## HEALTH GROUP

After remaining dormant for over a year the Health Group has not only come to life, but has been perverse enough to continue meeting through the summer.

At our first meeting, in May, Harry Shannon and Eileen Tattersall talked about the activities of the British Society for Social Responsibility in Science's (BSSRS) Industrial Health Hazards Group. Without ignoring the existence of large gaps in research (eg: women's health hazards, studies concerned with morbidity rather than mortality), BSSRS's prime concern is to make public existing information which is hidden away in academic journals, official reports, etc. In particular they try and get it into the hands of groups of workers who take action about the hazards affecting them. It is likely that we will be cooperating with them, particularly as our membership overlaps.

For the rest of the meetings, we turned our attention to the Department of Health and Social Security's (DHSS) two documents 'Priorities for Health and Personal Social Services in England' and 'Prevention and Health: Everybody's Business!. Most of the people who came to the first few meetings are working in the Epidemiology rather than the Health Services research field and we found 'Prevention and Health' the easiest to approach; it has some very obvious (to us!) statistical/political tricks and quotes research results (without references) to 'prove' that to prevent ill health it is virtually sufficient for individuals to reform their own life style - stop smoking, take exercise, wear sensible shoes etc. Few social causes of ill health are mentioned except those such as sewage which have already been dealt with. This is in line with the current philosophy embodied in the Royal College of Physicians report on heart disease, the Health and Safety at Work Act (which concentrates on the wearing of protective clothing rather than controlling emissions of toxic substances) and other issues outside and inside the health field. For example it reached celestial proportions in the Archbishop of Canterbury's 'Appeal to the Nation'.

However we felt that the 'Priorities' document which deals with expenditure on health and social services to be the more important document (although we later found that the 'Prevention' document was an integral part of its argument), so we decided to concentrate on that despite our feeling of being mystified rather than demystifiers. The statistics, apart from those preceded by the £ sign were notable mainly for their absence. The financial arguments are that in order to cut back the overall growth in the period up to 1979/80, the growth on acute hospital and maternity services should be curbed while that on general practice, services for the mentally ill and handicapped and 'preventive services' should still be allowed to grow. We noticed, however that that the growth in general practice was mainly in expenditure on drugs, and that drug costs elsewhere were not mentioned. Also we noticed that in the growth areas! expenditure was being shifted from areas directly controlled by DHSS to local authority services which it influences but does not control.

Originally we were sympathetic with the campaign against the cuts in the NHS, in the belief that it was trying to protect the interests of patients, nurses, ancillary staff, technicians etc. However as the summer wore on, it became apparent that those who were shouting loudest were members of the medical profession who were demanding expensive technical innovations whose effectiveness was completely untested (eg: brain scanners) or disproved (eg: coronary care units, induction of labour) so many of us became cynical. However the 'Priorities' deals only with shares of the cake, not the value of the ingredients.

The Health Group is very scattered throughout the country, but a number of people from outside London managed to get to some of the meetings while others took part by post. Fortunately these were people well versed in the 'Priorities' game. We are now attempting to put the strands of the discussions together into a coherent whole in time for the next meeting which will be during the annual conference of the Society for Social Medicine. Details of our meeting:

Thursday September 16, 5pm Senior Common Room, 1st floor of Union building Imperial College, London

We will then present it to a full meeting of Radical Statistics on October 5 (details elsewhere in newsletter). Anyone wanting a copy before that date please write to me at 40 Warwick Road, St. Albans, Herts.

Alison Mecfarlane