Letter from Westminster

Health topics for Parliament in 1981

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A new face has arrived on the Westminster health scene—Mrs Gwynneth Dunwoody, Labour MP for Crewe. She has taken over as shadow spokesman on health from Mr Roland Moyle, Labour MP for Lewisham East, but with one crucial difference. He was simply part of the social services team; she has been given the job in her own right. The reason is that Mr Michael Foot, the new Labour leader, decided when making the shadow appointments to anticipate what his party planned to do when it returned to power. So he split social services and health into two. Labour has thought for a long time that there is little sense in the mammoth DHSS—the link between pensions, unemployment benefits, and hospitals being far from obvious. Mr Moyle, who has been a spokesman on health in and out of office since 1976, has moved to foreign affairs. It is a new part of the political arena for Mrs Dunwoody, but her former husband is Dr John Dunwoody, chairman of the Kensington and Chelsea Area Health Authority, so she undoubtedly has first-hand experience of the trials of the medical profession.

Among the tales that carry on into the New Year is the vexed issue of seat belts. Though Lord Nugent of Guildford did remarkably well to get a second reading for the Bill he introduced in the Lords before Christmas with the backing of the BMA, its future is problematical. There are many hurdles on the Parliamentary obstacle course: while the Lords might send the Bill on its way in view of the second reading vote, its reception when it faces the worst that the Commons backbench wreckers can do is anybody's guess.

Private members' Bills are susceptible to the filibuster. All is not, however, lost since Mr David Ennals, the former Labour Social Services Secretary, is planning to table an amendment to the Transport Bill, which was given a second reading by the Commons last week, to make wearing seat belts compulsory. He has all-party backing for the move. The issue is one on which there will have to be a free vote but that should prove no problem. There have been three such votes in the Commons in the last six years, all of which have been in favour of compulsion. The various Bills have foundered as the result of either mismanagement by the Government or a filibuster by backbenchers. Lord Nugent's success is important, because the Lords have twice rejected similar Bills on second reading. Parliament is now, therefore, speaking with one voice. Mr Ennals's attempt to amend the Transport Bill, a portmanteau measure which as well as dealing with drink and driving gives the Government powers to sell off various holdings such as the British Transport Hotels, might just succeed. The point is that once the amendment has been made, provided the Government does not insist on changing things back again, it becomes safe from the efforts of the wreckers because as a Government proposal the power of the whips ensures it goes through.

In a bid to show the extent of support for his proposal Mr Ennals has tabled a Commons motion urging Mr Norman Fowler, Transport Minister, to accept the amendment. So far over 100 MPs from all parties have signed. It really is time Parliament acted on this issue for, as Mr Ennals says, the case

for seat belts is absolutely overwhelming. Even Mr Fowler is said to have been persuaded by the evidence of the need for seat belts to be made compulsory, so perhaps at last action will be taken.

End of "battle" with tobacco companies?

Mr Patrick Jenkin, Social Services Secretary, seems likely to follow a similar tack, when the Social Services (Miscellaneous Provisions) Bill comes before the House later this year, to bring his battle with the tobacco companies to an end. It seems he has decided after months of abortive negotiations that enough is enough and there is no point in trying to get a proper voluntary agreement to replace the one eventually cobbled together. That expires in July 1982. The plan, apparently, is for backbenchers, preferably senior people from the two main parties, to join in tabling an amendment to the Bill to give the Secretary of State power to make regulations controlling advertising by order. This would take effect once the present agreement had run its course. There would once again be a free vote.

At least in 1981 we look like escaping the abortion law reform struggle. Mr Tim Sainsbury, Conservative MP for Hove, who won first place in the ballot for private members' Bills and was considering a one-clause Bill to introduce a lower time limit, has changed his mind. Instead, he has opted for a Bill to stop indecent displays outside sex shops, cinemas, and theatres. He told me he had looked carefully at the possibility of introducing a Bill to bring in a new time limit. During discussions with colleagues and others interested in abortion law reform, however, it had emerged that there was a strongly held view that the present law, if properly used, should eliminate, or prevent, unnecessarily late terminations. He said that personally he found it hard to agree with such an interpretation but it was held by a number of learned counsel. Their view was that if he introduced his Bill to amend the limit to 20 weeks it would be difficult to test the law in the courts as was planned.

The deciding factor, however, seems to have been the fact that his one-clause Bill would have been all too easily amended. The House voted last year for a 24-week limit, such a change would probably have been made, and that would not have been satisfactory to Mr Sainsbury. There was probably another reason. MPs who get top place in the ballot are given an almost gilt-edged chance of getting something on to the Statute Book. They fail only when the topic is too controversial. I imagine Mr Sainsbury would rather have an Act to his name than yet another failed abortion reform Bill.

To turn to what lies ahead, a major statement on the priorities for the NHS is expected soon from Mr Jenkin. It will give guidance to the district health authorities on how to run the NHS in the 1980s. Among the issues covered will be the allocation of resources between competing priorities, preventive medicine, and partnership deals with the private sector. Mr Jenkin is also due to issue a discussion document on alcoholism that will put forward various options, including the use of the price mechanism to reduce demand. He believes that this will work. It will also suggest that employers take steps to encourage alcoholics to seek treatment and may propose some kind of code for the industry.