

Mark Exworthy, Stephen Peckham, Martin, Powell. Alison Hann (eds) (2011) *Shaping Health Policy: case study methods and analysis* Bristol: Policy Press. £25.99, pp 348, pbk.

This book is a must-read. It is hugely satisfying on two counts. First it provides a valuable historical background against which to assess the massive health reforms just introduced by the current government with the Health and Social Care Act. And second it addresses a neglected area of theoretical and methodological concern – the place of case studies in the study of health policy.

Two different trajectories served as inspiration for the book. One was the apparent ‘reinvention and recirculation’ of familiar themes in health policy in the many NHS re-organisations since 1948, which the authors sought to analyse through synthesising cumulative knowledge emanating from key case studies over time. The second trajectory was a concern with the rigour and methods of such case studies. Thus the book will appeal to those who want to understand better health policy change in the NHS since its inception, as well as to a much wider readership (including those in middle and low income countries) who are interested in developing the field of health policy analysis, by paying greater attention to theories and methods.

The authors note that case studies have become the predominant method by which much health policy is conducted, but that case study methods are subject to abuse and misuse. One aim of the book is to ‘recover and re-invigorate’ the case study as a valuable technique for researchers and practitioners. The authors are academics, most having researched and analyzed aspects of the NHS over several years, and some have been practitioners, involved in specific policy processes within the NHS. Having selected their case studies (an interesting process in itself, with a surprising lack of consensus on which were the most significant), they ground each narrative in history and method.

The case studies are preceded by two chapters covering some familiar arguments about the weaknesses of case studies (eg the difficulty of generalising from them), and also their strengths (eg they provide insights other methods cannot). The first (by Exworthy & Powell) addresses the

surprisingly difficult notion of deciding what a 'case' is, drawing on Yin's gold standard for case studies: they should be significant, complete, consider alternative perspectives, be based on sufficient evidence and be analysed in an engaging manner (Yin 2009). Marinetto (chapter 2) offers a useful description of the history of the case study, and how it has evolved, as well as a theoretical discussion on whether a case study is a method or a design, or a choice of what is to be studied. These concepts are analysed in later chapters which explore specific issues

The body of the book is divided into three sections: 1948 - 1980s, 1980s – 1990s; since the 1990s. All contain five or six case studies by different authors exploring the NHS during the period under question. Each chapter is based on a classic text (paper or book), and discusses the methods and approaches used and provides a commentary on its contemporary relevance. Each is an exhilarating reminder of how important it is to take a long and critical view of the health policy process, and that with hindsight it is possible to see changes in a different light. The stories of all these chapters are different and absorbing, and offer a marvellous overview of the evolution of the NHS. They are made the more valuable by their discussions of theoretical and methodological approaches.

The first part focuses on the birth, consolidation and disillusion of the first thirty years of the NHS. Chapters by Powell (comparing 18 case studies of the creation of the NHS), Mohan; Greener; Higgins; Keen; Peckham & Willmott (on hospitals, ideology and class, safety, and interests) dissect the extent to which each case reaches the criteria of exemplary case studies, and how far they differ in their interpretation of the specific issue. What all these chapters bring out are the difficulties of boundary definition in health policy, how complex it is to decide what is 'the case', and how looking back can offer new perspectives or interpretations of old stories.

The next part is set in the 1980s and 1990s, starting with the Thatcher reforms, which introduced managerialism and the internal market to the NHS. The chapters in this section (by Macfarlane, Exworthy & Willmott; Evans; Wainwright & Calnan; Hughes; Locock & Dopson) provide the familiar background to the current reforms: eg the introduction of general managers into the NHS, GP

fundholding, and organisational change. Particular attention is paid to two cases which the authors suggest have shaped a generation of research through their methodological and theoretical contributions.

The final chapters (by Peckham & Sanderson; Hann; Paton; Dowswell & Harrison; Allen; Exworthy & Oliver) explore the NHS from the 1990s to the current day, examining specific policy areas including patient choice (an excellent example of a poorly defined policy and the difficulties of constructing temporal and conceptual boundaries); implementation deficits, the 'tyrannies' of health promotion and individualisation; and the history of addressing health inequalities.

How much do such case studies advance policy learning? While there are several case studies in this book, which suggest that some cases did influence policy development and implementation, the authors note cautiously that there are not many direct examples, and that much depends on the context and current constraints. They take heart from what they see as case studies' contribution to a greater convergence between policy approaches – noting that the internationalisation of evidence has made practitioners more aware of what is happening elsewhere and more aware of adopting best practices.

In the final chapter Exworthy & Powell conclude, from the collective reflections presented in the preceding chapters, that case studies are far from a 'pauper's choice'. They provide a flexible research tool – especially for studies of health policy processes. They are diverse in their use of methods and their interrogation of evidence. They use qualitative methods and secondary sources and multiple variables which enables them to look back and forward. They have explanatory power through 'thick' description, and importantly, they can further explore further theoretical statements. While case studies may not meet the stringent standards Yin sets out, these authors are robust in their defence of them as methodologically and intellectually valuable.

Yin RK (2009) Case study research: Design and Methods. 4th edition, London: Sage.