

Inside the NHS

Jon Garvey *reflects on the creation of our 'third-world' health service*

Britain's National Health Service dominated the recent General Election, and was a major reason for the Conservative defeat. It could be this Government's nemesis, too, if Mr Blair cannot fulfil the promises he has made about it. On all sides the NHS is recognised to be in crisis.

As a General Practitioner for twenty years, I feel too close to understand the important truths underlying the decline. But perhaps, just as illness tends to uncover the character of the patient, so the state of the health service reveals the character of the British nation.

Arcane Art

One route to understanding many, perhaps all, of the current problems is to plot the change in the nature of the healing professions over the years. Originally medicine was an arcane art, not far removed from magic. In fact in Chaucer's wonderful pen-portrait in the *Canterbury Tales*, his *Doctour of Phisyk* is said to be the equal of anyone to speak about medicine or surgery because he was grounded in astrology! The source of his skill was ancient authority – fifteen authors are named in Chaucer – but not the Bible, which he didn't read much. And his motivation? Chaucer says wryly that gold, in medicine, is a heart stimulant – so the doctor loved gold especially.

Such a picture is far from today's medicine, but still survives in popular myths about doctors taking the Hippocratic Oath, being taught in Latin, and having dark secrets to protect. This is why the crimes of one psychopath, Harold Shipman, led to the entire reorganisation of professional accountability, as if without constant public vigilance every doctor will be murdering his patients.

Humanitarian Mission

A radical change occurred during the *Enlightenment*, from the middle of the seventeenth century on. This elevation of reason over dogma affected the field of health more than any other, and was associated with a strong concern for the betterment of mankind. The heroes of modern medicine, like Harvey, Nightingale, or Pasteur, are all from this Enlightenment tradition – Chaucer's ancient authorities are forgotten.

So medicine became a humanitarian mission. Doctors would abandon glittering careers to improve the health of poor communities (like *Dr*

Findlay's Tannochbrae). Nurses like Edith Cavell went to war to help soldiers of either side, and their deaths were seen as martyrdom.

Christians were at the forefront of this medical crusade. The Enlightenment, though often viewed as secular, had its roots in Protestantism, and influenced Evangelicals as much as anybody else. Christians at home manned charitable hospitals, championed improved sanitation, and voted for universal medical provision. Christians abroad founded medical missions, spreading scientific medicine worldwide.

The National Health Service rose on the foundation of this highly educated and ideologically motivated workforce, more concerned for the lives of the people than for gain. At the same time, their difficult training, long hours and heavy responsibility were recognised by society, which rewarded them with respect and remuneration reflecting the value of service to the public.

Public Commodity

Enlightenment values have declined during the last few decades. It is too early yet to say whether the good or bad effects of this will predominate – nobody is really able to define what "Postmodernism" is, so you're not alone if the word confuses you!

But amongst the resulting changes I would highlight two. First, the loss of *idealism* has resulted in the loss of both hope and heroism. Second, the growth of *populism* has led on one hand to rampant consumerism, and on the other to personal desire as the basis of morality.

In the NHS, too, the original vision has started to fade. People now enter health professions rather because of the career opportunities than to help humanity. Yet idealism does still exist, especially amongst those already in the NHS, which is why Mr Blair was recently able to praise the "public sector ethos" (by which he meant being willing to work with poor pay and conditions and not complain!). The problem is that this idealism is out of step with the way the NHS is now perceived by the Government and the voters, which is as a public commodity.

A Succession of Governments

Things have been brought to a head by this Labour Government's slavish adherence to populism, but in truth the same philosophy has motivated a succession of governments. During Kenneth Clark's reorganisation of the early '80s,

the mantra was “Cut taxes” (because the people don’t like paying them). As the NHS had the biggest expenditure of all it must be wasting money, so the whole reorganisation, from bed-cuts to Fundholding, hinged on “efficiency” and hence lower taxes.

This money-based rationale underpinned the first years of New Labour, too. They insisted on “evidence-based medicine” less because doctors were killing patients than because doctors were, supposedly, wasting money. Amazingly, both politicians and press managed to maintain the myth of the NHS as “the envy of the world” until the flu epidemic of last year, when the whole edifice began to totter. It became clear that the public’s unwillingness to pay taxes had created a third-world health service, funded to only half the levels of equivalent nations.

But Labour’s policies were also dictated by focus-groups, which told them what “the people” wanted. So a whole range of new measures like *NHS Direct*, Walk-in Centres and 48-hour GP access were introduced without any evidence base whatsoever. If the people want something, they are the customers and are always right.

Not shopkeepers

The flaw in all this is that, contrary to current opinion, health is not a commodity and health professionals are not salesmen. A businessman can sell anything, which is why everything from life-insurance to art is now called a “product”, and why men who wouldn’t know one end of a locomotive from another end up running *Railtrack*.

Speaking for myself, I’ve spent half a lifetime learning what makes people work, and what can go wrong. My relationship with patients depends on the assurance that I’m *not* selling them anything, but simply applying the truth I’ve learned to benefit them.

Profit is never the motive in that old-fashioned relationship, but equally any health worker can see that giving yourself for another’s good is worth intrinsically more than any salesman’s product. And that’s why low pay *is* a factor in NHS staff discontent.

More important, though, is that there are not enough resources, especially of people, to do the job well. Existing resources are distributed according to the priorities of ministers who never saw a patient in their lives (and don’t know one end of a locomotive from the other, either!), guided by popular opinion rather than any real vision for humanity.

This analysis helps to explain the unrest of NHS staff, whether the resistance of unions to corporate commercial values in a humanitarian enterprise, or the threatened mass-resignation of GPs. But the concept can also be usefully applied

to other health issues, from hospital waiting lists to genetically engineered babies.

“*Where there is no revelation, the people cast off restraint,*” says the proverb, and this is a people who, without God’s revelation, see nothing beyond their own inconsistent desires. They have no shepherd, but a government that follows where the sheep lead. And therefore people and government alike are under God’s judgement. Perhaps it should not surprise us that the NHS, where so much of our national expenditure goes, should exemplify this. **PT**