

Parliament

Bloody economics again

THIS WEEK: diseases. Legionnaires Disease and AIDS imported in the blood of American homosexuals. But nothing, if I can avoid it, about election fever. The patient should be allowed to rest for a few days in a darkened room with plenty of quiet, if any can be found.

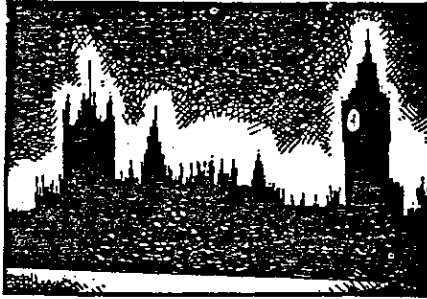
For something completely different have you heard the one about Legionnaires Disease in the Department of Health and Social Security's mighty headquarters at the Elephant and Castle? No, well it used to be an obsession with the former Health Minister and trick-cyclist Dr Gerry Vaughan and has lately surfaced yet again.

The story goes that there is this great ventilation system in the DHSS which circulates air around the building rejuvenating it as air conditioning systems do. Except that at the Elephant it apparently makes the air on the lower floors (ministers, needless to say, are higher up) progressively more stale and contaminated.

Does this add up to the dreaded Legionnaires Disease? Well, no, but the words have been used by the more alarmist. And it is apparently true that the Department gets more than its fair civil service quota of coughs and sneezes. Hence Dr Vaughan's professional interest. Filters have been demanded. Letters exchanged at ministerial level.

AIDS is a more tangible menace which, having surfaced in the newspapers, promptly surfaced in Prime Minister's Question Time thanks to Reg Race. Mr Race had denounced, yes, I'm afraid it was Gerry Vaughan in trouble again, the former Health Minister ('Our favourite own goal merchant') for not having spent the £30 million the unions said was necessary two years ago 'to make Britain independent in its blood supplies'. The result was the continuing importation of 'contaminated blood supplies coming from the United States,' and with it the risk that Britain's haemophiliacs might inadvertently contract AIDS, that potentially fatal virus to which blood-donating American homosexuals are particularly prone for reasons we won't go into here.

Mrs Thatcher replied: 'We first need to find out a good deal more about the incident and the causes that have been reported before coming to any conclusion.' Of course with an election



Michael White

coming the Prime Minister would have said something soothing like that if people had been dropping like flies in the street.

But what had me reaching to my bookshelf was not the medical ramifications but the politics. For, as Mr Race's dramatic outburst underlined, blood is not just a deeply symbolic issue but a highly political one as well. How does a modern society obtain blood? Through voluntarism or purchase? The ideologues of Left and Right have been squabbling over it for a decade.

Older readers may recall that the contemporary controversy was aroused by the late Richard Titmuss in his famous last work, 'The Gift Relationship', which sought to assert that blood given (the British system) was intrinsically better than blood bought (the US system) both morally and, important in the AIDS context, medically.

So far so familiar and Titmuss was duly invoked during last week's row. But it is not the full story as I found some years ago when I dared to write a feature on charities and peddled what might fairly be called the conventional liberal line — only to receive by post not one, but two, copies of 'The Economics of Charity' the Right's counter-blast against Titmuss.

They came from the Institute of Economic Affairs (IEA). It was to the surviving copy on my bookshelf that I turned last week to remind myself what they had said. The collection of essays, mainly by American academics and all about blood, suggests that the picture in the US is much more complicated. It's not just a pure free market. Only about nine per cent — at the time — gave blood without either payment or, much more

common, some other inducement, like 'blood credits' or a day off work. But only 20-30 per cent was purchased for cash. Moreover, they claimed, Titmuss's contention that 'the giving of blood is virtuous and the selling of it contemptible' is alive and thriving in the US too — and perhaps contributed to the shortages which in turn obliged some hospitals to take blood from dubious sources to make up, ie. that *social inhibitions* distort the market which would otherwise find its own level of supply and demand if everyone was paid for giving blood.

The arguments are complicated and I had better resort to the book's own summary: 'Giving is not to be separated easily into a category on a higher moral plane than selling; much depends on the terms, the timing and the spirit; selling is normally a part of a process of exchange in which both parties benefit; giving can create a sense of indebtedness in the recipient, and it can create and ferment an attitude of dependence . . . short-term good at the expense of long-term harm by weakening the capacity to build independence. . . .'

My, how Mrs Thatcher has made this sort of talk more familiar since that was written in 1973! I didn't find it very convincing then and I don't now. Nor entirely do the authors, since they can't easily get round the higher medical risk (hepatitis etc) of the US system.

One point I will give them since it is a problem which honest socialists admit too: that Titmuss was puzzled to discover that while all classes gave blood in the same proportion 'higher income classes received more than a proportionate quantity of blood transfers (so) there seems to be a net redistribution of blood from poor to rich.' A socially *regressive* system here then and a *progressive* one in the US. There's a paradox for election year. It can be seen throughout the Welfare State.

I should add that our ministers aren't thinking of charging for blood. Quite the reverse. Health Minister Kenneth Clarke is sometimes pressed from the Left in London to charge the private sector for handling blood. But he believes — with Titmuss, you might say — that once the cash nexus is introduced into blood donations altruistic impulses are damaged. And he's probably right. □