

Hiam, L. and Dorling, D. (2018) May and Cameron have a terrible record on health, and it could be cutting lives short, The New Statesman Blog (stagers), March 2nd, <https://www.newstatesman.com/politics/health/2018/03/may-and-cameron-have-terrible-record-health-and-it-could-be-cutting-lives>

May and Cameron have a terrible record on health, and it could be cutting lives short

THE STAGGERS

2 MARCH 2018

Life expectancy in the UK has stalled. In many places, and for more vulnerable groups, it is now falling.

BY LUCINDA HIAM AND DANNY DORLING

Between them, David Cameron and Theresa May have managed to secure the worst health record of any post-war prime ministers. Life expectancy in the UK has stalled. In many places, and for more vulnerable groups, it is now falling. No other country in Europe has had such a bad record in health between the years 2010 and 2018. It is not just the elderly who are suffering, although the large majority of untoward deaths are in this group, it has also been people of working age, especially those who have had their disability benefits slashed, and infant mortality rates in the UK have risen for children born into poorer families.

The recent UK health record is not only awful in terms of rising mortality for some groups, ranging from poorer babies to elderly women, but also in declining mental health. Some of greatest declines in mental health have been for people who are so ill that they required government employment and support allowance to survive with any decency. By 2016 over 40 per cent of this group between the ages of 16 and 64 and living in England were known to have made suicide attempts in recent years.



Epidemiological studies have shown that new more stringent government tests result in an additional six suicides a year for every 10,000 people re-assessed in an area, an unknown (but of course much higher) increased number of suicide attempts, and many times more suicidal thoughts.

British politicians who have held power since 2010 are trying to impose the US model by stealth. This results in poor health in the US, with little “regulation over powerful food and drug companies blinded by greed and arrogance”, **according to Columbia University's Jeffrey Sachs.**

More and more British health services are now “delivered” by “private providers”. More and more state facilities are now run by private companies.

Those who suffer the most are the weakest and least powerful. The number of prisoners who have died in custody each year has increased by over 60 per cent since the Conservatives first came to power as part of a coalition in 2010. At the same time deaths among patients with mental illness have increased by more than 200 per cent between 2011 and 2016 and may soon be greater each year than the number in prisons.

The NHS Winter Crisis

Reports of “third world conditions” in NHS hospitals dominated the media this winter. Pictures of ambulances queuing outside A&Es and patients lying on floors in corridors confirmed the fears many leading medics and academics had warned of: the NHS was not sufficiently funded to be able to respond to a surge in demand. **Office for National Statistics (ONS) provisional weekly death data** shows 6,346 more people died in the first 4 weeks of 2018 than the average for the last 5 years. This includes the worst year-on-year rise for 50 years in 2014/15. Obviously, this does not allow for changes in population age, but it is certainly a warning sign.

Following the 2014/15 winter, when excess deaths soared, concerns were raised that under-funding of health and social care could be linked to the patterns being seen. Last year, Professor Sir Michael Marmot **raised the alarm**, after government statistics showed stalling life expectancy. There is a growing body of evidence linking austerity, particularly cuts to health and social care, and worsening health outcomes, and rising deaths. Yet, when experts raise concerns, the government, so far, does not react.

The government's responses

The crisis this winter was, to some, predictable. The political choice of austerity has been linked to rise in food banks, homelessness, suicide rates, infant mortality, and, increasingly, to a greater number of deaths. The significance of the number of deaths was previously disputed, but with the official ONS figures now available, comparison of the 2016-based projection to the 2014 reveals 120,000 lives “cut short”, thus **projecting many more in the future**.

The numbers are not disputable. But what underlies these deaths is. Whilst a growing number of experts turn to the cuts in health and social care as the cause, some still believe influenza to be the culprit, or an unknown infectious agent. Data error is no longer a viable alternative.

Experts do not dispute that what has happened is significant. Yet, despite multiple warnings from heads of Royal Colleges,

academics, junior doctors, charity sector workers, and other health professionals, The Department of Health does not appear to be listening. How about: The department's responses to concerns raised have included accusations of bias, information that is unrelated (“**Life expectancy continues to increase, with cancer survival rates at a record high whilst smoking rates are at an all-time low**”), and failing to satisfactorily answer a Freedom of Information request asking for their press responses to these issues.

Health outcomes in England and Wales are deteriorating. More people are dying, and certain groups can now expect to live shorter lives. The Department of Health must, firstly, acknowledge this. The time for ignorance is over. Secondly, the Department of Health must urgently explore why this is happening. If it doesn't act, then we have **strongly suggested there should be an urgent independent inquiry** by the select committee of the House of Commons. Protecting the health of the population is a key part of the social contract Government holds with its electorate. Failing to do this, is a failure of Government.

Lucinda Hiam is an NHS GP and Danny Dorling is the Halford Mackinder Professor of Geography at the University of Oxford.