

oratory” of non-elected political activists and leaders of empires that have more ambition than revenue.

While Colomer’s analysis shows that the status of a sovereign state conveys limited advantages in the world today, it does have some advantages that are denied the most autonomous regions of sovereign states. For example, Slovenia is able to chair the Council of Ministers of the European Union, whereas Scotland, with a population three times as large, is not. Likewise, the Baltic states have a voice in the United Nations and in the EU which was denied them during almost half a century of forced integration into the Soviet empire.

If a nation is defined as the territory that a person would die for, national movements seeking autonomy or independence vary in their readiness to use force. At one extreme, a *jihad* in the name of Islam fits Colomer’s framework as it is a struggle between claims to empire. In Spain, the centralized state has been challenged by armed attacks from some Basques but not Catalans and in the United Kingdom by Irish Republicans and Ulster loyalists but not in Wales or Scotland. The use of force is alternatively labelled as claiming the rights of a suppressed nation or as terrorism. Violent conflicts to achieve a monopoly of force within a given territory shows that there is still relevance in the classic Weberian idea of the sovereign state.

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Julian Le Grand, *The Other Invisible Hand: Delivering Public Services through Choice and Competition*. Princeton University Press, 2007. ISBN-13:978-0-691-12936-5. Paperback, xi + 195 p.
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Julian Le Grand has a long history of direct influence on health-care policy in the UK. He sold the idea of a ‘purchaser-provider split’ to the last Conservative Government, and his ideas on ‘choice and competition’ in the NHS were warmly embraced by the Blair Government, who employed Le Grand at 10 Downing Street as senior policy advisor between 2003 and 2005. No tales are told out of school, here. But the book nonetheless reflects that close engagement with the nitty-gritty of policy design and evaluation. It also reflects a clear desire to carry the message to the wider community, with minimum jargon and analytical apparatus.

The thesis is simple. What do we want in a public service? Quality, efficiency, responsiveness and accountability (to taxpayers as well as clients), equity. How do we get those? Basically, in one of four ways (or more often through a mix of them all): by trusting professionals to do the right thing; by command-and-control, setting targets and managing performance; by voice-based models (complaints etc.); or by giving clients a choice of service providers and engineering a competition among them for clients. Le Grand does not advocate the last to the exclusion of the others, and he thinks there is especially a role for target-setting at least for purposes of short-term shake-ups. But his general message in the book is that choice and competition ought to play a much larger role in governing the delivery of public services. In extended discussions of schools (chapter 3) and health care (chapter 4), he summarizes evidence from the UK and abroad on how much difference it might make – provided the interventions are properly designed (one of the larger messages is just how sensitive the success of choice-based initiatives is to design flaws).

As Le Grand freely admits, the success of choice-and-competition mechanisms crucially depends upon clients having and acting on good information about the quality of services from alternative providers. He recalls one study showing that ‘parents exhibit a “herd” mentality, going for schools that were difficult to get into, not necessarily those that were top performing’ (p. 34). He acknowledges that ‘there is little evidence that, when presented with information about, for instance, the quality of outcomes by individual surgeons, patients actually use that information to make the appropriate judgments’, although ‘providers do’ (pp. 117–8). To help people make better use of such information, Le Grand commends the employment of ‘choice advisors’ particularly for lower-income clients – acknowledging that that has opportunity costs (pp. 118–20). In his ‘Afterword’ to the book, David Lipsey points out that, ‘actually, these [choice advisors] have always existed but they used to be called GPs’ (p. 177). One cannot help thinking money spent on dedicated ‘choice advisors’ would be better spent on dual-purpose GPs, if health outcomes are what matters.

More generally, there are the twin worries of ‘teaching to the test’ and ‘creaming’. Schools and hospitals will always be tempted to cut corners on the non-measured in order to look good on the measured indicators, and that will be as true in choice-and-competition regimes as in command-and-control target-setting ones (p. 28). Similarly, schools and hospitals will always be tempted to make themselves look good by selecting ‘good students’ or ‘easily-treated patients’, leaving the hard cases to others. Tellingly, Le Grand’s best suggestion for avoiding that is a Positive Discrimination Voucher that is defined in terms of income, not ease-of-teaching or ease-of-curing which correlates with income only imperfectly (pp. 147–51).

So there are problems with the choice-and-competition scheme for public service delivery. Still, as Le Grand says, there are problems with all the others too (p. 168). For a spirited defence of the role of choice-and-competition in the public service delivery mix, you will not find a better book than Le Grand’s.

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Michael Power *Organized Uncertainty: Designing a World of Risk Management*
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The sub-title of Michael Power’s previous book published in 1997, *The Audit Society*, was ‘*rituals of verification*’. This accurately captured one of the themes running through the book: the element of quasi-religious faith invested in the development and spread of ever more sophisticated, wide-ranging and intrusive tools of audit. Ten years later, Power’s new book brings much the same note of scepticism to another world-sweeping managerial phenomenon: the drive to convert uncertainty about the future into identifiable risks. In turn, so runs the theory, identifying those risks will focus the attention of management on preventing them. This emphasis and reliance on risk management, Power argues, has in effect become a way of redefining organisational governance: from being essentially a technical, largely statistical exercise left to experts, risk analysis has widened out to become a new form of organizational control. Chief Risk Officers now complement, and may rival Chief Financial Officers. Once again, there is a