Health and income inequalities into the millennium

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The widening inequalities in health recorded across the 1970s, 1980s and 1990s were the result of widening differentials in major causes of death like coronary heart disease (CHD) and lung cancer. Table 1 plots the scale of health inequalities in the early 1990s for men aged 20 to 64, based on estimates of the number of lives lost and working years lost due to social class inequalities in mortality. [1]

Table 1: Estimates of the number of deaths and working years lost per year due to social class inequalities in mortality, selected causes, men aged 20-64, 1991-1993, England and Wales

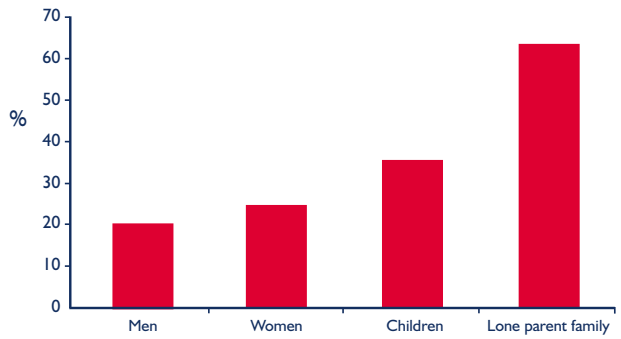
	Number of deaths	Working years lost
Coronary heart disease	5,000	47,000
Accidents etc.	1,500	41,000
Suicide etc.	1,300	39,000
Lung cancer	2,300	16,500
Other neoplasms	1,700	21,000
Respiratory disease	1,500	12,500
Stroke	900	9,000
All diseases	17,200	240,000

Source: Independent Inquiry into Inequalities in Health [1]

The latest evidence on living standards paints a similarly chilling picture. The increase in poverty and income inequality, which gathered pace through the 1980s and early 1990s, is still apparent in the latest data. [2,3] By 1996/7 25% of the population were poor, living in households with incomes below half the average income (after housing costs).

Poverty follows the contours of broader social inequalities, with higher rates among Bangladeshi and Pakistani households and Caribbean households than among the majority White population (see article by Saffron Karlsen & James Nazroo, pages 8 and 9). The burden of poverty also falls disproportionately on children and on the lone parents (predominately lone mothers) who care for them (Figure 1). At the same time, evidence has been accumulating that exposure to poverty in the early years of life has a long-term effect on adult health (see article by Chris Power, pages 6 and 7). While the government's anti-poverty programme is promoting paid employment as a route out of poverty, the living standards of the non-working poor remain well below the poverty line. [4]

Figure 1: Proportion in poverty (below 50% of average income after housing costs) 1996-7



Source: Households Below Average Income 1979-96/7 [2]

The trends in mortality and in poverty underline the scale of the crusade needed to reduce health inequalities. Research has an important role to play in this crusade, by shedding light on how social inequality affects the quality of our lives and the likelihood of premature death.

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References

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