



VIEWS AND REVIEWS

ACUTE PERSPECTIVE

David Oliver: Can doctors be too politicised?

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The Conservative MP Johnny Mercer, a former army officer, is concerned that doctors have become “too politicised.” He told the *Health Service Journal* in December 2018 that he was “really worried” that this politicisation had led to “unprofessional behaviour” and started to “affect patient care.”¹ He didn’t provide any examples beyond recounting that a GP’s child on a school visit had told him, “My daddy says the Tories kill more people than cancer.”

I’d like to challenge the notion that doctors can somehow be “too politicised.”

Doctors have a long and noble tradition of influencing public policy that affects the public’s health. Consider the work of Julian Tudor-Hart,² Douglas Black,³ or Michael Marmot on health inequalities⁴; campaigns by doctors on smoking,^{5,6} clean air,⁷ eradicating tuberculosis,⁸ alcohol policy,^{9,10} or developing a national dementia strategy,¹¹ and evidence based calls to decriminalise drugs.¹²

Medically qualified experts have rightly set out the risks Brexit poses to healthcare provision and public health policy.^{13,14} Why shouldn’t they?

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This kind of advocacy to improve population health and health services should be central to our values—as essential to our role as the doctor-patient relationship or developing evidence based practice.

It’s also surely legitimate for organisations representing doctors to seek to influence or oppose government policy.¹⁵ The BMA advocates for its members, flags serious problems in the medical workforce, and seeks to shape government policy on NHS funding, priorities, and staffing. As registered charities, medical royal colleges and specialist societies tend to avoid overtly party political positions but have key roles in influencing and shaping policy relevant to healthcare.

Some doctors, such as chief medical officers,¹⁶ national clinical directors,¹⁷ or national improvement leads,¹⁸ also have senior advisory and leadership roles in government and its arm’s length bodies. And, as local system leaders in clinical commissioning

groups or integrated care systems, doctors have a legitimate role in influencing policy and local politicians. Doctors are also private citizens and have as much right as anyone else to be campaigners, party activists, councillors, or MPs—and to express views on public platforms as stridently as the next person.

Doctors make up the health service’s second largest clinical staff group, so they have a stake in an organisation that spends around £124bn of taxpayers’ money a year and employs around 1.2 million people.¹⁹ This group is subject to intense political scrutiny, ministerial oversight, and inter-party debate. Its funding, provision, and performance are intensely political.

I don’t know for certain what Mercer meant by “too politicised.” My best guess is that he meant “too unionised” and, in particular, “too challenging of government policy.” Given that nurses and doctors top the Ipsos MORI table of public trust in professions²⁰—with politicians second bottom—such political challenges are an inconvenient thorn in the side of government.

That doesn’t mean that we should stop.

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