

AGAINST THE HEALTH POLICE

JAMES LeFANU

In April 1993 Ian Macauley, publican of the Bell Inn, Aldworth, Berkshire, was warned by his local environmental health officer that he faced legal action punishable with a £5,000 fine or three months in jail for contravening the Food Hygiene (General) Regulations. And what was Mr Macauley's crime? The officer in question, Grant Courteney, had dropped into the Bell Inn for an evening drink and seen Macauley smoking a pipe in between pulling pints. The regulations state that "if someone is engaged as a food handler, they must not use tobacco". As alcohol is deemed a "food", Macauley was clearly guilty of a misdemeanour.

There was no suggestion that flecks of pipe ash might be getting into the customers' beer because, as Macauley explained: "Whenever I am serving at the bar, I always put my pipe down. I never smoke when I serve." But this was no excuse, as the officer then pointed out. "If someone is engaged as a food handler," he said, "they must not use tobacco. The law does not require them to be doing the two simultaneously."

Macauley was lucky. His case became famous, with his picture, featuring the pipe he had smoked for fifty years, in the national newspapers. Bernard Levin leapt to his defence in the *Times*: "These creepy crawlies who want to creepy crawl all over an honourable man pursuing an honourable trade in perfectly hygienic premises do not jest. Someone gave them a tiny morsel of power and they bathed their hands in it, like the stage miser running the golden pieces through his hands."

Others have been less fortunate. Chas Wright, a traditional brewer, was told that before sterilising his beer by boiling it for an hour and a half — more than long enough to kill off any bugs or microbes — he had first to ensure the spring water

used in the brewing process was itself sterile, by passing it through a special machine which would cost him £400. Then there was a man called Drogy, who ran a small cake shop in Manchester equipped with no less than three handbasins but who was nonetheless ordered to install a fourth exclusively for washing "prior to shaking hands with customers".

Thousands of similar cases have come to light in the last year, relentlessly catalogued by Christopher Booker, the *Sunday Telegraph* columnist, who first took up the cause of the innocent citizens whose lives have been blighted by these health *gauleiters*. As Auberon Waugh has observed: "It cannot be long before environmental health officers have the right to enter private houses to ensure the washing up has been done properly. By the same token, they might undertake an ear inspection to make sure ears have been properly cleaned too."

HEALTH AUTHORITARIANISM AND THE HEALTH POLICE

These jumped-up sanitary inspectors humourlessly ensuring compliance with a never-ending stream of health regulations are no aberration, but rather symptomatic of the fact that Britain is now enthralled by a sinister new ideology — authoritarianism enforced by a health police force. The various branches of the health police are not coordinated — they have different motivations and agendas which sometimes conflict with each other — but they are united in the same belief that "health" should be the unquestioned, utopian aspiration of all. Any threat to health (real or imaginary) or lack of health (better known as illness) must be combated vigorously.

The chief of this health police at the time was the Secretary of State for Health, the blessed Mrs Virginia Bottomley, who believes passionately that much illness is due to personal behaviour, or to put it another way, that the victim has only himself to blame. The British public must therefore be cajoled or coerced, by education and regulation, into changing its ways. The question of whether the state has a right to interfere in the lives of its citizens in this way never arises. The overriding imperative is "health", and so healthy we must become.

THE FIVE YEAR PLAN

To this end, Bottomley had drawn up a five-year plan, *The Health of the Nation*, inspired by the scientific socialist planning so characteristic of the former Soviet Union and Eastern Europe. Targeted goals have been set out in four crucial areas of personal behaviour — food, fags, booze and sex.

So we are now told how much fat we should have in our diet, which essentially means what foods we should eat only sparingly, like meat, milk and dairy products, and those we should favour, like pasta, fruit, and vegetables. Cigarette smoking is



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anathematised by fair means or foul, leading to official endorsement of the threat of passive smoking — the ludicrous proposition that cigarette smokers kill innocent bystanders by giving them lung cancer.

Alcohol consumption must be limited to the equivalent of three glasses of wine a day, which is much less than is required to get even vaguely merry — but the new health authoritarianism is nothing if not puritanical. As for sex, Bottomley is less concerned how often we do it and with whom, than how we do it — so condoms are advocated to reduce the (virtually non-existent) risk of heterosexually transmitted HIV infection and the number of teenage pregnancies.

LIFESTYLE, RISK FACTORS AND THE THOUGHT POLICE

This primly vicarious desire to change the behaviour of private citizens is predicated on the belief that “lifestyle” is a major cause of preventable ill health. The fostering of this notion is very much the concern of another branch of the health police — which might be called the Department of Public Enlightenment, staffed by public health experts whose job is to locate the myriad ill effects on our health from our everyday lives.

Now, a dispassionate view of the nation’s health is rather optimistic. For the first time in recorded history most people now live out their natural life spans only to die from diseases, particularly those of the circulatory system and cancer, which are powerfully determined by ageing, and classic indices of health such as infant and maternal mortality rates have never been lower.

But, countering this view, the “public enlightenment” experts have generated a stream of false fears by promoting the mythology of “risk factors” for common diseases. This is easy. Take a group of people with a disease, ascertain what distinguishes them from a control group without the disease and in a trice there is evidence of yet another threat to health to be concerned about. So mouthwashes have been implicated in oral cancer, aluminium saucepans have been associated with dementia, keeping cats with multiple sclerosis, alcohol with cancers of the breast and oesophagus, coffee with cancer of the pancreas, sun exposure with skin cancer, and a high-fat diet with virtually everything.

This technique is so fertile that for one illness alone, coronary heart disease, there are now no less than 240 personal risk factors which range from not eating enough garlic to being bald, from having an intelligent wife to having an unloving one, from drinking too much milk to drinking too little, from coffee and chlorinated water, and so on, and on and on. These “risk factors” are for the most part shallow and contradictory, but that does not matter because, like the never-ending drip of water on a stone, they penetrate the public consciousness, engendering the belief that our everyday habits are treacherous and that virtually anything can harm someone.

Lest anyone be skeptical about these hazards, the public health police guarantee the validity of their findings by means of evoking the authority of “expert committees”. These committees, carefully selected to exclude anyone who might have “doubts”, gather round a table, ostensibly examine the entrails of the scientific evidence and then, by a show of hands, assert the certainty of the threat. This process is endlessly repeated with the same experts sitting on many different committees, all of which can be guaranteed to come out with the same consistent line.

Promoting these health hazards and coercing the public to change their behaviour to avoid them is the function of another branch of the state health bureaucracy — the Health Thought Police. Their main agency is the Health Education Authority,

with its generous propaganda budget for television and billboard advertising campaigns.

The methods of the Health Thought Police have been seen to very good effect over the issue of safe sex. Here, the primary concern was to assert that the HIV virus posed a threat to everyone, as reflected in the well-known slogan, “AIDS does not discriminate”. AIDS clearly does discriminate, but for the Thought Police this is immaterial. To maximise the impact of their campaign and to ensure that the funds kept rolling in, it was essential to bang on about the threat of an epidemic to everyone — which then allowed them to take the credit when the epidemic failed to materialise. Virtually all of the £150 million spent on anti-AIDS propaganda has been directed at discouraging casual heterosexual sex and emphasising the truly dire consequences of unprotected intercourse.

THE POLITICAL VIGILANTES

Assisting the Thought Police are voluntary vigilante groups, activists, single-issue campaigners, self-styled consumer spokespersons for whom “health” is a surrogate issue for their real political interests. Two groups in particular stand out.

The first are the environmentalists — like Greenpeace and Friends of the Earth — who have found the best way of gaining support for their campaigns is to exaggerate the threats to health from industrial progress. So comprehensive is their doom-mongering, it is surprising there is a healthy person left on the planet — nuclear plants, nitrate fertilisers, lead in petrol, vehicle exhaust emissions, chemicals in the water supply, synthetic pesticides and suchlike are all allegedly responsible for a bewildering variety of cancers, heart disease, bronchitis and asthma as well as adversely affecting children’s intelligence. Next are the food activists, whose animus is directed at a wicked food industry adversely affecting our health with hidden fats and sugars, or concealing their harmful products with irradiation, colourings and additives.

The net effect of this scaremongering is to create a public neurosis. People quake at the sight of a hamburger for fear of what harm it might do to their arteries, feel guilty about having bacon and eggs for breakfast, worry about whether taking the odd glass of wine when pregnant might harm their baby, and are hesitant to engage in the pleasures of casual heterosexual intercourse.

In this context, the activities of the environmental health officers, whose job it is merely to enforce ever more absurd health regulations, are only too understandable. If the pursuit of health is a dominant ideology of our age, then clearly it is necessary to ensure that those who transgress are punished.

A NEW RELIGION?

What is the cause of this madness? Why is it that people with the best health prospects in the history of humanity should imagine themselves in grave danger? Why has so much concern about minor hazards occurred in parallel with rising life expectancy? Why indeed has the pursuit of health become the dominant ideology of our times, readily exploited by the likes of Bottomley and the other functionaries of the health police state?

These are mysterious matters, but part of the reason lies in the common human yearning for self-improvement, for a better world. In the past, such aspirations might have been fulfilled by the great religions or by allegiance to a progressive political party. But the hold of these ideologies has weakened and in its place we elevate “health”. If, as many now believe, only oblivion follows death, then clinging to life is crucial. The pursuit of health and longevity becomes the nearest thing to a transcendental purpose of life on earth that anyone can have.