

# Scotland's health inequality worst in Europe

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A study published this month from the Scottish government, "Long Term Monitoring of Health Inequalities," has laid bare shocking levels of health inequality between rich and poor. The report, which compared data in Scotland with countries across Europe, confirms that in many key areas of health care, nowhere across the continent is this more polarised.

Life expectancy is 14 years less for someone living in the poorest areas of the country compared to the most affluent. In deprived areas, average life expectancy is 68, while among the 10 percent living in the most affluent areas, it rises to 82. The data for women is even more polarised, with life expectancies of 67 and 84, respectively.

The figures for healthy life expectancy are worse. Living in an area of poverty condemns the average male to just 47 years of healthy life, whereas in the richest areas, it is 70. It is no better for women, who can expect to live without health problems only until aged 51 in the poorest areas, against 73 in the wealthiest.

Along with these headline figures, the study documents a series of diseases and health conditions that are far more prevalent in deprived locations. Someone living in poverty is four times more likely to die of heart disease before the age of 74 and twice as likely to contract cancer.

Commenting on the figures and the moves by the government to increase the retirement age to 67, researcher David Walsh pointed out, "We are talking about extending working life, but we are seeing parts of Scotland where people are not going to get much time in retirement."

The health figures uncover an important aspect of a broader social polarisation, which has seen a tiny elite accumulate substantial wealth while the broad mass of working people have sunk ever deeper in to poverty. This contrast is particularly stark in large cities like

Glasgow, where the researchers calculated that each bus stop on a route beginning in the wealthy west end towards the east side meant a corresponding drop in life expectancy by 1.7 years.

The findings are a damning indictment of the political establishment. Successive governments at the national and regional level have pursued policies that have brought about economic and social devastation for many areas. The destruction of the universal provision of health care by attacking the National Health Service (NHS) has been embraced by all of the political parties, including the previous Labour government, the current Conservative-Liberal coalition and the Scottish National Party (SNP) administration at Holyrood.

Many of the poorest areas identified in the study, most of which are concentrated in west central Scotland, have undergone a terrible economic and social decline beginning in the 1980s with the deindustrialisation launched by the Thatcher government. When the Labour Party came to power in 1997, this process continued unabated.

Under Labour, plans to privatise the NHS began to be implemented, culminating in the passage at Westminster this year of the Health and Social Care Act by the Conservative-Liberal coalition.

Although health policy was devolved to Holyrood when Scotland's devolved parliament was set up in 1999, the approach there has been no different, with the SNP currently at the consultation stage of its own health and social care bill. The key priorities of this reform are to increase the involvement of the private sector and cut public spending on health care, which is considered unacceptably high.

Companies are being involved in the privatisation process with notorious records for cost-cutting and the denial of care to those who need it most. The SNP has just awarded several contracts to ATOS, a French firm that has been heavily criticised for eliminating welfare

payments to the sick and disabled. Evidence has emerged of large financial donations from ATOS to the Institute of Healthcare Managers-Scottish Division, the body representing health management in Scotland, with the undisguised aim of influencing the reform agenda in the firm's favour.

A recent report from accountancy firm KPMG outlined a scheme to eliminate swathes of publicly funded health care, under the guise of handing more "responsibility" to people for their own health.

The detrimental effects of the welfare reforms of the governments at Holyrood and Westminster, coupled with the global economic crisis, were noted by one of the researchers who led the study in to health inequality. Dr. Gerry McCarthy of the Public Health Observatory for Health Scotland commented to the *Scotsman*, "Inequalities in income are the most obvious point for action. Clearly, the economic recession and welfare reform are pushing in the wrong direction."

Such appeals for action will fall on deaf ears in the political establishment. At Westminster, the Conservative-Liberal government is carrying out the deepest spending cuts in British history, including a reduction in the NHS budget of £20 billion. At Holyrood, the SNP is collaborating loyally to implement its share of the budget cuts. Since it came to power in Edinburgh in 2007, the SNP has overseen declining health budgets and cuts to staff numbers. Recent figures showed that the number of nurses working in the NHS in Scotland is at its lowest since 2005, with at least 1,000 further jobs being eliminated this year alone. The SNP has also overseen the slashing of places for student nurses by 20 percent in two years.

This record undermines the myth that the SNP and its ex-left apologists seek to cultivate of a more "progressive" system of government at Holyrood. Prior to a debate on Tuesday on universal health care and social benefits, SNP health secretary Alex Neil claimed, "The Scottish Government's commitment to maintain universal benefits is clear and unwavering. It is simply not right to tax ill health through prescription charging, not right for older people to spend time in hospital or be prematurely put in care homes due to a lack of support, or for adults to forego eye examinations due to the cost."

Neil's response to the study exposing the massive divide between rich and poor in health was to claim a

success for the SNP administration since average life expectancy had risen slightly. The fact that this rise resulted only from an increased life expectancy for a privileged few was not acknowledged.

Labour is on record as having no disagreements with the reforms that the SNP is implementing. In September, Labour leader in Scotland Johann Lamont delivered a speech denouncing the "something for nothing culture" she asserted was predominant in Scotland. She demanded the removal of the few remaining social measures that have been implemented under devolution, such as free care for the elderly and free prescription charges. Such measures have been enacted solely thanks to the favourable settlement that Scotland receives under the Barnett formula, which sees Edinburgh receive around 1.5 times the amount of public spending per head of population compared to the rest of the UK.

At a time when politics is dominated by questions of whether Scotland remains in the UK or seeks independence, the government's health report is a powerful reminder that the basic division in society is not that of national identity but of class.



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