Alan Williams

In 1997 experts were invited to nominate articles or books that they thought had been most influential in the field of health economics. The winner was a paper by Alan Williams, Professor of economics at the University of York, who died this June aged 77.

Alan was exceptional in academia. Rigorous analysis led to new concepts and ways of measuring public sector output. He first thought of and helped develop the Centre for Health Economics at the University of York, now one of the world's leaders. He was the inspiration behind and instrumental in establishing the graduate programme in health economics at York as a hot house for producing new generations of specialists in the field. He purposely published in journals directed at policy makers and health care professionals to ensure that the economics message reached people who could influence implementation. He lectured throughout the world to economists, health care researchers and policy makers. He had the gift of making penetrating and controversial comments with a wit and eloquence that ensured his audience was both persuaded and entertained. In 2002 Alan was the first health economist to be elected a Fellow of the British Academy.

Alan was born on 9 June 1927 in Birmingham. After national service he read economics at Birmingham University where the stimulating teaching of Frank Hahn directed him toward an academic career. For a year in Sweden he immersed himself in the Swedish school of public finance and taught at the Universities of Upsalla and Stockholm. Thus began a life long involvement with Nordic economists which was recognised by an honorary DPhil from Lund University in 1977. Alan died a week before he was to receive another honorary degree in Finland.

In 1954 he was appointed lecturer at the University of Exeter. He was a visiting lecturer at the Massachusetts Institute of Technology (1957-58) and at Princeton (1963-64). On returning from the United States he became Senior Lecturer, Reader and soon Professor at the (then) new University of York. During 1966-1968 he was seconded to the Treasury where, in his words, he was ‘loaned out’ to large spending departments (including the Home Office and Ministry of Health) to inject rigorous economic analysis into planning public services. This experience, though brief, was to have a long term impact on his subsequent academic work.

When Alan Williams joined Alan Peacock and Jack Wiseman in the new Economics Department at York, the scene was set for the birth of a stimulating academic community. Peacock and Wiseman were well known advocates of market solutions to public sector problems, stressing the primacy of individual liberty. Alan approached the same problems from a different angle: equity and social justice had to be central to the analysis of efficient solutions to public sector production and resource allocation. All parties enjoyed and thrived on debate thus ensuring that students and young researchers were the beneficiaries of these ideological differences. York was soon attracting students of public finance from around the world.

Alan's early work in public finance focused on tax incidence and fiscal federalism. After his stint in the Treasury his research centred on the economics of public services. It had become clear to him that a major reason for failure to conduct proper economic appraisals of public services was the lack of good measures of output. This daunting problem was the one he tackled. Turning to the NHS, he developed the idea of the Quality Adjusted Life Year (QALY): the output of health care was to be measured in terms of its impact on quality of life and life expectancy. Alan led collaborators from many disciplines and countries to produce a practical instrument for measuring and valuing health states. The work was so successful that the resulting measure is now used in many countries. The UK Treasury now advocates the use of QALYs in public sector investment appraisal and the recent Atkinson Review of measurement of government output in the national accounts notes the potential value of data on QALYs. The National Institute for Health and Clinical Excellence (NICE), uses QALYs to prioritise treatments for NHS patients.

Toward the end of his life Alan found it ironic that early development of the QALY stemmed from his work in the Home Office, a Department which showed little interest in the concept. By 2003 the Home Office, impressed with the success of QALY-type thinking in health care priority setting, wanted to explore ways it could be adapted for use in evaluation of the criminal justice system. Alan, with relish, participated in the meetings.

Alan's influence as a teacher and researcher has been profound. He engaged in debate with philosophers and medical ethicists as well as economists, pressing the need to make interpersonal comparisons of welfare when allocating public sector resources. He deeply valued his relationships with students and scholars of all disciplines and continued to visit and lecture overseas until his death. Many would count him as having been the single most inspiring influence on their professional lives. Despite his pre-eminence he never intimidated, talked down to, or failed to encourage and nurture his colleagues at home and abroad, whether young or old. He will be sorely missed.

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