously rather than wantonly.

Which neoliberalism?

Davies (2017) – a critic – suggests neoliberalism involves “the elevation of market-based principles and techniques of evaluation to the level of state-endorsed norms” (p. xiv). Davies concentrates on practice rather than theory. He proposes that neoliberal policy sought, in its enactment, to render non-market institutions (e.g. in the UK, the nationalised health service) “market-like or business-like” (p. xiv – italicisation in original), and while the restructuring accompanying these developments would, it was anticipated, enable market efficiencies (e.g. cost-containment and greater responsiveness to user/patient wants/needs) to be leveraged from actors who were perceived to have fallen prey to producer capture, these benefits were, for Davies, not or not-fully realised. This description plots a different course to that charted by Harvey (2007) and, importantly, these approaches in no way conclude those that could be offered. Many interpretations of neoliberalism and its effects can be cited, and since interpretations often differ markedly in emphasis or focus, scholars who take up and critique the concept need to specify which version is engaged.

This injunction assumes that, absent clarification, descriptive rigor may be squandered. Thus, mindful of Boas and Gans-Morse’s (2009) earlier comments, if not all versions of the concept are mutually coherent, if neoliberalism describes a wide and potentially contradictory set of linked but discreet ideas (a family of ideas rather than one idea or thing), critics who do not specify which version of neoliberalism they are interested in may become muddled. That is, they could find themselves discussing an ill-considered assortment or jumble of ideas. Further, since critiques can explore neoliberalism’s impact on high-level macroeconomic policy, meso-level policy formation, or micro-level dyadic professional-client interactions – and since each level of analysis (macro, meso, micro) employs distinct forms of explanatory theory – again, unless the version of neoliberalism being reviewed is clarified, the logic of argument may collapse if or when the concepts being investigated ‘come apart’ from the theories that are the tools of investigation. Scholars therefore need to demonstrate care and precision.

Scholarly ‘care’ requires, as stated, appreciating discussion’s evaluative component. Thus, neoliberalism challenges the effectiveness, utility, and moral status of political judgements expressing or instantiating organised interest group pressure, and it promotes ideas about economic evaluation and reasoning that (its proponents argue) best facilitate individual flourishing and, thereby, societal wellbeing. This is what is claimed. However, whether neoliberalism is
applauded or ridiculed depends on the values and beliefs of evaluators. Exhortations supporting and opposing actions and policies that can be placed within or on the spectrum of neoliberal thinking are therefore evaluative (colloquially) all the way down – and this confronts us with a problem. Namely, we cannot understand or judge values without invoking values (i.e. that which evaluates) and, hence, these need to be recognised, explained and defended in argument. Indeed, if the descriptor means anything, unless we think that every idea and everyone tainted by association with neoliberalism is some sort of bogeyman (i.e. is stupid, morally bankrupt, or worse), more than blank condemnation is required.

**Shouting “boo”**

Communication generally proceeds roughly but adequately. It is sufficient that we mostly grasp what it is that speakers and writers say, and while misunderstanding readily occurs, normally comprehension is ‘good enough’. Scholars and researchers on the other hand scorn ambiguity and imprecision. The slippery nature of words means that miscommunication is, despite all efforts, commonplace. Nonetheless, considerable lucidity is demanded of those operating in the academy, and the epithets ‘scholarship’ and ‘research’ require or involve demonstrations of significant communicative exactness. What then are we to make of the following statements?

“The neoliberal nature of healthcare organisation . . . represents an assault on the foundational values of the [UK] NHS, a reduction of the welfare state . . . and austerity measures . . .” (Cooper & Mercer, 2017, p. 927)

Regards the UK Mid-Staffordshire NHS inquiry and subsequent Francis Report: “nurses are rarely in charge of the neo-liberal policies that underpinned this scandal” (McAllister, Brien & Piatti-Farnell, 2018, p. 315)

Although it is difficult to pin down what ‘model’ comments look like vis-à-vis neoliberalism, these examples might fit the bill. In each instance neoliberalism sweepingly points towards something that is otherwise unexplained or under-explained. The term is close to being a synonym for nasty. However, the nature of nastiness remains unspecified. Here neoliberalism assaults foundational values and it underpins scandal. Yet while readers are clearly meant to situate the term negatively, key features of argument remain unclear. In what way, for example, is ‘assault’ identified? How, specifically, did neoliberalism produce scandal? Substantive arguments could be made to backup these claims (and counter proposals offered). But this does not happen. Instead statements are avowed rather than argued and – thus – neoliberalism is, in use, coterminous with George Orwell’s (Eric Blair’s) description of fascism; a word that, through misuse, has become a degraded and hollow insult.

“The word ‘Fascism’ is almost entirely meaningless . . . I have heard it applied to farmers, shopkeepers, Social Credit, corporal punishment, fox-hunting, bull-fighting, the 1922 Committee, the 1941 Committee, Kipling, Gandhi, Chiang Kai-Shek, homosexuality, Priestley’s broadcasts, Youth Hostels, astrology, women, dogs and I do not know what else. (Orwell, 2019 [1944])

In my opinion, through careless application, neoliberalism and neoliberal have – bar shouting “boo” – become ‘almost entirely meaningless’ within much academic nurse writing. This is not to say that interesting and nuanced work does not occur, and the terms can clearly sustain definition. (Several taken from political science are given here – e.g. see Harvey, 2007; Davies, 2017.) Yet beyond name calling, failure to identify what is meant by the application of these labels in most nursing publications produce reduced forms of communication, and when these phrases simply reference something unpleasant (a bad smell), scholarship is in abeyance.
Ideas and the holders of ideas

Multiple and possibly incommensurable interpretations of even straightforward statements and phrases can often be offered, and in attempting to clarify meaning, readers instinctively ‘look to’ the wider context or place within which words (plural) appear. Contextualisation relies, in part, on distinguishing between ideas and the holders of ideas. However, nurses who invoke neoliberalism in their writing tend not to distinguish between the divergent viewpoints of those who are classified as neoliberals. This is a mistake.

If who is speaking matters then, for example, although Hayek and von Mises are both associated with neoliberalism, each differed markedly regards the warrant and acceptability of state involvement in market operations. Thus Hayek, in *The Road to Serfdom* (1993 [1944]), moves considerably further towards legitimating intervention than von Mises felt able to do (Caldwell, 2005), and analogous differences and schisms run widely. Unless this potential is realised, careless or unwary scholars could run together (under the neoliberal umbrella) ideas emanating from economists such as Milton Friedman, a Nobel prize winner who wrote popular books linking together economic, personal and political freedom (Friedman & Friedman, 1980), philosophers like Robert Nozick who in *Anarchy, State, and Utopia* (1974) proposed a ‘night-watchman’ (limited) state, rational choice theorists such as Harris and Seldon (1979), and any number of writers on health policy (see e.g. Robinson, 1995). Yet, problematically, it is not necessarily the case that one label accurately summarises the positions (plural) of these individuals. It is doubtful if all those cited here should be considered neoliberals, and even when the appellation is understoodly applied (and when views overlap) – to put things crudely – Rand isn’t Rothbard isn’t Goldwater.

Since nurse writers do not, to repeat, tend to identify and engage with individuals and/or their ideas when discussing neoliberalism, this might not be thought important. However, if the concept is worth discussing, in addition to providing clear definitions, it would be helpful to unpack who said what. Further, while neocconservative and libertarian ideas should be differentiated from the porous and ill-defined notion of neoliberalism that is usually presented, relationships between neoliberalism, neoconservatism and libertarian thought/policy remain, in nursing’s literature, unexplored. Yet Ayn Rand and Murray Rothbard, who might be situated towards the libertarian and/or anarcho-capitalist end of neoliberalism (and this situating can be objected) differ markedly in outlook, I suggest, from more politically engaged actors such as Barry Goldwater (who might be placed within the borderlands of neoliberal and neoconservative thought). Moreover, among neoliberals (and those so categorised) we find people who are social, moral and/or political commentators with pretensions towards or involving economic rationales in their arguments, and economist/logicians who recognise the social, moral and political implications of their standpoints. This exacerbates confusion, and confusion matters.

The danger here is – to give ‘an’ example – Ayn Rand’s focus on and celebration of individualism occasionally resembles or plucks at themes articulated and pursued by non-neoliberals; but, if political and moral orientations are treated frivolously, if we elide that which is unique, if too many find themselves thrown (fairly or not) into the neoliberal basket, and if we are not concerned with ideational nuance, this sanctions or threatens to sanction the dismissal of ideas and ways of thinking that we might support and value had greater care been taken. Thus, nurses assert that they respect patient autonomy and choice. This valuing rests on a conception of what it is or means to be a person or individual. However, if this ethic is appropriate in healthcare, does it not also apply in or to other areas of people’s lives (e.g. the economic or private sphere)? When writers bluntly dismiss neoliberalism as an ideology for being individualistic, if they do not make clear what this means, if they do not link ideas to the people who advance them, they may inadvertently undercut the ‘rightness’, logic or ability of individuals to make autonomous choices. Nursing scholars who invoke neoliberalism fight shy of such issues and their arguments rarely advance beyond condemnation. Failure to differentiate between the viewpoints of neoliberals (as opposed to amorphous neoliberalism) confounds problems of comprehension.
In this journal
At the time of writing, an unrestricted search of CINAHL generates, for neoliberalism (neoliberalism), 321 hits. Neoliberal (neo-liberal) elicits 869 hits. Overlap between searches exists and, of course, CINAHL includes non-nursing publications. Nonetheless, it is clear that these concepts are regularly cited by and are of concern to nurses. In this journal, the descriptors neoliberal or neoliberalism (hyphenated or not) appear in around 100 distinct publications (features, reviews, commentaries, etc.), and it is therefore reasonable to surmise that both concepts and the subjects they are associated with interest Nursing Inquiry readers.

From this mass of publications, I here focus on Foth and Holmes’ (2017) Neoliberalism and the government of nursing through competency-based education. This work advances a series of intriguing and stimulating points, and while I disagree with several aspects of what is said, the following discussion of the role that neoliberalism plays in the paper ought not to be misconstrued as an ad hominin attack on Foth and Holmes. Quite the reverse. This is, in my opinion, a highly sophisticated text and it was chosen for scrutiny precisely because – unlike the bulk of other papers that cite these descriptors – it engages seriously with the ideas presented. That said, focusing on ‘a’ paper usefully draws attention to problems that are encountered in discussing this topic. Problems that, so far, have been treated abstractly.

Given neoliberalism’s appearance in the title, since the concept is clearly integral to what Foth and Holmes say, it is legitimate to inquire into their description and use of the term. Neoliberalism appears just once in the abstract when, we are told, the focus of the work – competency-based nurse education and the placing of this thing within a socio-cultural and political-historical context – references “broad societal transformation . . . [that is] often summarized under the catchword neoliberalism” (p. 1 – italicisation in original). Defining neoliberalism as a ‘catchword’ is somewhat curious (it is reminiscent of Thorsen’s, 2010, “buzzword”). This suggests the descriptor is being used loosely, and it hints at the subordinate role played by neoliberalism in the overall argument presented. Thus, despite repeating that the transformations being highlighted “are often summarized under the catchword neoliberalism” and have led to the emergence of managerial models” (Foth & Holmes, 2017, p. 2), it is these managerial models that form the centrepiece of discussion, and neoliberalism is (bar heading 3, p. 3) not mentioned again until pages 4 and 5 where the subheading ‘Neoliberalism’ and sub-subheading ‘Nursing in advanced liberalism’ appear.

Under ‘Neoliberalism’ we are told that, following the end of the Cold War, changes in employment patterns and the valorisation of “knowledge workers” (p. 4) accompanied or coincided with “the decline of welfarism . . . [which] strengthened the rise of neoliberalism” (p. 4). These assertions may or may not be correct/plausible (I put to one side their factual status). However, while key concepts such as ‘welfarism’ are explained they remain, in my opinion, underexplained given the role they are expected to play in argument and, significantly, no attempt is made to quantify the changes described. Thus, while some and possibly many people did take up occupations during this period that might be designated as being in the ‘knowledge economy’ (definitional vagaries notwithstanding), presumably many others did not and – yet – without clarification regards timescales, geographies and numbers, purported shifts in employment structure of this sort lack substance.

More intriguingly, neoliberalism’s relationship with or to these changes remains unclear. Thus, is neoliberalism being presented as a causative or motor force in change? Or is it – as claimed – only a generalising ‘catchword’ that bundles a collection of purportedly linked developments together?

This distinction is significant. If Foth and Holmes are proposing that some confluence of economic, political, socio-cultural, ethical/evaluative and/or other ideas or developments are causative, then much more explanation and clarity is required. And, clearly, in this instance the precise meaning of ‘developments’ needs unravelling and linking expressed ideas to their
instantiation in socio-cultural historical practice is no easy task. Beyond sweeping generalisation, social and other theories will have to be invoked to structure empirical claims. Theories contrast and conflict. And some defence of chosen theory(s) (explanatory standpoints) will be required.

Alternatively, if neoliberalism is merely a ‘catchword’, what exactly is caught? What does it mean to say that the transformations described are “often summarized” (p. 2) under this slogan? Are we to suppose that being ‘often summarised’ lends credence to what is proposed? In what way is this claim sensible or warranted? Who summarises? Why do they do it? On what grounds or against what criteria can summaries be maintained or debunked?

The sub-subheading ‘Nursing in advanced liberalism’ is equally perplexing. (Why, for example, ‘advanced liberalism’ rather than ‘neoliberalism’?) Thus, we are told that “some privatisation” (p. 5) – an unquantified and unexplained phenomenon – has occurred in Canadian healthcare (when exactly? where precisely?), and this change is associated (how?) with “social entrepreneurs” and the “forging [of] new partnerships . . . with business” (p. 5). I take these associations to be ‘bads’ within the context of argument. However, unhelpfully, badness is suggested rather than stated (so I may be mistaken). Yet, assuming my interpretation is correct, since Foth and Holmes do not clarify what is wrong with social entrepreneurship (another unspecified term), and if public-private partnerships are misguided, the nature of this misguiding remains unclear. No doubt positive and negative arguments can be made for and against these sorts of initiative. However, what these arguments are remains unmade and mysterious. We are supposed (I think) to assume that something untoward occurred and ‘advanced liberalism’ (neoliberalism?) is responsible in an unspecified sense. Yet, to repeat, connections between ideas and actions in the world remain implied but not explained.

We are further told that “under welfarism” (p. 5) physicians exercised considerable power but that, post-restructuring, “new management” (p. 5) came to the fore. The status of this alternation is unclarified. And, once again, it seems reasonable to presume that something remiss or at least problematic is being described and advanced liberalism (whatever it is) is to blame. Note, I am not suggesting that shifts in power did not occur. Yet detail regards the nature, speed, extent, and evidenced effects of change would be useful – and without this detail readers cannot understand in any concrete sense what is claimed. Put another way, explaining how change can/cannot be tied specifically to ideational factors (‘advanced liberalism’) is necessary if the proposed connections are to be sustained. Moreover, since in other contexts and countries (e.g. in the UK), criticisms of provider dominance came in the late 80s and early 90s from all political parties (Manning, 1994) – i.e. from the left and right – why in this instance is attack laid solely at the door of neoliberalism? If we assume that ‘advanced liberalism’ codes for right of centre economic and other ideas, within Canada, did centrist and left of centre commentators not also fault established ways of working?

Note, Foth and Holmes’ (2017) paper is informative, interesting and well worth reading. My critique focuses on one aspect of what is argued, and their use of the concept neoliberalism contrasts favourably (as stated) with use of this descriptor in other publications where no explanation or contextualisation is provided. Nevertheless, even within what might be termed an exemplary paper, much is left hanging.

Rebuttals and closure

These criticisms may be misplaced. If every article that referenced neoliberalism provided a substantive definition of what was described this would obviously generate considerable difficulties for authors. Given journal word restrictions, the space required might be deemed excessive and – maybe – it is sufficient that writers use the descriptor to point towards (caricature) ‘something’ about market functioning and/or changes in public sector funding and organisation. Perhaps shorthand for issues of this sort is all that is needed?

Alternatively, gut instinct or intuition regards neoliberalism’s supposed negative effects may be what scholars seek to convey. Instinct in the guise of ‘common-sense’ or ‘just being the
case’ has, some epistemic conservatives believe, a claim to our attention (Fumerton, 2008), and it is proposed that intuition can stand as evidence in certain circumstances (Maguire, 2014; Climenhaga, 2018; Ramsey, 2019).

Instinct and intuition are, however, problematic guides (Greenhalgh, 2002; DePoe, 2011). For example, while you might instinctively intuit that neoliberalism is a mostly good thing, and I might not – what then? Further, Bright (1962) asserts that “Needless to say, nursing is the most perfect preparation for looking after a husband and a home” (p. 24). Yet assumptions that ‘needless to say’ appeared instinctively and intuitively correct for many people at the time this statement was made are not universally accepted today, and generational changes in opinion and convention highlight the socio-cultural and historically patterned nature of what are ostensibly individual instincts and intuitions. Contingent specificity of this sort destabilises the authority of these forms of reasoning in relation to both marriage and, it is suggested, neoliberalism.

Or, I might (mistakenly) be accused of justificationism. However, following Magee (2017), I do not hold that positive justifications for beliefs and/or values are always necessary, that without validation every belief and value is groundless and that, *ergo*, we must actively seek proofs for belief/values in all instances. Rather, many of our most cherished and fundamental beliefs about the world and, indeed, ourselves or our ‘being’, cannot be settled or demonstrated. Moreover, reason can inform but does not underpin or secure the values we hold/instantiate. And, thus, we frequently and legitimately advance claims about things we do not and possibly cannot understand.

Given this, it might be supposed that it is unnecessary to describe and explain every idea and/or the values associated with the use of ideas in academic writing. If this is the case, maybe those who invoke the concepts neoliberalism and neoliberal can reasonably assume that readers grasp or understand enough about what is meant? Or, perhaps, the manner in which these terms are used in nurse writing merely signposts the position of writers and no substantive object or other meaning is intended? That is, those who deploy words such as neoliberalism simply reference where they stand politically (i.e. something of what they support/oppose), and little or nothing worth saying about neoliberalism is actually being said (or, indeed, preferred alternatives). There is, to repeat earlier comments, nothing intrinsically wrong with evaluative judgement (it is often inescapable).

Further, scholars do make assumptions of reader knowledge and, often, these assumptions are defensible. Nurse writers might, for example, talk about disease processes or pathogens without additional explanation. And if readers are unfamiliar with the descriptors used, writers can fairly suppose that medical dictionaries and/or other information sources will be accessed. This makes sense when what is described has a stable designation. That is, a commonly agreed and demarcated definition. It works less well, I contend, when – as per neoliberalism and neoliberal – the nature and boundaries of the objects described are contested, vague, and normatively charged. In these instances, it is the lack of precision that requires recognition and engagement.

Writers cannot then assume readers grasp or understand what these descriptors reference. Meaning must be made clear. Neoliberalism does reference market operations and – regards public sector financing and organisation – changes to previously accepted practice. However, without explanation, claims about what these changes are and imply remain empty and nebulous. Shorthand is not always sufficient.

Without getting bogged down in quarrels regards the relative merit of differentially grounded epistemic claims, while those who address neoliberalism often appear happy to assert without clarifying what is addressed is injurious, this is not, I maintain, a viable position. Or, rather, it is not viable where scholarship as opposed to journalism or mere chatter is attempted. Scholarly argument can be unsound and its conclusions may be incorrect. Moreover, consensus or agreement is unlikely to be achieved or achievable (it may not even be desirable) when evaluative and normative topics are discussed. Nonetheless, scholars who throw around the descriptors neoliberal and neoliberalism in an offhand and ill-considered manner potentially forfeit credibility, and this needs stating.
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- Derek Sellman – Associate Professor, University of Alberta, Edmonton, Canada. Editor-in-Chief of the journal Nursing Philosophy.
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