Letter from Westminster

Unemployment and health

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Dr Gerard Vaughan, Minister of Health, is embroiled in a row over the relationship between the present appalling unemployment and the health of unemployed people and their families. It all started innocently enough during question time towards the end of October when he was asked by several MPs to declare his attitude on the conclusions drawn by Dr Leonard Fagin, consultant psychiatrist at Claybury Hospital, Essex, in his report on unemployment and health in families. An excellent study, was Dr Vaughan's verdict. But it was a pilot study of only 22 families, and MPs should bear that in mind. He also pointed out that the report stated that "the relationship between unemployment and ill health is not clear, and that no generalisations can be drawn from it." Later, accused by his predecessor, Mr David Ennals, of seeking to undermine the importance of many of the report's conclusions, Dr Vaughan quoted another passage, which said, "In such a small sample, it is impossible to come up with any generalisations."

It was the quotations, given during exchanges in which he can fairly be said to have been making very sympathetic noises generally about the report, which were to get him into trouble. Dr Fagin, unfamiliar, I suspect, with the politician's technique of selective quotation, promptly wrote complaining that his replies had been unbalanced and that he had misled the House.

Now that really is a very serious charge indeed, and Dr Vaughan swiftly denied that he had done anything of the sort for political or any other reasons. "I have paid tribute to your study and I also—and properly—drew attention to its inevitable limitations, the same limitations to which you drew attention in writing your report," he replied. He then offered, in order to put Dr Fagin's mind at rest, to see him.

Dr Fagin, however, while expressing no enthusiasm over the offer of a personal chat, was still not satisfied. He promptly quoted from another part of his report, which said, "Our interviews with the families revealed close associations in time between changes in health and the experience of unemployment. As we described, health changes were not restricted to the male breadwinner; his wife and children often reported fluctuations. Health did not necessarily worsen after unemployment; some families actually reported less health problems. And often the return or marked worsening of a previous illness, and not the emergence of a new illness, coincided with the event of unemployment." He complained that Dr Vaughan by the way he had quoted from it had trivialised his study of the problem.

The moral of the tale, and of all this textual analysis, is that writers of reports should not be surprised if politicians use them for political purposes. Rather like the Black Report, the name of the Fagin Report looks like being used a good deal in the months ahead when MPs talk about the impact of unemployment on society.

One result of all this activity was that the Unemployment Alliance, an association of groups such as the Low Pay Unit, Child Poverty Action, Age Concern, and MIND, circulated the MPs concerned with papers on the problem. One of them cites

the *British Medical Journal's* leading article (29 March 1980, p 881) that claimed that "child abuse is strongly correlated with unemployment and financial difficulties" to back up the argument that unemployment results in a great deal of damage to the physical and mental health of the unemployed and their families. The paper also noted the fact that the *BMJ* (Unemployment in my practice, 6 June–19 September 1981) had concluded that doctors belonged to one of the professions that was rapidly becoming very conscious of the ill health generated by unemployment.

Social Democratic Party

The arrival of Mrs Shirley Williams in the Commons must give an impetus to the Social Democratic Party's efforts to produce draft policies to be considered by its council next October. The health committee, chaired by Mr Mike Thomas, MP for Newcastle East, started work at the beginning of last month and is now open to receive any views the grass roots have to submit; doctors with SDP tendencies, please note. The aim is to have a consultation paper ready by the late spring, and for the views on that to be ready to be taken into account when the council meets to ratify policy. The members of the committee are Mr Tom Hayhoe, Mr Nicholas Hilton, Mrs Edith Korner, Professor Michael Rawlins, and Professor Rudolf Klein—the last two well known to *BMJ* readers—but that was all the lady at the SDP headquarters could tell me about them when asked to identify why they had been appointed. Mr Thomas expects to be able to start uttering various principles early in the New Year; meanwhile all contributions will be gratefully received, I understand.

Mrs Gwyneth Dunwoody, Labour's health spokesman, was pleased to be offered the job for another year by Mr Michael Foot after winning a seat for the first time in the Shadow Cabinet. Her reappointment, and that of Mr Brynmor John, also a shadow cabinet member, as social services spokesman, reinforces the division Mr Foot is trying to establish between health and social services. "He believes they are fundamentally two separate departments," Mrs Dunwoody says. As for her priorities in the present session, she says they are the pay and conditions of nurses, the effects of the reorganisation of the NHS on those who work in it, and the impact of private medicine.

The introduction of self-certification for the first week off work has been something the medical profession has been aiming to secure for some time. Nobody was making any promises when the Commons debated the second reading of the Social Security and Housing Benefits Bill, which implements the new sickness benefit scheme and brings it into tax for the first time. But there seems no reason to doubt that by the time the Bill goes into committee the necessary amendments will have been drawn up. Discussions are still continuing with the profession and both sides of industry, mainly because there are still some doubts on the part of the employers about whether such an arrangement will not simply increase the number of absentees. But the problems that remain are said to be only technical, and all should be happily resolved—with less paper-work for GPs.