Bedford College (Spring Term 1984-5)

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HEALTH CARE IN BRITAIN/CONTEMPORARY ISSUES IN HEALTH CARE

## Textbooks

There are four textbooks which, between them, cover many aspects of the course. Of these, the most useful is probably:

## J. Allsop Health Policy and the National Health Service, 1984

A general overview, from a social administration perspective, contains both brief history of policy issues in NHS, and some discussion of broader issues of the bases of ill-health etc.

## C. Ham Health Policy in Britain, 1982

More of a policy studies textbook, with detailed discussion of the policy-making process at all levels, as well as chapters on specific client groups eq. elderly etc.

## R. Klein The Politics of the National Health Service, 1983

Historical account of the development of the NHS, looking particularly at the role of civil servants as well as professionals, cogently, if, at times, provocatively, argued.

J. R. Butler & M.S.B. Vaile <u>Health and <u>Health</u> <u>Services: An</u> <u>Introduction to <u>Health</u> <u>Care in Britain</u>, Routledge & Kegan Paul, 1984. Most recent, and more orientated to questions of evaluation and resource allocation than the others.</u></u>

# <u>Section I: Social Factors in Health and Health Policy</u> 1:Inequalities in health

The publication of the Black Report revived a long-standing debate about inequalities in health, revealing persistent differences between regions and social classes in mortality and morbidity. Yet the government rejected the report and the causes of these inequalities are still the subject of debate. This session looks at the evidence on inequalities in health, and the surrounding arguments. For, the assumption at the beginning of the National Health Service was that as services were made more accessible a 'backlog' of untreated ill-health would be eliminated and inequalities in health and utilisation of services reduced, leading in the long run to a reduced demand for health care. In reality, not only have inequalities in health persisted but so have inequalities in health care provision, and the demand for health services has risen enormously.

 Differentials' J. of Social Policy, 12, 1, pp.24-29,1983

On inequalities in health care resources, and the contribution of the NHS to eliminating inequalities:

- Townsend and Davidson op. cit Ch.4
- J. Le Grand The Strategy of Equality, 1982 Chs 1-3.
- V. George & P. Wilding <u>The Impact of Social Policy</u>, 1984, esp Chs 2 & 3.
- J. Tudor Hart 'The Inverse Care Law'Lancet 1971.
- R. Klein op.cit Ch. 5
- Ham op.cit Ch. 6.
- M. Blaxter 'Health Services as a defence against the consequences of poverty in industrialised societies' <u>Soc.Sci & Med</u>, 17, 16, pp 1139-1148, 1983.
- A. Maynard 'The inefficiency and inequalities of the health care systems of Western Europe' <u>Soc.Pol & Admin</u>, 15, 1981

## 2: Unemployment and Ill-Health

The previous session have suggested that ill-health may be 'socially caused', though interpretations of this term and of the mechanisms involved differ and that public policies to reduce ill-health might mean more than the provision of health care. As a case study in the complexities of investigating social causes, and their policy implications, this session will look at recent discussions of the health effects of unemployment.

- H. Brenner & A. Mooney 'Unemployment and health in the context of economic change', <u>Soc.Sci & Med</u>, 17, 1983, pp. 1125-1138
- M. Colledge 'Economic cycles and health: towards an understanding of the impact of recession on health and illness' <u>Soc.Sci & Med</u>, 16, 1982 pp. 1919-1927
- H. Brenner 'Mortality and the national economy: a review and the experience of England and Wales' <u>Lancet</u>, 2, 1979 p.568
- L. Fagin & M. Little <u>The Forsaken Families</u>: <u>The Effects of</u> <u>Unemployment on Family Life</u>, 1984, Part III
- J. Eyer 'Does unemployment cause the death rate peak in each business cycle?' Int.J. <u>Hlth. Services</u>, 7, no 4, 1977
- S. Platt & N. Kreitman "Trends in parasuicide and unemployment among men in Edinburgh, 1968-82" <u>Laancet</u>, 20 Oct 1984, pp1029-1032
- Platt "Unemployment and suicidal behaviour: a review of the literature", <u>Soc.Sci & Med</u>, 1984, 19, pp93-115.

#### 3: Health Policy and the Elderly

Among the social factors that shape health needs and health policy is the demographic composition of the population. At present Britain is experiencing a 'growth in the burden of the elderly'. In this session we will consider the demographic factors behind this growth, the changing assumptions about the elderly as a 'social problem' and the policies that exist and might be developed to meet their needs.

- S. MacIntyre 'Old Age as a Social Problem' in Dingwall R. et al (eds) <u>Health Care and Health Knowledge</u>, 1977
- P. Townsend 'The Structured Dependency of the Elderly' Aging and

Society, 1, 1981

C. Phillipson <u>Capitalism</u> and the <u>Construction</u> of <u>Old</u> Age, 1982 Chs 2, 3, 6 & 7.

J. Barker & M. Bury 'Mobility and the Elderly: a Community Challenge' in Carver, V. & Liddiard, P. <u>An Ageing Population</u> Ham op. cit, ch.2

A. Tinker The Elderly in Modern Society, 2nd edn 1984, Ch 6.

Section II: New Directions for Health Care?

4. Community Care

At its inception the NHS was a 'hospital centred' service in both the acute and long stay sector. Over the past thirty years, and especially in the last decade, there has been a shift in policy aims, and in practice, from large-scale institutional care for the chronically sick and disabled towards community care. This session examines the factors behind such a shift, are they primarily humanitarian, or economic or ideological? What exactly is meant by 'community care', and is this shift really a recognition of what has always been the major form of care for those with long-term dependency?

- C. Davies 'Hospital Centred Health Care: Policies and Politics in the National Health Service' in Atkinson, P. et al (eds) <u>Prospects for the National Health Service</u>, 1979
- A. Scull Decarceration, 2nd edn 1984
- F. M. Martin <u>Between the Acts: Community Mental Health Services</u>, 1959-83, 1984
- J. Finch & D.Groves (eds) <u>A Labour of Love</u>, 1983 Chs by Graham, Ungerson, Walker.
- A. Walker (ed) <u>Community</u> <u>Care</u>, 1983 Chs. by Walker, Wilson & Wicks.
- C. Ham <u>Policy-making</u> in the <u>National Health</u> <u>Service</u>, 1981. Ch.5
- Allsop op.cit Ch. 6.
- P. Abrams 'Community care: some research problems and priorities' <u>Policy and Politics</u>, 6, 1977, pp.125-51

5: Prevention: A New Priority

In the context of evidence of the ineffectiveness of treatment to reduce mortality from degenerative diseases and the growing cost of such treatment is making 'prevention' a policy priority a radical change? What are the obstacles to implementing preventive health policies? This session examines different strategies for prevention and their implications.

DHSS Prevention and Health, 1976 Chs 3-5

- T. McKeown op.cit Chs 7 & 9
- P. Draper 'The Royal Commission and prevention Lancet, 1979
- P. Draper et al 'Three types of health education', <u>BMJ</u>, 1980, 2, p. 493
- R. Crawford 'You are dangerous to your health' <u>Int J. Hlth Serv</u> 9, 1979
- Allsop op.cit Ch. 9
- R. Clutterbuck 'The state of industrial ill-health in the UK' Int. J. Hlth. Services, 10, 1980, 149-.
- H. Graham "Smoking in Fregnancy" Soc.Sci & Med, 1976, 10, 399-405

- M. Calnan "The Politics of Health: the case of smoking control" Jnl. Soc.Pol, 1984, 13,3, pp.279-296
- G. Popham "Government and Smoking: policy-making and pressure groups" <u>Policy and Politics</u>, 1981, 9, 331-47
- L. Doyal & S. Epstein <u>Cancer in Britain: The Politics of</u> <u>Prevention</u>, 1983

#### 6: Private health care

Since the 1970s the place of private health care and the role of private contractors within the health service has been the focus of controversy. In this session we consider what is meant by the 'private sector', recent trends in its development and the factors that lie behind both its growth and the opposition to it, Butler & Vaile, op.cit. chs 5 & 6

- Klein op.cit Ch 4.
- J. Le Grand & R. Robinson <u>Privatisation</u> and the <u>Welfare</u> <u>State</u>, 1984 Ch. by Maynard & Williams

A. Maynard 'Privatising the Health Service'<u>Lloyd's Bank</u> <u>Review</u> 1983, no 148, pp.28-41

McLachlan & A Maynard <u>The Public/Private Mix for Health</u>, 1982. Introduction, Pt 1 & Pt 4.

R. Klein 'Privatisation and the Health Service' <u>Lloyd's Bank</u> <u>Review</u>, 1984, pp. 12-29.

Fightback <u>Going Private: The Case against Private Medicine</u>, 1982 (Pamphlet)

## 7 Alternative Medicine

In recent years there has been a marked increase in the attention paid to 'alternative medicine', though information about patterns of usage is minimal. This session examines the extent to which 'alternative medicine' can be seen as a single entity, the exent to which assumptions and practices do differ from 'establishment' medicine, and the place of the former in health care in Britain.

- R. Wallis & P. Morley (eds) <u>Marginal</u> <u>Medicine</u>, 1976, Chs by editors, & Lee. Wardwell & Wallis
- V. Skultans Intimacy and Ritual, 1974, Chs 1,3,4.
- D. Hewitt & F. Wood "Heterodox Practitioners and the Availability of Specialist Advice" <u>Rheumatology</u> & <u>Rehabilitation</u>, 1975 14.
- R. Eagle Alternative Medicine, 1978, esp Chs. 3 & \$
- B. Inglis Natural Medicine, 1979 Chs 6,7,
- H. Berliner & Salmon "The holilistic alternative to scientific medicine" <u>Int.J. Hlth.Serv</u>, 1980, 10.
- B. Griggs <u>Green</u> Pharmacy, 1981

8: Reproductive Technology and the making of health policy

It has often been argued that clinical decision making and hence innovations in clinical work are one, if not the, dominant influence on resource allocation. In the field of reproductive medicine recent developments, especially in genetic screening and fertility treatment present new options and demands for resources. In this session we will examine some of the policy implications of these developments, arguments about whose interests they may serve and how policies in this field are being made. For this topic espeially, you will need to monitor the press, perhaps <u>New Society</u> for legislative developments.

Report of the Committee of Inquiry into Human Fertilsation and Embryology, 1984 HMSD (The Warnock Report)

P. Singer & D. Wells <u>The Reproduction Revolution</u>, 1984 Council for Science and Society <u>Human Procreation: Ethical</u> <u>Aspects of the New Techniques</u>, 1984

- R. Arditti, R. Duelli-Klein & S. Minden (eds) <u>Test-Tube Babies</u> 1984 esp Chs by Rothman, Ince, Finger, Saxton & Hanmer
- W. Farrant "Who's for Amniocentesis? The politics of pre-natal screening" in H. Homans (ed) <u>Sexual Politics of Reproduction</u>

<u>Section III: Decision-making and the Division of Labour in Health</u> <u>Care</u>

9. Professional Dominance and Challenges to it

The previous session considered the power of clincians and scientists to shape health policy through their day-to-day work. Studies of policymaking in health care have also emphasised the power of doctors as organised group and in the adminstrative structure in shaping health policy and its implementation. This session looks at the place of doctors, at the competing claims made by other groups of health workers and planners in decisionmaking, and at the possibility that this medical dominance may be under threat.

M. Elston 'Medical autonomy: Challenge and Response' in Barnard, K & Lee, K. (eds) <u>Conflicts in the NHS</u>, 1977

Klein op.cit Chs 3 & \$.

Illsley, R. op.cit Ch. 4

C. Ham <u>Policy-making in the National Health</u> <u>Service</u>, 1981 Ch.9 M. Stacey et al (eds) <u>Health Care and the Division of Labour</u>,

- 1977, Chs by Manson & Carpenter
- D. Gill 'The National Health Servive; Professional determinates of administrative structure' in Cox, C. & Mead, A. (eds) <u>A Sociology of Medical Practice</u>, 1974

10: Lay Participation in Health Policy and Health Care

We have seen in session 6 that health care is mainly provided in the home but that this has only been partially recognised in health policy. What part do 'consumers', if that is the appropriate term, play in formal decision-making structures? Does the growth of self-help movements in health care represent a radical challenge to professional power, a response to inadequate services or ...?

Allsop op.cit Ch 10

C. Ham 'Power, patients and pluralism' in Barnard & Lee op.cit. Klein op.cit Ch 5.

- M.Stacey 'The health service consumer: a sociological misconception' in Stacey, M. (ed) <u>The Sociology of the NHS</u> 1976.
- S. Henry & D. Robinson 'The Self-Help way to Health' in Atkinson et al (eds) op.cit.
- J. McEwan et al (eds) Participation in Health, 1983
- P. Bart "Seizing the Means of Reproduction" in H. Roberts (ed) Women and Health Care, 1981