head to head

In light of the ongoing controversy surrounding the proposed new junior doctors' contract, we asked two of our members to share their views on whether juniors should take part in industrial action.

YES

'We need to stand up for the vulnerable'

Melody Redman

eclaration of interest: I am an active member of the BMA Junior Doctors Committee, as well as a CMF member, though I am speaking entirely out of my personal view.

It is 5am on night shift number four. You've slept badly between shifts, and haven't had time for a break yet. Being called to a cardiac arrest may stimulate the needed adrenaline. As for other tasks such as prescriptions, calculations, and handover, you feel the heaviness – the struggle – as you try to approach problems systematically and to make the most appropriate decisions. Junior doctors are already stretched. There is no give left.

As doctors, we already have very demanding jobs with a lot of responsibility. As Christians, we know salvation is through grace and not by works. 1 However, we all know many non-Christian doctors and other healthcare staff who each work admirably hard - well beyond rostered hours, and expecting no compensation.

For many of us, it's an absolute pleasure to actually get paid for a job which (usually!) directly helps people, in a system which upholds biblical principles of treating all as equals. 2 This equality reaches beyond the patient's past (ie IVDU, alcohol), social status, and personal beliefs. As a Christian,

it is a privilege to work in publicly-funded, publiclyprovided healthcare (though we can be good servants in any workplace!). Does that mean it's not okay to strike? Hold that thought...

Safeguards to prevent junior doctors working dangerously long hours: gone. Compensation for unsociable hours: gone. More importantly, as a result, any incentive to stop employers making us work later evenings and more Saturdays: gone (which fits in nicely with the move to increase elective procedures over weekends - medics all know the NHS is already 24/7 for emergency care). This is the contract the government has threatened to impose.

With so much gone, what will be added? More exhaustion from way too many extra hours beyond the rota, as the financial penalty for trusts has been removed. More mistakes. Added to that, more weeknight meetings/fellowship missed, less time spent being parents, being friends, being there for those who need us, and less able to meet with those who support us. From an NHS user's perspective, do you want your mum being met in A&E by a dissatisfied, overworked and undervalued junior doctor? Junior doctors already have a high risk of burnout.3

Those who would suffer the most from this new contract would be those working in the acute

NO

'We need a different message'

Matt Lillicrap

need to make something clear. Although I was a junior doctor for seven years, a year ago I rescinded my licence to practise and I am now in my third year at Oak Hill Theological College.

So it is with trepidation that I write as one no longer 'on the pitch'. Please don't hear me as an idealist who has lost touch with reality. Rather I am one standing on the sidelines shouting as loud support as I can muster, urging you on to know, love and serve Christ and to call others to him for his glory - not just as my former colleagues but as my current brothers and sisters in Christ.

So what would be the nature of my'loud support' to junior doctors under the cosh? Answer: keep faithfully serving Jesus, keep loving your patients, and keep giving an answer for the hope that you have even as those around you become more despondent and angry.

But don't strike.

I could give a number of reasons. The imperative to be there to show compassion to your patient. The importance not to cause harm (even indirectly). The importance of understanding communication breakdown - attempting to understand our opponents' reasons for struggling to hear us and our reasons for not listening to them before we accuse them of not listening (could there be a log in my eye?).

But, Bible college student that I am, indulge me in choosing this: the work and example of Jesus.

Two thousand years ago Peter wrote a letter to a group of Christians under the cosh. Some were suffering for doing good. Others, like the slaves in 1 Peter 2, were suffering *despite* doing good. So Peter speaks to these Christian slaves, not because he approved of their situation but because it was their situation and they needed to know how to live in it. Here's what he said:

'Slaves, in reverent fear of God submit yourselves to your masters, not only to those who are good and considerate, but also to those who are harsh.'1

Now, you might be thinking, 'hang on, we're not slaves.' Exactly. Imagine their situation for a minute. Not'persons,' but property. Not workers, but'tools'. Some had good masters. Some had harsh masters. I can't begin to imagine what that meant. Constantly belittled, treated as vermin, beaten for no reason. And yet Peter calls them to submit nonetheless.

Our reaction to this is complex. We are children of our generation but we try to understand how the Bible teaches us. This means that we rightly recoil at



specialties and A&E; places where we cannot afford to stretch doctors any further, and where we already struggle with recruitment and retention. Nearly 3,000 doctors said they would move abroad, locum, or leave medicine if the proposed contract was imposed. ⁴ There is a serious threat that junior doctors will vote with their feet, which would be disastrous for the NHS and for our patients.

Industrial action (IA) is lawful, and employers must be given a minimum of seven days' notice, which allows for appropriate plans to be put in place so that patients are safe. ⁵ If the action goes ahead, the BMA will provide guidance and support. ⁶ Interestingly, a review of the literature shows that patient mortality may fall during doctors' strikes, perhaps as elective work is cancelled and doctors reassigned. ⁷ I would not encourage IA if I didn't believe it could be done safely, and I still hope the government offer meaningful negotiations first.

I never thought I would hear myself encouraging IA as a doctor. We really have reached the last resort, and I strongly believe it has become a necessary step to defend our patients by defending our doctors' working terms and conditions. Who will be next? I genuinely believe this proposed contract, as part of the bigger picture, threatens the future of the NHS. We are called to use our voices to stand

up and defend those who are vulnerable ⁸ – those who our NHS already cares for. Having been involved with the BMA, I know that the battle has already been long. Every avenue has been pursued. Along with many other colleagues, I've kept up to date with the issues, written to my MP, written for the newspaper, spoken on the radio and TV, and taken part in protest marching. So, I ask you, can we afford not to?

I encourage others to speak out on other matters too, ⁹ and please, let's not undervalue the importance of this matter. Whilst we know we have security in Christ, we can also witness by promoting a healthy NHS, ¹⁰ with a healthy workforce – even if that means taking part in IA. The two are not mutually exclusive. I ask you, please think long and hard about what we are fighting for (/against!). Yes, examine your heart and pray. If you choose not to take part, then that is your choice. But whatever your views, please consider the issue fully and be informed.

I believe I can act in good conscience as a Christian and vote 'yes/yes', 11 so that we can send a clear message of the need to negotiate – without threat of imposition – for a contract that is safe for patients, fair and safe for doctors, and sustainable for the NHS.

references

- 1. Ephesians 2:8
- 2. James 2:1-7; Luke 10:30-42
- Burnout in doctors. BMJ Careers, 2012 bit.lv/10alAJf
- Junior doctors: 7 in 10 to leave NHS if Hunt pushes through new contract. Guardian, 20 October 2015 bit.ly/1XigLmJ
- Taking part in industrial action and strikes: Your employment rights during industrial action. Gov.uk bit.ly/1Sr9Y7u
- bma.org.uk/juniorcontract
- Cunningham SA, Mitchell K, Narayan KM, Yusuf S. Doctors' strikes and mortality: a review. Soc Sci Med 2008 Dec;67(11):1784-8 ncbi.nlm.nih.gov/pubmed/18849101
- Proverbs 31:9; Isaiah 1:17
- Redman M. Heroes and heretics: William Wilberforce. Nucleus 44(1):32-34 cmf.li/wilberforcenucleus
- 10. Ephesians 6:7
- 11. BMA ballot information pack bit.ly/1MkmgO4

Melody Redman is an F2 doctor living in York.

the treatment Peter describes, or at the very idea of owning slaves. But those are not the issues Peter is addressing. Rather, he wants to tell those people in that situation what they should do in response. If we recoil at his command to submit to masters, even the harsh ones, we find ourselves on the side of our entitlement-driven culture, recoiling not at human injustice but at God's word. That's dangerous ground.

So we need to understand how Peter can say this, let alone expect these poor slaves to live it. Here's his reason:

'To this you were called, because Christ suffered for you, leaving you an example, that you should follow in his steps.' ²

Why should we? 'Because Christ suffered the same way on your behalf and as your example,' Peter answers. These slaves are followers of a different master. A master who enacted the supreme example of unjust suffering, offering no retaliation.³ Why? So that these slaves could be called to follow him. Jesus' unjust suffering on our behalf is the very reason he can call us to imitate him by enduring unjust suffering ourselves. And the real punch is in how he did it:

'He entrusted himself to him who judges justly' 4

So he doesn't call harshly treated slaves – even unfairly treated employees – to simply endure, but to hope in the final vindication of believers under the cosh. Read through 1 Peter and count the number of times this vindication is in view. He can't point to it enough! It's real, it's the reason Christians can behave in this radical way, and it's the thing Peter consistently calls us to point to –'the hope' that we have. ⁵

My biggest concern is that in all the protesting and social media, there has not been significant difference between the rhetoric of Christian and non-Christian medics. Please don't be silent, but please don't melt into the crowd. At this moment of highly charged emotions the world around you needs, not your joining a strike, but your pointing to the Lord Jesus, your only possible source of hope amidst the pressures of medicine in 2015 and beyond. Your colleagues, your patients, and those looking in from the outside need to see and hear a group of juniors with a different message. One of self-sacrifice and responsibility versus entitlement. Yes, one even of submission. Supremely, one of a crucified saviour who suffered for us, leaving us an example, that by his power we might walk in it.

So from the sidelines I shout: 'Point to him!'.

references

- 1. 1 Peter 2:18
- 2. 1 Peter 2:21
- 1 Peter 2:23 1 Peter 2:23b
- 5. 1 Peter 3:15-16

Matt Lillicrap is a former doctor now training for pastoral ministry.