The Distinctiveness of Case-oriented Research

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INTRODUCTION: TWO STRATEGIES OF SOCIAL RESEARCH

It is common in discussions of methodology to focus on techniques of data collection and to group techniques into two main families, qualitative and quantitative. Techniques in the qualitative group conventionally include observation, in-depth interviewing, focus groups, and so on; techniques in the quantitative group include surveys, analysis of records and other archival data, census data, and so on (see, e.g., Frankfort-Nachmias and Nachmias 1992, who discuss qualitative research in the section on data collection). In general, this distinction is useful because the most basic prerequisite for the use of sophisticated quantitative techniques of data analysis is a large number of cases. Thus, data collection techniques that generate large numbers of observations are usually grouped together as quantitative methods. Further, most quantitative analyses are centrally concerned with the problem of making inferences from a sample to a population, and it is generally agreed that the relatively small, unrepresentative "samples" generated by qualitative methods offer a weak basis for making such inferences (King, Keohane, and Verba 1994).

While useful, the identity of qualitative and quantitative methods with specific techniques of data collection is unfortunate, for it obscures more basic differences in research goals and strategies. More fundamental than the distinction between quantitative and qualitative methods of data collection is the distinction between case-oriented and variable-oriented research strategies (Ragin 1987, 1994). The case-oriented strategy is centrally concerned with

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making sense of a relatively small number of cases, usually between one and 50, selected because they are substantively or theoretically significant in some way (Eckstein 1975; Ragin 1987). The variable-oriented strategy is centrally concerned with the problem of assessing the relationship between aspects of cases across a large sample of "observations," usually with the goal of specifying general patterns that hold for a population.

For example, a researcher might adopt a case-oriented approach to study a small number of HMOs in an in-depth manner. Suppose several HMOs are thought to be unusually successful in lowering costs through preventive medicine, helping their members lead healthier lifestyles. How do they do it? Do all of these successful HMOs do it in the same way? Clearly, to answer these questions a researcher would have to conduct an in-depth study of the HMOs in question, with the focus on the ways in which they accomplish this outcome (that is, after confirming that they do in fact accomplish it). By contrast, a researcher might adopt a variable-oriented approach to study variation in patient satisfaction with the care provided by HMOs, compared with the satisfaction of recipients of other forms of health care delivery, and might survey a large sample of recipients. What explains variation in satisfaction? Is it more a matter of patient or plan characteristics? Do these factors interact? Useful answers to these questions should be based on a careful analysis of relationships among variables drawn from a survey of a large sample of individuals (the more observations, the better).

As these two examples show, what matters most is the researcher's starting point, and here the issue is very simple. Does the researcher seek to understand specific cases or to document general patterns characterizing a population? In many respects, this contrast reflects a long-standing division in all of science, not just in social science. The philosopher von Wright argues in *Explanation and Understanding* (1971) that there are two main traditions in the history of ideas regarding the conditions an explanation must satisfy to be scientifically respectable. One tradition he calls "causal-mechanistic"; it is anchored in the problem of prediction. The other is called "finalistic" and is anchored in the problem of making facts understandable. The contrast between variable-oriented and case-oriented research closely parallels this fundamental division. In the two examples just described, the first researcher adopts the case-oriented approach in order to make certain facts understandable—the success of a handful of HMOs; the second researcher adopts the variable-oriented approach in order to derive an equation predicting levels of satisfaction, based on a sample of respondents, and to draw inferences from this equation that can apply to an entire population.

Researchers may select specific cases for in-depth study—seeking to make them "understandable"—for a variety of different reasons (Stake 1995). For example, cases might be chosen because they are extreme in some way and thus present a process or phenomenon in relatively pure form (e.g., Dumont 1980). Cases are sometimes selected for in-depth study for the opposite reason: because they are typical or run-of-the-mill (e.g., Becker et al. 1961). Researchers select such cases to learn more about conventional arrangements and practices. Another justification for studying specific cases in an in-depth manner is their historical or cultural significance (e.g., Lipset 1963). For example, some cases may be pioneers, establishing standards and routines imitated by others. Cases also may be selected for explicitly theoretical reasons: because they challenge a widely held theory or because they support a widely questioned theory (Eckstein 1975). Very often case study methods are used because the phenomena that researchers wish to study are too complex, context-bound, or context-sensitive to be studied in any other way (Yin 1994 and in this issue). Such phenomena require a more holistic approach, and the researcher must triangulate different types of evidence using different methods. It is also important to note that making sense of cases often requires researchers to collect evidence relevant to the motives and feelings of actors, which, in turn, mandates the use of intensive, case-oriented methods. In short, whenever a compelling motivation exists to make the facts of a case or a small number of related cases "understandable," a case-oriented research strategy is essential.

Once the distinction between case-oriented and variable-oriented research is established and their contrasting goals are acknowledged, it is clear that the importance of techniques of data collection as bearers of the "qualitative versus quantitative" distinction begins to fade. For example, it is clear that a researcher using case-oriented methods to study a handful of successful HMOs might benefit from conducting surveys of their members and performing a conventional quantitative analysis of these data. The results of the survey would contribute to that researcher's depth of knowledge about the HMOs in question, just as interviewing their administrators or studying their organizational charts would contribute useful information. Likewise, it is clear that the researcher using variable-oriented methods to predict levels of satisfaction could benefit from focus groups to help interpret complex patient-plan interaction effects found in the quantitative analysis of the predictors of satisfaction. Still, the first researcher would remain focused on the problem of understanding the handful of HMOs in question, while the second would remain focused on the problem of explaining variation in satisfaction and

of making inferences about a population. The important point here is that data collection techniques per se can be seen as relatively neutral; what matters most is the researcher's goal and the contrasting research strategies that follow from different goals. In social research goals are primary: strategies and methods follow goals.

PRACTICAL DIFFERENCES BETWEEN THE TWO STRATEGIES

Although it is tempting to portray case-oriented research as rich but journalistic and variable-oriented research as analytically powerful but sterile, these stereotypes do little to advance an appreciation of basic differences between the two strategies. Exaggerating their contrasts contributes to their reification and to the perception that the gulf between them cannot be bridged. The best way to dispel much of the mutual suspicion that is usually spawned in discussions of their "relative merits" is to focus on practical differences in the way each approach produces results from evidence (Myles and Huberman 1994; Ragin 1997).

Consider, for example, the contrast between computing a correlation between a causal and an outcome variable, a popular analytic step in variable-oriented work, and identifying the causally relevant conditions linked to a specific outcome shared by a relatively small number of cases—a well-worn analytic path in case-oriented research (called the "comparative case study of commonalities" in the discussion that follows). Both procedures may seem deceptively simple and straightforward, but these two ways of producing results from evidence involve sharply contrasting practical orientations to cases, outcomes, and causal conditions. (These practical differences also hold when researchers eschew causal argumentation and focus simply on those aspects that "correlate" in variable-oriented research or that "co-occur" in case-oriented research.)

Cases

When a researcher using variable-oriented methods computes a correlation between two variables, the relevant cases become more or less invisible and the variables take center stage. Further, the set of cases included in the computation must be fixed before the researcher can compute the correlation. Once this set is fixed, usually at the outset of an investigation, it is rarely altered. What matters most is that the cases (which are understood as

"observations") belong to the same general "population" and that they be drawn from this population with an eye to randomness or representiveness or to some combination of these criteria.

In a comparative case study of commonalities, by contrast, cases have clear identities and are usually chosen specifically because of their substantive significance or theoretical relevance. Furthermore, the set of relevant cases may shift during the investigation because the researcher may decide that one or more cases do not "fit" with the others. For example, a researcher studying "HMOs that successfully reduce costs through preventive medicine" might decide that several HMOs originally thought to belong to this group really do not belong, and that perhaps one or more that were thought to be outside this group actually belong in it. This flexibility is maintained throughout the investigation because the core concepts (e.g., "preventive medicine" or "successful cost reduction") may be revised as the researcher learns more about relevant instances.

Outcomes

In correlational studies researchers usually identify a "dependent variable": an outcome that varies across cases. Typically, such outcomes are aspects of cases that vary by level, for example, level of satisfaction, level of bureaucratization, and so on. Sometimes the outcome variable is categorical, indicating whether or not some event has occurred (e.g., filing a complaint), and sometimes it is a frequency or a rate. The important consideration, in this procedure, is that the outcome varies across "observations." The goal of the research typically is to explain, if possible, why each case has the value or level on the dependent variable that it has. Typically, cases are assessed relative to the average of all cases. Such research is centrally concerned with the question of "why." For example, a researcher might seek to explain why some patients are more satisfied than average and others less so, why some health care delivery organizations receive more complaints than average and others receive fewer than average, and so on.

In a comparative case study of commonalities, by contrast, the outcome is often something that does not vary substantially across the chosen cases. In a study of HMO success, for example, cases are chosen precisely because they all display the same outcome: a specific pattern of success. Recall that the goal of a comparative case study of commonalities is to identify common causal conditions linked to a specific outcome across a relatively small number of purposefully selected cases. Thus, the focus is on cases with a specific outcome, not cases that vary widely in how much they display this outcome.

Even though the outcomes in a study of this type will not be identical across cases, the researcher must demonstrate that the outcomes in the cases selected are in fact enough alike to be treated as instances of the same thing. Finally, unlike correlational studies, which are centrally concerned with the question of "why" (as in: Why some more than others?), comparative case studies are centrally concerned with the question of "how" (as in: How does it happen?). How do HMOs encourage healthy lifestyles? How does this effort translate into reduced costs?

Causes

In a correlational study, causation typically is inferred from a pattern of covariation. If a variable thought to represent a cause or to be an indicator of a key causal condition is strongly correlated with the outcome variable, then the researcher may make a causal inference. Usually, the researcher will assess the relative strength of several causal variables at the same time. The typical goal is either to find out which one explains the most variation in the outcome variable or simply to assess the relative importance of the different independent variables. In effect, variables compete with each other to explain variation. In most investigations, each causal variable is considered sufficient, by itself, for the outcome or some increment in the outcome. That is, each one is considered an "independent" variable capable of affecting the outcome variable regardless of the values of other causal variables.

In a comparative case study of commonalities, by contrast, causation is typically understood conjuncturally. The goal of this type of analysis is to identify the main causal conditions shared by relevant cases. Causal conditions do not compete with each other as they do in correlational research; they combine. The way in which they combine or "fit together" is something that the researcher tries to discern using his or her in-depth knowledge of cases. Because all of the cases have more or less the same outcome, the usual reasoning is that the causally relevant conditions shared by cases provide important clues identifying the factors that must be combined to produce the outcome in question. When constructing this argument, the researcher is especially sensitive to the possibility that a given causal requirement (i.e., a necessary condition) may be met in a variety of different ways.

The study of the commonalities shared by a set of similar instances is not always explicitly concerned with causal conditions. Very often, the commonalities identified by researchers help them deepen their knowledge of the research subject and thus lay the groundwork for construction of a "composite portrait" (see Ragin 1994). The researcher works back and

forth between ideas and evidence to progressively refine the portrait (Katz 1982). Although the method is not explicitly causal, procedurally it is the same: the researcher makes sense of the "facts" of his cases by identifying and interpreting commonalities. Researchers using case-oriented methods quite often shy away from causal statements because they have been warned repeatedly that case studies are not good tools for making causal inference (Campbell and Stanley 1966). However, even the construction of composite portraits based on commonalities results in representations of cases that are full of implications that can be tested with correlational methods applied to large samples.

MUTUAL RECRIMINATIONS

These and other practical differences in ways that researchers using case-oriented versus variable-oriented methods work with evidence to produce results provide many opportunities for disjunctures in findings. These differences also create a great deal of mutual suspicion.

For example, from the perspective of variable-oriented work, the study of commonalities across a small number of instances is fraught with analytic sins and errors. (1) The number of cases is too small and too nonrandom to warrant any kind of inference (King, Keohane, and Verba 1994). (2) The procedure "selects on the dependent variable" (i.e., it focuses on extreme, noteworthy, or convenient cases, all with more or less the same value on the outcome variable). This practice may deflate otherwise robust correlations (Collier 1995; Collier and Mahoney 1996; King, Keohane, and Verba 1994). (3) Researchers may drop cases that "don't fit" at various stages of the analysis, a practice that seriously undermines any effort to generalize beyond the cases that remain (King, Keohane, and Verba 1994). (4) The most important causal factors do not vary and thus are impossible to assess, and so on (Lieberson 1991, 1994; Goldthorpe 1991, 1997).

Likewise, from the perspective of case-oriented work, the examination of the correlation between a causal and outcome variable across many cases is fundamentally flawed. (1) Typically, so many cases are studied that there is no way for the researcher to know if they are all really comparable and thus belong together in the same analysis (Ragin 1987, 1997). (2) Fixing the population boundary also fixes the assumption of homogeneity, which usually is not warranted. Investigators should be free to redefine the set of relevant cases as they learn more about them (Ragin 1992, 1997). (3) It is difficult to

determine how something "comes about" by comparing cases with different levels of the outcome. The partial instances (i.e., those with low scores on the outcome variable) are likely to provide many false leads (Lijphart 1971, 1975; Ragin 1997). (4) It is pointless to try to isolate the "independent" effect of any causal condition when several factors usually must combine for a particular outcome to occur (George 1979), and so on. In short, at a practical level the two approaches seem antithetical. It is no wonder that findings diverge and researchers talk past each other (Rueschemeyer 1991; Ragin 1997).

Consider the following scenario, which is all too common. A researcher using case-oriented methods studies several instances of an outcome (e.g., HMOs that are successful in a specific way), documents their commonalities, and then constructs a general argument about how they do it. This argument has very specific policy implications, namely, a list of specific recommendations relevant to HMO practices. Let's call these recommendations X_1 to X_4, which, in turn, reflect the important, causally relevant commonalities shared by the HMOs in question. A second researcher reads this study and decides to evaluate it with a large sample using variable-oriented methods. This researcher collects information on a random sample of HMOs and finds that, as independent variables, X_1 to X_4 do not distinguish more successful from less successful HMOs, using a variety of measures of success. In short, the second researcher shows that no statistically significant difference exists in the success of HMOs with and without these four aspects, considering these aspects one at a time or in an additive, multivariate equation.

What went wrong? Usually, the researcher using variable-oriented methods will claim that the first researcher's "sample" was "too small" and "unrepresentative." Thus, the identification of X_1 to X_4 took advantage of unique aspects of the selected cases, which probably were cases that conformed to the first researcher's own agenda. The first researcher might reply that X_1 to X_4 are very difficult to represent as "variables," and that the second researcher's crude attempt to operationalize them fell far short. Indeed, the first researcher might argue that it would take in-depth knowledge of each HMO included in the quantitative analysis to truly capture X_1 to X_4 appropriately and contextually. Clearly, the second researcher lacks this knowledge and, in fact, may know only statistical methods and nothing about any single HMO.

Both arguments may be correct. However, correctness is not the issue. The problem is that both arguments involve recriminations and thus are intellectual dead ends. Before presenting an alternative resolution of this divergence, I provide some background on the distinction between necessary

and sufficient causal conditions. I then show how the two sets of "findings" just presented in fact may not diverge at all.

NECESSARY VERSUS SUFFICIENT CAUSATION

Social scientists have been slow to recognize that different analytic strategies are relevant to the assessment of different kinds of causally relevant conditions. At the most basic level, it is important to recognize that the study of necessary causes works backward from instances of an outcome and is a search for common antecedent conditions, while the study of sufficiency works forward from instances of a causal condition (or a combination of conditions) to see if these instances agree in displaying the outcome. I elaborate these different emphases and their implications in the discussion that follows, using dichotomous, presence/absence conditions and a simple 2 × 2 cross-tabulation, shown in Table 1.

In conventional quantitative analysis, all four cells of the cross-tabulation of the presence/absence of an effect against the presence/absence of a cause are considered relevant to the investigator's argument. Basically, cases in the cells where the cause is present and the effect is present or where the cause is absent and the effect is absent count *in favor of* the inference of a causal relationship, while cases in the other two cells count *against* it. This simple principle is the foundation of almost all quantitative analysis in the social sciences today, including Pearson's correlation coefficient, the computational foundation of conventional multiple regression analysis. As I show subsequently, however, the reasoning behind these calculations conflates the analysis of necessity and the analysis of sufficiency. Some errors of prediction violate sufficiency; others violate necessity. Furthermore, cases where both

Table 1: Necessary Versus Sufficient Causation

	Cause Absent	Cause Present
Outcome Present	1. Key cell for assessing necessity; cell should be empty (or relatively empty)	2. Cases in this cell establish the link between the cause and the outcome
Outcome Absent	3. Cell not directly relevant to the assessment of either necessity or sufficiency	4. Key cell for assessing sufficiency; cell should be empty (or relatively empty)

the cause and the effect are absent are not directly relevant to the assessment of either necessity or sufficiency. Most measures of association count cases in this cell as evidence in favor of a causal argument. This common practice is of questionable value when one views it from the perspective of necessity and sufficiency.

For illustration, first consider the situation where the researcher is interested only in assessing whether or not a cause is necessary for an outcome. In this analysis, only the first row of the cross-tabulation shown in Table 1 is relevant, because the researcher's objective is to show that no instances of the outcome lack the cause (i.e., no cases in cell 1). The researcher can effectively ignore information on cases where the outcome is absent because such cases are irrelevant to the assessment of necessity. In essence, when a condition is necessary for an outcome, instances of the outcome will be a subset of instances of the cause. For example, boys who score many points in basketball games are a subset of boys who practice shooting baskets a lot. Thus, practicing baskets can be considered a necessary condition, but not a sufficient one for scoring many points in games. Note that because instances of the outcome are a subset of instances of the cause, if investigators select on the outcome, they will find that there are no instances of the outcome without the cause (i.e., cases in cell 1).

Next consider the situation where the researcher is interested only in assessing whether or not a cause is sufficient. In this analysis, only the second column of the cross-tabulation shown in Table 1 is relevant. The key concern is to show that there are no cases in cell 4 (cause present, outcome absent). The researcher can effectively ignore information on cases where the cause is absent because they are irrelevant to the assessment of sufficiency. After all, the researcher may be convinced that other causes exist that produce the outcome, so there probably should be cases in cell 1. Notice that when a cause is sufficient but not necessary for an outcome, instances of the cause (or a combination of causes) form a subset of instances of the outcome. For example, if there are several surefire ways to get a good score on an exam (studying very hard, being brilliant, cheating, paying bribes, and so on), then if researchers select on instances of any one of these causes, they will find that these instances agree in displaying the outcome (i.e., there are no cases in cell 4).

Thus, the study of necessary conditions involves selecting on the dependent variable, a practice that is usually considered a fatal flaw from the perspective of variable-oriented research, while the study of sufficient conditions involves selecting on causal conditions (or combinations of causal

conditions). This analytic separation of necessity and sufficiency is crucial to understanding the disjunction between case-oriented and variable-oriented research. From the perspective of variable-oriented research, all four cells must be involved in any assessment of the relationship between two variables. Having cases in cells 2 and 3 is good; having cases in cells 1 and 4 is bad. Further, there is no differentiation between cells 1 and 4; cases in either cell are equivalent errors. From the perspective of case-oriented research, however, cells 1 and 4 constitute very different kinds of errors and speak to very different kinds of causal arguments. Further, cases in cell 3 are not directly relevant to the assessment of arguments involving either necessity or sufficiency.

RESOLVING THE DISJUNCTION

Return to the case-oriented study of HMOs. The first researcher in this example—the one using case-oriented methods—selected on instances of the outcome (successful use of preventive medicine to reduce costs) and identified four causally relevant conditions shared by these HMOs. In essence, this researcher looked only at the first row of the cross-tabulation of causal conditions and the outcome (see Table 1) and thus addressed only necessary conditions. The four conditions identified in this study (X_1 to X_4) thus constitute possible necessary conditions for the outcome.

Are they truly necessary? In part, this is an empirical question. To gain confidence, the researcher should examine as many instances of the outcome as possible, to see if they agree in displaying these four causally relevant conditions. But it is also a question about knowledge. Is the argument that these four conditions are necessary consistent with theoretical and substantive knowledge? Do they make sense as necessary conditions? If the researcher's finding is consistent with existing substantive and theoretical knowledge, then the argument that these four conditions are necessary is strengthened.

How should the second researcher—the one using variable-oriented methods—respond? One response is simply to argue that the study of necessary conditions is only a beginning. This type of analysis simply establishes the kinds of cases that are candidates for an outcome. The real problems of causal inference in small-N, case-oriented research, as discussed for example by Campbell and Stanley (1966), remain. A less inflammatory response would be simply to accept the gains from studying necessary conditions and to point out that the first researcher still does not know if the causal conditions identified are sufficient for the outcome. It should be noted that this question

is not raised in the case-oriented study just described. Therefore, the first researcher cannot really be faulted for not answering a question that was not asked. Still, it is an important question. How should it be addressed?

It is clear from Table 1 that in order to assess whether or not the combination of these four conditions is sufficient for the outcome, it is necessary to identify all relevant instances of their combination and then to see if these instances agree in displaying the outcome. (Alternatively, a researcher might use case-oriented methods and simply search for specific cases that display the causal combination but lack the outcome.) If all relevant cases do agree in displaying the outcome, then the evidence supports the argument that the causal combination is not only necessary but also sufficient for the outcome. If they do not agree (i.e., if there are many cases in cell 4), then it is clear that other conditions exist that must be combined with these four necessary conditions in order to generate the outcome in question (i.e., to reach sufficiency).

Assume that many cases are present in cell 4. What's the next step? If the researcher accepts the argument that the four conditions are necessary for the outcome, then it is still pointless to study HMOs that do not display them. HMOs that do not meet these four necessary conditions are simply not candidates for the outcome. This is the meaning of necessary conditions. The second researcher, therefore, should select only HMOs that meet these four conditions, in effect using these conditions to define the relevant "population" of candidates, and then look for factors that distinguish HMOs displaying the outcome from those that do not, within this subset of HMOs. From this discussion it should be clear that the use of a sample of "all HMOs" to refute a study based on a select handful, as originally described, is misguided. The study of a select handful is useful for identifying necessary conditions. Such analyses are outside the scope of conventional variable-oriented analysis because of its requirement that the outcome vary across cases. However, the use of variable-oriented methods to examine the sufficiency of causal conditions is quite reasonable, as long as the evaluation is limited to the population of candidates—those that display all of the conditions necessary for the outcome.

Notice that the resolution of the disjunction described here provides a framework for integrating the two strategies. The results of case-oriented research establish potential necessary conditions. If theoretical and substantive knowledge support the idea that these conditions are necessary, the next task is to verify this, moving from a small number of positive instances of the outcome to many. If the commonalities do not hold across many instances of

the outcome or if, at least, they fall short of being "general," then researchers should study more instances of the outcome in an in-depth manner and perhaps develop a typology of outcomes with the focus on causally relevant commonalities within each type. However, if the extension of the initial case-oriented results to many cases holds, then the next step is to address the sufficiency of the conditions identified as necessary. Here, researchers must first assess the plausibility of sufficiency. Is the argument that the necessary conditions (identified through the study of instances of the outcome) are also sufficient consistent with theoretical and substantive knowledge? If so, then researchers should select instances that display these conditions to see if they agree in displaying the outcome. If they do not, then in-depth study of disconfirming cases should help researchers identify relevant sufficient conditions. Once these conditions have been identified, then researchers can evaluate them with variable-oriented methods, applying these methods only to those cases that display all of the necessary conditions.

This sketch identifies only one of several different ways to integrate small-N, case-oriented inquiry and large-N, variable-oriented inquiry. The general and most important point is that it is possible to integrate these two approaches if researchers carefully distinguish between necessity and sufficiency and separate the analysis of these two aspects.

The brief sketch of the disjunction between case-oriented and variable-oriented research strategies provided here leaves many issues unanswered. For example, researchers using case-oriented methods are often accused of being "too subjective" and of distorting their investigations toward particular ends. For example, a researcher might wish to verify a particular commonality and thus may feel pressure to "find" it in cases when the evidence is equivocal. Researchers who adopt case-oriented methods also must face the charge that their results are not generalizable—that findings cannot be extended beyond the cases studied. The strategies for integrating the two types of inquiry I have sketched here should help researchers address these concerns. Ultimately, however, it is only through the accumulation of research findings that these concerns can be addressed.

Other unaddressed issues are internal to the techniques sketched here. For example, no allowance is made in this discussion for causes and outcomes that vary meaningfully by level. Likewise, there is no allowance here for the possibility that a cause or causal combination may be "usually" necessary or sufficient as opposed to "always" necessary or sufficient. An assessment of causes that are "usually" necessary or sufficient requires some use of probabilistic methods. These and other basic issues that are at the crossroads

of qualitative and quantitative methods are discussed in *Fuzzy-Set Social Science* (Ragin 2000).

CONCLUSION

The gulf between case-oriented and variable-oriented inquiry can be bridged (see also Ragin 1991). The first step in building this bridge is to reject common stereotypes of the two approaches. Their commonalities are stronger than most researchers are willing to acknowledge. Both approaches seek to construct findings from empirical evidence. Very often this evidence is cross-case in nature, based on multiple instances. The second step is to acknowledge that social research has multiple goals (Ragin 1994) and that the two dominant goals—making facts understandable and making causal-mechanistic predictions—lead to different research strategies. Social scientists should never lose sight of the tight coupling of goals and strategies in social research. Otherwise, a misguided preference for certain methods proscribes broad categories of important questions, including many that are policy relevant, from the realm of empirical social science. The third and final step is to appreciate the practical differences between these two approaches, especially the different conceptions of cases, causes, and outcomes that are embedded in each. Once this bridge is complete, researchers can take steps to resolve divergent findings and avoid mutual recriminations.

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