astronomical projects. He adds that because the working party includes scientists whose primary interest is solar physics, the dice are loaded towards astronomy and away from solar system geophysics.

Professor Ackerman points to the United States while making this charge. In his view, it is symptomatic of the contrast that Europe is incapable of coordinating an effective campaign such as that in the United States to investigate the atmospheric effects of the El Chichón eruption. He points to the Solar Mesosphere Explorer (SME) satellite as an important element in that programme, quoting it also as an illustration of how the US National Aeronautics and Space Administration allows scientists greater independence to manage their own budgets, thus avoiding the bureaucracy of ESA.

If the space agency chooses ISO, then, with Giotto and Hipparcos already under way, no ESA mission will be planetological in orientation. "The decision will have farreaching consequences" says Professor Ackerman. "On a longer time scale, some political decisions are going to have to be made at the highest possible level if Europe is to keep at least some contact with others in the realities of space."

When told of Professor Ackerman's complaint, Dr A. Gabriel, chairman of SSWG, said that the Kepler proposal was a good one, well-judged in cost and scope for an ESA project, and that he was surprised that it had not won more support. But he indicated discreetly that not all members of the working group with planetological interests were united behind the project.

Philip Campbell

## Federal elections

# What the parties promise

SCIENCE and technology feature prominently in the election platforms of the two principal Australian parties campaigning for election on 5 March. What follows is a list of the promises made by the Australian Labour Party (ALP) and by the Liberal-National Party (LNP) which formed Mr Malcolm Fraser's government.

The Australian Research Grants Committee (ARGC) at present spends A\$18 million a year on academic research projects, the National Health and Medical Research Council (NH and MRC) has a budget of A\$33 million a year and the Australian Industrial Research and Development Incentives Scheme (AIRDIS), administered by the Australian Industrial Research and Development Board, now costs about A\$50 million a year. Vimala Sarma

High technology

# **Australian Labour Party**

Increase ARGC funding by 10 per cent over inflation rate for the next 3 years.

Initiate national research fellowship scheme for post-doctoral research, costing A\$2.3m in the first year for 100 fellowships.

# Make AIRDIS grants tax-free.

Convert present Australian Industrial Develop-ment Corporation into Australian Industrial Development Bank to provide venture capital for high-technology industries. (Priorities identified computer software, custom-made computers, computer software, custom-made chips, scientific instrumentation, medical tech-nologies, lasers, communications technology, industrial ceramics, solar technology, shape memory alloys, fusion, robots, hydrogen as fuel, biomass.) Establish new research, development innovation division within DST.

Make funds available through AIRDIS, the new Australian Development Bank and a new industry finance corporation.

Establish a national biotechnology scheme for funding basic as well as applied research, costing A\$2.5m in first year increasing to A\$15m in third year.

Liberal-National Party

Increase NH and MRC funds over current inflation

rate by \$A4m in 1983-84, A\$8m in 1984-85, and

A\$46.5m for establishing an advanced technology

corporation to assist firms and organize venture capital with a ceiling of A\$100m for the first year.

Make approved projects 100 per cent tax deducti-

\$A12m in 1985-86.

A\$2.5m from AIRDIS grants.

### Antarctic research

Increase funding by 300 per cent over 3 years. A\$4m for improving transport facilities. Provide aircraft landing facilities

### Australian Telescope A\$25m over 5 years as a bicentennial project.

Honour Fraser government's initiative.

Supporting phase B studies.

Provide funds.

Conservation Stop the Gordon-below-Franklin dam by use of existing constitutional powers.

Provide funds for alternative projects.

Establish environmental contaminants authority. A\$4m for a national soil conservation programme.

Establish an international prize awarded by Australian Academy of Science of the value of the Nobel Prizes for scientific achievement in human Upgrade Landsat receiving stations.

A\$500m compensation offer still open.

A\$50m to establish a national park in south-west

A\$5m for a national soil conservation programme.

# Heath care in London

# Improved plans

A MUCH-DELAYED step towards the improvement of health care in Inner London was taken last week by the University Grants Committee, which has set aside £160,000 to help found departments of general practice at two London teaching hospitals — the partnership of St Bartholomew's and the London Hospital Medical Colleges and St Mary's Hospital Medical School. This is almost the first step taken to implement the recommendations of Professor Donald Acheson's study group on London's health care, published nearly two years ago.

The essence of the Acheson report's diagnosis of health care problems in Inner London was its complaint that there had been inadequate progress (up to 1979) towards the development of group general practices in which patients are looked after by integrated health care teams. The provision of adequate care for patients in Inner London had been complicated in the 1970s by the redistribution of acute hospital beds away from London - one of the chief reasons for the committee's existence.

Surveys carried out by the study group at the end of 1979 drew attention to the difficulties encountered by new patients in finding physicians who would accommodate them on their lists.

Many of the Acheson recommendations take the form of financial incentives and disincentives to improve the organization of general practice. Carrots include the suggestions that physicians should be paid extra for each new patient registered, extra payments to encourage the merging of practices or to salaried assistants intended to be made full partners in a practice. The corresponding sticks include a revision of the rule that a physician should be able to claim from the National Health Service his rent and rates and 70 per cent of the salary of ancillary staff provided that he or she has more than 100 patients on his books, and of the rule that other public contributions towards overhead costs should be calculated on a sliding scale based on 1,500 patients per physician, not 1,000 as now.

Many of these recommendations have disconcerted individual physicians working in Inner London, while physicians elsewhere have seen it as a threat to their standard terms of service. For the past six months, the government has been under pressure in the House of Commons to say when its response would appear, while even the General Medical Services Committee of the British Medical Association is "seriously dismayed" at the delay. The University Grants Committee, one of the members of the London Health Planning Consortium that commissioned the Acheson study seems, however, to have responded early to the plea that facilities for professional training and retraining should be improved.