

# John Pilger's *The Dirty War on the National Health Service* screening on Australia's SBS this Sunday

**Our reporters**  
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Veteran investigative journalist John Pilger's documentary—*The Dirty War on the National Health Service*—premiered in Sydney on Tuesday and will be screened on Australia's Special Broadcasting Service television network on Sunday, 16 February at 8.30 p.m. It can viewed after broadcast at SBS-On Demand, the network's free streaming service.

*The Dirty War on the National Health Service* is an unflinching and timely exposure of the impact of the creeping privatisation of Britain's National Health Service. Filmed in the US and Britain, it has clear parallels with the systematic undermining of state-funded public health services in Australia by consecutive Liberal-National Coalition and Labor governments.

Pilger has made more than 60 documentaries since 1970. His latest work, which was reviewed by the WSWs late last year, and reposted below, deserves the widest audience. Ofcom, Britain's television regulatory authority, directed ITV not to broadcast Pilger's film until after the UK elections on December 17, due to the immense opposition, within the British population, to the ongoing destruction of the NHS.

The WSWs urges all our readers and supporters to watch this powerful documentary on SBS television, at 8.30 p.m. Sunday night, February 16.

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***The Dirty War on the National Health Service: John Pilger* documentary “goes to the heart of the struggle for democracy today”**

*By Jean Shaoul*  
10 December 2019

*Written and directed by John Pilger*

*The Dirty War on the National Health Service*, written and directed by the BAFTA and Emmy award-winning journalist and film director John Pilger, has opened in several UK cities. The screenings, some accompanied by question-and-answer sessions with the director, have been sold out.

The film will reach a far wider audience on ITV, but it will only be aired *after* the election on December 17, because of the political sensitivity of the issue, following a ruling by the television regulatory authority Ofcom.

Pilger's work is a passionate appeal to working people to oppose the decades-long, covert assault on the National Health Service (NHS) by all three major parties. Even for this writer, whose professional work was bound up with exposing the secret privatisation and balkanisation of the NHS, the film proved deeply shocking.

Pilger introduced *The Dirty War* saying that he had wanted to make it for some time, even though he had already made a couple of films about the NHS. He noted that the war on the NHS had been going on a long time but was at a crucial stage now. The NHS, said Pilger, has become a major issue in the election precisely because it “represents democracy.”

But what was at stake was more than “just” the dismantling by the corporate vultures of a system that was, in principle at least, a comprehensive (from the cradle to the grave) and universal service, free at the point of use. Pilger explains in the film that “Britain's deadly disease was class. The NHS was not given from on high but won in struggle. It exemplifies what is good in British society. NHS is a deeply democratic institution. The leaflet announcing the NHS to the British people and given to everyone said, ‘Open to all, rich and poor.’”

“But” he said, “the corporations hate the NHS. They and the politicians are carrying out a war against it. We have to fight for it. We should have done so earlier because it touches all our lives. It is the great connector between all of us.

“If the NHS goes, everything else will go.”

Pilger had had to turn to crowdfunding to finance the film. He acknowledges in the credits all the people who had donated.

*The Dirty War* opens with scenes shot in the US of “patient dumping,” by which patients, discharged from hospital in the middle of the night—one was severely disabled, another had had open heart surgery just nine days earlier—are thrown onto the streets or into some refuge without so much as informing the care workers, much less asking for their consent. It is nothing short of barbaric. This was in order to make way for new patients and additional income.

Switching to Britain, a homeless charity says this is happening here as hospitals need a rapid turnover of patients in order to make a profit.

Pilger shows that the creeping privatisation of the NHS in Britain meant an early death for a worker when a private ambulance came with a non-functioning defibrillator and was unable to contact anyone at the company's call centre to obtain another. In another case, in which the NHS had subcontracted a surgical procedure to a private hospital, the patient had to be blue lighted [rushed by ambulance] to an NHS hospital because, when things go wrong, the private hospital

has no back-up facilities. The writer-director points out that the system designed to give us all “Freedom from Fear” has been attacked by every political party on behalf of big business.

Privatisation by stealth began in the 1980s under Conservative Prime Minister Margaret Thatcher, who commissioned a report from McKinsey’s, the consultants, that led to the creation of the “internal market” in 1991. In 1988, Conservative MPs Oliver Letwin and John Redwood had proposed a switch to an insurance-based system, in a pamphlet titled, “Britain’s Biggest Enterprise: ideas for radical reform of the NHS.”

But it was Tony Blair’s Labour government that set it all in motion with the Private Finance Initiative (PFI), whereby the private sector built, owned and operated hospitals, using private finance. So expensive were these new hospitals, despite being considerably smaller than the ones they replaced, that many other hospitals were closed, and land was sold to pay for them. Despite this, the commissioning trusts were soon in financial distress. Since they could not be allowed to fail, the non-PFI trusts were sacrificed to bail out the PFI hospitals.

After 2010, the “reforms” speeded up. David Cameron’s Conservative-Liberal Democrat coalition escalated the privatisation process, introducing the disastrous 2012 Health and Social Care Act, removing the duty of the Health Secretary to “provide” health care for the population and “freeing up providers to innovate”—that is, opening the door to private healthcare companies and management consultants.

*The Dirty War* shows privatisation continuing under the Conservative government of Boris Johnson, with Matthew Hancock, the current health secretary, waxing lyrical about a smartphone self-diagnosis app called Babylon: no doubt a mechanism for eliminating whole swathes of GPs and nurses. A Babylon spokesperson has the gall to tell Pilger its diagnoses are “100 percent safe, but not all of the time.”

There is a revolving door between government, public officials and the private health care sector. Alan Milburn, Labour’s Secretary of State for Health, on leaving government in 2013, became chair of PricewaterhouseCoopers’s UK Health Industry Oversight Board, whose purpose is to engineer the privatisation of the NHS, and help PwC increase its share of the “health market.” He also joined the private equity firm Bridgepoint Capital, whose activities include financing private health care companies providing services to the NHS, including Care UK.

In a sign of the NHS’s intended trajectory, its current head is Simon Stevens, who spent 10 years as a senior executive at UnitedHealth Group in the US, becoming CEO of UnitedHealthcare’s \$30 billion Medicare business.

Pilger makes clear that the dirty war on the NHS is aimed at giving free rein to the corporate sector, who cannot wait to get their hands on the service’s £120 billion a year funding, with author and Spinwatch campaigner Tamasin Cave describing the NHS as a “£120 billion opportunity” for the powerful healthcare corporations. It will mean a healthcare system that will deliver profits, not treatment and care for those who need it.

The writer-director illustrates this graphically, pointing to what happened at the privatised Hinchbrook Hospital, which in 2012 was put in “special measures” and eventually returned to the NHS after just three years of a supposed 10-year contract.

In a very moving scene, one of the senior nurses, who had worked for 24 years in the hospital before being sacked by the private company running it, explains that putting profit before patients

changes the relationship between the clinical staff and their patients. It means cutting costs, working long, unsafe hours, closing down hospital and GP services, increased waiting times and not addressing patients’ clinical, social and personal needs.

She is not alone. Doctors, nurses, academics and campaigners all warn Pilger about the risks involved in the NHS becoming a “two-tier” system, with the free NHS providing only a minimal service.

Now, with Johnson seeking Brexit-related trade discussions with the US that include plans to “sell out” the NHS as part of any deal, there is the added danger that the NHS will replicate the disastrous US system, where some 87 million people either have no healthcare insurance or healthcare insurance that demands unaffordable co-payments.

According to a leaked transcript of the US-UK discussions, a Department of International Trade official reassured a US trade representative, writing, “Wouldn’t want to discuss particular health care entities at this time,” and, “you’ll be aware of certain statements saying we need to protect our needs; this would be something to discuss further down the line.”

So, although the Johnson government has publicly pledged that the NHS is not “on the table” in any post-Brexit trade deal with the Trump administration, selling it off “would be something to discuss” later.

Pilger says that no one in the Conservative government responded to his request for an interview. There is a short clip of Labour’s Shadow Secretary of State for Health, Jon Ashworth, making the bald—and unconvincing—claim that a Labour government will end the privatisation of the NHS.

*The Dirty War on the NHS* ends with a scene that drew gasps from the audience: a visit to a US free healthcare initiative known as a Remote Area Medical (RAM), run by volunteer clinical staff in Wise, Virginia, a small town in the Appalachian Mountains where there are no healthcare facilities.

RAM provides pop-up medical clinics delivering free dental, vision and medical care to those without healthcare insurance. Stan Brock, a Londoner, originally established it in the 1980s to treat people in the developing world, but latterly treated those in need of health care in the US.

The message was unmistakable. This is the future in Britain if the dirty warriors have their way and the NHS becomes an insurance-based system.

This deeply moving film should be seen by everyone. It not only provides the most convincing case for socialised healthcare. It points to the better world that would be made under a system where the goods and services so essential to humanity are produced based on social need, not profit, and made available to all.



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