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The politicisation of a generation

I am a junior doctor. I went through medical school, foundation, and specialty programmes with relative ease and several accolades. I married a guitar-playing, Aston Villa-supporting historian I met at university who entered policy work. I would scoff at his insistence that politics was important — I honestly believed that I was doing the only true and noble job in the world. Politics was beneath me.

Having experienced the furore of the junior doctors' contracts dispute I now realise how completely and naively politically illiterate I was. To disengage with this process and say it does not concern us because we are public servants has proved detrimental. If Jeremy Hunt has done nothing else, he has at least caused a political awakening among our generation, and I am not ashamed to say that, at times, this has been thrilling. I have attended marches, petitioned on the streets, canvassed local support, given interviews, written to and appeared in newspapers, and contacted my MP.

Social media has played a central role in igniting and spreading the grass roots campaign that followed the breakdown of talks between the British Medical Association (BMA) and the Department of Health (DOH). Facebook groups have allowed us to feel connected to almost every other junior doctor in the country in some way, debate differences, and celebrate victories. The twittersphere has enabled rapid dispersal of information and opinion and placed at our fingertips persons and groups we wouldn't normally be in contact with, like Mr Hunt himself. The occasional impersonality of twitter has emboldened the challenges we make to policy makers — retaliation, though unpleasant, is seemingly inconsequential in this smoke and mirrors forum.

The unravelling of this dispute in the media has strengthened the resolve of many of my peers to become more politically active. Many are of the opinion that the media have to take responsibility for their role in exacerbating this dispute — you may recall the now retracted 1998 Wakefield study and subsequent rise in incidence of measles as an example. Indeed

the online national survey by Gan *et al*¹ to explore the 'Hunt effect' suggested that in the months after the reporting of Jeremy Hunt's irresponsible interpretation of the Freemantle epidemiological study,² there were patients presenting later than they would have to emergency services, afraid the weekend care would be suboptimal. Patient care was potentially compromised as a consequence during this period.

By increasing engagement with the press, we have been able to project our concerns while also holding them accountable for what they write — retractions have appeared in national broadsheets and complaints to the BBC have been upheld. This increased interaction can only be a good thing. Although it is difficult to quantify the relationship between media moguls and government, perhaps this improved bond between our media and the medical community can lead to a more positive affiliation in the future?

As this dispute has evolved, it has been life affirming to realise that we are not alone. Many patients and other public health service staff have consistently shown their support for us and the shared core belief in an efficient and effective health service free at the point of use. Becoming politically aware, has therefore also become about the way we connect on a meaningful level with those around us to make our immediate and extended social, cultural and economic environment relevant and bearable.

On a personal note, although I am but a child taking my first steps in this new landscape, my feelings of political apathy are long gone and I believe that real and effective change is possible. And I am hopeful that our new-found political awareness and reaffirmed social responsibility will survive the crest of this campaign post crisis.

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REFERENCES

1. Gan HW. Response to *BMJ* 2015; **351**: h4596. <http://www.bmj.com/content/351/bmj.h4596/rr-52> (accessed 18 Feb 2016).
2. Freemantle N, Ray D, McNulty D, *et al*. Increased mortality associated with weekend hospital admission: a case for expanded seven day services? *BMJ* 2015; **351**: h4596.

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