## Doctors' report "Growing up in Britain" highlights growing inequality in children's health

Keith Lee 16 July 1999

Childhood is a period of rapid and uneven developments; physical, psychological, intellectual, emotional and social. Illness, disability and problems of mental health which develop during childhood may remain with an individual throughout life and it is during childhood that important choices are made and habits adopted which will affect long term health and well-being. Traumatic effects in childhood such as divorce, unemployment, serious illness, disability or death of a parent or family breakdown may also have profound consequences not only at the time, but also in adulthood. (House of Commons Health Committee, 1997)

Last week saw the publication of the British Medical Association (BMA) report "Growing up in Britain: Ensuring a healthy future for our children". The report, which covers the ages from birth through five, presents a devastating picture of the decline in children's health in Britain, and highlights a rapidly growing health gap between rich and poor children.

It reveals that low birth weights in the UK are on par with Albania and are behind countries such as Singapore and Slovenia. Britain is eighteenth out of twenty-seven countries, when measuring childhood mortality rates.

One of the report's authors, consultant paediatrician James Appleyard, says "We should ask why we are now below countries like Slovenia in infant mortality and why the gap has widened between the health of rich children and poor over the last 20 years? Children in the lowest social class are smaller at birth and grow up shorter in height. We are programming our children at an early age for lifetime of problems.... They have a relatively poor deal. The first five years of life are

absolutely crucial to the development of children's bodies, minds and personalities. Deprivation in early life causes lifelong damage, delinquency and despair."

The United Nations considers Britain to be one of the most unequal countries in the world.

One inescapable conclusion to be drawn from the data presented by the BMA is that inequalities in health are linked firmly to inequalities in income. In the first chapter of the 210-page study, the BMA recommends that a "high priority should be given to the health of families with children; and further steps should be taken to reduce income inequalities and improve living standards".

The report notes: "Structural and environmental factors, principally inadequate income and inadequate access to healthy food make it much more difficult for low-income families to improve their diets and thus their health. The primary determinants of disease are mainly economic and social, and therefore remedies must also be economic and social."

Vivienne Nathanson, head of health policy at the BMA, said, "Inequalities in health are not disappearing in Britain, quite the opposite, we are raising children in a way which damages them for life, but if you start making a difference now you can make rapid improvements that will benefit them for the rest of their lives."

Already in Britain one in three children live in poverty: "In social class five, poorer children are four times more likely to die in accidents than in class one. They are smaller at birth, shorter and have markedly poorer diet."

The report cites one study that found, for example, that for "mothers living in bed-and-breakfast

accommodation in Hackney, London, 25 percent of their new-borns had a birth weight below 2500g, compared with 10 percent among babies of local area residents, and 7.2 percent in England".

During the 1980s and early 1990s infant and childhood mortality rates fell for all social classes, but the social differentials persisted. In 1993-95 the infant mortality rate for social class five was 70 percent higher than social class one.

Babies born weighing under 2500g in 1991 accounted for 59 percent of neonatal deaths. In 1994, in England and Wales, the average birth weight in social class five was 115g lighter than in social class one.

From the very beginning, when a child takes in its first food, class disparities arise: most affluent mothers (81 percent) breastfeed their babies and most poorer mothers do not (44 percent). "In certain Nordic countries virtually everyone breastfeeds", said Dr. Appleyard.

The report also highlights the growing prevalence of anaemia in UK children aged 0-5, this is found to affect all social classes, with one in twelve children found to be anaemic. Doctors say this is brought on by a lack of iron in the diet. In fact, iron deficiency is the most common nutritional disorder in early childhood. Among older children, lower iron status is significantly associated with poorer performance on IQ tests and reduced activity levels.

It has been common coin for well over 50 years that it is necessary to lift people out of poverty to improve their well being; and especially so for children. It is a truism that inequality and social deprivation cause a lowering of health, and conversely, that better nutrition and housing lead to healthier, taller adults and higher educational attainment.

Despite Prime Minister Tony Blair's promise to "end child poverty within a generation", the BMA's report proves that is no more than a sick joke. It is also an indictment of the free market policies that have been pursued over the last two decades. Labour has continued the cuts in public spending and has attacked so-called expensive welfare provisions.

The BMA opposes this dismantling of welfare provisions. In its final recommendations, it calls for a comprehensive review of the government's welfare and health policies. It demands no further cuts in lone parent benefit, calls for tax and education measures to

halt social exclusion and action to tackle teenage pregnancy. It wants the appointment of four "Children's Commissioners"—for England, Wales, Scotland and Northern Ireland—with a mandate to oversee a programme that would include an annual report on the health of children to the Chief Medical Officer.

The BMA report confirms that we are witnessing the consequences of 20 years of attacks on the welfare state. Working people can also expect no respite from this policy of social cuts, carried out under the Conservative governments of Margaret Thatcher and John Major. Indeed, New Labour has made it its policy to "think the unthinkable" when it comes to slashing much needed welfare programmes and social benefits.



To contact the WSWS and the Socialist Equality Party visit:

wsws.org/contact