



Jon Garvey chews the cud

All in a good cause

I always find returning from a holiday a bit like returning to Wonderland after a sojourn in the real world. If I have been separated from the News, or what we are bludgeoned into believing is the News, but which is in fact only that which is of vital importance to journalists, there is a kind of culture shock, a shift in perspective which is very difficult to accommodate. What seemed quite sensible and important before I went away becomes complete insanity, and it is hard for me to see why everyone takes it so seriously.

For example, as I write this, at least, there is still a National Health Service industrial dispute in progress, becoming ever more bitter as government intransigence fuels the fires of collective anger. I shall remind you of the essentials of the situation in case you too have been on holiday.

The health service unions are justifiably angry at the Government's miserly pay offer. They deserve more because their jobs consist of selfless caring for the weak and sick. To alter this state of affairs, they are putting pressure on the weak and sick by withdrawing their selfless caring, in the hope that this will shame the Government into improving its offer. If they do not cause the weak and sick to suffer, the action can have no effect, as there is no economic penalty to the Government from their withdrawal of labour.

Governments, however, are elected to be callous enough to make decisions which may cause suffering (it would have been no good if Mrs Thatcher had been too sensitive to send the Task Force to the South Atlantic, even though she knew that some would die). Therefore the Government has not given way, having the good of the nation, as they see it, at heart.

If the Government did give way before the health workers, the strikers would only have proved that they have less conscience than a government prepared to send men to their deaths in the South Atlantic, a demonstration which does little to further their claim.

It is clear that the only way the Government will back down is if public opinion, expressed in the media, turns against it. However, the health unions at one point almost guaranteed that this could not happen by persuading the press unions to come out in sympathy. When a court injunction stopped this secondary action, certain sections of the health unions came out in solidarity with the press workers. The aim of this tertiary action is rather convoluted, but may be followed through with a piece of paper and a pencil. The health workers, by putting pressure on patients, hoped to persuade the judiciary to drop charges against the press unions, so they could put pressure on the newspaper owners and hence convince the Government that they should give the health workers more money.

All this may seem a rather cynical jibe at the health workers, but it is not—it is merely an attempt to show that strike action is an entirely inappropriate way to settle health service pay disputes. Striking is also an addictive activity, as the separate strike of ambulance drivers in Cleveland over a rather trivial bonus dispute has shown. Five years ago, ambulance drivers would not have gone on strike for anything—now, it has become the first response to industrial disagreement. It is inevitable that the same will become true for nurses once they have used strike action.

But, I hear many reply, strike action is the only weapon the unions have left. Leaving aside the fact that you could say the same thing to justify bombing Hiroshima, this is just not true. I can think of at least two further courses of action possible:

a) Give in, and accept the Government's ludicrous offer. In this case, the health service workers would be poorer, but nobody would die. It might be some small comfort for them to realise that they would still be taking home a great deal

more than about 80 per cent of the world's population, whose poverty may be directly related to our own affluence.

b) Commit mass-suicide, or since they have so far baulked at all-out action, they could nominate by lot one member each week or so, who would publicly kill himself. This would bring direct pressure on the Government, unlike the present tactics, and would cost fewer lives. Those lives which were sacrificed, in contrast to those being lost in the present action, would not be those whose only crime was to have cancer, or asthma.

Perhaps the collective mind of the NHS workforce would not consider a few per cent worth dying for, though. I don't happen to think it's worth *killing* for, either.▪

Moralisers by appointment

Top doctors, it said on the BBC news today, are advising the Prince and Princess of Wales to have young Prince William immunised against whooping cough. On closer inspection it appears that these top doctors are in fact making statements in the press to the effect that the royal parents ought to be setting an example to the nation by having their son so immunised.

Now, I am all in favour of pertussis inoculation, but if I advise my patients, I try to do so on the basis of what is best for them and their offspring, which is what they pay me to do. The good of the herd is an important, but subsidiary, aspect.

There is something to be said for the Royal Family's being an example to the rest of the country. There is considerably less to be said for pressure groups insisting on their being mouthpieces for their own particular view of things. There is no place at all for doctors who are not involved in the care of the patients involved to bring moral pressure on them by unsolicited public pronouncements to undergo medical procedures for the good of somebody else.

Prince Charles and Princess Diana should do whatever they think best for their child on the basis of the advice their own doctors give them.▪