

RATIONING HEALTH CARE

(report on the conference organised by RADSTATS HEALTH GROUP together with PUBLIC HEALTH ALLIANCE, CRITICAL PUBLIC HEALTH, COHSE, NUPE and NALGO)

held on 14 November 1992 at the YWCA BLOOMSBURY

Despite the grey, wet, November Saturday well over a hundred people turned up at the Rad Stats Health Group conference, "Rationing health care: careless talk costs lives". Following the success of last year's joint conference with the Public Health Alliance on the Health of the Nation, collaboration seemed the obvious way forward. This time the joint organisers included the Public Health Alliance, Critical Public Health and COHSE, NUPE and NALGO. This eased the administrative and financial burdens arising from the conference (the unions each contributed £250) and provided the organisers with the opportunity to reach a wider cross-section of interested parties.

The audience were key participants at this conference and included pensioners, health service workers, trade unionists, health care interest groups and others.

The programme was packed and varied. It started by challenging the myths which plague the NHS. The first myth was ably covered by Miranda Mugford who explored the myth of the health service requiring infinite resources. She showed how spending on the NHS was far from spiralling out of control when factors such as the changing demographic profile of the country and higher inflation levels on medical goods were taken into account. The move towards explicit rationing is also a move towards reducing services.

This should have been followed by the unravelling of the myth of infinite demand, but the speaker, Mark Williams, cancelled at 8am on the morning of the conference; happily, he has promised to forward us a written copy of his talk. In his place, Alison Macfarlane and Allyson Pollock presented respectively an outline of the problem with health care statistics and a résumé of the Royal College of Physicians conference held earlier that week for doctors and managers.

David Hunter explored the concept of health gain and rationing and his contribution saw the opening of a potentially exciting debate around issues such as effectiveness. Towards the end of the morning there were short contributions from the floor on the elderly and on rationing in districts around the country.

Following lunch, which saw almost as much exchange of information and debate as the morning sessions, the afternoon changed tack. Anna Coote gave a paper on health care rights and the patients' charter's understanding of them. Len Doyal, a

writer on medical ethics, followed and the debate ended on a philosophical note as Len discussed the ethics and the possibilities of treatment in a situation of scarcity, where each person would have as much chance as any other of receiving treatment (rather like a lottery).

The philosophical flavour may have appeared a strange way for the day to end especially for a Radical Statistics meeting, but the contribution of the policy analysts and the ethicist was invaluable for those of us who have little contact with the philosophical and ethical processes of decision making.

Mel Bartley did an absolutely splendid job of tying up the whole day's presentation, and in summing up reminded us of the parallels with war time rationing. Is it possible to have a minimum set of health care rather like a basic diet? And what of the black market where the analogy is private health care. She also brought sharply into focus all the current realities of health care, social services, housing etc., and reminded us all that the conference is only a starting point and of the need to go forward and to do more work.

Over tea a list was drawn up of people's interests and areas of expertise. It is impossible to report in full on the varied and full contributions of all the speakers but the proceedings will be published in a special Spring edition of Critical Public Health, price £3.

But this is not the end of the story. Since the conference, several informal links and meetings and discussions have taken place. A group of people from Critical Public Health and the Rad Stats Health Group have got together to work on the Tomlinson and the Kings Fund reports. Part of this work will be used to inform the public and to support the many groups who feel much is wrong with Tomlinson but, lacking the analytical skills, have come forward for help. The BBC is to make yet another film on rationing and this time has sought out our help and ideas. And we have seen many more contributions to the debate as people begin to realise the impact of the internal market on rationing decisions.

No conference realises everyone's expectations, but it often does the spade work for motivating and co-ordinating people. We hope that any of the readers who could not come but would like to be involved won't feel inhibited. We need as many people to pick up their areas of interest and turn them into challenges. The next opportunity to do so will be at the Health session at the Rad Stats AGM. Contrary to what's down in the programme, it will be on rationing healthcare in the NHS and not on the Health of the Nation.

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