
Power and the Ethics of Reform

Ciarán O'Kelly and Melvin Dubnick

There are two broad traditions in the study of administrative ethics. The *moralist* tradition is central to most of the contemporary literature on ethics in public administration, and its essence was captured in Dennis F. Thompson's 1985 definition of the field: "Administrative ethics involves the application of moral principles to the conduct of officials in organizations." For public administration, he continued, it is a "species of political ethics, which applies moral principles to political life more generally" (555).

By contrast, an *instrumentalist* tradition, which is more prominent in today's generic management literature and less often found in the study of public administration ethics, offers a different perspective, one that highlights the functionality of ethics and its role as a means for coping with dilemmas and other problematic situations that arise in the effort to control and coordinate. Despite the often peripheral (and frequently critical) attention this instrumentalist view receives among public administration ethicists and others, it has deep roots in many of the foundational works of the field, from Woodrow Wilson's often-cited article "The Study of Administration" (1887) at least through Herbert Simon's *Administrative Behavior* (1957).

Posing this stark contrast between two traditions serves a number of purposes. First, it highlights a distinction among students of administrative ethics that creates a major barrier to the advancement of our collective endeavor to understand and appreciate the role of ethics in modern organizational contexts. Each tradition regards the other as myopic and lacking perspective due to an intellectual form of tunnel vision. Second, it calls attention to a false sense of incommensurability among those who address similar or overlapping is-

sues within each tradition. For those in the moralist tradition, it is often more rewarding to be critical than analytic, while instrumentalists approach their subject matter with less certainty as to the normative criteria that ought to be applied. This, in turn, spills over to a third consequence of the division: while both traditions generate prescriptive action agendas, the moralist school tends toward institutional reform, through law and other regulatory mechanisms, while the instrumentalist is more likely to focus on design and enhancement of problem-solving capacities.

We stand aside from this debate and seek to address the complex interplay of instrumental and moralist concerns as they are brought to bear on administration through the language of ethics. We approach ethics less as a guide for individuals or as a tool for managers and more as one component in the unending struggle to define, shape and wield the institutional purpose toward particular ends. These ends emerge in turn from a combination of normative and instrumental concerns and are fundamental in shaping our lives as administrators and indeed as moral persons within our roles. As such we do not argue for a particular "ethics" as a guide to individual behavior in work. Imperatives for "personal integrity" (Dobel 1990) or "patriotic benevolence" (Frederickson and Hart 1985; see also Frederickson 1997) or "constitutionalism" (Rohr 1998) do not take into account the fungible character of what it is to be human in the context of the modern organization. Nor do we argue for ethics as the solution to some problem of administration. Rather, we ask how ethics, specifically as articulated in the tension between "thick" and "thin" standpoints, infuses and shapes administrative life.

Our starting point is Alasdair MacIntyre's observation about "character" in the modern corporation:

In the modern corporate organization character has become more like a mask or a suit of clothing; an agent may have to possess more than one. So the difficulties, indeed the impossibilities, which would result from trying to embody a contradictory and incoherent set of virtues systematically, are avoided; each character is allocated its own place and its own tasks in the corporate world. Nonetheless the corporation itself delimits the range of possibilities; what it takes to be the good provides a moral horizon.¹ (1979, 125)

That is, the formal and informal roles we adopt when we act as organizational agents carry within themselves *self-contained moral vocabularies*: as we discuss below, they describe the "proper" landscape of work and to a large extent it is up to administrators to obey. In this sense they are both moralist *and* instrumental: the two cannot be separated out in practice. Administrative

ethics is *administered*: it is part of a script, outlining how we ought to present the self in organizational life.² The study of administrative ethics, therefore, is the study of administration before it is the study of ethics. It is the study of the *enforcement of power through ethics*.

The language of administrative ethics is of course not totally disconnected from “ordinary” moral vocabularies. Rather, how ethical landscapes form and are formed in organizations is a function of the complex interplay of internal and external moral, ideological, and political debates. Actually, existing ethical landscapes are one part of the broader tectonics of political power. They are, in Foucault’s terms, related to the administration of administration and the “conduct of conduct” within administration—a matter of the “government” of possibilities for action (Foucault 1994b, 340–341). Ethics, in this sense, is rooted in the attempt both to produce amenable mentalities, well disposed toward corporate ends, and, failing that, to explain the development of organizational mechanisms that enforce compliance in line with corporate ends. These ends in turn may be drawn from political stances about organizational forms, about the legitimate bases of power over others, about the organizational purpose and the role of the public sphere in people’s lives. Importantly, therefore, ethics is a matter ultimately of some *defined and enacted political stance*: it is an articulation of power.

Power, simply and broadly defined, is the capacity to get someone to do something they might not otherwise do (Dahl 1957). In Foucaultian terms, it is the capacity to govern—that is, to exercise the influence of government broadly conceived—over individuals who are not necessarily inclined to act in accordance with the priorities and preferences of the governing party (Foucault 1994b). This “capacity to govern” can take many forms, ranging from coercion and surveillance to persuasion and the use of carefully designed “nudging” mechanisms (Lindblom 1977; Thaler and Sunstein 2008).

Administrative ethics, in other words, is situated in the midst of the ongoing struggle to shape organizational governance—it is the administration of administration. We view ethics as a mechanism of governing that falls within that range, especially in regard to organizations that rely primarily on the work of professional communities. Within such organizations,³ professional commitments and norms play a critical role in shaping behavior, and these often take the form of ethical standards in which “thick” peer relationships inform the actions of individuals and the groups within which they work. Organizations that are formed and operated based on those thick relationships—e.g., hospitals run by doctors, schools run by teachers—reflect an ideal type for many, although they also represent a challenge to those who seek change, innovation, and openness in such key institutions. The latter group often regards

thick relationships and the power of ethical consensus around professional norms and practices to be obstacles that require modification, if not complete reorientation. Whether in the form of management focused on efficiency, governing boards committed to profit, or external (or even internal) reformers seeking to alter the social role and function of the organization, these would-be change agents frequently pursue strategies focused on breaking the hold of (or at least “thinning out”) those thick relationships and the ethical anchors they create and sustain.

For present purposes, we will focus on the use of a particular set of mechanisms—the metrics of accountability—to reflect the efforts made by reform-oriented actors to bring about organizational and institutional change. These efforts are, in fact, focused on changing the ethical landscape and ethical vocabularies of those professionals who control the core technologies of the organization. What they seek is countering the ethical pull of thick relationships with the standards and preferences of an ethical regime based on a thin (or at least thinner) standpoint.

In the next section we discuss moral personhood and its place in institutional and organizational contexts. The second section focuses on the role of metrics and measures in the production of administrative ethics, and how tests and measures act as communicative devices, shaping the styles of favored moral agency as manifested in bureaucratic bodies. In the third section we turn to the concepts of “thick and thin,” and how they focus our attention on the tensions in bureaucratic life between administrative communities and the external oversight and disciplinary techniques of reformers. We discuss the rise of accountability as the government of conduct rather than as the conduct of government.

Finally, in the last section, we use two case studies that reflect our discussion of administrative ethics. Focusing on the No Child Left Behind (NCLB) policies in American public education, we discuss the role of ethics in implementing thin (by our accounts) “standards” in schools and the manner in which thicker perspectives on educational practice have adjusted to the NCLB regime. We then examine reforms to the English National Health Service⁴ (NHS) that are motivated by the desire to “hand control back to doctors and nurses.” We suggest that, despite the rhetoric of reform, this is not aimed at privileging thick standpoints per se, but at institutional change that seeks to move administration beyond existing ethical standards in the operations of the NHS. The reform initiatives of the current (Cameron) government are yet another moment in the interplay of thick and thin—in the struggle to define and control organizational conduct. We conclude the chapter with a brief discussion of the study of administrative ethics from this perspective.

Moral Personhood and Administrative Life

Ethical stances rarely arise through processes of choice exercised by autonomous individuals. It is important not to think of individuals as coming to each moral predicament “ready-made” as moral thinkers. Rather our sense of moral personhood may be reformed and redefined by each dilemma we encounter. Each choice is made in a particular moment, in particular circumstances regarding particular persons. “Caught,” as David Carr puts it, “in the complex web of human association” (2003, 219), we can do little more than attempt to judge an appropriate course through conflicting imperatives and expectations. We might refer ourselves to “higher” goods. We might keep one eye on the constraints placed on our actions by families, societies, or workplace roles. Moral judgment can only exist embedded in a sequence of contexts, even when high principle is invoked.

Our standpoints are learned—indeed, they are *created*—across our lifetimes as we speak, argue, and interact with other people, with our communities, and with the institutions within which we live and work. The relationships we form around people, communities, and institutions are *educative*, morally speaking, and in this context moral agency is a skill—it does not preexist context: it is *acquired through context* (see Annas 2011). Institutions seek to intervene here, to self-consciously educate and drive us into particular modes of behavior, because they are concerned to recruit us into their ends. They could not function if we resolved our moral dilemmas entirely alone. So they seek to guide us, in subtle and not so subtle ways, whether through conversations or through direct management of our work.

Any encounter with administrative ethics cannot be driven by an attempt to define a “good” that individual administrators can apply because our sense of what is appropriate—indeed our very sense of moral selfhood—is context-driven, fungible, and subject to the power articulated as moral knowledge, as “justificatory truths” in Richard Rorty’s parlance (1980, 383),⁵ where normative claims are disseminated as “facts about the world.” As such, how we construct ourselves in relation to administration is a matter of some concern for the institutions in which we work. In other words, the path we take through everyday predicaments is quite literally the business of modern institutional life. Institutions are intensely concerned with infusing work with particular notions of right and wrong because those notions of right and wrong are underpinned by particular ideas about social and organizational purpose. Institutional technologies are designed to communicate particular senses of the good, whether as constraints on action or as licenses for action, because those senses of the good articulate claims to institutional resources and they describe the “proper” distribution of institutional resources among social groups. Given this, the paraphernalia of institutional life—processes of promotion and

demotion, of approbation and admonition, of measurement and management, of surveillance and accounts—and the frameworks of social regulation—law, rules, and regulatory conversations—are embedded in moral vocabularies that themselves describe, define, defend, and justify particular decisions in pursuit of particular institutional ends. Understanding administrative ethics on these terms, moreover, is key to any analysis of discipline and control, of standards, and of the terms of autonomy for bureaucratic communities.

The disciplinary mechanisms of bureaucracy are both license and constraint (E. Hughes 1958, 78ff). Since discipline is most often thought of as a matter of constraint, it is perhaps difficult to think of it as license. We should recognize, however, that the rules and processes of administrative life can just as easily confer powers on people as take them away. Such a license may be mundane and technological—work with electronic equipment, for instance—or it may involve special privileges that shape the individual's entire life. Some people—soldiers, police officers, or capital judges, for instance—are even licensed to act over life itself. Such licenses indemnify people from having actions ascribed to them in a way that they would be in life beyond their occupations.

In administering administration, institutions demand that we actively *narrow* our thinking as moral agents (see J. Scott 1998); that we either set aside our moral intelligence and our moral skills⁶ in favor of adhering to administrative authority, or that we maintain our focus in the workplace on the sense of the good produced by corporate ends. Work becomes the primary moral context and hierarchy replaces individual moral reason (see Wolgast 1992). While organizations and bureaucracies may be more or less formal, and more or less coercive in their disciplinary structures, they cannot seek to produce individual moral autonomy per se. The institution's job is in large part the manufacturing of a commonality of purpose toward institutional ends (Barnard 1938).

Institutions and the metrics they employ are thus designed to be *educative*. The administration of administration may not be performed through direct managerial coercion. Rather, it might be articulated as expectations in the context of metrics and surveillance on the one hand or through the production of professional communities on the other. An organization's demands for a narrowing of moral vision can discourage the kinds of inquisitive account-seeking and account-giving that are characteristic of "ordinary" moral life at its best and replace them with moral instruments that both legitimate particular standpoints and actions and ensure that those actions take place.

Metrics, Measures, Rituals, and Rules

Given the fungible character of moral agency, we now turn to the question of how institutions communicate and disseminate organizational ends to

individuals and how those ends are articulated as moral imperatives. In this regard, administrative ethics is but one element in the struggle to define organizational ends—a struggle that has come to define major governmental reform movements in recent decades.

We live in an era of constant reform, and government has increasingly turned its attention to the administration of administration as one of its core functions. Whether through outsourcing, New Public Management-style reforms, “reinvention,” or privatization, government has evolved as an intricate relationship between moral vocabularies and reasons, management techniques, monitoring technologies, and a range of accountability mechanisms. Institutions constantly attempt to render and stabilize moral conversations in such a way that centrally defined purposes and priorities can be pursued. They invoke common ends not only through informal “regulatory conversations” (cf. Black 2002), but also through formal management control capacities, including through the production of metrics and measures as communicative techniques.

Tests, audits, and other techniques aimed at specifically institutional ends are not simply technological: they are *statements of regulatory intent* driven by specific formulations of institutional ends and are invoked as ethics, particularly about the character and dynamics of administrative work (see Edelman and Suchman 1997; Suchman and Edelman 1996). The educative character underpinning regulatory intentions in institutional life is inescapable so long as we seek to organize ourselves in institutional forms. Furthermore, we cannot evade the dance between our moral lives and the moral expectations formed in institutions because our experience of life is entirely wrapped up in our experience of institutions.

Regarding the interplay of regulatory metrics and standards in particular, every act of measurement is “marked by the play of power politics,” Alasdair MacIntyre and the kinds of formal order created within modern institutions are “always and to some considerable degree parasitic on informal [social] processes, which the formal scheme does not recognize, without which it could not exist, and which it alone cannot create or maintain” (J. Scott 1998, 27, 310). Standardization is not brought to bear passively on society: it is constructive of society and recasts individuals in line with the “narrowing of vision” involved. Measurement does not just shed light on preexisting facts, on, say, student capacities and teacher successes. It recasts institutional functions in terms of a narrowed sense of what those functions might be. And in that regard, a metric is revealing in terms of the institutions and roles it defines.

The difficult interplay of multiple and diverse expectations (see Dubnick 2005; Dubnick and Romzek 1993; O’Kelly and Dubnick 2006) are testament to the educative process that the modern organization seeks to bring to bear

on the self. In our technology driven era, furthermore, we direct an intense focus on the production of “fields of visibility” (Foucault 1979, 202), through the gathering of statistics, accounts, and audits (Power 1997). Through these metrics, accountability is often defined, articulated, and aimed at discipline through the production gestures of transparency—gestures, that is, in the sense that they induce vulnerabilities in the name of performance and in line with prevailing myths about the proper underpinnings of some particular mode of work (Meyer and Rowan 1977).

The disciplinary effects of statistics gathering, standards, and metrics, moreover, are not presumed to operate only after the moment when the measure is taken. They do not simply weed the nonperformers out (though they may do that both indirectly and directly). They also help bring the minds and thoughts of workers into line with organizational objectives. How these metrics impose discipline is very important to note. The first “pre-hoc” aspect of the information-gathering power of metrics lies in its production of “approved” vulnerabilities in the informal defining and outlining of roles. Knowing that senior managers and their bosses are armed with new forms of information, rendering work legible in specific and circumscribed ways, workers will be aware of their own vulnerability to managerial oversight. The workings of transparency are, after all, one-way. The existence of upward-moving transparency through metrics is not a good guide for individuals to predict effects. The subject of statistics is not necessarily made party to the “expert systems” (Giddens 1991, 18ff) that the statistics produce. Instead, it is assumed that discipline will emerge through each individuals being aware that they will be subject to the metric at all. Or, even better, those individuals who are promoted and encouraged will align their moral mentalities to those favored by the institution, whether through judicious pruning of the workforce or through individual conviction. In many ways, this is the ultimate aim of standards and metrics as communicative devices: they aim to align individual and institutional norms. They are processes of normalization.

In addition to these directly disciplinary effects, the specific and circumscribed modes of metrics will act as an educative device by normalizing measured activities, setting them as organizational priorities. Measurement is a communicative device in and of itself. Standards do not emerge and are not defined after the act of measurement; they happen before. Individual workers (and new recruits) will likely see new metrics as communicating and normalizing the organizational purpose. They will perceive them as the communication that desired organizational ends be inculcated as primary individual virtues and, through processes of commendation and condemnation, that the metrics will be brought to bear on them, driving promotions, demotions, and managerial interventions. Compliance is rewarded or at least

promoted whether through formal mechanisms or through the more casual social processes. Metrics seek to legitimate particular standpoints and produce not only compliance, but also active dispositions on the part of their subjects. The institution, through the communicative power of metrics, seeks to “control the memory of the institution’s members” and “provides the categories of [members’] thoughts, sets the terms of self-knowledge, and fixes identities” (Douglas 1987, 112). The subjects’ roles are defined by the metrics, and the organization actively demands that they accept and internalize the discipline suggested by them. Otherwise, subjects will be left to one side.

Thick and Thin Standpoints, Accountability, and the Administration of Administration

Individual moral selfhood is a highly fungible thing, and shaping moral selfhood is one key element in the administration of administration. The business of metrics is in large part communicative and educative: it is the business of disseminating moral ideals and of “setting the terms of self-knowledge and fixing identities,” as Mary Douglas (1987, 112) puts it. Metrics are part of the paraphernalia of governance that focus on narrowing our vision, on devising the institution as sovereign on its own ground—a kind of Hobbesian Leviathan (Hobbes 1996), setting the terms of moral truth so that order might emerge. The questions we should always ask, though, are “what truth?” and “whose order?”

In this section we set these struggles out in the context of “thick” and “thin” moral standpoints. Thick and thin ethics, broadly speaking, provide us with a cartography through which we can navigate such questions and survey the terrain of administration as competing pressures are brought to bear on its purpose. The concepts of thick and thin describe two categories of moral relations, the thin rooted in abstract principles (relations based on justice, desert, duty) and the thick in concrete situations (involving loyalty, commitment to others, love, faith).⁷ As the philosopher Bernard Williams saw it, the manner in which thicker or “more specific” ethical notions are applied “is determined by what the world is like (for instance, by how someone has behaved)” in someone’s perception (1985, 144); these notions—for example, “treachery” or “courage”—contain within them both judgment (on a principle) and appraisal (of a person). Thin standpoints, in contrast, make reference to abstracted, universal principles that, despite their generality, ought to be applied in any particular circumstance. Such a “minimalist” (Walzer 1994, 1ff) foundation for moral standpoints is focused on “procedures justice”—that is, on justice as being above context to a great extent.

In an organizational context, the “ordinary” components of thick and thin are bundled with ideas of discipline and power. How organizations are defined

and how those definitions invoke *justificatory truths* about the organizational purpose is articulated on more or less thick or thin lines. The disciplinary force that comes with those definitions proposes a combination of thin frameworks—for example, metrics oriented at invoking standards—and thick relations—for example, fealty to groups. The multiplicity of pressures, norms, metrics, rules, procedures, and conflicts to narrow one's thinking of the institutional good provides the backdrop through which the individual must ask the question: How do I work? How do I perform in my work as I engage with authority, with rules, with clients, colleagues, and the multilayered publics of administrative life? Upon what standpoints is my work borne?

The concept of thick and thin standpoints allows us to bring two competing forces in organizational life to the fore. Reflecting the more abstract principles in "ordinary" moral life, the thin organizational theme highlights the drive to focus the organizational purpose on some moral and political imperative. This focus requires a reinvigoration of the disciplinary aspects of organizational life as legal, institutional, or "cultural" reforms are brought to bear on the organization. The thin standpoint imagines the organization as bound by procedures and rules, subject to hierarchical lines, metrics, and standards. It sees itself as constructing rational, even "scientific" organizational processes and as rooted in systematic knowledge about the organization and its management.

The thick theme articulates an aspect of organizational life that imagines the organization cohering around internally validated processes, relationships, and meanings. It sees the organizational purpose as necessarily defined by the context that these relationships and meanings produce, by attention to individuals, and by relationships with others. Thick organizational processes are necessarily opaque to reform movements and are met with the suspicion that they mask narrow self-interest. These processes emphasize collective or group autonomy and do not welcome attempts at reform through metrics-driven standardization. Group contexts—such as professions and work groups—may define their autonomy against outside intervention, appealing, for instance, to particular conditions that do not lend themselves to scrutiny. As such, the individual in a thick, particularist work environment does not necessarily stand alone. The employee stands within a particular way of organizing administrative work. Conversely, while the thin theme is also a matter of organization, its focus is precisely on the outsider. Ends are imagined as externally defined, and means are a matter of aligning action to those ends.

Needless to say, in reality organizational life is pursued somewhere between these two broad types, and, as we see below, the dynamics of change and reform can be informed by perceptions about the interplay between the two. The parallel tracks described by thick and thin, however, are the source of much of the tension we might experience in organizational life. And how these tracks are

defined is the source of a struggle among institutional entrepreneurs who seek to define and shape organizational goals, whether in pursuit of “standards” and “discipline” or in pursuit of “professionalism” and “discretion.”

Thick or thin standpoints, then, are invoked as “justificatory facts” underpinning the promotion of particular kinds of conduct and of mentalities that are conducive to that conduct. They also propose different methods for administering administration based either on externally validated metrics or on capacities and conduct cohering around groups. The language of administrative ethics, in both cases, will be quite distinct both in how it conveys its focus on ends and on the means to those ends. How processes of promotion, demotion, approbation, and admonition are brought to bear on individuals will depend on how administrative bodies are situated on the line between thick and thin. What those processes communicate to workers about the institutional good will determine to a large extent how those workers define themselves as moral agents *vis-à-vis* their roles.

The performance of administrative ethics in its thick and thin guises, as such, is also the performance of accountability. The construction of “zones” of accountability (Dubnick and Justice 2011) depends upon the degree to which the organization is defined as an internally defined community or as a subject of externally determined discipline. It also depends on how standards are conceived and operationalized—on whether they are formulated within or beyond the organization and on whether and how they are made the subject of processes designed not only to render work legible but, through that legibility, to bring it within the boundaries of the organization’s ends.

In its institutionalized form, accountability is a matter of enforced expectations. Metrics and measures are wielded in the cause of having the interests of particular constituencies or communities or principals represented in the organizational form. Thus, being accountable is not a simple matter of being answerable for some duty or other. It is a matter of promises: it acknowledges the legitimacy of some principal in its standpoint, recognizes the mechanisms of enforcement that have been brought to bear, and inculcates mentalities that support and sustain those standpoints against alternatives.⁸ As such, accountability is not a mere technological device. It is the lived experience of the never-ending struggle to define, control, and then maintain organizational ends. It articulates expectations about how work ought to be carried out, towards what ends, and in what contexts. As such, it seeks to act upon how individuals think about their jobs. It does so by defining ends and by aligning those ends with processes of commendation and condemnation, of promotions and interventions. Accountability, in other words, maps out a zone of behavior and in doing so is the engine that drives the institution’s positioning of individual and teamwork on the thick-thin axis.

Given this, if we think of accountability in the context of the kinds of “zone of indifference” described by Barnard (1938; see also Dubnick and Justice 2011; Stewart 1989), we ought not to think of a kind of moral neutrality. Rather, such spaces are intensely moral, circumscribed and defined as they are by ideas of the good. And while normative ideals may be defined and brought to bear through discipline (at least in the first instance), rather than emerging directly from individual “moral intelligence,” they nonetheless lend institutional ends a legitimating force that they could otherwise not have. This, in short, is the business of accountability. The thick or thin character of institutional norms is the everyday practice of accountability.

Accountability, then, provides the interface between institutional ends, role moralities, and the metrics and mechanisms through which institutions articulate their moral presence. The thick-thin nexus is a key part of this interface. It underpins, first, how the licenses and constraints of institutional work are conceived, and it justifies, second, the structures of power politics through which regulators or teams will seek to define and stabilize some particular institutional form.

The struggle over the institution’s normative architecture is perhaps the key tension in the practice and government of public administration. The study of administrative ethics is less a matter of studying norms than it is a matter of studying the power to administer administration. That is, we should recognize “ethical organizations” as conforming to particular (often contested) definitions of how the organization ought to conduct itself. We should recognize individual administrative ethics, by these lights, as being a matter of compliance (in the ordinary sense) with expectations arising from those definitions. As such, accountability both maps out and administers the territory of good conduct and is infused with implicit and explicit threats directed at those whose conduct is not in keeping with the organization’s defined aims.

Two Cases

In this section we focus on two brief case studies to demonstrate the manner in which the tensions between thick and thin described above—in other words, the tensions produced by the struggle to define and control an administrative ethics—have played out in the drive for administrative reform. Our discussion of the “high-stakes” No Child Left Behind reforms in the United States focuses on a number of factors that lie behind the invocation of thin standards, achievable through metrics, primarily the interaction of teachers with the process and their developing sense of alienation from it as tension between thick and thin norms became apparent. In the case of the United Kingdom’s National Health Service reforms, we examine how local, thick, group expertise is being

invoked in pursuit of market-oriented reforms. The NHS case reveals a seeming shift *beyond* ethics as administrative groups are reconfigured as consumers, their priorities shaped by markets. We argue, however, that the NHS reforms reflect if anything an *intensified* thin administrative ethical standpoint, where though they may be delegated to organizational groups, imagined market priorities that tend to be at the heart of accountability discourses—efficiency, performance, and so on—are given center stage.

Case 1: No Child Left Behind: Education in Targetworld

From the outset, No Child Left Behind represented a significant change in American education policy in two regards. First, its passage reflected a major expansion of the federal government's role in education.⁹ Of equal, if not greater, significance has been the NCLB's reliance on high-stakes performance metrics as the preferred means for delivering this reform program. The use of metrics in American education has its roots in first decades of the twentieth century, but the passage of NCLB in 2002 represented a major shift. Not only did it involve a "scaling up" to the national level policy initiatives found in some states and localities, but also it put into effect an unproven "default" theory of education that assumed the key factor for the "success" of schooling resided in teachers (see Gunzenhauser 2003).

There were two policy related paths that ultimately led to NCLB, one following the development and application of metrics-based research to matters of education and intellectual performance (Lagemann 2000; Robarts 1968), and the other winding its way through the political maze of education reform proposals (Ravitch and Vinovskis 1995). The two paths ran in parallel for many decades, until they intersected with the emergence of test-based, high-stakes accountability systems that become the state-level education policy standard in the 1980s. Metrics previously used as indices and assessment tools were linked to decisions related to the funding or accreditation of schools, the placement or promotion of students, and the certification and compensation of teachers.¹⁰ With NCLB, that approach became nationalized, with all due constitutional deference to the niceties and peculiarities of an American federalism that formally locates authority over education to the states.

Put in the context of contemporary education reform in the United States, NCLB was (and remains) an open-ended composite of state-based efforts to complete a "second wave" of reforms that began in the 1980s as critics attacked previous attempts at reform (Chubb 1988). The first wave was characterized by programmatic initiatives developed and implemented within the existing education establishment.¹¹ Focusing on funding and the adoption of basic curriculum standards, these reforms altered K–12 schooling in the United States,

States, but did little to enhance overall performance as indicated by the various metrics of the day. There were, however, examples of local initiatives that seemed to succeed, yet efforts to reproduce such successes in other districts or to “scale up” those reforms were blocked by structures, procedures, and “interests” inherent to the education establishment.¹² As a result, the second wave of reforms aimed at breaking through the institutional and political barriers to innovation and change. The adoption of high-stakes accountability systems was a major tool in carrying out that strategy.

Given the stress on improving the performance of students, the explicit rationale and logic of high-stakes accountability was initially embraced by many teachers. Playing to the core values of teachers, the rhetoric of these reforms stressed empowering classroom instructors through fostering innovation and professional development. The common enemies of both reformers and teachers were the bureaucratized administrative infrastructure of centralized school districts and the constraints they imposed on instructors, a line that, as we also see in the NHS case study, is common with metric-oriented reform. Turning the focus to results and outcomes was more attractive than obsessive concentration on procedure and constant monitoring, and teachers were willing to adjust and adapt to new realities well before NCLB was signed into law in January 2002.

Although more than half the states had adopted some forms of high-stakes accountability system prior to 2002, special attention was paid to the high-stakes approach used in Texas since the mid-1980s.¹³ Regarded as the exemplary model for reform, at the outset it included a “no pass, no play” rule for student athletes (a powerful incentive in the sports-obsessed state), a strengthening of statewide basic skills testing for students, and test-based recertification for teachers. By 1995 the testing system had moved from assessing the minimum proficiency of students to rating the performance of schools based on the passing rates for students both in the aggregate and in disaggregated student populations reflecting specified racial and economic groups. Both cash rewards and heavy sanctions (including school closures) were tied to those ratings. The results of this effort were touted in the national media and a proposal based on the model became a centerpiece in the presidential campaign of then Texas governor George W. Bush in 2000 (see Rudalevige 2003).

The “testing” of teachers in Texas began in 1986, when a basic literacy exam was given to more than 210,000 of the state’s teachers. A formal survey conducted two years prior by a powerful blue-ribbon committee (chaired by future presidential contender Ross Perot) found that Texas teachers believed at least 10 percent of their colleagues were incompetent. The commission also heard complaints from school administrators about the difficulties of firing

or disciplining incompetent teachers, and the media were filled with stories and narratives to support calls for action. As a result, the Texas legislature's omnibus education reform law of 1985 required teachers to take two exams, one focused on basic literacy and the other on proficiency in their subject area. Organizations representing teachers supported the new requirements, in part because they were accompanied by a substantial increase in state funding for teacher salaries, and in part due to their compatibility with the desire of many teachers to weed out the incompetents among them.

The first two administrations of the Texas Examination of Current Administrators and Teachers (TECAT) resulted in a 99 percent passage rate, but observers found the process had a demoralizing effect on teachers, who had expected a less time-consuming and less onerous test. In addition, the ongoing media coverage highlighting stories of incompetent teaching and unqualified teachers was perceived as demeaning by many teachers who saw their sense of teaching as reliant on professionalism and public standing diminished by a reform effort they initially supported. Post-test surveys and interviews noted that only 5 percent felt the process made them better teachers, and more than half stressed its negative impact on them both personally and professionally. At the same time, the survey uncovered a basic agreement that the reforms—including those focused on teacher competency—were necessary and even desirable.¹⁴

The Texas experience with high-stakes accountability is well studied and frequently debated, but its status as a model for other states both pre- and post-NCLB offers insights into the impact of such reform efforts on the ethical landscape under which public sector professionals work. Teachers initially embraced the notion of reform through greater accountability, not merely because of the pecuniary rewards it would bring to them individually and collectively, but also because the reform agenda was highly compatible with what it meant to be a professional educator. However, being subjected to the accountability demands of the reform—in this instance, being subjected to what was generally perceived as a demeaning and at times publicly humiliating testing process—proved to be a challenge (on a very personal level) to their sense of identity as members of a professional community.

To comprehend the impact of such high-stakes accountability reforms, we can consider the options facing teachers as a classic example of facing the choices of exit, voice, or loyalty (Hirschman 1970, 1980). For teachers, exiting by choice effectively meant surrendering one's thick ties with the professional community. Those who remained under conditions of loyalty were essentially choosing to adapt to the ethically thin demands of the reformist agenda. To remain as a vocal skeptic of accountability based reforms required the ethical stamina to live a life between the conflicting demands of thick and thin relationships.

Fast-forward twenty-five years from the initial Texas experience, and issues related to accountability based reforms remain unresolved at the policy and implementation levels. NCLB, up for renewal in 2012, went into its tenth year with even its supporters calling for changes (see Chubb 2009; Schneider 2011). Its critics, including some prominent former advocates of major K–12 reforms (see Ravitch 2010), have mounted a significant challenge to the policy regime based on the negative impacts of high-stakes accountability.¹⁵ In light of a potential political stalemate over renewal, the U.S. Department of Education has used a variety of executive power mechanisms to reshape NCLB through grants and waivers from strict implementation guidelines to states that can demonstrate an effective effort to achieve the student proficiency objectives of NCLB by the legislated target date of 2014. At the state and local level, major efforts at school reform move ahead, relying increasingly on high-stakes methods that increasingly place the burden for “success” on schools and their teachers.

What is most important for us, however, is the way this extended process of reform has indelibly altered the ethics regime surrounding teaching and teachers. The classroom and the school are venues where one expects thick relationships to be nurtured and thrive. For teachers, such relationships have hitherto been assumed central to their professional endeavors, and it is those relationships—with students, with colleagues, with administrators, with parents and the community-at-large—that, they believe, ought to determine performance and success.

Reformers, however, perceive many of those thick relationships as obstacles to achieving the objective of student performance and proficiency. Thinning those relationships by reducing entry into the field, eliminating tenure, or modifying (if not eliminating) collective bargaining rights is perceived as corrective action, and if the result is the undermining of the teaching profession's norms and practices, so be it. For the reformers it is a matter of altering those norms and practices in order to achieve the higher goal of schooling, which is to enhance student performance and proficiency in areas deemed essential for their success and society's well-being.¹⁶

Well-funded by major foundations and supported by politicians from both sides of the partisan divide as well as sympathetic media, the American education reform movement has a momentum on the policy stage that seems to have already succeeded. Yet reformers such as Michelle Rhee and the leaders of Students First! realize that the ability to bring about real change through alterations of curriculum, governance, and sanctions will be insufficient until it undermines and/or replaces the ethical infrastructure of the teaching profession. The struggle is not for teachers to adhere to an “ethics.” It is to define what those “ethics” are taken to be.

After a quarter-century of high-stakes accountability reforms, the reformers are having considerable success but are running into resistance. Their persistence in the use of agenda-setting and policy-making powers has made exit and adaptive loyalty more inviting to many teachers, but it has also energized what reformers regard as a reactionary countermovement that is attempting to mobilize opposition to any further changes. But even if that anti-high-stakes movement succeeds, it is unlikely that it would call for a return to prereform conditions in K–12 education. The ethics of teaching have been forever altered by the power of reform.

Case 2: Cultivating Consumers in Britain’s National Health Service

The United Kingdom’s National Health Service was established as part of the postwar welfare state and continues to provide most health-care services “free at the point of use” for all UK residents. The NHS employs 1.7 million people, making it by some measures the world’s fifth-largest employer (*Daily Telegraph* 2012). Its budget for 2011–2012 was about US\$166 billion, and it is governed broadly in line with the UK’s devolved federalism.¹⁷ The NHS in England, by far the largest component in the regionalized organization, treats 3 million people every week (NHS Choices 2011).

Our discussion here focuses on the reforms implemented in England and Wales through the Health and Social Care Act of 2012.¹⁸ Before going into some of the act’s details, it is helpful to situate it in the NHS’s twenty-year “permanent revolution” (Hunter 2005, 209; see also Pollitt 2007) through which successive reform projects have sought to “modernize” the service, largely aimed, in classic New Public Management style (Hood 1991; Osborne and Gaebler 1992), at alleviating perceived deficiencies in performance produced through perceived shortcomings in accountability (see Dubnick 2005). That is, the reform attacked clinical teams as interest groups resisting efficiency and patient care.

NHS reform has always been Janus-faced, on the one side looking toward marketization in order to produce ostensible efficiencies, and on the other side looking toward centralized bureaucratic coercion as a presumed means of delivering results. Reformers have sought to introduce elements of competition into the service without the (politically unviable) option of allowing competition on price. Prime Minister Margaret Thatcher’s government, finding that they could not privatize the service, introduced an “internal market” reform featuring some intra-NHS competition. This proved ineffective in terms of outcomes, not helped by the service’s struggles in the face of depleting budgets. At the same time, reforms have

placed a major emphasis on delivery targets, especially on hospital waiting times, and have witnessed a rise in metrics and monitoring governed by a cadre of what Christopher Hood calls “econocrats” and “accountocrats” (Hood 1995, 94).¹⁹

All this has been matched by a broader rise in managerial “leaderism,” through which managerial “reform” imperatives are driven through narratives of “leadership,” and provision is oriented away from ideas of citizenship and toward ideas of the citizen as a consumer of services.²⁰ The NHS, as such, has been torn between budgetary pressures and central policy requirements for two decades.

The reform cycle under Tony Blair’s premiership set the scene for the current Cameron government reform efforts, hitting the English NHS on four fronts simultaneously. First, capital funding was diverted through the “private finance initiative,” whereby private providers built and maintained NHS estates that were then rented by the service. Second, organizational reform saw the introduction of new levels of governance through a maze of health-care trusts, foundation trusts, all overseen by a number of regulators. Third, a series of uniform targets was introduced from the center (see Smith and Busse 2010), for instance producing a “three-star” rating for each regional health trust (Bevan 2006)²¹ to which chief executives could be held to account. Finally, there was a major drive for the introduction of “patient choice,” through which it was hoped efficiencies would emerge. Choice was predicated, as one ex-policy adviser to Tony Blair put it, on the grounds that “the absence of choice also meant an absence of incentives for providers to improve” and that, without competition “providers who offered a poor or a tardy service could continue do so with impunity; for those badly treated had nowhere else to go” (Le Grand 2006).²² The division of the NHS into regional organizations allowed resources to be delegated down, and patients, in collaboration with their general practitioners (GPs, the primary interface between individuals and the NHS) were encouraged to shop around Alasdair MacIntyre between NHS hospitals for elective procedures. The hope, as expressed, was that patient choice would render hospitals and trusts accountable, would root out failures, and would encourage efficiency, innovation, and quality improvements.

The Cameron reform builds on Blair’s work, in particular by combining further organizational change with a shift in the market focus of the NHS. The Cameron government’s innovation lies in the sense that health-care choice may work better in a wholesale, rather than retail environment—that is, if “patient choice” is replaced by “GP choice.” Patients proved to be relatively passive consumers. It is hoped that, disciplined by market forces, GPs will do a better job. Organizationally, regional trusts have

been abolished, to be replaced by GP consortia that will buy services from health-care providers (both public and private) on behalf of their patient populations.

All this is predicated on conventional “there is no alternative” narratives, positing rising costs of care and poor outcomes as the problem—although, on many measures, the NHS fares as well as European comparators, on less money—and competition as the solution (UK Department of Health 2011). At the same time, the Cameron reform’s special innovation, through the Health and Social Care Act, is that it sees itself as putting

clinicians in charge of shaping services, enabling NHS funding to be spent more effectively. Previously clinicians in many areas were frustrated by negotiating with primary care trusts to get the right services for their patients. Supported by the NHS Commissioning Board, new clinical commissioning groups will now directly commission services for their populations. (UK Department of Health 2012, para. 6)

Doctors and nurses are to be emancipated from central control, with the reform (as Health Minister Andrew Lansley puts it) “giving them overall responsibility in each local area for the NHS budget.” For NHS organizations, the reform “means giving them operational independence from ministers in Whitehall—allowing them to focus on the results they are delivering, rather than the latest central missive from government” (Lansley 2012, 789). For Lansley, indeed, the key problem the reform is trying to solve is that

frontline staff do not have the freedom to deliver care in the way they see best. Perfectly sound clinical decisions taken by doctors and nurses are routinely frustrated by a system that is not clinically led and where trust and power are not placed in the hands of those who treat patients every day. (789)

So the reform is articulated as bringing trust and control back to local levels and to the groups that, at the New Public Management (NPM)-driven beginning of the reform era, were themselves regarded as a significant part of the NHS’s problem.

As we saw in the case of No Child Left Behind, much of the interaction we are interested in involves the imposition of metrics legitimated on thin ethical frameworks. Testing was predicated on a mistrust of the thick ethical frameworks through which bureaucratic groups were sustained. These teams were presumed to stand in the way of modernizing forces or were simply deemed hostile to accountability and reform where greater accountability (not,

say, budgetary pressure) was the solution to problems of performance. Team appeals to their obscure and arcane local forms of expertise were dismissed in favor of centralized standards, and organizations were reformed toward accounting and managerial imperatives privileging legibility and ultimately toward metrics imposed from outside. In the case of the most recent NHS reform, on the other hand, there is a major emphasis on the local and on group expertise being used on patients' behalf. Are we witnessing a major shift away from previous NPM reform cycles in British health care? We think not.

The Cameron reform has been met with deep skepticism, not least from within the medical profession, largely on the grounds that the marketization components in the reform will “put profit before patients” (Spence 2012), will lead to patients “being excluded from health services” (Pollock, Price, and Roderick 2012), and ultimately will “wreck” the NHS (Bailey 2012; see also Ham 2012; Hunter and Williams 2012). We see the reform less as a radical move but as situated fundamentally within the logic of NPM-Alasdair MacIntyre reform as we have set it out above.

The emphasis on power being transferred to doctors and nurses on the ground relies on the idea that doctors and nurses—the thick groups that administer public services through their expertise—have been tamed by the twenty-year reform process and, as subjects of reform, will continue to be disciplined through their new independence. Their independence, in other words, *is itself a regime*. They are to be “governed through freedom,” in a sense, in that they would “enact the responsibilities that composed their liberties,” having been “equipped with a moral agency that would shape their conduct within a space of action that was necessarily indeterminate” (Rose 1999, 72).

The market imperative in the reform is intended, in other words, to replace government—and to dissipate the need for the administration of administration—in the delivery of health care to patient populations. Rather than taking the kinds of centralized approach favored in No Child Left Behind or in the targets imperatives of the Blair reforms, this new iteration posits health-care workers as existing in localized consumer-producer relationships with each other. By remaking health-care markets on local grounds, characterized by competition over quality, by GPs acting in an “agency” relationship, consuming health care on their patients' behalf, and by NHS hospitals competing with private providers, the system is imagined as self-regulating.

This exercise in “cultivating consumers” is also imagined, as envisaged by the economist and philosopher Friedrich von Hayek, as being beyond administrative ethics. That is, markets, as institutions that best “encourage the discovery and communication of decentralized practical knowledge” (Gray 1998, 135), can replace questions of social justice on the outside and loyalties, fidelities, and principles on the inside (for his critique of social justice, see

Hayek 1976). Duties emerging from market forces, within this ideological scheme, will be sufficient to discipline all players. The GP consortia that do not serve patients well or are not sufficiently active as intermediary consumers of health care on patients' behalf will lose patients to their rivals. Hospitals that are inefficient or ineffective will suffer. The reform, as such, does not rely on the tensions between thick and thin. It replaces them—in its own view—with a more efficient social technology. As such, this reform does not involve a rowing back from the previous attack on thick relations and ethics. It simply assumes that they have either disappeared or are irrelevant. The triumph of this iteration of administrative ethics is that it sees itself as presiding over the withering away of ethical concerns in administration entirely.

There is a misapprehension at the core of this standpoint. While the marketization of health-care relationships is imagined as allowing a “zone of accountability” to emerge, shorn of ethical concerns but constrained by market forces, the organizational experience will likely involve the intensification of an administrative ethics narrative, in a quasi-corporate governance guise, aimed at orienting mentalities toward “efficiency,” “growth,” “accountability to stakeholders,” and “performance,” where specified outputs are construed as products and from there as outcomes (Gregory 1995). The ethical administration of conduct will continue, because people and the purposes to which they are put will still need to be monitored, performed, and controlled. It is likely that we have not escaped Hood’s “accountocrats” yet (Hood 1995, 94). Attempts to detach organizational goals from “ethical” concerns, rather than simply situating work in a technocratic space, tend to fold back on themselves, with the internal imperatives of organizations simply reinvigorating administrative ethics for the new market dispensation, characterized by cost controls, by forms of corporate responsibility articulated through reputational and other forms of risk management, and by innovation and enterprise situated in market terms. The interplay of thick and thin will play out henceforth in the theater of markets.

Conclusion

As the two cases above have highlighted, while tensions between thick and thin are inescapable, the NPM generation of reform agendas has sought to set thick relationships aside in favor of and through the enforcement of thin metrics. What is more, the invocation of ethics has to be understood not as an appeal to the good, but as a form through which particular power structures can be enforced. *Administrative ethics are a form of administration.*

While the struggle between thick and thin can never be escaped, the paths along which organizations travel are closely determined by what has gone

before. The reform agenda has its impact, whether through the metrics focus of NCLB or through the marketization of the NHS that has come through the Cameron reform. Organizational path dependencies come about not least because organizations attract and recruit workers in line with whatever ethics holds sway at some particular time. Those who are reluctant to comply will either be turned away or will turn themselves away. On this level at least, organizations and their masters choose their virtues.

Administrative ethics is not fully described by the moralist's virtues. Nor is it encompassed by the instrumentalist's designs. It is better understood as a form of, a function of, and a facility of politics. Presentations of ethics as standards to aspire to should lead us to ask "whose standards?" Behind every such appeal is a demand for the maintenance or overthrow of some organizational status quo. A call to regard administrative ethics as a matter of power is not a call to cynicism. It is, rather, an appeal to subject the bases of administrative ethics to critical analysis. Organizational life is a language of power and we must recognize that this power extends to how ideas of the good are brought to bear on and pervade administrative work. Administrative ethics is thus neither preexisting good nor simple tool. It is the very stuff of organizational politics and power.

Notes

1. Such thinking has been key for MacIntyre throughout his career (see especially his thoughts on effectiveness in MacIntyre 1985, 73ff; see also MacIntyre 1999). We do note that the conclusions we draw from MacIntyre's diagnosis are different from those drawn by MacIntyre himself. He is concerned with the erosion of the virtues in the face of modernity. We are concerned solely with production of administration and administrative selves through the production of administrative ethics.

2. We do not claim that the self *outside* organizational life is any less a presentation (on which see Goffman 1969).

3. On professional organizations, see Bucher and Stelling 1969; see also Satow 1975.

4. As we discuss below, the United Kingdom's National Health Service works on broadly federal lines. The latest reform is, at least initially, targeted at England.

5. We are following Michel Foucault's work on power/knowledge and on "governmentality" here (see for instance Dean 2010; Foucault 1994a, 2008; Miller and O'Leary 1987, 1994; Rose 1992; Rose, O'Malley, and Valverde 2006).

6. On virtues as skills, see Annas 2011.

7. Much has been written on this subject, not least in the fields of virtue ethics and of political philosophy (see, for instance, Williams 1985 from a virtue ethics standpoint; see Walzer 1994 for an argument on "thick and thin" from a political philosophy perspective).

8. Mark Bovens (2010, 962) has posited that there are "two concepts of accountability," one promoted as a virtue and the other offering it as a mechanism to generate compliance. These two views of accountability bear more than a "family resemblance." Virtue and mechanism are, in the institutional context, effectively the same thing in

that the mechanism is held to measure a series of products (metrics) that are held in turn to reflect the desired virtues (see Gregory 1995).

9. Historians trace national education policies back to the pre-Constitution Northwest Ordinance of 1787, which required that territorial governments set aside land in each town for public schools if they wished to be considered for statehood. While the Constitution itself makes no explicit allocation of national authority in the area of education, over the past 220 years the federal government has been increasingly involved in expanding access to education, providing funding and related support, and promoting curriculum content standards. With NCLB, however, the federal government extended its reach by focusing on educational quality and specifically the improvement of teaching.

10. On various high-stakes mechanisms, see Wohlstetter 1991.

11. The “waves” perspective has taken several forms; see also Linn 2000.

12. For an analysis of the obstacles to “scaling up,” see Bruns, Filmer and Petrinis 2011.

13. The analysis that follows draws on Haney 2000; Shepard and Kreitzer 1987; see also Heilig and Darling-Hammond 2008; Palmer and Rangel 2011.

14. Specifics on this study, including excerpts from interviews, are found in Shepard and Kreitzer 1987.

15. For an exchange between Chubb and Ravitch, see Ravitch and Chubb 2009.

16. As an example, one of the most active and vocal advocacy groups for extending accountability-based reforms puts what it perceives as the primary purpose of teaching right in its name: “Students First!” The group’s explicit mission objectives are stated simply as “elevating teachers, empowering parents, and spending wisely.” Its policy objectives are rhetorically elevated as well: “Ending seniority based layoffs is a matter of social justice,” proclaims their website (see Castillo 2012).

17. The United Kingdom has three “devolved” regions, each with varying levels of autonomy: Wales, with very limited powers; Northern Ireland with unique powers rooted in its “peace process”; and Scotland, with more substantial powers. Strangely to American eyes perhaps, England, the largest of the UK’s nations by a large margin, does not have any self-governing institutions. The NHS has separate governance structures for each region. The UK also has three separate legal systems: England and Wales’s legal system is based on common law, as is that of Northern Ireland. Scotland’s legal system is based in Roman law. Public sector reform, following these complex institutional structures, is often targeted on England and Wales, with devolved institutions in Scotland and in Northern Ireland implementing reforms quasi-autonomously.

18. We call it “the Cameron reform,” in order to distinguish it from the previous, related cycle of reform instituted under Tony Blair’s government (“the Blair reform”) from 2002.

19. See also, for instance, Bevan and Hood 2006; Hood 1991, 1995. For an account of targets in European health care as a whole, with a special emphasis on the UK, see Smith and Busse 2010.

20. On leaderism, see O’Reilly and Reed 2010; on citizen-consumers, see Clarke et al. 2007; on choice in the NHS, see Greener 2003.

21. On targets, see also Bevan and Hood 2006; Cutler and Waine 2000; Hood 2006; McMurray 2007; Smith 2002.

22. Julian Le Grand has been active in defending this aspect of Blair’s legacy, on grounds of both efficiency and social justice (see Dixon 2009; Hunter 2009; Le

Grand 2007, 2009a, 2009b). It is unclear how his claim that social exclusion in state services can be resolved by competition between state services is to be understood. On choice in general, see the work of Ian Greener (2003, 2009) and see also Clarke 2005; Clarke et al. 2008; D. Hughes and Griffiths 2008; D. Hughes, Mullen, and Vincent-Jones 2009; Needham 2008; Newman and Kuhlmann 2007; Simmons 2011; Simmons, Birchall, and Prout 2012; Tritter 2011; Vincent-Jones 2011.

As the most recent cycle of reform was progressing through Parliament, controversy emerged in blogs, newspapers, and journal publications between health economists over the evidence base for the choice agenda. See Beckford 2011; Bloom, Cooper et al. 2011; Bloom, Propper et al. 2011; Cooper 2010; Cooper et al. 2010, 2011, 2012; Gibbons 2012; Pollock, Macfarlane et al. 2011; Pollock, Macfarlane, and Greener 2012; Pollock, Majeed et al. 2011; Ramesh 2011. Methodological debates aside, it should be noted that the evidence produced by Cooper et al. was focused on the Blair reform, rather than on the 2011–2012 proposals, so provides lessons about competition between state hospitals under a regime supposedly driven by “retail” consumption, whereas the Cameron reform introduces both private providers and a more “wholesale” mode of consumption by GPs’ consortiums.

References

- Annas, Julia. 2011. *Intelligent Virtue*. Oxford: Oxford University Press.
- Bailey, Peter. 2012. “Primary Care Duped: The Government’s Bill Will Wreck the NHS.” *British Medical Journal* 344 (February 14): e998–e998.
- Barnard, Chester. 1938. *The Functions of the Executive*. Cambridge, MA: Harvard University Press.
- Beckford, Martin. 2011. “300 Heart Attack Patients Saved a Year Under Competitive NHS.” *Daily Telegraph*, July 28. www.telegraph.co.uk/health/healthnews/8666296/300-heart-attack-patients-saved-a-year-under-competitive-NHS.html.
- Bevan, Gwyn. 2006. “Setting Targets for Health Care Performance Lessons from a Case Study of the English NHS.” *National Institute Economic Review* 197 (1): 67–79.
- Bevan, Gwyn, and Christopher Hood. 2006. “What’s Measured Is What Matters: Targets and Gaming in the English Public Health Care System.” *Public Administration* 84 (3): 517–538.
- Black, Julia. 2002. “Regulatory Conversations.” *Journal of Law and Society* 29 (1): 163–196.
- Bloom, Nicholas, Zack Cooper, Martin Gaynor, Stephen Gibbons, Simon Jones, Alistair McGuire, Rodrigo Monero-Serra, Carol Propper, John Van Reenen, and Stephan Seiler. 2011. “In Defence of Our Research on Competition in England’s National Health Service.” *Lancet* 378 (9809): 2064–2065.
- Bloom, Nicholas, Carol Propper, Stephan Seiler, and John Van Reenen. 2011. *The Impact of Competition on Management Quality: Evidence from Public Hospitals*. Centre for Economic Performance Discussion Paper No. 983, October. <http://cep.lse.ac.uk/pubs/download/dp0983.pdf>.
- Bovens, Mark. 2010. “Two Concepts of Accountability: Accountability as a Virtue and as a Mechanism.” *West European Politics* 33 (5): 946–967.
- Bruns, Barbara, Deon Filmer, and Harry Anthony Patrinos. 2011. *Making Schools Work: New Evidence on Accountability Reforms*. Washington, DC: World Bank.

- Bucher, Rue, and Joan Stelling. 1969. "Characteristics of Professional Organizations." *Journal of Health and Social Behavior* 10 (1): 3–15.
- Carr, David. 2003. "Character and Moral Choice in the Cultivation of Virtue." *Philosophy* 78 (2): 219–232.
- Castillo, Francisco. 2012. "Seniority-Based Layoffs: A Matter of Social Justice." StudentsFirst, May 23. www.studentsfirst.org/blog/entry/seniority-based-layoffs-a-matter-of-social-justice.
- Chubb, John E. 1988. "Why the Current Wave of School Reform Will Fail." *Public Interest* 90 (Winter): 28–49.
- . 2009. *Learning from No Child Left Behind: How and Why the Nation's Most Important But Controversial Education Law Should Be Renewed*. Stanford, CA: Hoover Institution Press.
- Clarke, John. 2005. "New Labour's Citizens: Activated, Empowered, Responsibilized, Abandoned?" *Critical Social Policy* 25 (4): 447–463.
- Clarke, John, Janet Newman, Nick Smith, Elizabeth Vidler, and Louise Westmarland. 2007. *Creating Citizen-Consumers: Changing Publics and Changing Public Services*. London: Sage.
- Clarke, John, Janet Newman, and Louise Westmarland. 2008. "The Antagonisms of Choice: New Labour and the Reform of Public Services." *Social Policy and Society* 7 (2): 245–253.
- Cooper, Zack. 2010. "Hospital Competition Is Good for Patients, and for Efficiency." British Politics and Policy at LSE, July 12. <http://blogs.lse.ac.uk/politicsandpolicy/2010/07/12/hospital-competition-is-good-for-patients-and-for-efficiency/>.
- Cooper, Zack, Stephen Gibbons, Simon Jones, and Alistair McGuire. 2010. *Does Competition Improve Public Hospitals' Efficiency? Evidence from a Quasi-Experiment in the English NHS*. CEP Discussion Paper No. 988, June. London: London School of Economics. <http://cep.lse.ac.uk/pubs/download/dp0988.pdf>.
- . 2012. "Economic Studies Showing Positive Competition Effects on Hospital Performance Fully Controlled for the Factors Cited by Recent Critics." British Politics and Policy at LSE, March 12. <http://blogs.lse.ac.uk/politicsandpolicy/2012/03/12/hospital-competition-cooper-et-al/>.
- Cutler, Tony, and Barbara Waive. 2000. "Managerialism Reformed? New Labour and Public Sector Management." *Social Policy and Administration* 34 (3): 318–332.
- Dahl, Robert A. 1957. "The Concept of Power." *Behavioral Science* 2: 201–215.
- Daily Telegraph*. 2012. "NHS Is Fifth Biggest Employer in World." March 20. www.telegraph.co.uk/news/uknews/9155130/NHS-is-fifth-biggest-employer-in-world.html.
- Dean, Mitchell. 2010. *Governmentality: Power and Rule in Modern Society*. 2nd ed. London: Sage.
- Dixon, Jennifer. 2009. "Invisible Hand? More Like Post-Modern Mush." *Health Economics, Policy and Law* 4 (4): 503–508.
- Dobel, J. Patrick. 1990. "Integrity in the Public Service." *Public Administration Review* 50 (3): 354–366.
- Douglas, Mary. 1987. *How Institutions Think*. London: Routledge and Kegan Paul.
- Dubnick, Melvin J. 2005. "Accountability and the Promise of Performance: In Search of the Mechanisms." *Public Performance and Management Review* 28 (3): 376–417.
- Dubnick, Melvin J., and Jonathan Justice. 2011. "Dealing with Barnard's Regret: Accountability and the Zone of Expectations." In the Sixth Organization Studies Sum-

- mer Workshop "Bringing Public Organization and Organizing Back In." Abbaye des Vaux de Cernay, Paris, May 25–28.
- Dubnick, Melvin J., and Ciarán O'Kelly. 2005. "Accountability Through Thick and Thin: Making Assessments and Making Cases." In *Ethics in Public Management* (2nd ed.), ed. H. George Frederickson, and Richard K. Ghere, 139–162. Armonk, NY: M.E. Sharpe.
- Dubnick, Melvin J., and Barbara Romzek. 1993. "Accountability and the Centrality of Expectations in American Public Administration." In *Research in Public Administration*, ed. James Perry, 37–78. Greenwich, CT: JAI Press.
- Edelman, Lauren B., and Mark C. Suchman. 1997. "The Legal Environments of Organizations." *Annual Review of Sociology* 23: 479–515.
- Foucault, Michel. 1979. *Discipline and Punish: The Birth of the Prison*. Harmondsworth, UK: Penguin.
- . 1994a. "Governmentality." In *Power: The Essential Works of Foucault*, vol. 3, ed. James D. Faubion, 201–222. London: Allen Lane, Penguin Press.
- . 1994b. "The Subject and Power." In *Power: The Essential Works of Foucault*, vol. 3, ed. James D. Faubion, 326–348. London: Allen Lane, Penguin Press.
- . 2008. *The Birth of Biopolitics: Lectures at the Collège de France, 1978–1979*. London: Palgrave.
- Frederickson, H. George. 1997. *The Spirit of Public Administration*. San Francisco: Jossey-Bass.
- Frederickson, H. George, and David K. Hart. 1985. "The Public Service and the Patriotism of Benevolence." *Public Administration Review* 45 (5): 547–553.
- Gibbons, Steven. 2012. "Competition between NHS Hospitals Produces Positive Incentives. However, Introducing Private Hospital Competition Can Have Adverse Effects." British Politics and Policy at LSE, February 23. <http://blogs.lse.ac.uk/politicsandpolicy/2012/02/23/hospital-competition-gibbons/>.
- Giddens, Anthony. 1991. *Modernity and Self-Identity: Self and Society in the Late Modern Age*. Oxford: Polity.
- Goffman, Erving. 1969. *The Presentation of Self in Everyday Life*. London: Allen Lane.
- Gray, John. 1998. *Hayek on Liberty*. 3rd ed. London: Routledge.
- Greener, Ian. 2003. "Who Choosing What? The Evolution of the Use of 'Choice' in the NHS, and Its Importance for New Labour." In *Social Policy Review: UK and International Perspectives*, ed. Catherine Bochel, Nick Ellison, and Martin Powell, 49–68. London: Policy Press.
- . 2009. "Towards a History of Choice in UK Health Policy." *Sociology of Health and Illness* 31 (3): 309–324.
- Gregory, Robert. 1995. "Accountability, Responsibility and Corruption: Managing the 'Public Production Process.'" In *The State Under Contract*, ed. Jonathan Boston, 97–114. Wellington, NZ: Bridget Williams Books.
- Gunzenhauser, Michael G. 2003. "High-Stakes Testing and the Default Philosophy of Education." *Theory into Practice* 42 (1): 51–58.
- Ham, Chris. 2012. "What Will the Health and Social Care Bill Mean for the NHS in England?" *British Medical Journal* 344 (March 20): e2159–e2164.
- Haney, Walt. 2000. "The Myth of the Texas Miracle in Education." *Education Policy Analysis Archives* 8: 1–270.
- Hayek, Friedrich A. 1976. *Law, Legislation and Liberty*, vol. 2: *The Mirage of Social Justice*. Chicago: University of Chicago Press.
- Heilig, Julian Vasquez, and Linda Darling-Hammond. 2008. "Accountability Texas-

- Style: The Progress and Learning of Urban Minority Students in a High-Stakes Testing Context." *Educational Evaluation and Policy Analysis* 30 (2): 75–110.
- Hirschman, Albert O. 1970. *Exit, Voice, and Loyalty: Responses to Decline in Firms, Organizations, and States*. Cambridge, MA: Harvard University Press.
- . 1980. "Exit, Voice, and Loyalty: Further Reflections and a Survey of Recent Contributions." *Milbank Memorial Fund Quarterly/Health and Society* 58 (3): 430–453.
- Hobbes, Thomas. 1996. *Leviathan*, ed. Richard Tuck. Cambridge, UK: Cambridge University Press.
- Hood, Christopher. 1991. "A Public Management for All Seasons?" *Public Administration* 69 (1): 3–19.
- . 1995. "The 'New Public Management' in the 1980s: Variations on a Theme." *Accounting Organisations and Society* 20 (2/3): 93–93.
- . 2006. "Gaming in Targetworld: The Targets Approach to Managing British Public Services." *Public Administration Review* 66, (4): 515–521.
- Hughes, David, and Lesley Griffiths. 2008. "On Penalties and the Patient's Charter: Centralism v De-Centralised Governance in the NHS." *Sociology of Health and Illness* 21 (1): 71–94.
- Hughes, David, Caroline Mullen, and Peter Vincent-Jones. 2009. "Choice vs. Voice? PPI Policies and the Re-Positioning of the State in England and Wales." *Health Expectations* 12 (3): 237–250.
- Hughes, Everett C. 1958. *Men and Their Work*. Glencoe, IL: Free Press.
- Hunter, David J. 2005. "The National Health Service 1980–2005." *Public Money and Management* 25 (4): 209–212.
- . 2009. "The Case Against Choice and Competition." *Health Economics, Policy and Law* 4 (4): 489–501.
- Hunter, David J., and Gareth H. Williams. 2012. "NHS 'Reform' in England: Where Is the Public Interest?" *British Medical Journal* 344 (March 14): e2014–e2019.
- Lagemann, Ellen Condliffe. 2000. *An Elusive Science: The Troubling History of Education Research*. Chicago: University of Chicago Press.
- Lansley, Andrew. 2012. "Why Legislation Is Necessary for My Health Reforms." *British Medical Journal* 344 (February 1): e789–e792.
- Le Grand, Julian. 2006. "The Blair Legacy? Choice and Competition in Public Services." Transcript of public lecture, February 21. www2.lse.ac.uk/publicEvents/pdf/20060221-LeGrand.pdf.
- . 2007. *The Other Invisible Hand: Delivering Public Services through Choice and Competition*. Princeton, NJ: Princeton University Press.
- . 2009a. "Choice and Competition in Publicly Funded Health Care." *Health Economics, Policy and Law* 4 (4): 479–488.
- . 2009b. "Response to Hunter, Dixon and Saltman." *Health Economics, Policy and Law* 4 (4): 513–514.
- Lindblom, Charles E. 1977. *Politics and Markets: The World's Political-Economic Systems*. New York: Basic Books.
- Linn, Robert L. 2000. "Accountability and Assessment." *Educational Researcher*, 29 (2): 4–16.
- MacIntyre, Alasdair. 1979. "Corporate Modernity and Moral Judgement: Are They Mutually Exclusive?" In *Ethics and Problems of the 21st Century*, ed. Kenneth E. Goodpaster and Kenneth M. Sayre, 122–135. Notre Dame, IN: University of Notre Dame Press.

- . 1985. *After Virtue*. 2nd ed. London: Duckworth.
- . 1999. "Social Structures and Their Threats to Moral Agency." *Philosophy* 74 (289): 311–329.
- McMurray, Robert. 2007. "Our Reforms, Our Partnerships, Same Problems: The Chronic Case of the English NHS." *Public Money and Management* 27, (1): 77–82.
- Meyer, John W., and Brian Rowan. 1977. "Institutionalized Organizations: Formal Structure as Myth and Ceremony." *American Journal of Sociology* 83 (2): 340–363.
- Miller, Peter, and Ted O'Leary. 1987. "Accounting and the Construction of the Governable Person." *Accounting, Organizations and Society* 12 (3): 235–265.
- . 1994. "Governing the Calculable Person." In *Accounting as Social and Institutional Practice*, ed. Anthony G. Hopwood and Peter Miller, 98–115. Cambridge, UK: Cambridge University Press.
- Needham, Catherine. 2008. "Choice in Public Services: 'No Choice but to Choose.'" In *Modernising the Welfare State: The Blair Legacy*, ed. Martin Powell, 179–197. London: Policy Press.
- Newman, Janet, and Ellen Kuhlmann. 2007. "Consumers Enter the Political Stage? The Modernization of Health Care in Britain and Germany." *Journal of European Social Policy* 17 (2): 99–111.
- NHS Choices. 2011. About the NHS. www.nhs.uk/NHSEngland/thenhs/about/Pages/overview.aspx.
- O'Kelly, Ciarán, and Melvin J. Dubnick. 2006. "Taking Tough Choices Seriously: Public Administration and Individual Moral Agency." *Journal of Public Administration Research and Theory* 16 (3): 393–415.
- O'Reilly, Dermot, and Mike Reed. 2010. "'Leaderism': An Evolution of Managerialism in UK Public Service Reform." *Public Administration* 88 (4): 960–978.
- Osborne, David, and Ted Gaebler. 1992. *Reinventing Government: How the Entrepreneurial Spirit Is Transforming the Public Sector*. New York: Penguin.
- Palmer, Deborah, and Virginia Snodgrass Rangel. 2011. "High Stakes Accountability and Policy Implementation: Teacher Decision Making in Bilingual Classrooms in Texas." *Educational Policy* 25 (4): 614–647.
- Pollitt, Christopher. 2007. "New Labour's Re-Disorganization." *Public Management Review* 9 (4): 529–543.
- Pollock, Allyson, F. Azeem Majeed, Alison Macfarlane, Ian Greener, Graham Kirkwood, Howard Mellett, Sylvia Godden, Seán Boyle, Carlo Morelli, and Petra Brhlikova. 2011. "In Defence of Our Research on Competition in England's National Health Service—Authors' Reply." *Lancet* 378 (9809): 2065–2066.
- Pollock, Allyson, Alison Macfarlane, Graham Kirkwood, F. Azeem Majeed, Ian Greener, Carlo Morelli, Seán Boyle, Howard Mellett, Sylvia Godden, Petra Brhlikova, and David Price. 2011. "No Evidence That Patient Choice in the NHS Saves Lives." *Lancet* 378 (9809): 2057–2060.
- Pollock, Allyson, Alison Macfarlane, and Ian Greener. 2012. "Bad Science Concerning NHS Competition Is Being Used to Support the Controversial Health and Social Care Bill." *British Politics and Policy at LSE*, March 5. <http://blogs.lse.ac.uk/politicsandpolicy/2012/03/05/bad-science-nhs-competition/>.
- Pollock, Allyson, David Price, and Peter Roderick. 2012. "Health and Social Care Bill 2011: A Legal Basis for Charging and Providing Fewer Health Services to People in England." *British Medical Journal* 344 (March 8): e1729–e1733.
- Power, Michael. 1997. *The Audit Society: Rituals of Verification*. Oxford: Oxford University Press.

- Ramesh, Randeep. 2011. "NHS Competition Study Splits Academic Community." *Guardian*, July 28. www.guardian.co.uk/society/2011/jul/28/nhs-healthcare-competition-lse-study.
- Ravitch, Diane. 2010. *The Death and Life of the Great American School System: How Testing and Choice Are Undermining Education*. New York: Basic Books.
- Ravitch, Diane, and John Chubb. 2009. "The Future of No Child Left Behind: End It or Mend It?" *Education Next* 9 (3): 49–56.
- Ravitch, Diane, and Maris Vinovskis, eds. 1995. *Learning from the Past: What History Teaches Us About School Reform*. Baltimore, MD: Johns Hopkins University Press.
- Robarts, James R. 1968. "The Quest for a Science of Education in the Nineteenth Century." *History of Education Quarterly* 8 (4): 431–446.
- Rohr, John. 1998. *Public Service, Ethics and Constitutional Practice*. Lawrence: University of Kansas Press.
- Romzek, Barbara, and Melvin Dubnick. 1987. "Accountability in the Public Sector: Lessons from the Challenger Tragedy." *Public Administration Review* 47 (3): 227–238.
- Rorty, Richard. 1980. *Philosophy and the Mirror of Nature*. Oxford: Blackwell.
- Rose, Nikolas. 1992. "Governing the Enterprising Self." In *The Values of the Enterprise Culture*, ed. Paul Heelas and Paul Morris, 141–164. London: Routledge.
- . 1999. *Powers of Freedom: Reframing Political Thought*. Cambridge, UK: Cambridge University Press.
- Rose, Nikolas, Pat O'Malley, and Marianna Valverde. 2006. "Governmentality." *Annual Review of Law and Social Science* 2, (1): 83–104.
- Rudalevige, Andrew. 2003. "The Politics of No Child Left Behind." *Education Next* 3 (4): 63–69.
- Satow, Roberta Lynn. 1975. "Value-Rational Authority and Professional Organizations: Weber's Missing Type." *Administrative Science Quarterly* 20 (4): 526–531.
- Schneider, Mark. 2011. *The Accountability Plateau*. Report, December. Washington, DC: Thomas B. Fordham Institute.
- Scott, James C., 1998. *Seeing Like a State: How Certain Schemes to Improve the Human Condition Have Failed*. New Haven, CT: Yale University Press.
- Scott, William R. 2008. *Institutions and Organizations: Ideas and Interests*. 3rd ed. London: Sage.
- Shepard, Lorrie A., and Amelia E. Kreitzer. 1987. "The Texas Teacher Test." *Educational Researcher* 16 (6): 22–31.
- Simmons, Richard. 2011. "Leadership and Listening: The Reception of User Voice in Today's Public Services." *Social Policy and Administration* 45 (5): 539–568.
- Simmons, Richard, Johnston Birchall, and Alan Prout. 2012. "User Involvement in Public Services: 'Choice About Voice.'" *Public Policy and Administration* 27 (1): "Governmentality." *Annual Review of Law and Social Science* 3–29.
- Simon, Herbert A. 1957. *Administrative Behavior*. "Governmentality." *Annual Review of Law and Social Science* 2nd ed. New York: Free Press.
- Smith, Peter C. 2002. "Performance Management in British Health Care: Will It Deliver?" *Health Affairs* 21 (3): 103–115.
- Smith, Peter C., and Reinhard Busse. 2010. "Learning from the European Experience of Using Targets to Improve Population Health." *Preventing Chronic Disease* 7 (5): A102–A108.

- Spence, Des. 2012. "The NHS Bill Puts Profit Before Patients." *British Medical Journal* 344 (February 15): e1082–e10862.
- Stewart, Debra W. 1989. "Barnard as a Framework for Authority and Control." *Public Productivity Review* 12 (4): 413–422.
- Suchman, Mark C., and Lauren B. Edelman. 1996. "Legal Rational Myths: The New Institutionalism and the Law and Society Tradition." *Law and Social Inquiry* 21 (4): 903–941.
- Thaler, Richard H., and Cass R. Sunstein. 2008. *Nudge: Improving Decisions About Health, Wealth, and Happiness*. New York: Penguin Books.
- Thompson, Dennis F. 1985. "The Possibility of Administrative Ethics." *Public Administration Review* 45 (5): 555–561.
- Tritter, Jonathan Q. 2011. "Public and Patient Participation in Health Care and Health Policy in the United Kingdom." *Health Expectations* 14 (2): 220–223.
- UK Department of Health. 2011. The Case for Change—*The Health and Social Care Bill*. Factsheet A2, October 24. www.dh.gov.uk/health/files/2012/02/A2-Case-for-change.pdf.
- . 2012. The Health and Social Care Bill: Overview. Factsheet A1. www.dh.gov.uk/health/files/2012/02/A1-Overview-of-the-Bill.pdf.
- Vincent-Jones, Peter. 2011. "Embedding Economic Relationships through Social Learning? The Limits of Patient and Public Involvement in Healthcare Governance in England." *Journal of Law and Society* 38 (2): 215–244.
- Walzer, Michael. 1994. *Thick and Thin: Moral Arguments at Home and Abroad*. Notre Dame, IN: Notre Dame University Press.
- Williams, Bernard. 1985. *Ethics and the Limits of Philosophy*. Cambridge, MA: Harvard University Press.
- Wilson, Woodrow. 1887. "The Study of Administration." *Political Science Quarterly* 2 (2): "Governmentality." *Annual Review of Law and Social Science* 197–222.
- Wohlstetter, Priscilla. 1991. "Accountability Mechanisms for State Education Reform: Some Organizational Alternatives." *Educational Evaluation and Policy Analysis* 13 (1): 31–48.
- Wolgast, Elizabeth. 1992. *Ethics of an Artificial Person: Lost Responsibility in Professions and Organizations*. Stanford, CA: Stanford University Press.