

Pandemic death toll in Europe rises to 19,000 as savaged health care systems are overwhelmed

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28 March 2020

Coronavirus deaths surged in Europe yesterday, with several countries recording their highest daily totals to date. Throughout continental Europe 34,028 new cases were reported and 2,352 deaths. The total number who have perished in the continent in just six weeks since the first death is approaching 20,000 (18,754).

Italy saw 919 fatalities, taking the overall number to 9,134. The number of recorded infections climbed past China to 86,498. There are fears that the poorer southern regions of the country will soon be put under the same pressures suffered by the richer north.

Spain also suffered its worst 24-hour death toll of 769 deaths, bringing its total to 4,934. The number of cases increased from 56,188 to 64,059.

France saw 299 deaths, with the total now at 1,995. There are currently 32,964 cases of infection and 3,787 people are on life support, meaning nearly half of France's ventilator beds are occupied. The government has extended a national lockdown by two weeks.

The UK recorded an additional 185 deaths, bringing the toll to 759. Recorded cases of infection increased to 14,543, but this number is kept artificially low by a lack of testing. The spread of the disease is indicated by the fact that Prime Minister Boris Johnson, Health Secretary Matt Hancock and the Chief Medical Officer Chris Whitty all tested positive yesterday. Prince Charles is already infected.

The COVID-19 pandemic is preying on Europe's 500 million-plus population whose health care services have been decimated by years of government austerity and private sector looting. Johnson tested positive for COVID-19 immediately after taking part—outside the front door of 10 Downing Street—in a national demonstration of support for beleaguered doctors, nurses and support staff in the National Health Service (NHS).

Millions left their homes at 8:00 p.m. to cheer and bang pots and pans, after reports of hospitals full to overflowing and exhausted staff working without personal protective equipment and falling ill as a result—scenes already all too familiar in Italy, Spain and elsewhere in Europe.

That Johnson joined in was an act of monumental cynicism—not only because his inaction for weeks has allowed the spread of the coronavirus, but because the NHS has been slashed to the bone by his Conservative Party in government over the past decade, leaving it unable to meet the challenge it now faces.

Health care spending per head grew at a rate of just 0.6 percent per year in the period 2009-10 to 2016-17, compared to 5.4 percent between 1996-97 and 2009-10. In 2015, the NHS was told to find £22 billion of “efficiency” savings by 2020. Forty-seven percent of NHS trusts were in deficit in 2018-19 as well as 67 percent of acute hospital trusts. The overall shortfall is estimated at £5 billion.

The UK has fewer doctors and nurses per head than any developed economy bar Poland. Britain's 2.8 doctors and 7.9 nurses per thousand population compare to an OECD average of 3.6 doctors and 10.1 nurses per thousand. There are currently 44,000 vacancies for nursing jobs (12 percent of the necessary workforce) and 10,000 for doctors. Overall, the NHS has 100,000 vacancies, roughly one in every 12 jobs.

The number of hospital beds has dropped dramatically—17,230 were lost in just nine years between April-June 2010 and 2019, taking the total to 127,225. In 1987, there were 299,000 beds. Since then, the population has increased by over 9 million and grown older. The number of beds per thousand population has dropped from around four in 2000 to around 2.5 today.

Huge cuts to medical resources have resulted in chronically overcrowded hospitals—with occupancy of overnight general and acute beds regularly topping 95 percent over the winter. The NHS has a maintenance backlog, half of it considered safety-critical, totalling £6 billion.

In France, the health service has likewise been gutted by at least three decades of cuts and so-called “modernisation” efforts. Between 2000 and 2015, the number of hospital beds was reduced by around 15 percent. Approximately 64,000 inpatient beds were lost in the 13 years between 2003 and 2016.

After years of budget cuts, nearly half (48 percent) of French hospitals were running a deficit in 2016, and between 2002 and 2012, the indebtedness of public health care establishments tripled.

A 2018 health bill demanded €960 million of savings, with a further €910 million demanded last year. A new health bill, passed by the French Senate in July 2019, aims to make a further €3.8 billion of “savings” by 2022.

French medical workers at over 200 facilities took strike action on multiple occasions last year in opposition to this devastating assault on the health service and against attacks on their pay and working conditions.

In Italy, the government reduced public health financing by €900 million in 2012, €1.8 billion in 2013 and another €2 billion in 2014. In 2016, 18 out of the 20 Italian regions exceeded their annual health budget within the first half of the year.

The health service in Italy has seen staff numbers drop 6.5 percent between 2009 and 2016, from 693,716 to 648,663, and hospital bed numbers fall 11 percent, from 218,264 to 192,548. Wait times to see a specialist increased by between 20 and 27 days, depending on the complaint, between 2014 and 2017.

In Spain, health care funding per capita is around 15 percent less than the European Union (EU) average. In 2012, the Popular Party government of Mariano Rajoy adopted a new health care bill which would see €7 billion in cuts over two years. Dozens of public hospitals and other health care centres were privatised or closed and nearly 20,000 nursing positions wiped out.

Hospital bed numbers fell by around 4.26 percent between 2010 and 2016, dropping from 115,426 to 110,509. Spain ranks in 73rd place in the world for hospital beds, with only three beds per 1,000 people. Even prior to the pandemic, waiting times for key operations continued to grow, with patients in some parts of Spain having to wait up to 177 days before hospitals could

operate.

The consequences for the European working class have been brutal. The European Commission’s “Health at a Glance” report for 2018 notes: “While life expectancy increased by at least 2 to 3 years over the decade from 2001 to 2011 in all EU countries, the gains have slowed down markedly since 2011 in many countries particularly in Western Europe, increasing by less than half a year between 2011 and 2016.”

In words that sum up the terrible human cost of the slashing of public health services by governments of all political stripes, the report states, “More than 1.2 million people in EU countries died in 2015 from diseases and injuries that could have been avoided either through stronger public health policies or more effective and timely health care.”

Especially concerning in light of the coronavirus pandemic the report suggests: “This slowdown appears to have been driven by a slowdown in the rate of reduction of deaths from circulatory diseases and *periodical increases in mortality rates among elderly people due partly to bad flu seasons in some years*” (emphasis added).

This trend falls most heavily on the most oppressed sections of the working class. According to the same report, “On average across the EU, 30-year-old men with a low level of education can expect to live about 8 years less than those with a university degree.” For women, the gap is four years, “These gaps largely reflect differences in exposure to risk factors, but also indicate disparities in access to care.”

The COVID-19 pandemic is throwing the consequences of these years of health care cuts into sharp relief. Austerity was justified on the grounds that there was simply no money available to address pressing social needs. Now hundreds of billions have been made available by governments to corporations across the continent, proving that what has taken place is a class policy of social devastation in service to the profits of a tiny elite. The working class must respond with their own class programme of socialist internationalism.



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