The politics of health inequalities in Scotland and the UK

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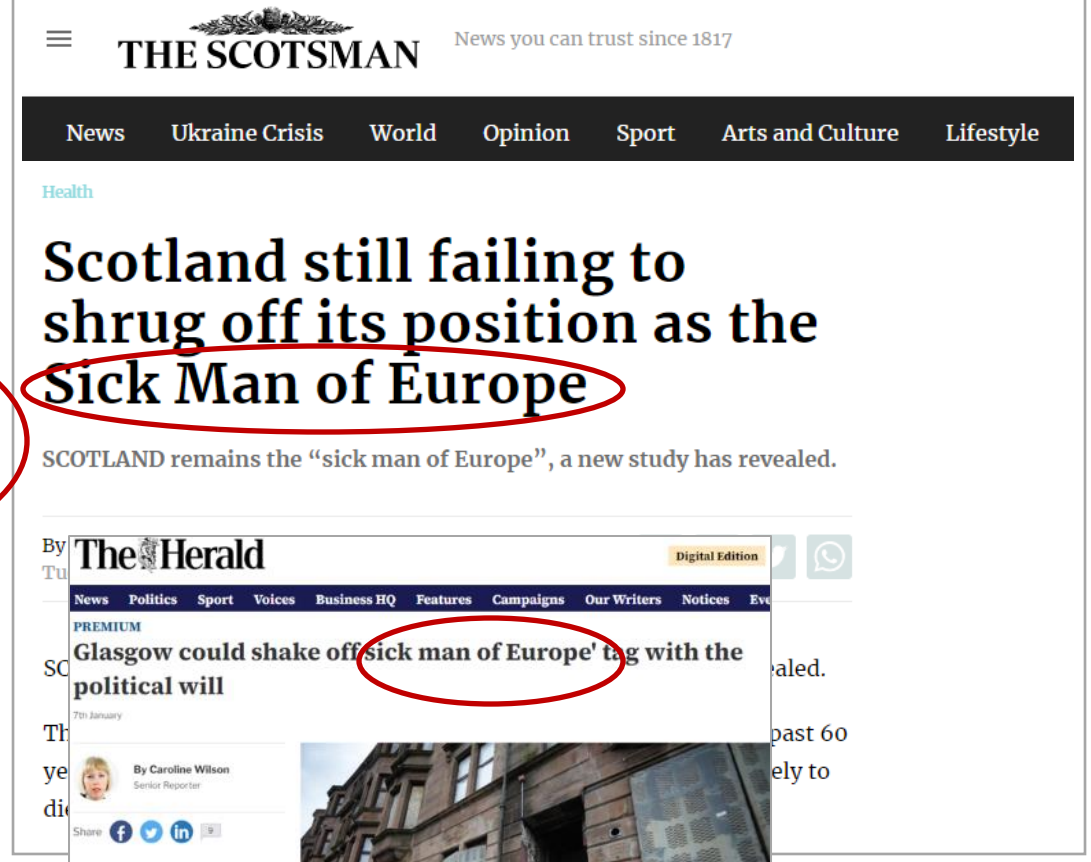
Today: health inequalities **then** and **now**

- '**Then**': health and health inequalities historically
- '**Now**': health and health inequalities in past 16 years
- Underlying theme: importance of **political** determinants of health & health inequalities…
- …leading to required **political (policy) responses** (briefly)
- Note: principally talking about **socioeconomic** inequalities in **mortality/life expectancy** today
- **Drug deaths** highly relevant to all this

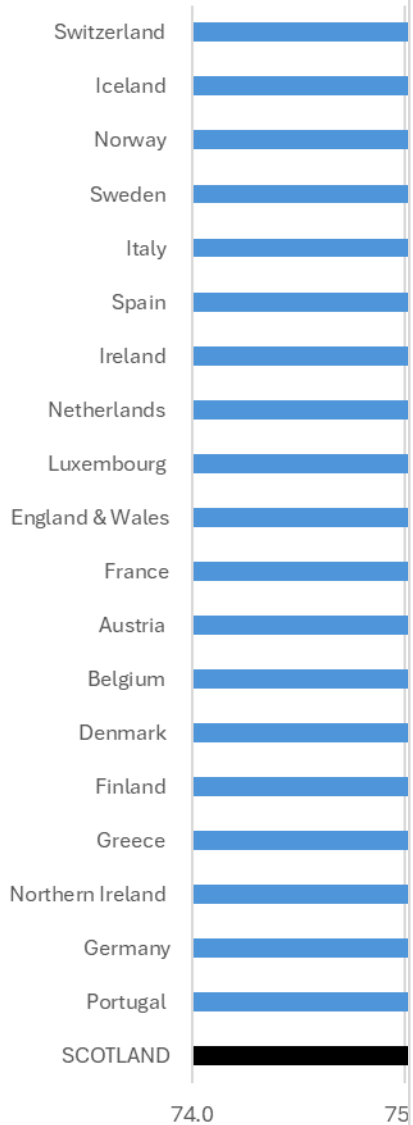
‘Then’: health & health inequalities in Scotland (historically)

Background: Scotland's health



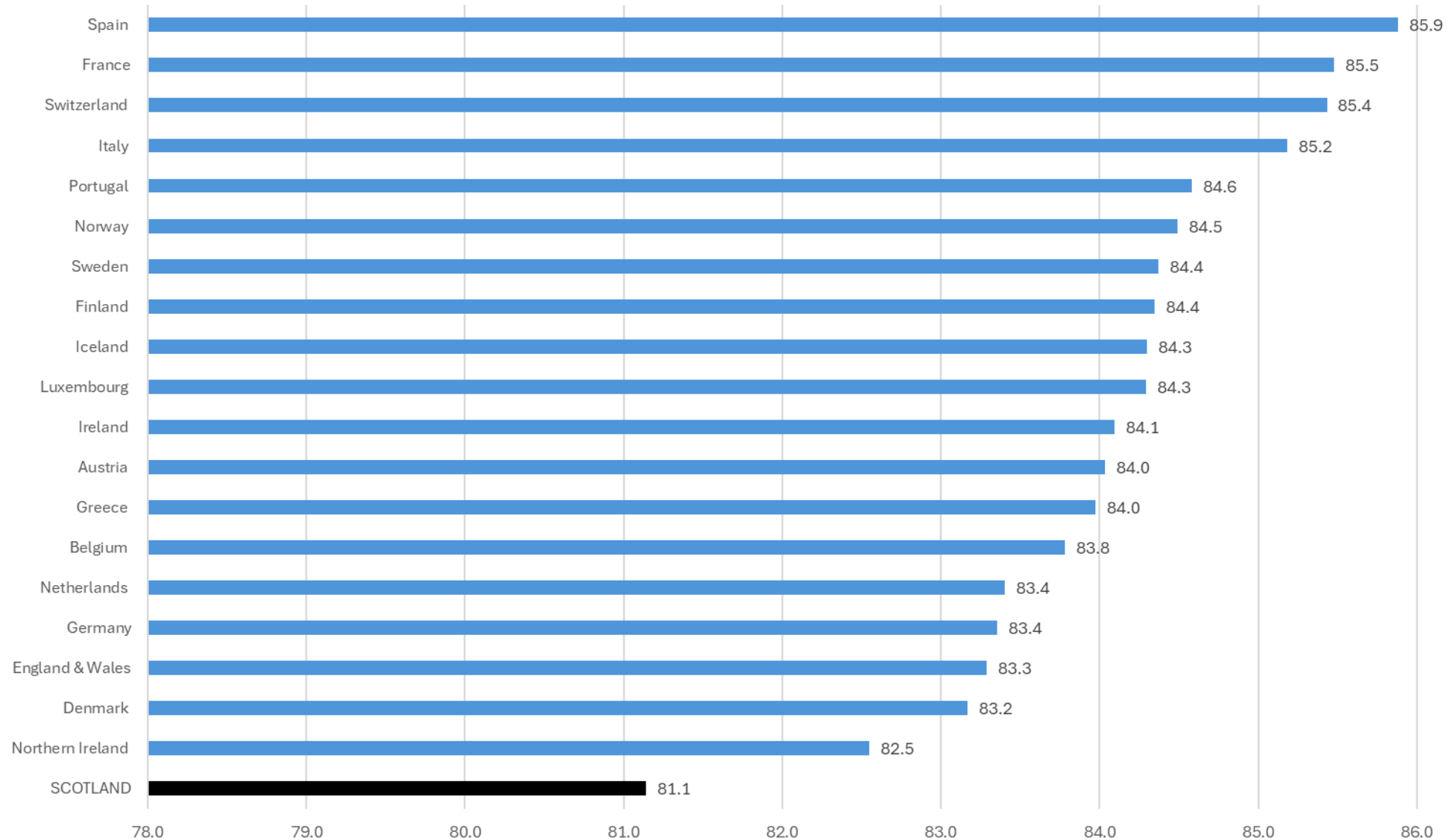
MALE life expectancy at birth 2017-2019

Source: Human Mortality Database



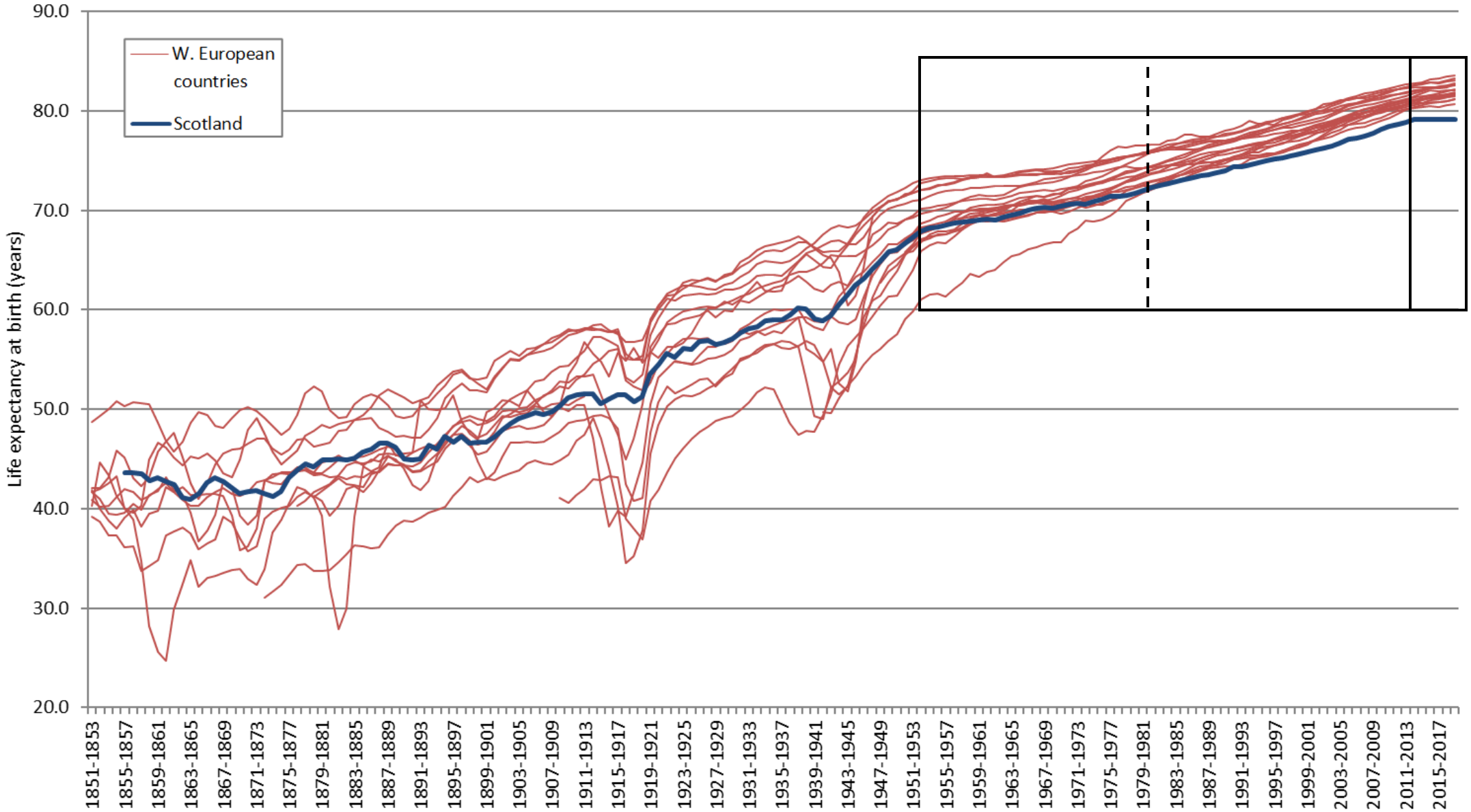
FEMALE life expectancy at birth 2017-2019

Source: Human Mortality Database



Male & female life expectancy:
Scotland and 18 other Western European Countries, 1851-2019

Source: Human Mortality Database



Understanding national trends

- Life expectancy is low because inequalities are wide

Lifespan variation (*eƒ*) 2017/19, W. European countries - MALES AND FEMALES

Source: calculated from Human Mortality Database (HMD) data - www.mortality.org.

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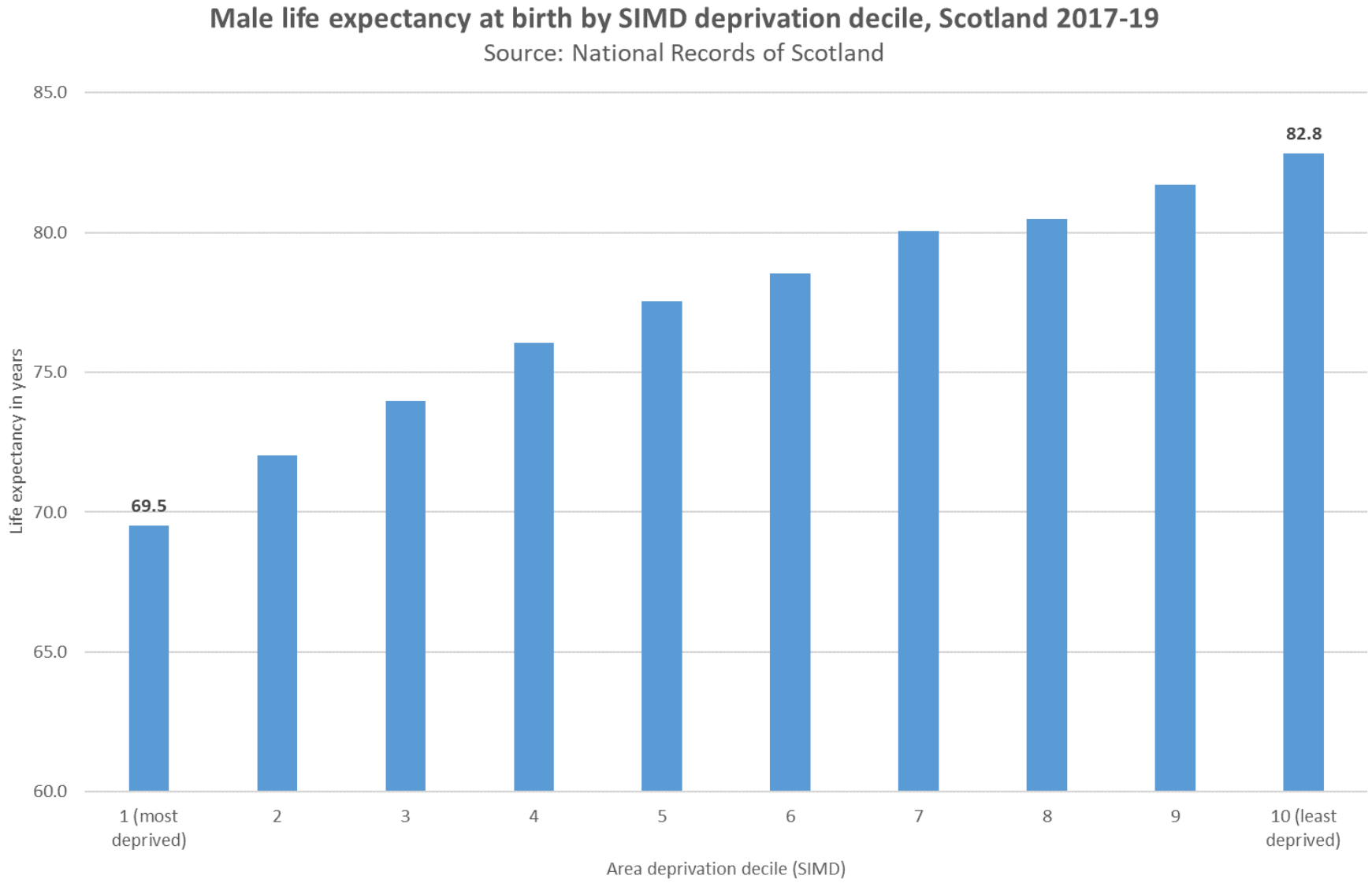
Is Scotland still the UNEQUAL man of Europe'?

It was a tag infamously given to the UK in the 1970s to reflect a period of economic and social challenges facing the country under the administrations of Ted Heath and Harold Wilson.

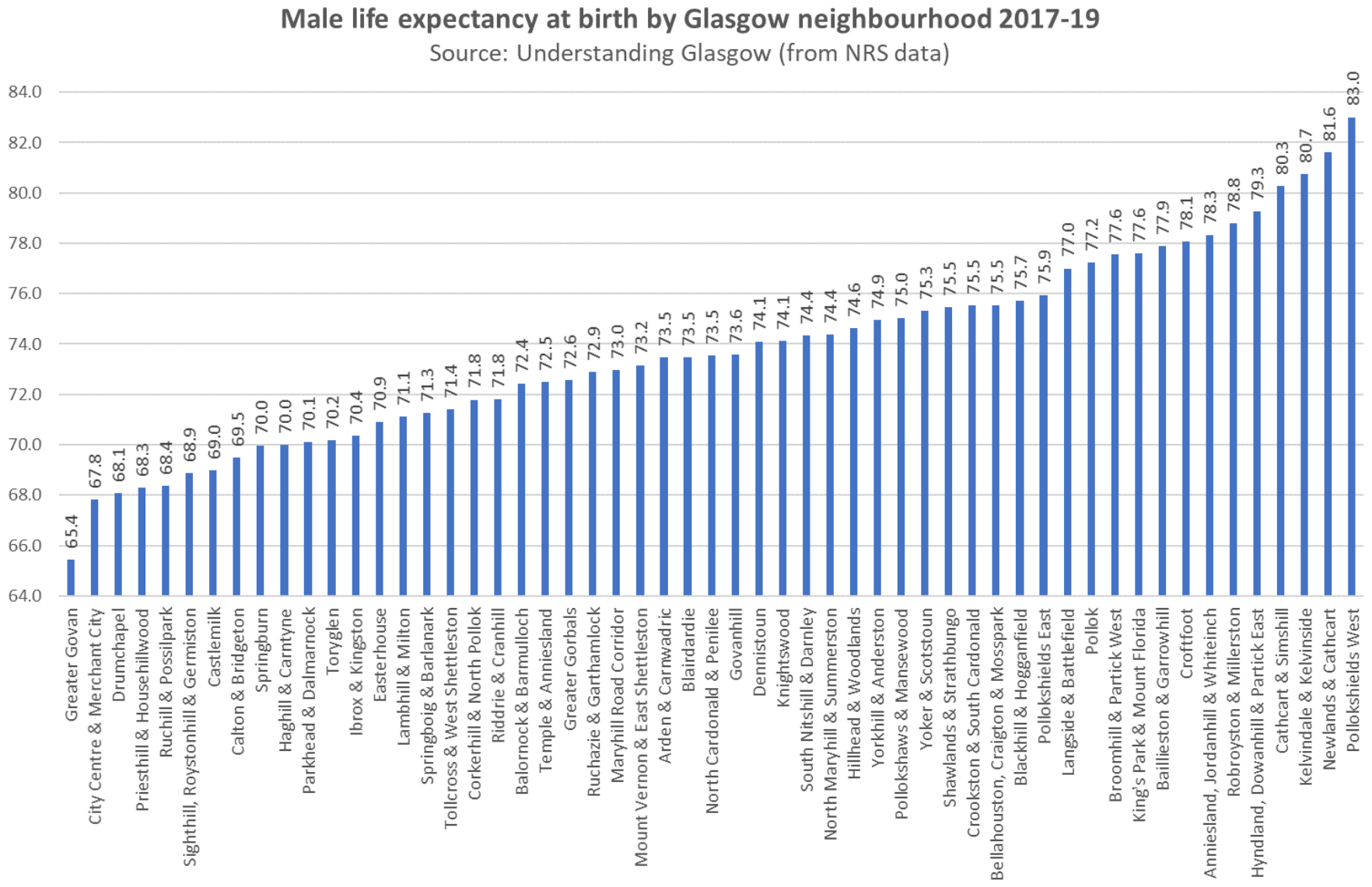
By The Newsroom
Friday, 23rd September 2016, 11:27 am
Updated Wednesday, 5th October 2016, 2:32 pm

The number of Scots who smoke is declining. Picture: Ian Rutherford/TSPL

Health (life expectancy) inequalities - Scotland



Health (life expectancy) inequalities - Glasgow



Understanding national trends

- Life expectancy is low because inequalities are wide
- And health inequalities have widened considerably in that period (1979→)
- They have widened because society has become fundamentally more unequal in that period

Income inequality trends, GB/UK*, 1961-2010

Source: Institute of Fiscal Studies (IFS)

1979

Gini coefficient of equivalised inequality in income after tax and before housing costs

0.36
0.34
0.32
0.30
0.28
0.26
0.24
0.22
0.20

1961 1962 1963 1964 1965 1966 1967 1968 1969 1970 1971 1972 1973 1974 1975 1976 1977 1978 1979 1980 1981 1982 1983 1984

Ye

Gini coefficient of income inequality, W. European OECD countries 2018

Source: OECD

Gini coefficient

0.4
0.35
0.3
0.25
0.2
0.15
0.1
0.05
0

0.25
0.37

Iceland (2017) Belgium Norway Denmark Finland Sweden Austria Germany Ireland Netherlands France Greece Switzerland Portugal Luxemburg Italy Spain Great Britain

Sighthill Link Towpath Project

This project has been funded by **SUSTRANS (Places for Everyone)** *with the help of* **Scottish Canals** *and* **Glasgow City Council**

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Income inequality trends, GB/UK*, 1961-2010

Source: Institute of Fiscal Studies (IFS)

1979

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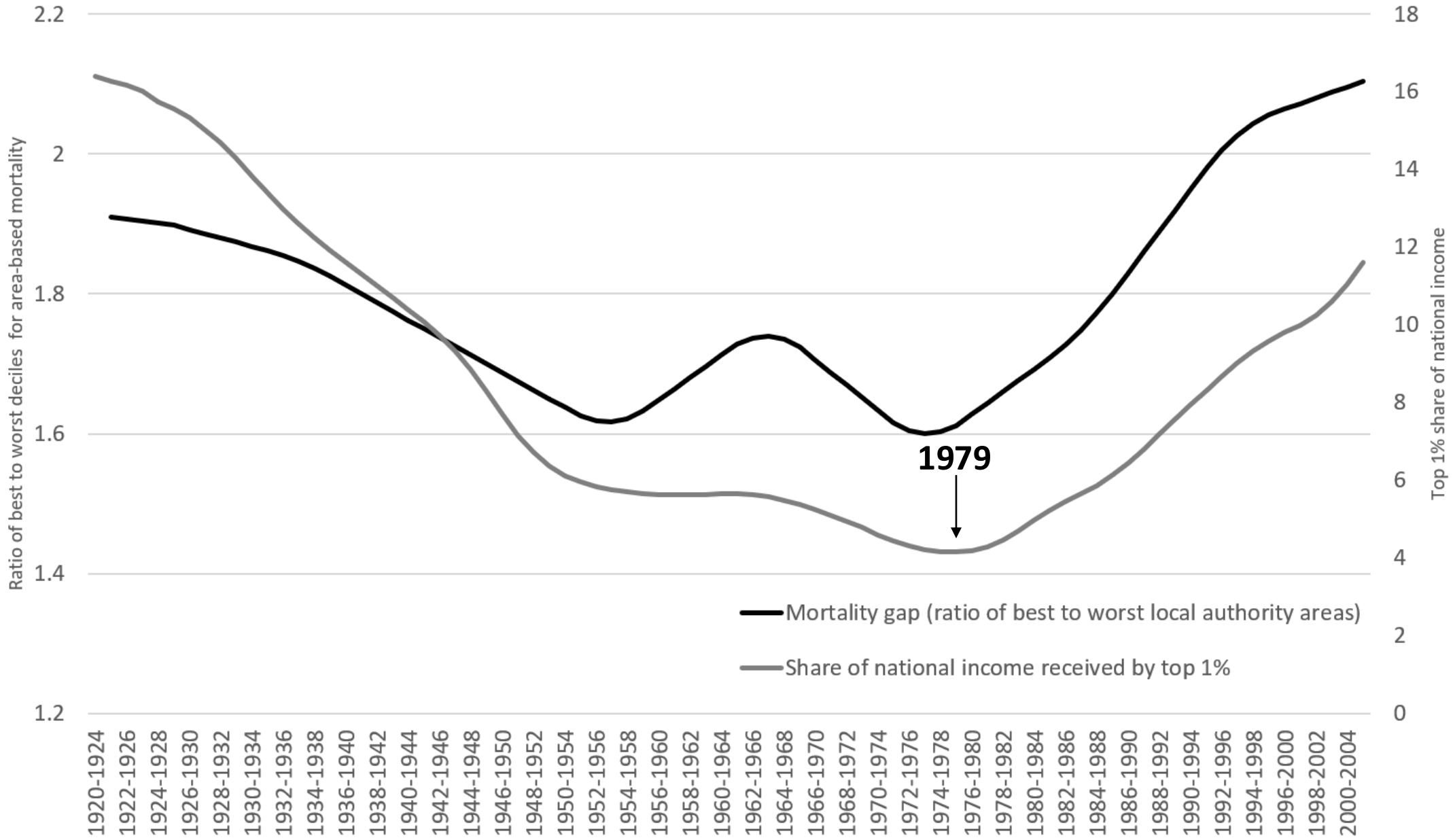
0.25
0.37

Iceland (2017) Belgium Norway Denmark Finland Sweden Austria Germany Ireland Netherlands France Greece Switzerland Portugal Luxemburg Italy Spain Great Britain

Trends in income inequality (share of national income received by top 1%) and mortality inequality (gap between 'best' and 'worst' local authority area), Great Britain 1920-2005

Source: Thomas et al. 2010 and Dorling, 2010



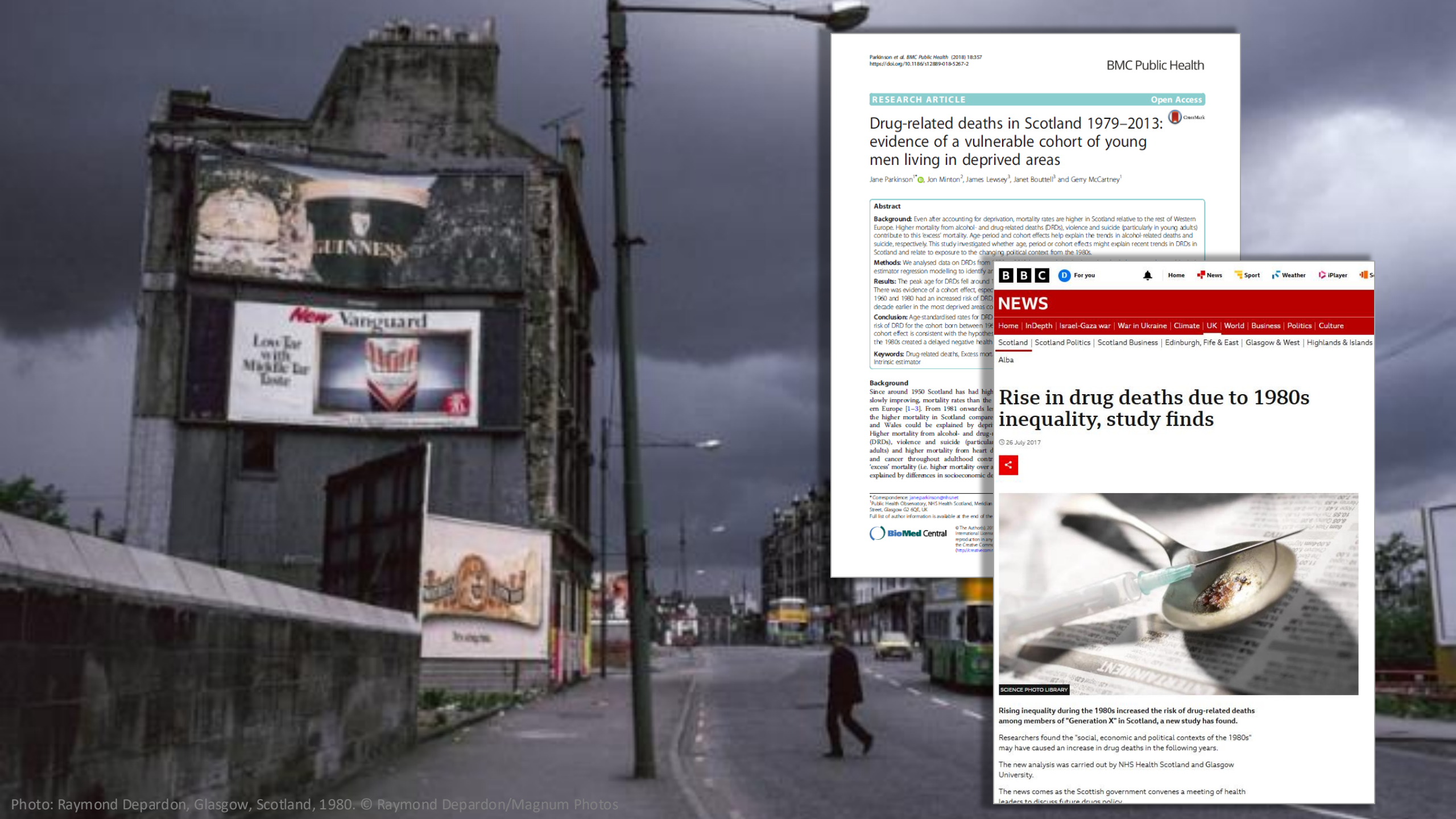


Photo: Raymond Depardon, Glasgow, Scotland, 1980. © Raymond Depardon/Magnum Photos

Parkinson et al. BMC Public Health (2018) 18:357
https://doi.org/10.1186/s12889-018-5267-2

BMC Public Health

RESEARCH ARTICLE Open Access

Drug-related deaths in Scotland 1979–2013: evidence of a vulnerable cohort of young men living in deprived areas

Jane Parkinson[1*], Jon Minton[2], James Lewsey[3], Janet Bouttell[3] and Gerry McCartney[1]

Abstract

Background: Even after accounting for deprivation, mortality rates are higher in Scotland relative to the rest of Western Europe. Higher mortality from alcohol- and drug-related deaths (DRDs), violence and suicide (particularly in young adults) contribute to this 'excess' mortality. Age-period and cohort effects help explain the trends in alcohol-related deaths and suicide, respectively. This study investigated whether age, period or cohort effects might explain recent trends in DRDs in Scotland and relate to exposure to the changing political context from the 1980s.

Methods: We analysed data on DRDs from
estimator regression modelling to identify ar

Results: The peak age for DRDs fell around
There was evidence of a cohort effect, espec
1960 and 1980 had an increased risk of DRD
decade earlier in the most deprived areas co

Conclusion: Age-standardised rates for DRD
risk of DRD for the cohort born between 19
cohort effect is consistent with the hypothes
the 1980s created a delayed negative health

Keywords: Drug-related deaths, Excess mort
Intrinsic estimator

Background

Since around 1950 Scotland has had high
slowly improving, mortality rates than the
ern Europe [1–3]. From 1981 onwards les
the higher mortality in Scotland compare
and Wales could be explained by depri
Higher mortality from alcohol- and drug-
(DRDs), violence and suicide (particular
adults) and higher mortality from heart d
and cancer throughout adulthood contr
'excess' mortality (i.e. higher mortality over a
explained by differences in socioeconomic de

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Full list of author information is available at the end of the

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Alba

Rise in drug deaths due to 1980s inequality, study finds

26 July 2017

Rising inequality during the 1980s increased the risk of drug-related deaths among members of "Generation X" in Scotland, a new study has found.

Researchers found the "social, economic and political contexts of the 1980s" may have caused an increase in drug deaths in the following years.

The new analysis was carried out by NHS Health Scotland and Glasgow University.

The news comes as the Scottish government convenes a meeting of health leaders to discuss future drugs policy

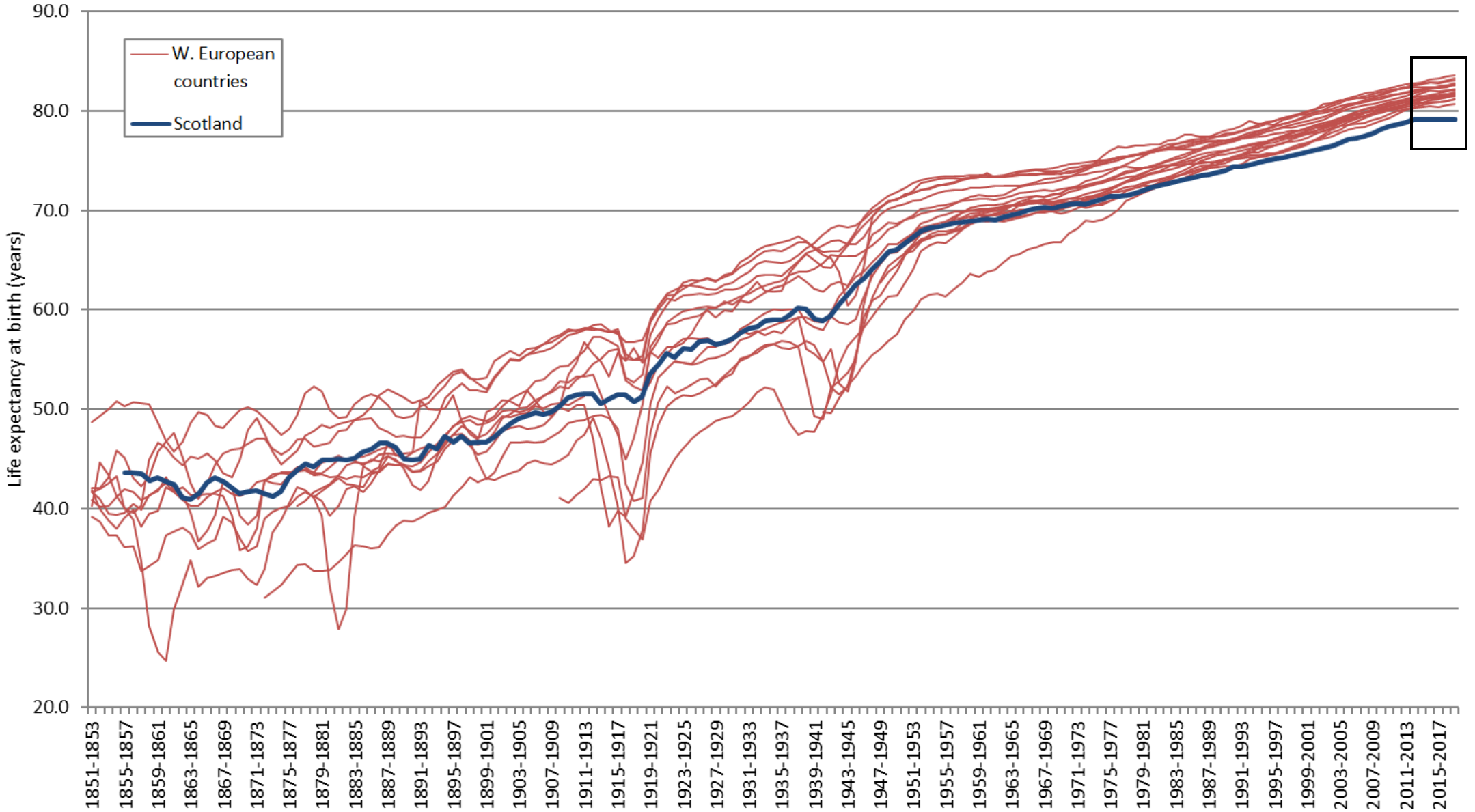
Understanding national health trends

- So, Scotland:
  - lowest life expectancy in Western Europe…
  - … linked to slower improvement…
  - … linked to widening (now widest) health inequalities…
  - … linked to widening societal (socioeconomic) inequalities…
  - …caused by government policies
- Drug deaths: both a consequence and contributor
- And 16 years ago, that was the end of the talk
- But things have changed profoundly since 2010
- We are now in a **new era** of inequalities (and not in a good way!)

‘Now’: health inequalities in the last 15 years

Male & female life expectancy:
Scotland and 18 other Western European Countries, 1851-2019

Source: Human Mortality Database



Background

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Health

Life expectancy progress in UK 'stops for first time'

By Alex Therrien
Health reporter, BBC News

25 September 2018 | Share

Life expectancy in the UK has stopped improving for the first time since 1982, when figures began.

Women's life expectancy from birth remains 82.9 years and for men it is 79.2, the figures from the Office for National Statistics, for 2015-17, show.

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Scottish life expectancy improvements stall

14 August 2019 | Share

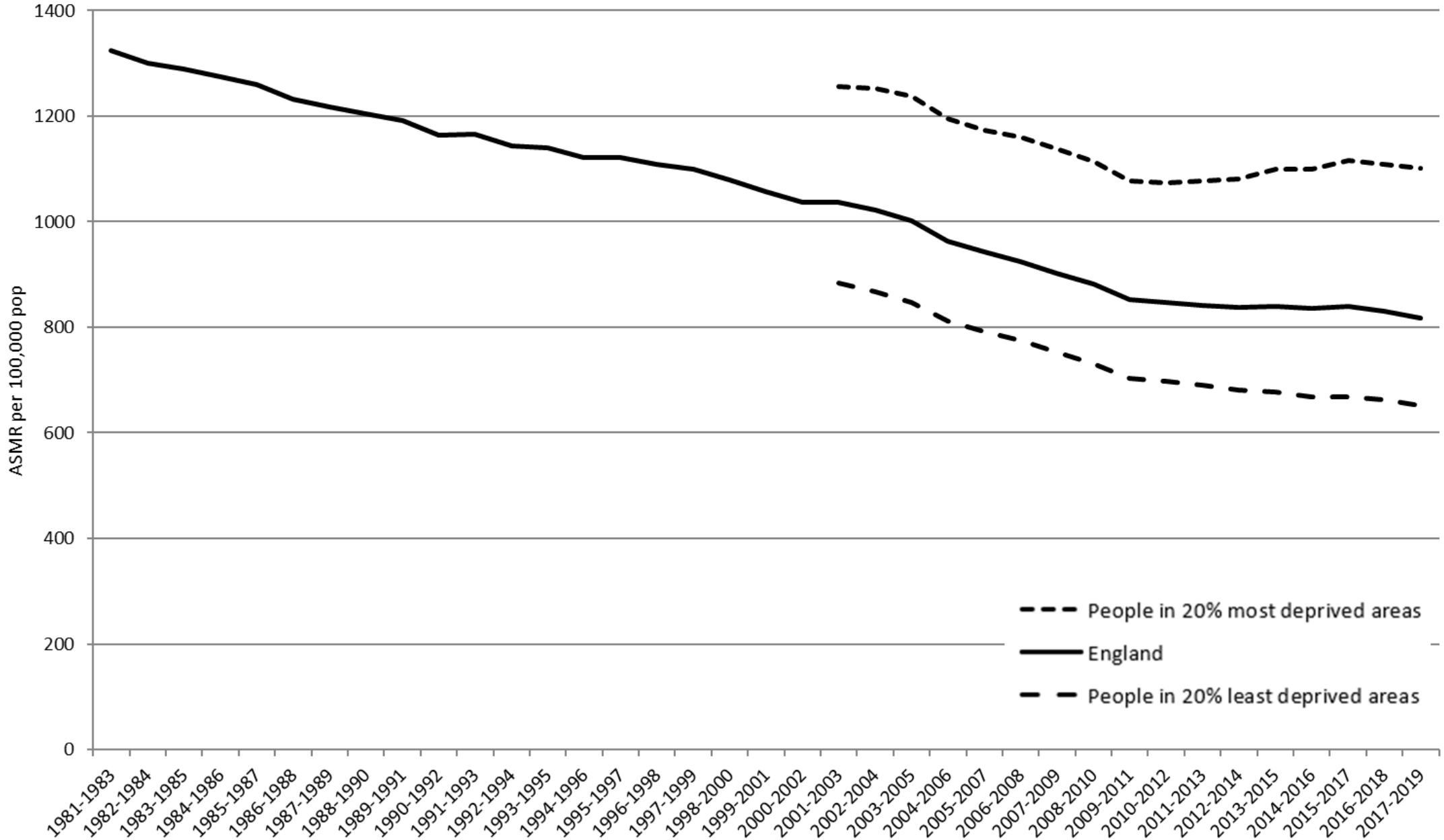
Although the population is aging, life expectancy is no longer showing clear progress

Life expectancy improvements have stalled, according to a report from the National Records of Scotland.

It said the change came after three decades in which Scottish residents have been

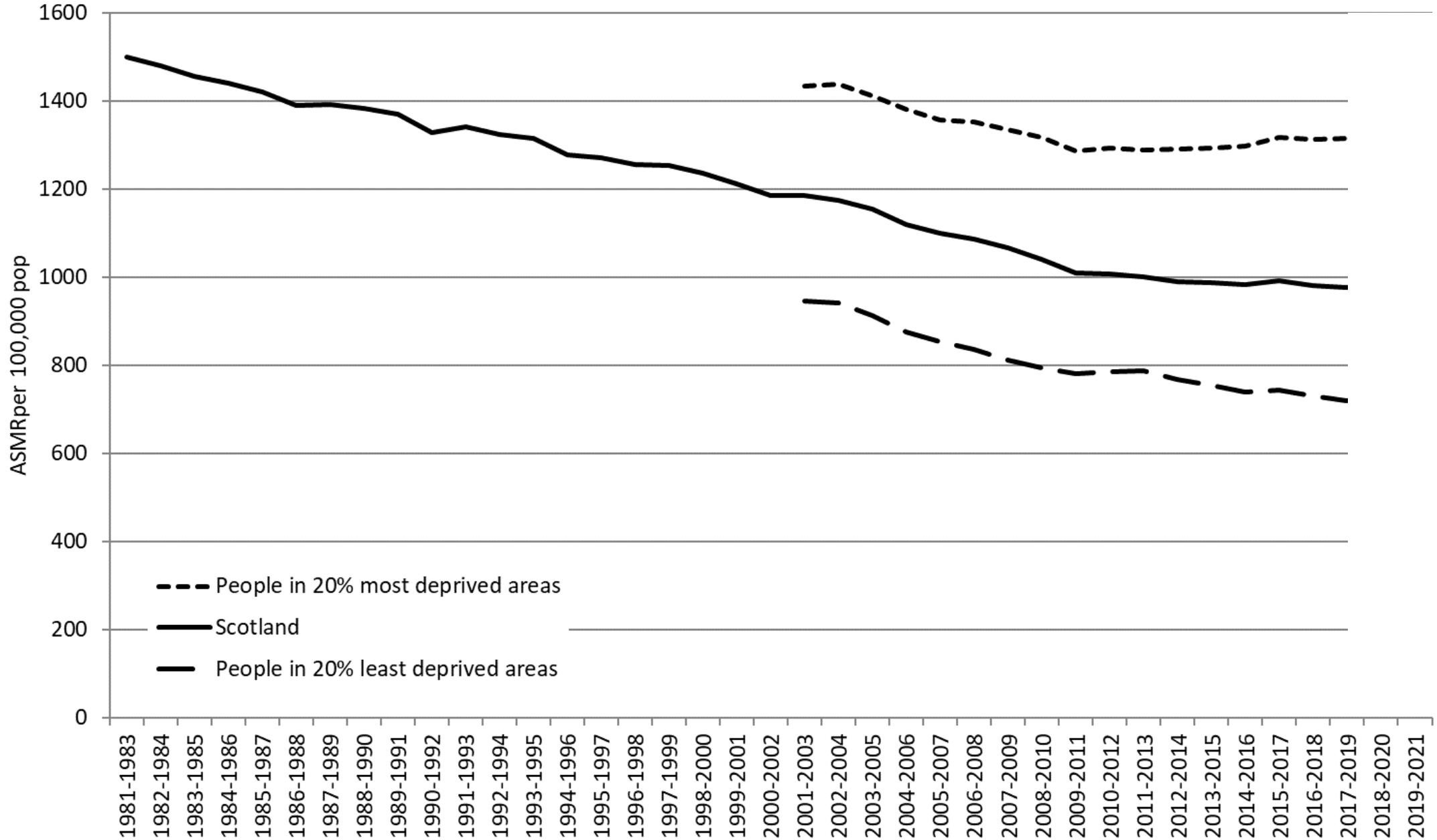
Age-standardised mortality rates, females, England 1981-2019

Source: Walsh & McCartney 2023



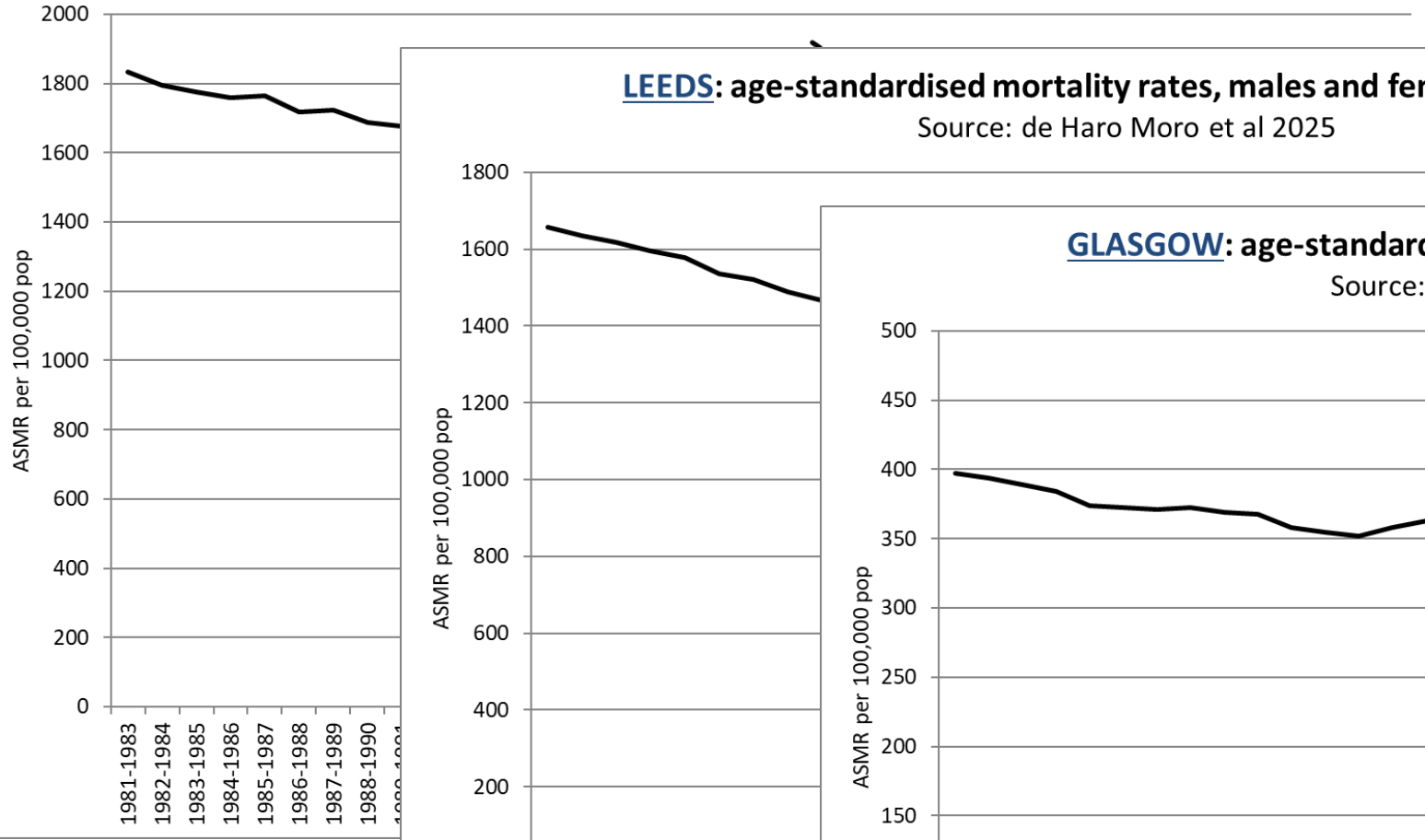
Age-standardised mortality rates, females, Scotland 1981-2021

Source: Walsh & McCartney 2023



LIVERPOOL: age-standardised mortality rates, males and females, all ages

Source: de Haro Moro et al 2025



LEEDS: age-standardised mortality rates, males and females, all ages

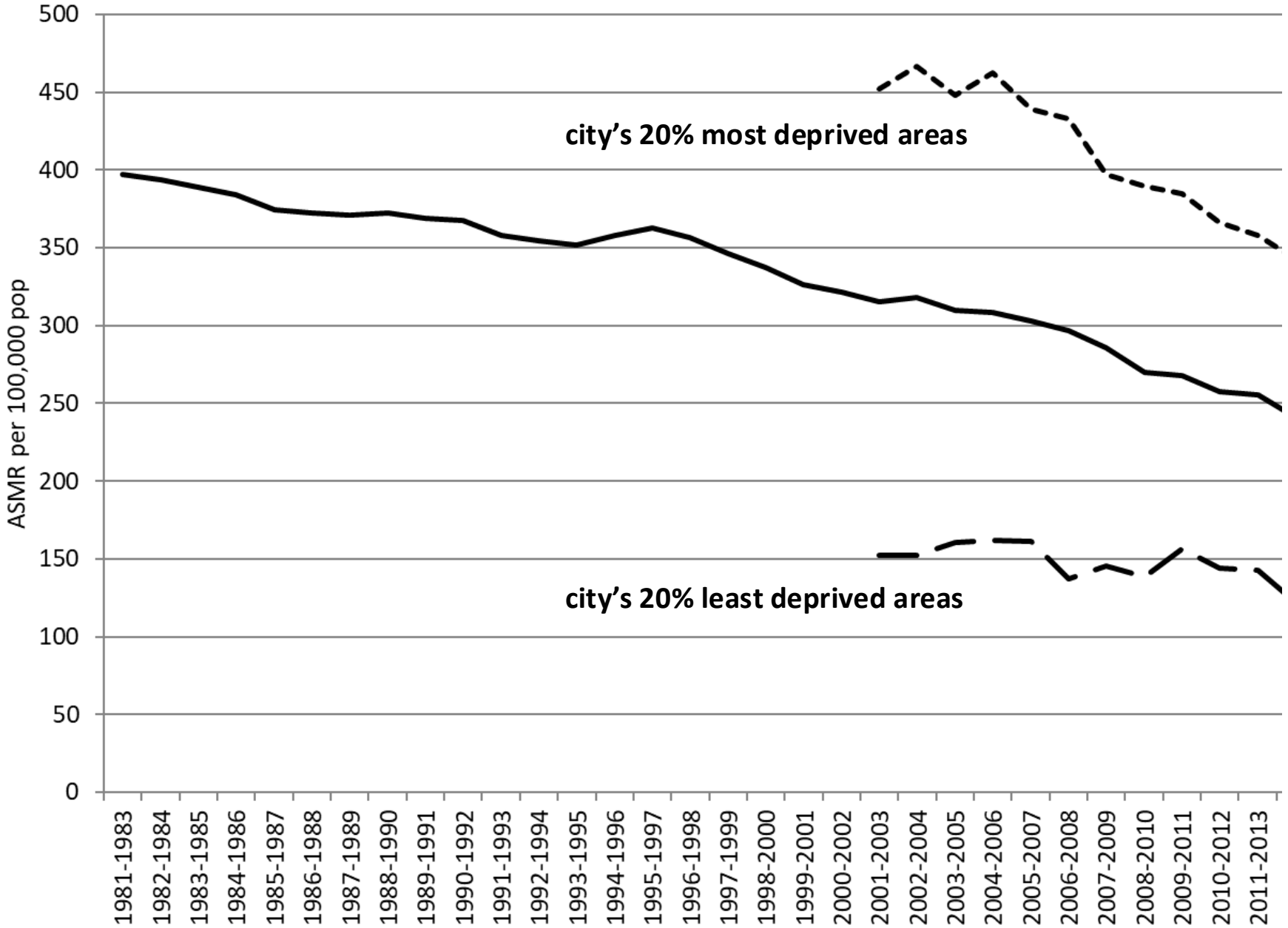
Source: de Haro Moro et al 2025

GLASGOW: age-standardised mortality rates, females, 0-64 years

Source: Walsh & McCartney 2023

GLASGOW: age-standardised mortality rates, females, 0-64 years

Source: Walsh & McCartney 2023



Age-standardised mortality rates, females, Scotland 1981-2021

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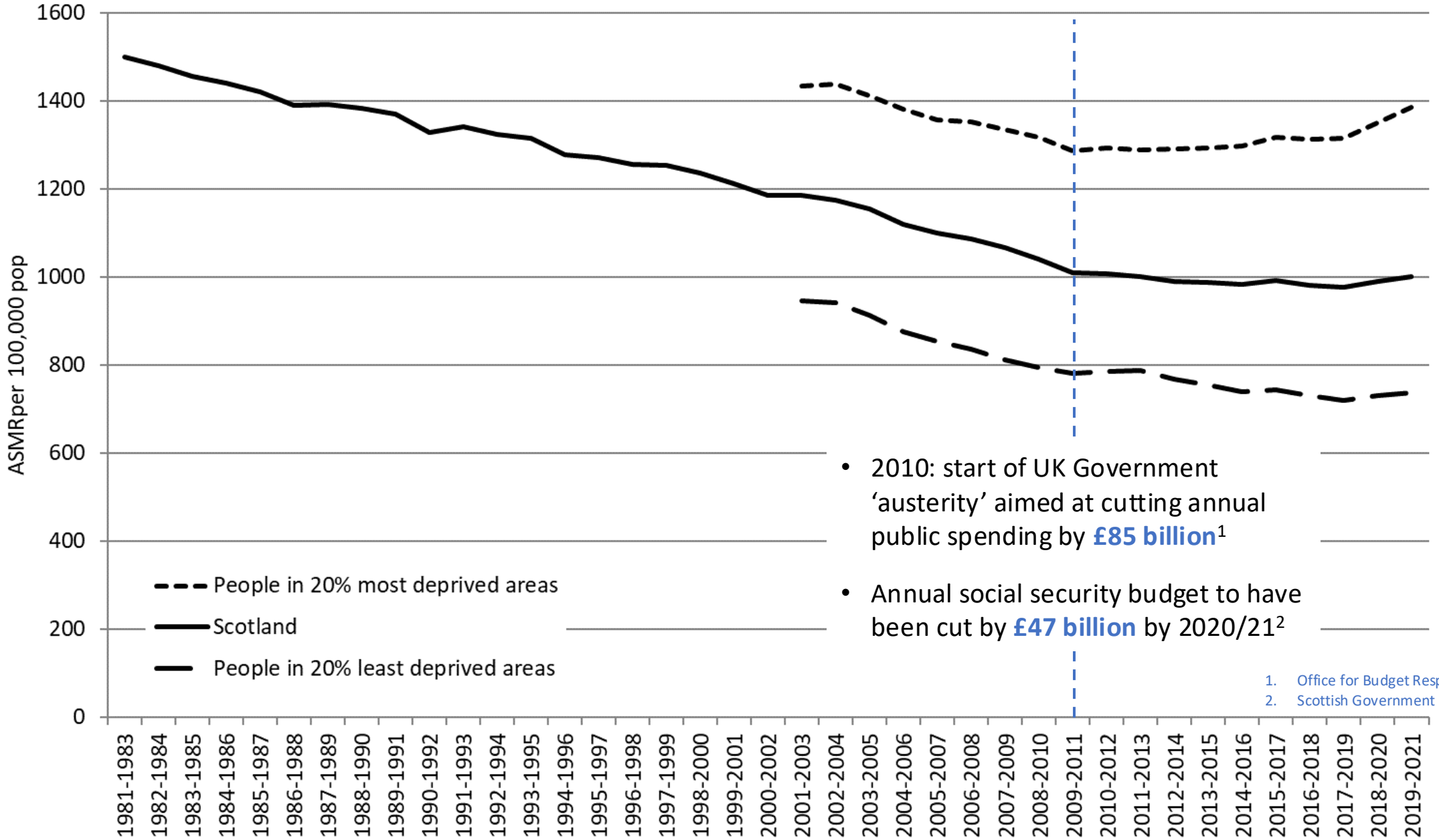

- 2010: start of UK Government 'austerity' aimed at cutting annual public spending by **£85 billion**[1]
- Annual social security budget to have been cut by **£47 billion** by 2020/21[2]

1. Office for Budget Responsibility 2013.
2. Scottish Government 2017

The evidence...

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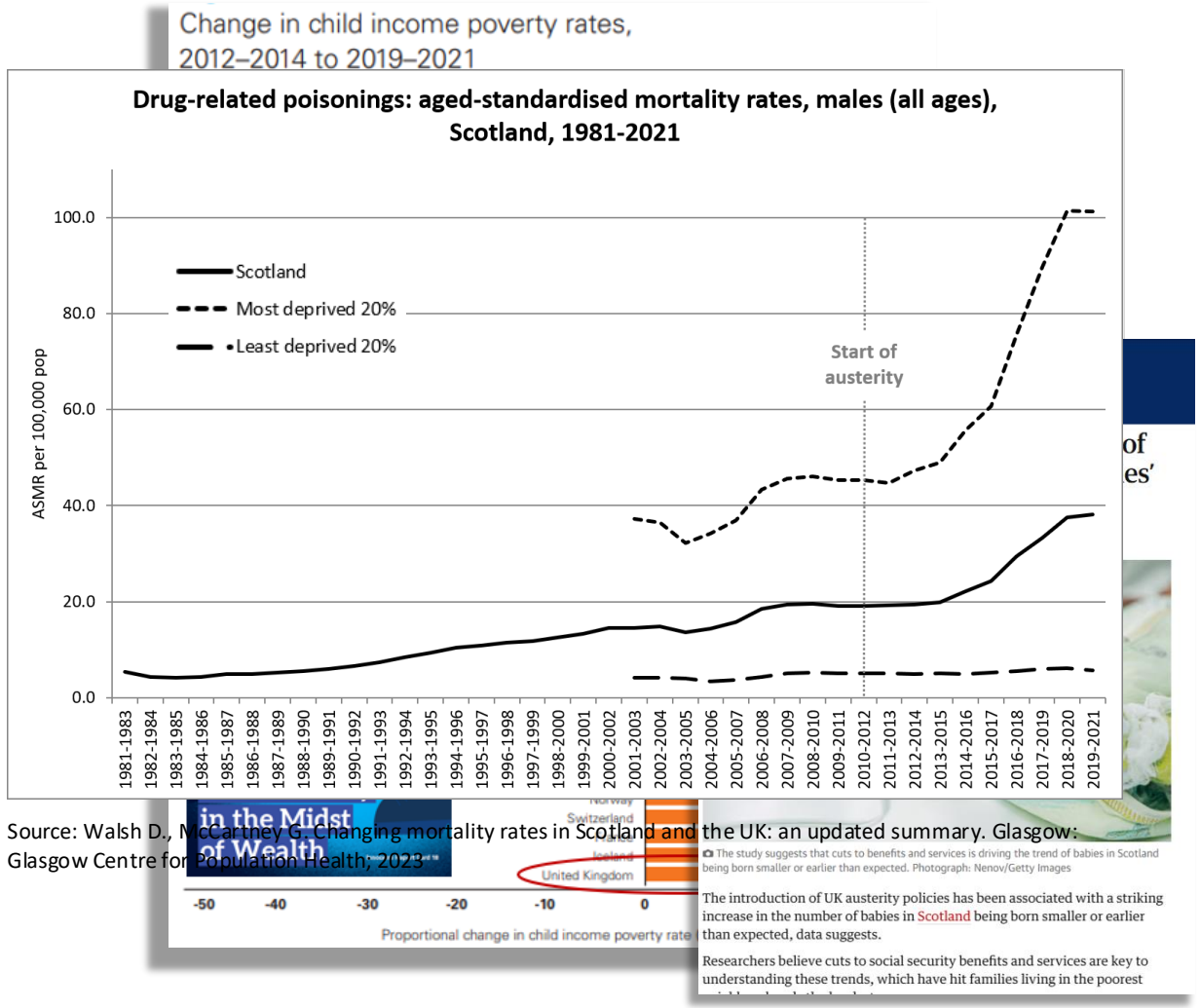
The evidence of an altered society

- Food banks
- Child poverty
- Healthy life expectancy
- Mental health trends
- Birth outcomes
- Mortality trends
  - **Including drugs deaths**



Source: Walsh D., McCartney G. Changing mortality rates in Scotland and the UK: an updated summary. Glasgow: Glasgow Centre for Population Health; 2023

Mortality changes and drug deaths

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https://doi.org/10.1093/eurpub/ckag076

Austerity policies and falling life expectancy in disadvantaged areas in Scotland: a pre-pandemic decomposition analysis

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Abstract

Previous decomposition analyses quantified the contribution of changes in age- and cause-specific mortality to the adverse changes in life expectancy observed in the UK since 2012. We extend those analyses by stratifying by socioeconomic deprivation. Between 2012–14 and 2017–19, changes in life expectancy were substantially worse in Scotland's 20% most deprived areas. Negative impacts on life expectancy were found for most age groups and causes of death, reversing improvements between 2001–03 and 2012–14. This is consistent with the evidence of the role of UK Government 'austerity' policies in reversing previous health improvements among the UK's poorest populations.

Introduction

Note: additional supporting references for this paper are included in the online appendix.

Profound changes to life expectancy have been observed across the UK since the early 2010s. In all four nations (England, Scotland, Northern Ireland, and Wales), long-term national-level improvements effectively ground to a halt, while in the poorest areas, life expectancy actually declined. These changes predate the COVID-19 pandemic and post-pandemic period of high inflation ('cost of living crisis') but have been made worse by both. A large body of evidence has demonstrated that UK Government 'austerity' policies, initiated in 2010 but still largely in place today, are the most likely cause of these changes [1]. In the UK context, austerity can be crudely defined as large-scale cuts in government spending, and evidence shows that a combination of cuts to the provision of vital public services and historically unparalleled reductions in social security provision have had profound effects on the health and mortality profile of the poorest in society. The causal pathways involved, relating to poverty and other key social determinants of health, are well understood and have been set out in detail elsewhere [1].

Key to our understanding of these effects was a set of decomposition analyses, published in 2020, which showed that the national-level stalling of improvement in life expectancy was driven by adverse changes in mortality—i.e. increased rates or slower improvement in rates—for almost *all* age groups and *all* major causes of death [2]. This was important in demonstrating that the overall changes to life expectancy were neither explained by changes in rates of specific, individual, causes of death nor by changes for particular age groups, as had been previously hypothesized; rather, the analyses showed that a common underlying factor affecting multiple, diverse, causes of death across different age groups was a more likely explanation [1]. These decomposition analyses were undertaken with Scottish mortality data; however, similar results were also shown elsewhere in the UK [3]. One weakness of the Scottish analyses was that they were not stratified by socioeconomic deprivation. This is an important limitation, given that we know that the changes to life expectancy have been demonstrably worse in poorer areas. The aim here, therefore, was to extend the analyses by comparing the contribution of age- and cause-specific mortality changes to life expectancy trends between the least and most deprived areas of Scotland to establish whether, and to what extent, those contributions were more pronounced in more disadvantaged areas.

Methods

We replicated the previously employed methodology [2], additionally stratifying by the least and most deprived 20% of the Scottish population using the Scottish Index of Multiple Deprivation (SIMD), a neighbourhood-level (c. 750 population) measure of relative socioeconomic deprivation, calculated from administrative data, and used in official government publications and resource allocation [4]. Different versions of SIMD were used for different time periods (Supplementary Table S1). We calculated period life expectancy (LE) at birth from National Records of Scotland mortality and population data, and then applied Arriaga's method of life expectancy decomposition [5], thereby estimating the contribution of different underlying causes of death, and different age groups, to changes in life expectancy over time, and between the most and least deprived 20% of Scottish neighbourhoods.

LE calculations were based on 5-year age groups, with the exceptions of the 0-4 (split into 0 and 1-4 years) and 90+ groups. For robustness, 3 years of data (e.g. 2001–03) were combined. Twenty-six major causes of death were used (25 for females, that is excluding prostate cancer), defined by the previously used ICD10 codes (Supplementary Table S2). The results are shown as the annualized change in LE in weeks per year.

Aside from stratification by deprivation, the only other difference to the original methodology was that we extended the period of analysis from 2017 to 2019. This updates the original analyses slightly but avoids the additional complication of factoring in the effects of the COVID-19 pandemic. Thus, we compared changes in LE in the period 2001–03 to 2012–14 with those in 2012–14 to 2017–19. The break between periods was based on previous estimates of when the LE trends in Scotland changed [2].

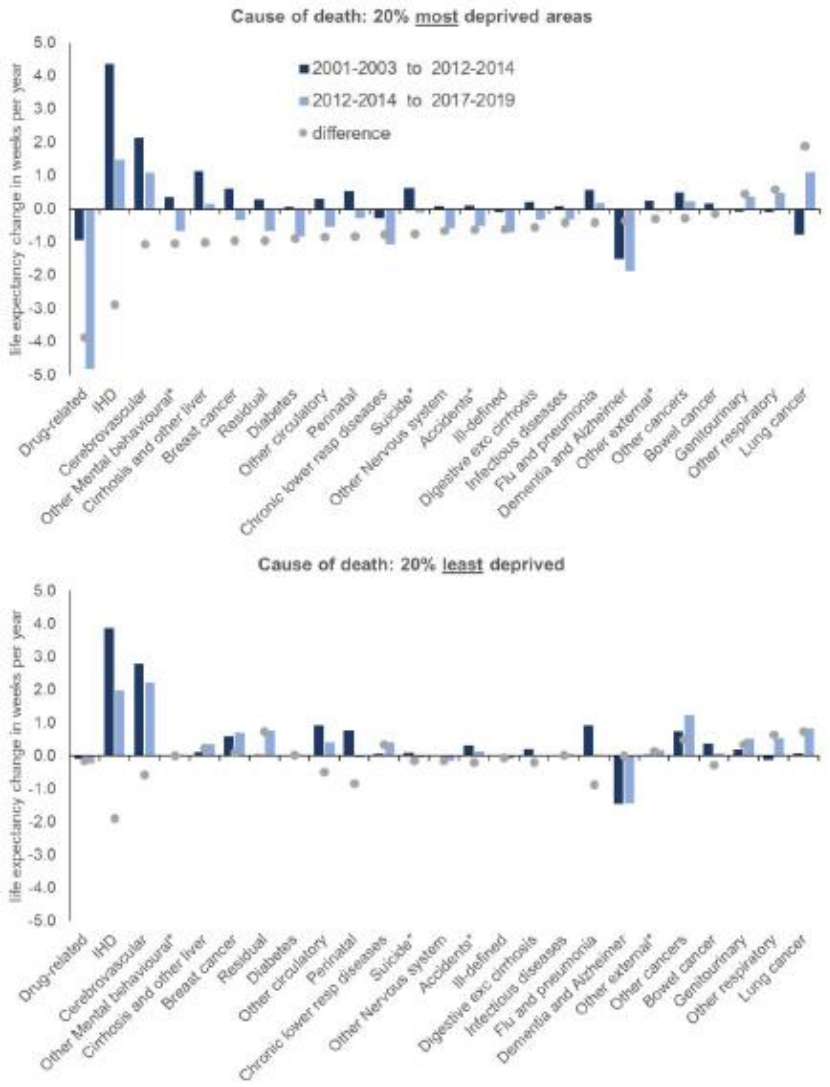
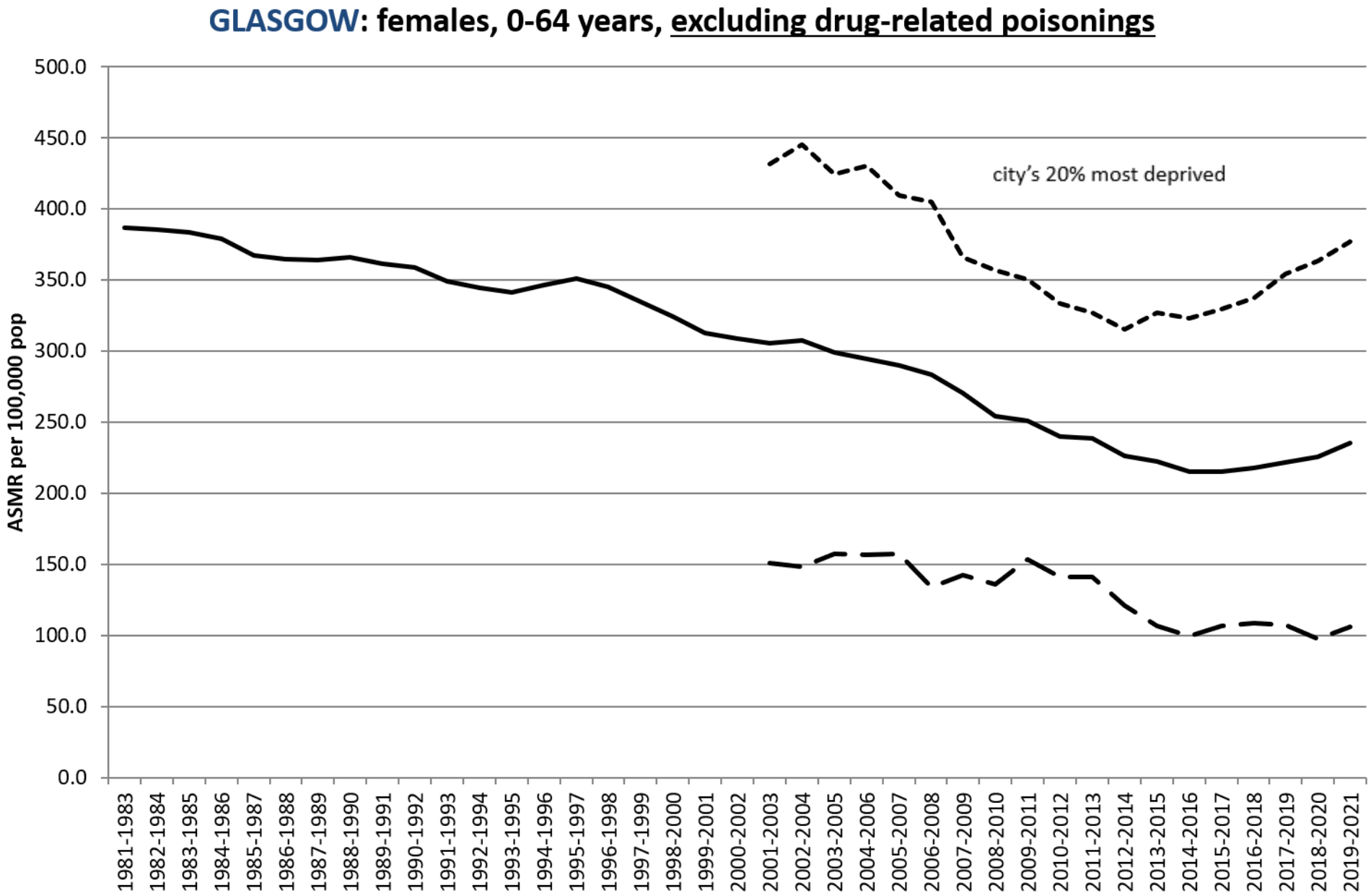


Figure 1. Decomposition of the contribution of specific cause of death to changes in female life expectancy between 2001–03 and 2012–14, and 2012–14 and 2017–19, for the populations living in the 20% most deprived (top charts) and 20% least deprived (bottom charts) areas

M


GLASGOW: females, 0-64 years, excluding drug-related poisonings
ASMR per 100,000 pop
500.0
450.0
400.0
350.0
300.0
250.0
200.0
150.0
100.0
50.0
0.0
city's 20% most deprived
1981-1983
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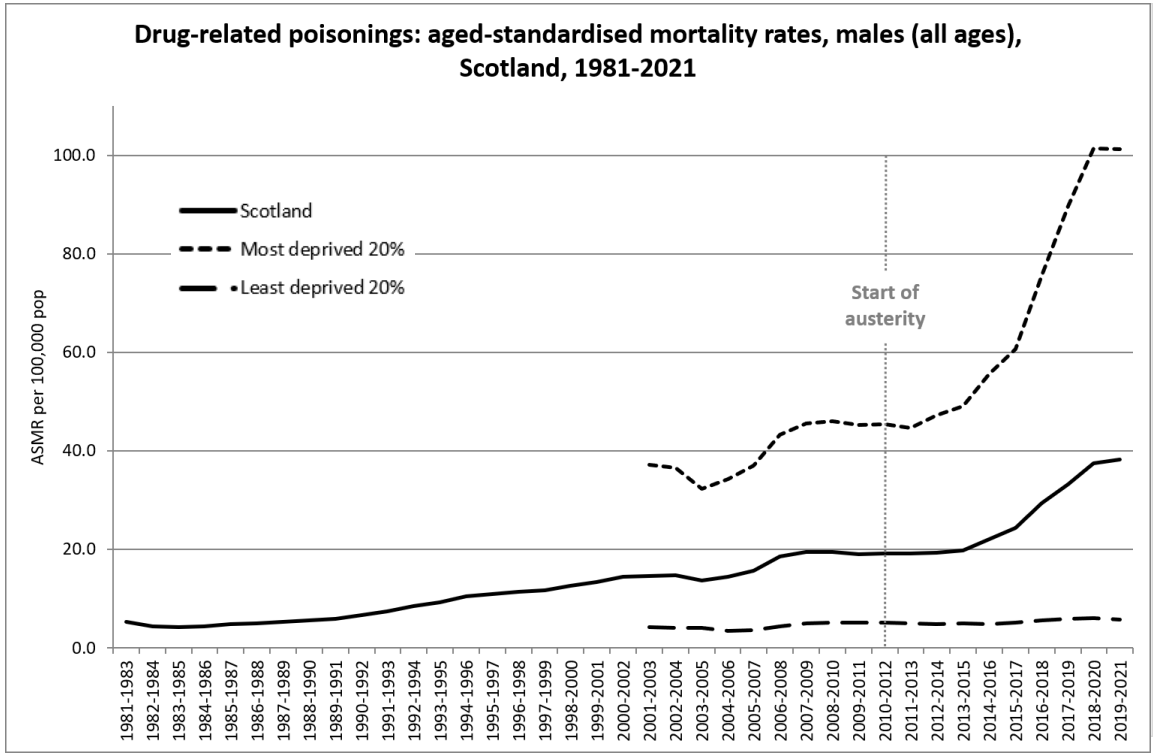
2018-2020
2019-2021

The evidence of an altered society

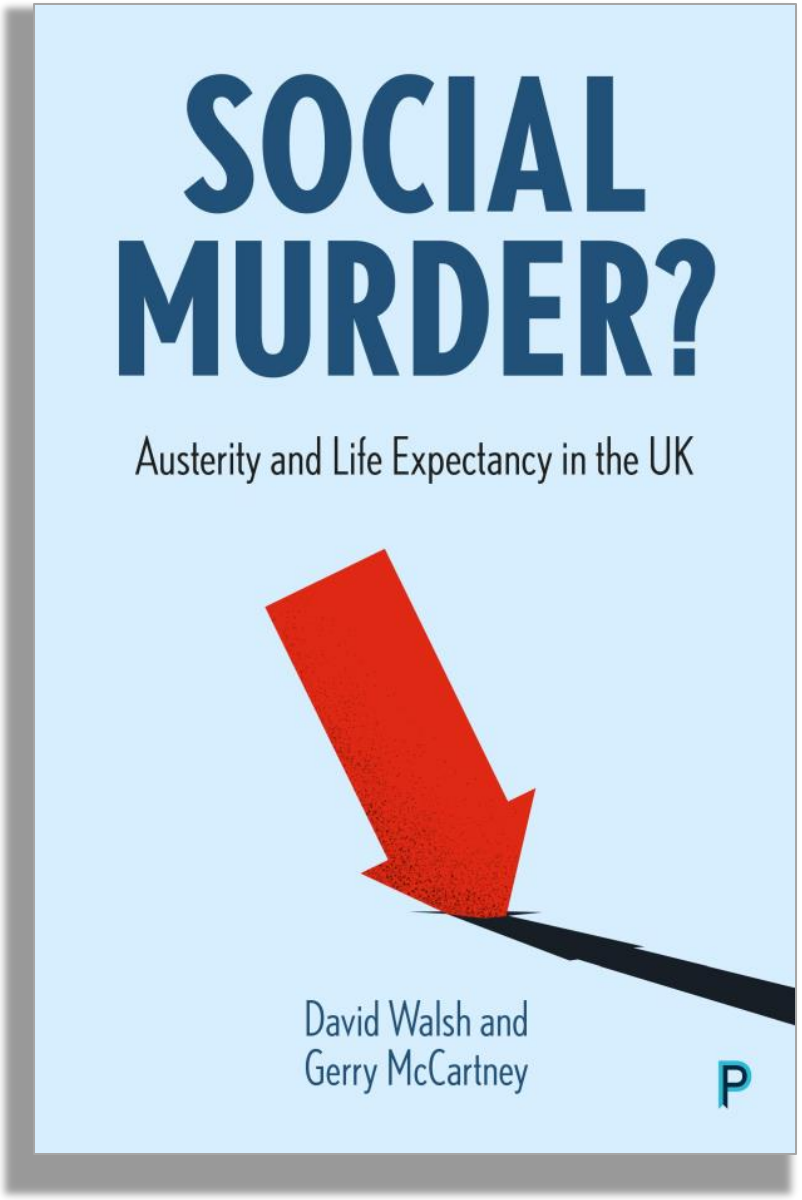
- Food banks
- Child poverty
- Healthy life expectancy
- Mental health trends
- Birth outcomes
- Mortality trends
  - **Including drugs deaths**
- And much more besides



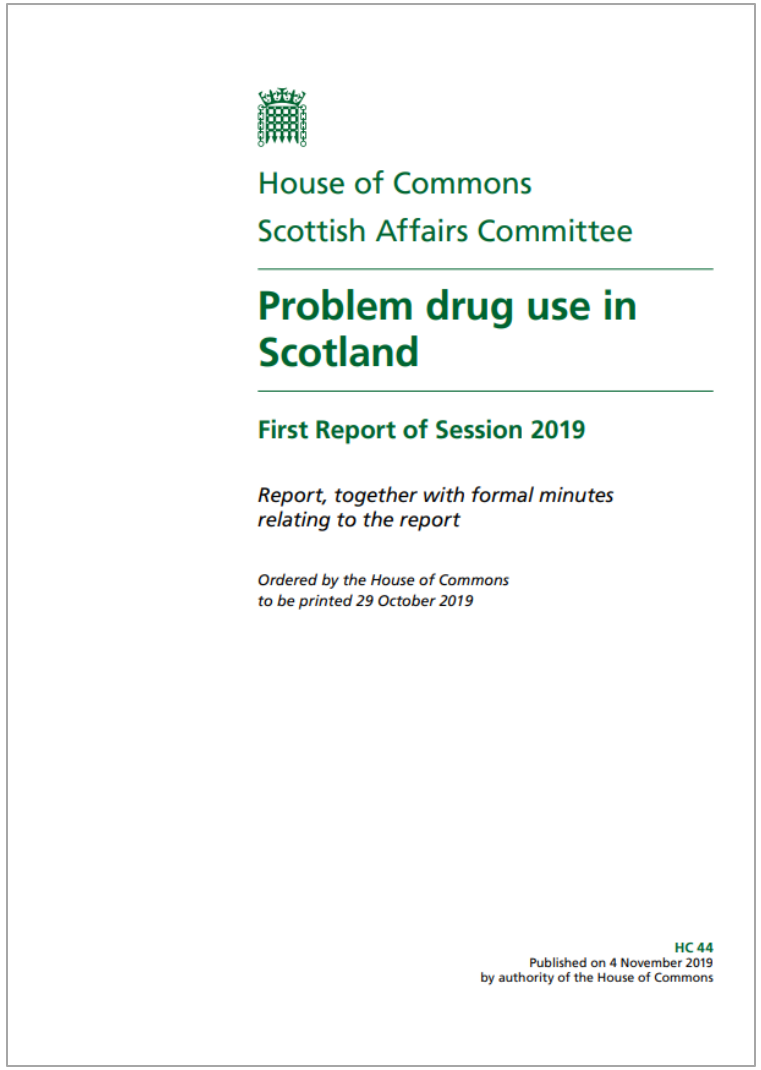
Source: Walsh D., McCartney G. Changing mortality rates in Scotland and the UK: an updated summary. Glasgow: Glasgow Centre for Population Health; 2023

Evidence?

- There's so much of it we've filled a book with it
- *(Warning: shameless book plug ahead!)*
- The book has a more interesting title than this talk
- (NB all royalties go to NHS charities and not the authors)



Policy responses (1)



House of Commons
Scottish Affairs Committee

Problem drug use in Scotland

First Report of Session 2019

Report, together with formal minutes relating to the report

Ordered by the House of Commons to be printed 29 October 2019

HC 44
Published on 4 November 2019
by authority of the House of Commons

- **Recommendations e.g.:**
  - Declare the issue a ‘public health emergency’
  - Reverse austerity policies
  - Adopt public health, not criminal justice, approach
  - Adopt evidence-based approach
  - Safe consumption facilities
  - Decriminalise drugs for personal use
- **All rejected by UK Government**

Policy responses (2)

- It’s no mystery…
- The solutions to health inequalities **are well understood**
- To address changes of past 16 years:
  - reverse cuts to social security – to create a robust ‘safety net’
  - invest in public/social services
- To address health inequalities more generally:
  - adopt evidence-based measures to narrow societal inequalities
- But this requires political will
- Does it exist?

Policy responses (2)

- UK Government austerity policies:
  - 2010-2015: Conservative-Liberal Democrat Coalition Government
  - 2015-2024: Conservative Governments (including those led by even more inspiring figures)
- We’re two years into a Labour UK Government – any cause for celebration?

The solitary ‘good news’ slide

The Guardian

UK

Budget 2025

Labour MPs celebrate end of two-child benefit cap in Reeves's budget

Abolition is popular with backbenchers and is expected to stabilise precarious positions of the PM and chancellor

Eleni Courea *and* Peter Walker

Wed 26 Nov 2025 18.55 GMT

Share

Rachel Reeves addressed nurses during a visit to University College London hospital after her budget speech on Wednesday. Photograph: Adrian Dennis/AP

Labour MPs have publicly thrown their weight behind Rachel Reeves's budget after she abolished the two-child benefit cap and unveiled a slate of progressive measures, including a mansion tax.

Backbenchers rallied round the prime minister and chancellor on Wednesday afternoon after Keir Starmer hailed the measures being announced as “a Labour budget with Labour values”.

The decision to entirely scrap the two-child limit, which prevents parents from claiming child tax credit or universal credit for more than two children, was openly celebrated by dozens of Labour MPs who have been publicly and

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Two-child benefit cap to be scrapped from next year

GETTY IMAGES

Becky Morton

Political reporter

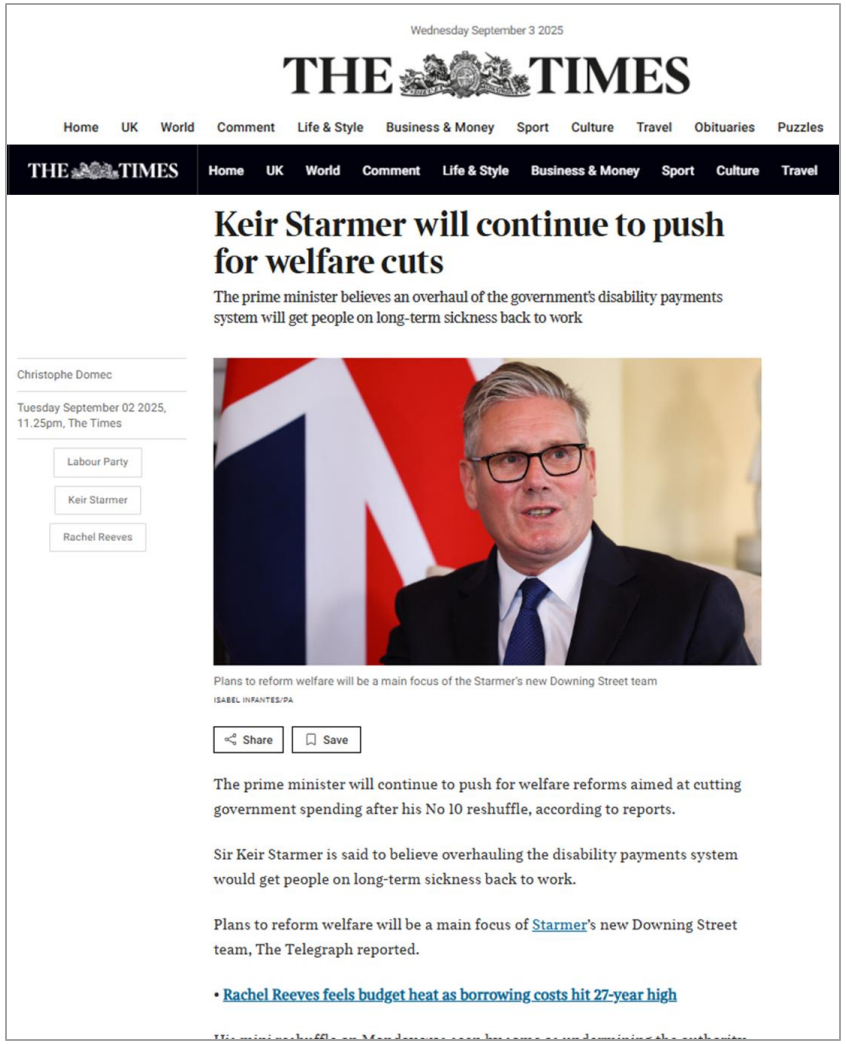
26 November 2025

The two-child benefit cap will be scrapped in full from next April, Chancellor Rachel Reeves has said.

The policy, introduced under the Conservatives in 2017, means parents can only claim universal credit or tax credits for their first two children.

Announcing the move, which is estimated to cost £3bn a year by 2029-30, Reeves said her party did "not believe that the solution to a broken welfare system is to punish the most vulnerable children".

However….



Wednesday September 3 2025

THE TIMES

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THE TIMES Home UK World Comment Life & Style Business & Money Sport Culture Travel

Keir Starmer will continue to push for welfare cuts

The prime minister believes an overhaul of the government's disability payments system will get people on long-term sickness back to work

Christophe Domec

Tuesday September 02 2025, 11.25pm, The Times

Labour Party

Keir Starmer

Rachel Reeves

Plans to reform welfare will be a main focus of the Starmer's new Downing Street team

ISABEL INFANTES/PA

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The prime minister will continue to push for welfare reforms aimed at cutting government spending after his No 10 reshuffle, according to reports.

Sir Keir Starmer is said to believe overhauling the disability payments system would get people on long-term sickness back to work.

Plans to reform welfare will be a main focus of Starmer's new Downing Street team, The Telegraph reported.

• Rachel Reeves feels budget heat as borrowing costs hit 27-year high

Epstein, Andrew & me

Virginia Giuffre in her own words

Saturday

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Page 38

The Guardian

Saturday 18 October 2025

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'We can't leave welfare untouched,' says Reeves

Treasury considers end to tax breaks on cars for disabled people

Rowena Mason
Heather Stewart

Rachel Reeves has said she "can't leave welfare untouched" this parliament, with the Treasury understood to be considering axing up to £1bn in tax breaks for cars for disabled people.

The chancellor set out her thinking before next month's budget in an interview with Channel 4 News broadcast last night, having previously said she would need to make cuts and raise taxes. "We can't leave welfare untouched," she said, when asked about benefits. "We can't get to the end of this parliamentary session and I've basically done nothing ... We have to do reform in the right way and take people with us."

The government had to abandon billions of pounds in cuts to disability benefits earlier this year after a revolt by Labour backbenchers, but it is pressing ahead with cuts for future claimants of the health element of universal credit from April 2026.

It is now understood to be considering removing tax breaks for the Motability scheme, under which disabled people are exempt from VAT and insurance premium tax on cars subsidised by the government.

Whitehall sources said the ending of tax exemptions was under consideration but that no decision had been taken. They downplayed the idea of reducing the eligibility criteria for Motability cars, but said the option of scrapping the VAT and insurance tax exemptions was "more likely".

Another change under consideration is removing luxury brands such as BMW and Mercedes from the scheme, which allows claimants to make a top-up payment to get a more premium car. These premium brands make up only 40,000, or about 5%, of the 800,000 Motability cars.

Adding VAT and insurance premium tax to the Motability car price tag would mean more claimants would need to

Tackle online fake news or risk riots, MPs warn

Fears of repeat of 2024 unrest if misinformation left unchecked Page 5

Children's sport 'ruined by pushy parents'

Page 13

Reese Witherspoon

A novel new role

Profile Page 21

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What's On

However… (no. 2)

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THE TIMES

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...thanks to Kenny Dalglish

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David Moyes

McTominay can make the difference

World Cup Special

Sport

Burnham: I'll cut welfare

He won't be 'squeamish' in reducing bill to fund defence PM says it's his 'duty' to fight any challenge

Steven Swinford Political Editor
Oliver Wright Policy Editor
Larisa Brown Defence Editor

Britain must not be "squeamish" about reducing the welfare bill to fund extra spending on defence, Andy Burnham has said.

The mayor of Greater Manchester said the government must listen to the concerns raised by John Healey, who resigned as defence secretary on Thursday after accusing the prime minister of jeopardising the security of the nation.

In an interview with The Times, Burnham said "the world has changed" and it was "obvious" the government would have to adjust assumptions about defence spending in response.

He said that rather than implementing "crude cuts" to the welfare budget, he favoured a "preventative" approach that would provide the support people needed to get back to work.

Burnham announced plans for a ten-year approach to public investment that would require all government procurement to include commitments to spending on apprenticeships and work placements for young people.

On Thursday Burnham will contest the Makerfield by-election, which has been described as among the most consequential in British politics. If he wins, his allies, including cabinet ministers, will push to install him as prime minister as soon as possible.

"I am not squeamish about saying that the plan would be to reduce the welfare bill," Burnham said. "Not at all. But it is not the traditional Westminster way of just crude cuts, short-term crude cuts that then create a backlash and create more political turbulence."

He said cutting the bill could be done by "moving towards a more preventative state that makes the right investments to support people into work".

Burnham said Healey's resignation provided more evidence that politics was "broken", adding that he believed

Continued on page 9

David Hockney 1937–2026 | David Hockney, whose death was announced yesterday, at an immersive exhibition of his work in King's Cross, London. The King led tributes to "a dear friend". News, page 1; obituary, pages 90–91

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Weekend

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Weekend

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Andy Burnham to make it harder for people to claim benefits as he vows to 'get serious' about cutting welfare bill

New prime minister has also warned that 'the NHS will collapse' unless he fixes social care

David Maddox

Monday 27 July 2026 12:26 BST

457 Comments

Andy Burnham To Make It Harder For People To Claim Benefits As He Vows To 'Get Serious' About Cutting Welfare Bill

However… (no. 3)

The Guardian

UK

Up to 1.2m disabled people will lose thousands in UK welfare overhaul, experts warn

Liz Kendall, the work and pensions secretary, laid out plans for £5bn savings but faces rebellion from some Labour MPs

Liz Kendall, the secretary of state for work and pensions, laid out the welfare overhaul in the House of Commons, 18 March 2025. Photograph: House of Commons/Reuters

Up to 1.2 million people with disabilities will lose thousands of pounds under the government's welfare overhaul, experts have said, as campaigners warn the plan will exacerbate the country's mental health crisis and push more children into poverty.

Liz Kendall, the work and pensions secretary, laid out her long-awaited changes to the benefits system on Tuesday, announcing a set of measures

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Benefits crackdown unveiled with aim to save £5bn a year by 2030

Becky Morton
Political reporter

18 March 2025

The government has unveiled sweeping changes to the benefits system, aimed at saving £5bn a year by 2030.

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THE NATIONAL

THE NEWSPAPER THAT SUPPORTS AN INDEPENDENT SCOTLAND

'A NEW ERA OF AUSTERITY'

MacAskill wins Alba leadership but beaten deputy candidate threatens legal action

Nae money?

- UK social security system the least generous of any high-income country

Sources: OECD; UBS Global Wealth Report; Sunday Times Rich List 2026; IMF, World Bank, UN; OBR

Nae money?

- UK social security system the least generous of any high-income country
- By any measure, the UK is one of the richest countries on the planet
- The wealth of the richest **150 people** = c.£670bn
  - > GDP of Norway (and Sweden, Belgium, Ireland, Austria etc etc)
  - 3 times the health & social care budget of the UK
- Hmm. If only there were some way we could afford to pay for a better society?

One economist said there was 'a total disconnect between macroeconomic indicators and the reality of income gains for most people'. Photograph: Christopher Furlong/Getty Images

The wealth of Britain's 157 billionaires is now equivalent to more than a fifth of the country's entire GDP, according to analysis by the Equality Trust - a

24	Sweden	89,430
25	Israel	88,866

Sources: OECD; UBS Global Wealth Report; Sunday Times Rich List 2026; IMF, World Bank, UN; OBR

I'll shut up now

- (aka 'in conclusion')
- Health inequalities are entirely political
- They have been widened by atrocious/harmful policies
  - Drug deaths are a key, tragic, part of that
- NB But they can be narrowed by good policies
  - Multiple examples across time and place
- We need to collectively demand this from our political leaders
- (You can start to do that this afternoon)

The politics of health inequalities in Scotland and the UK

David Walsh

School of Health & Wellbeing, University of Glasgow

August 2026

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