What is poverty?

RUDOLF KLEIN

Poverty and health, it has long been recognised, are two sides of the same coin. Not only may poverty cause ill health but, conversely, ill health may precipitate people into poverty. The history of health policies therefore largely overlaps the history of policies directed at poverty. This was emphatically so in the nineteenth century: Sir John Simon's classic book *English Sanitary Institutions*—his retrospect on a lifetime dedicated to improving the nation's health—concluded with a chapter on "The politics of poverty," published in 1890, but the same theme surfaces in the Black report of 1980 on *Inequalities in Health* and in the current controversy on the effects of unemployment on health.

But what is poverty? How is to be defined? What causes it? How may it be prevented? Like the link between health and poverty, the arguments about these questions have a long history, and the aim of Professor Himmelfarb's blockbuster of a book is to show how perceptions and images of poverty have changed over time: to provide what is, in effect, the biography of an idea.

In this book Professor Himmelfarb takes the story up to the middle of the nineteenth century; a further volume is promised to bring it up to date. Drawing on contemporary sources—the works of political economists, social polemicists, novelists, and investigative journalists—she allows the reader to participate in the great

nineteenth century debate. The result is an exhaustive, if also exhausting, tour of the intellectual landscape, with brief stops at the major landmarks: Adam Smith, Malthus, Carlyle, Cobbett, Dickens, Mayhew, and so on. Many of the themes that emerged then still have resonance today. The division between those who believed that interfering with the mechanisms of the market would only damage the interests of the poor and those who argued that all citizens should have an entitlement to adequate standards of living persists, if in a less crude version.

Professor Himmelfarb's book is a model of leisurely, at times self indulgent, scholarship. If it has a weakness it is that she tends to neglect the social engineers: those who like Chadwick (in his *Report on the Sanitary Conditions of the Labouring Population of Great Britain*) argued that it was environmental conditions, not individual sin or laziness, which caused poverty. But for anyone who likes to eavesdrop on history her book offers a unique insight into how another age grappled with issues that are still with us today.

The Idea of Poverty: England in the Early Industrial Age. Gertrude Himmelfarb. (Pp 595; £20.) Faber and Faber. 1984.

Coordinating GPs

SIMON JENKINS

Good textbooks serve two functions: they collect together in a concise and orderly fashion the agreed facts on the specialty, supported by corroborative references and bibliographies which direct the reader towards other avenues of related interest; and occasionally they bravely question the very foundation of the subject that they are expounding. The authors of *Management in General Practice* have admirably tackled the first task but have addressed themselves patchily to questioning whether creating practice managers is good for general practice.

The preface states that "general practitioners have a specific management role, but the key person in the day to day management of the practice is now the practice manager. This applies particularly to larger practices." Have practice managers become necessary as the result of larger groups being formed? It is suggested that general practice now operates in a more complex organisational socio-health care structure, and a manager is crucial to bring the benefits of the organisation to bear on the care of patients. But I know that it is also an uncomfortable fact that some practice managers are the repository for the unsolved interpersonal problems and divergent management philosophies of the partners in a practice. Too much emphasis is placed on the "sweet side of the job," although the ordering of thoughts that is the inevitable consequence of writing a book on this subject may underplay their obvious recognition that "management in practice" is different from "practice management."

Have practice managers become necessary because general practitioners have divested themselves of managing the day to day affairs of their practices? If so, perhaps someone should raise a warning flag and point to the trends in hospital and community medicine that started a generation ago with the demise of the medical superintendents of hospitals and, more recently, medical officers of health in local authorities. Twenty five years of

inattention and atrophy have led to a dearth of medically qualified managers to implement the Griffiths report.

When doctors declare that they are interested only in clinical management and exclude themselves from the difficulties of personnel, estates, and finance by restricting their horizons, they offer the overall management role to someone else. The coordinator at the centre of a network is often best able to judge the direction in which that organisation should move. Should the coordinator really be the lay practice manager? Or should he or she implement properly coordinated decisions, produced from a soundly structured practice organisation? The authors' opinion on this fundamental question would be welcomed.

Chapter 7 discusses the "General practitioner's role in management," emphasising "policy making" and "forward planning" as the main areas in which the leadership role has to be exercised. It would be helpful if examples of different practice structures were given so that the reader could more easily relate the theoretical principles to his own practice environment. If space is at a premium the twittering six pages of chapter 1 that are devoted to a sort of Mrs Dale's Diary about "a day in the life of a practice manager" could beneficially be omitted.

I think that this is a useful contribution to the publications on general practice organisation. Its clear and concise style commends it as a reference book which will allow the people in the wide range of disciplines within primary care, to whom it is directed, to read selectively sections of specific interest. It may prove to be the handbook of general practice managers (or senior receptionists by any other name).

Oxford General Practice Series. Vol 8. "Management in General Practice." Peter Pritchard, Kenneth Low, and Merrill Whalen. (Pp 291; £12.50.) Oxford University Press. 1984.