

Part 1 – Smoking bans

Text 1 - UK disposable vapes ban likely to become law after lack of objections

Peter Walker *Deputy political editor - The Guardian* Mon 29 Jan 2024

Plans to ban disposable vapes and gradually phase out the sale of tobacco to people of all ages in the UK appear likely to pass into law with minimal fuss as only a handful of Conservative MPs have objected to the proposals.

Both measures will be voted on in parliament, Downing Street confirmed. While Conservative MPs will be given a non-whipped free vote on the smoking ban, it remains to be decided whether this will also happen for vapes.

The ban on disposable vapes, along with action to combat the sale of some child-friendly fruit-flavoured varieties and restrictions on packaging and in-shop displays, would come into force late this year or in early 2025 via a mixture of a bill and secondary legislation.

The already announced ban on selling tobacco products to anyone born on or after 1 January 2009 will also be introduced as a law, potentially in the same bill as that connected to vaping.

Although Labour is likely to back both measures, meaning they are guaranteed to pass, Sunak might have expected a significant pushback from libertarian-minded Tory MPs. However, only Liz Truss publicly denounced the plans, calling the date-based tobacco ban “profoundly unconservative” and an extension of the “nanny state”. Some other Tory MPs will probably vote against it in parliament, but have said they are not minded to make a significant fuss.

In a broadcast clip during a visit on Monday, Sunak responded: “I don’t think there’s anything unconservative about caring about our children’s health.

“I respect that some people will disagree with me on this but I think this is the right long-term thing for our country. Smoking causes one in four cancer deaths. It’s responsible for a hospital admission every minute.” He added: “On smoking, there’s been a long tradition in parliament of these being free votes, which aren’t party political, people will have their own held views on that, that’s the same as it’s been in the past.”

A more meaningful fightback could come from the well-organised vaping industry, much of which has opposed the ban on disposable vapes – which is based largely on concerns the often cheap and colourful products are tempting for children and young people as well as the environmental impact.

Shares in vaping firms fell significantly on Monday, with trade groups saying the ban would affect adults trying to use vapes to give up smoking.

In contrast, the plan was welcomed by the National Association of Headteachers, which said disposable vapes had helped make vaping “normalised for some young people”, and by environmental groups.

The health secretary, Victoria Atkins, said ministers would consult on how best to implement the changes, including making sure firms did not try to skirt the ban by attaching charging points to disposable vapes. “We will listen very carefully to suggestions that big tobacco and other vaping companies will somehow find a way around this,” she told BBC Radio 5 Live.

“The motivation here is to help ensure that children and young people are not dragged into this addiction to nicotine.”

Text 2 - This vaping ban is our trivial, mindless elite at its worst

MADLINE GRANT, *The Telegraph*, 13 September 2023 (adapted)

Kingsley Amis once quipped that “no pleasure is worth giving up for the sake of two more years in a geriatric home in Weston-super-Mare”. Much as it pained me to give in to the wellness brigade, however, I’ve recently bought myself some extra months in that bath-chair on the seafront.

5 Though never a heavy smoker, I successfully kicked the habit – spurred on by the indignity of panting after a half-mile jog, mounting costs and general vanity. A few times a year, I’ll still have the odd “ur cigarette”, the quintessentially perfect puff in a sunlit beer-garden or at a boozy wedding, but there’s no doubt I smoke vastly less than before. All thanks to vaping.

Vapes, unlike patches and nicotine gum, work particularly well for many would-be quitters because they mimic the
10 physical activity of smoking while carrying a fraction of the risk (vapes do not burn tobacco, or produce tar or carbon monoxide). Disposable vapes offer the same convenience as cigarettes. You can buy one on the move, with no worries about refilling or charging your device.

The Government’s imminent ban on disposable e-cigarettes may seem trivial, but it’s a vivid example of making the perfect the enemy of the good. Officials fear that the flavoured models and their brightly coloured packaging are being
15 aimed at children, even though the law already bans under-18s from buying vapes, and, as I can attest, plenty of adults enjoy them, too.

It would be absurd to outlaw booze for all ages just because some children manage to sneak a bottle of Frosty Jack’s or Glen’s Vodka from the iffy offy down the road, yet a vape ban would follow the same logic. Surely the solution is to enforce existing regulations, not create brand-new ones?

20 Others have raised the problem of mounting plastic waste. But if vape disposal is a particular issue, then why not raise awareness about responsible recycling, or consider a deposit and return scheme? An outright ban should be a last resort, given the well-documented public health benefits of vaping.

Since e-cigarettes first entered the UK market, smoking among 18 to 24-year-olds has halved, from 26 per cent in 2011 to 13 per cent in 2021. Far from being a “gateway” to smoking, the available evidence suggests the opposite –
25 vapes overwhelmingly attract ex-smokers and those who would otherwise have smoked. (...)

Banning flavoured vapes is a classic example of the “something must be done” tendency, so prevalent in UK politics – often producing badly framed legislation. Three years after the Government’s much-touted ban on single-use plastic, it has emerged that “eco-friendly” paper straws are far more likely to contain long-lasting and potentially toxic chemicals known as PFAS. (...)

30 Following the Manchester Arena bombing, the government announced a new Protect Duty, known as Martyn’s Law, which will place more rigorous obligations on venues to protect against terror threats and train staff in safety protocols. This may sound harmless, but a House of Commons report warned that the requirements could put some small firms and organisations at risk of closure, while failing to “make a significant impact” on preventing attacks.

Creating an additional layer of bureaucracy might well have the unintended consequence of dissuading volunteers
35 who keep community venues going. It seems an emotive response to a tragedy, potentially disproportionate to the actual threat.

Government decisions often reflect hyperactivity in the wrong areas, inaction in crucial ones. It remains extraordinary that, after an estimated 350 attacks so far this year, numerous pets killed, children maimed, several people dead, you can still buy a manifestly dangerous breed of fighting-dog, the Bully XL. Pettifogging proscriptions are our forte, yet
40 we drag our feet on this. Flavoured vapes? Ban ’em! Plastic straws? Begone! Child-mauling dogs? Meh.

Massive structural problems afflict the UK – shoddy social care, an out-of-control pensions bill, an unreformable NHS – yet we seem only capable of addressing trivialities.

It is the political equivalent of procrastination; an urgent DIY job beckons, the roof is half off, but instead you put the kettle on and do the laundry. Perhaps this is typical behaviour for a government in its death throes. (...) But does anyone
45 believe that Labour will fare any better? Unable to fix the big problems, our political class prefers mindless tinkering.

TEXT 3 - E-Cigarette Sales Tapered Off Last Year After Big Surge

The New York Times, June 22, 2023 (adapted)

Sales of e-cigarettes rose by nearly 47 percent from January 2020, just before the pandemic hit the United States, to December 2022, according to an analysis released on Thursday by the **Centers for Disease Control and Prevention**.*

The increase over that period occurred while teenagers and young adults reported in surveys that they had recently tried e-cigarettes at much higher rates than older adults did.

5 According to the **C.D.C.**, about 4.5 percent of all adults said they used e-cigarettes. But the rates went up as the age dropped. About 14 percent of high school students and 11 percent of young adults reported using the devices within the last 30 days of the survey, the C.D.C. data showed.

Sales were still growing through May of last year, but then dropped by 12 percent through December. Researchers attributed the decline to several possible factors, including state or local bans on flavored products; government
10 enforcement; and the introduction of devices that offered thousands of “puffs” in a single device.

Overall, four-week sales of e-cigarettes climbed to 25.9 million units late last year, from 15.5 million units in early 2020.

The Food and Drug Administration* has embraced the use of e-cigarettes, regulating their sale on the market as an aid for adult smokers to make the transition to a less harmful product.

15 But tobacco opponents and public health experts warn that the popular devices have lured teenagers and young people — who would be unlikely to smoke traditional cigarettes — into an addictive habit amid growing concerns about vaping nicotine.

The C.D.C.’s analysis reinforces data indicating that fruit and candy flavors have surged in popularity. The vaping devices often contain high levels of nicotine and are sold in appealing colors and flavors, like strawberry ice cream and
20 mango ice.

The American Heart Association has called for more action to reduce youth vaping and issued a scientific statement last year saying that e-cigarettes appeared to lead to increased risk of heart and lung disease. The American Lung Association has also aired concerns, saying it was “very troubled by the evolving evidence about the impact of e-cigarettes on the lungs” and citing the known and unknown toxic effects of chemicals used in vapes.

25 The C.D.C. study does not include sales from vaping and tobacco shops or internet sales, so the findings are limited. Still, trends have shifted in the last few years. Vaping of e-cigarettes among minors has declined from a record high in 2019, when nearly 28 percent of high school students reported vaping within the last 30 days. At the time, products that were sleek and produced by Juul Labs were the most popular, and the company was largely blamed for the soaring rate of teenage vaping. Juul has since resolved myriad lawsuits brought by many states and individuals, resulting in
30 settlements adding up to nearly \$3 billion.

The **F.D.A.*** has rejected applications for millions of products to get on the market, approving only about two dozen tobacco-flavored vaping devices. Yet the agency has struggled with enforcement; flavored vapes have flooded gas stations, convenience stores and vape shops nationwide.

The agency prevailed in court in recent weeks against the makers of Hyde vapes, which were a favorite among high
35 school students in a recent youth tobacco survey. The latest report from the C.D.C. shows Elf Bar Vapes rising in popularity. The F.D.A. has issued an import alert for them to be seized at the border and on Thursday announced enforcement against nearly 200 retailers selling those vapes and Esco Bar products. [...]

Text 4 - Hausse modérée du prix des cigarettes, plus de lieux publics sans tabac, interdiction des puffs : le gouvernement présente son plan contre le tabagisme

Par [Camille Stromboni](#), *Le Monde*, 28 novembre 2023

L’objectif est d’atteindre un prix du paquet de cigarettes à 13 euros à l’horizon 2027, avec une étape à 12 euros en 2025, a annoncé le ministre de la santé. Les « espaces
5 sans tabac » vont être généralisés aux plages, forêts et parcs publics, ainsi qu’aux abords des établissements scolaires.

10 **Comment faire de nouveau reculer le tabagisme, alors que la prévalence – 12 millions de fumeurs quotidiens en population adulte – stagne depuis plusieurs années ? Le ministre de la santé et de la prévention, Aurélien Rousseau, a dévoilé, mardi**

15 **28 novembre, le nouveau programme national de lutte contre le tabac pour la période 2023-2027.** « *Chaque année, la France paye un lourd tribut au tabagisme, qui reste la première cause de mortalité évitable, avec 75 000 décès par an, soit 200 morts par* 20 *jour* », souligne-t-il.

Premier pilier de ce plan attendu, alors que de nouveaux produits inquiètent, comme les cigarettes électroniques jetables visant les adolescents : prévenir l'entrée dans le tabagisme, en particulier 25 **chez les plus jeunes, parmi lesquels une nette baisse du tabagisme a été observée entre 2017 et 2022.** « *Il faut aujourd'hui franchir une nouvelle étape* », a défendu le ministre, rappelant l'objectif du **gouvernement d'une génération sans tabac en 2032.**

30 **Pour cela, le prix du paquet de cigarettes – aujourd'hui d'environ 11 euros – sera porté à 13 euros d'ici à 2027, comme le prévoyait le gouvernement.** Pas de changement pour 2024, toutefois. La « *première étape* » se jouera en 2025, à 35 12 euros, a annoncé M. Rousseau. Dans son entourage, on défend un « *pas significatif* », quand bien même cette augmentation devrait être proche de celle attendue du seul fait du mécanisme d'indexation de l'imposition sur le tabac à l'inflation, modifié en 2022 par le Parlement, 40 réagit-on déjà dans les rangs des associations antitabac. Sur cette base, les prix devraient ainsi augmenter dès le 1^{er} janvier 2024 de 40 à 50 centimes, selon des estimations de la Confédération des buralistes, rapportées dans *Les Echos*.

45 En septembre, l'annonce faite par la première ministre, Elisabeth Borne, de ne pas augmenter la fiscalité sur le tabac pour 2024 avait été largement dénoncée par les acteurs de la lutte contre le tabagisme. « *Pour être efficaces, les hausses de taxes doivent être fortes, 50 répétées et continues dans le temps* », avait réagi le Comité national contre le tabagisme.

Cette hausse à l'horizon des quatre prochaines années permettra-t-elle un « *effet prix* » significatif sur la baisse de la consommation ? « *Cela ne va rien changer, craint* 55 *Loïc Josseran, président de l'Alliance contre le tabac, qui milite pour un paquet à 16 euros, au minimum. Cela ne marquera pas les esprits, et on peut même se demander si la prévalence ne va pas augmenter de nouveau, comme entre 2005 et 2010, quand le prix du* 60 *paquet avait stagné.* » Le prix constitue en effet le « *levier majeur* », selon le professeur de santé publique,

qui pointe aussi « *la nécessité de faire enfin appliquer l'interdiction de vente aux mineurs chez les buralistes* ». « *Dans les arbitrages interministériels, force est de* 65 *constater que la voix des lobbies du tabac porte plus que celle de la santé publique* », déplore-t-il.

Accompagnement des fumeurs

Autre mesure qui sera, à coup sûr, saluée dans les rangs des acteurs de la lutte contre le tabac : les espaces sans 70 tabac vont être généralisés à toutes les plages, forêts, parcs publics et aux abords extérieurs de certains lieux publics à usage collectif, spécialement les établissements scolaires. Une manière de « *dénormaliser* » la consommation de tabac, dans des 75 lieux où cette interdiction relevait jusque-là en grande partie de décisions locales, notamment des collectivités. Des exceptions sur certaines périodes pourront être décidées par le préfet.

En direction des plus jeunes, une mesure promise par le 80 gouvernement devrait se concrétiser dans les prochaines semaines : l'interdiction des cigarettes électroniques jetables à usage unique – appelées « puffs » (« bouffées », en anglais) –, en vogue avec leurs emballages colorés et leurs arômes sucrés chez les 85 adolescents. Une proposition de loi « *transpartisane* », visant à « *interdire les dispositifs électroniques de vapotage à usage unique* », soutenue par 162 députés issus de 8 groupes politiques, arrive en commission des affaires sociales, mardi 28 novembre, avant son examen 90 dans l'Hémicycle le 4 décembre.

Pour ce qui est des autres « *produits d'appel* », comme les sachets de nicotine – eux aussi une porte d'entrée vers l'addiction –, le ministère de la santé joue la prudence. A ce stade, il entend ouvrir la réflexion pour 95 « *construire une doctrine et définir des règles permettant d'anticiper et d'intervenir systématiquement et le plus précocement possible* » face à ces nouveautés déployées chaque année sur le marché. De même qu'un « *travail* » va être engagé pour limiter les arômes 100 autorisés dans les produits de vapotage.

Un second volet du plan prévoit, lui, une série de mesures consacrées à l'accompagnement des fumeurs dans l'arrêt du tabac. Sur ce sujet comme sur d'autres, les pharmaciens devraient jouer un rôle accru, avec 105 possibilité de donner un accès direct aux traitements de substitution nicotinique, dans le cadre d'une expérimentation.

Part 2 – Poverty Malnutrition Obesity

Text 5 - In U.K. Cost-of-Living Crisis, Some Workers Struggle to Feed Children

As inflation hits the pockets of families who already had little to spare, food banks say they are getting much busier and seeing more people with jobs.

By Emma Bubola, Reporting from London, *The New York Times*, Jan. 25, 2023

When her two sons ask for snacks she can no longer afford, Aislinn Corey, a preschool teacher in London, lays down a blanket on the floor and plays “the picnic game.” She takes an orange or an apple collected from her preschool’s food bank and slices it in thirds to be shared. “We do it as an activity,” she said. “So they don’t know that mummy is struggling.” She says dinners are often reduced to “pasta pasta pasta,” and she sometimes skips the meal entirely so there is more food for her children.

As the cost of grocery shopping and heating homes have hit records in recent months, the signs of distress are everywhere. The BBC has published dozens of online recipes costing less than a pound, or about \$1.23, per portion. Some schools have turned down their heaters. And many communities have opened “warm spaces” — heated public rooms for people with cold homes.

But in Britain, one of the world’s richest countries, among the most shocking signs of the cost-of-living crisis is that a growing number of workers are struggling to feed their children.

Some are heading to **food banks*** for the first time.

“It’s atrocious that it’s working people who are coming to us,” said Vicky Longbone, a church minister who runs a food bank in Derby, in central England.

For the hardest hit working families, the crisis has been long in the making.

Employment growth has left Britain with fewer out-of-work households, but many of those who found work still did not reach a decent standard of living, which left them vulnerable when inflation hit a 41-year high a few months ago, and wages failed to keep up.

Austerity measures under a decade of Conservative-led governments* have also eaten away at the benefits paid to many low-income families, including working households. Since 2016, Britain has had one of the highest minimum wages in the world for most workers, benefiting some of the lowest earners. But many of them still cannot find enough hours of work, and the income of low earners has grown more slowly in Britain than in some other Western countries including Germany and France.

“It is harder because the past 10 years have been so awful,” said Greg Thwaites, an economist at the Resolution Foundation, an independent research institute focused on living standards.

Then, in October, consumer prices surged 11.1 percent from a year earlier. With energy and food costs driving the inflation, lower-income families, who spend a larger share of their income on essentials, were disproportionately hit. The rises slowed slightly in December, but consumer prices were still up more than 10 percent compared with a year earlier.

Although some key statistics are not yet available, including the latest annual figure for child poverty, there are clear signs that many workers, including working parents, are under serious strain, as well as growing evidence that children are going hungry at home.

You can read the whole article here: https://www.nytimes.com/2023/01/25/world/europe/uk-cost-of-living-children.html?unlocked_article_code=1.Xk0.LKag.5UlxoV2jIDi7&smid=url-share

Text 6 - Are young children in Britain getting smaller?

Bad diets are the likeliest cause of problems

The Economist, Jun 29th 2023

A report this week from the Food Foundation, a think-tank, notes the social cost of soaring food inflation: the poorest fifth of households would now need to spend half of their disposable income to eat a healthy diet. Instead, too many eat cheap, high-calorie but low-nutrition meals. That takes a toll. Years of poor diets lead to more obesity and affect children's heights.



The Economist

A study in the *Lancet* in 2020 suggested British five-year-olds were already among the shortest in Europe (see left chart). That study, based on analysis of data up to 2017-18, indicated that average height started falling in 2014. Confirming that is not easy. Different factors could be at play, such as changing immigration trends: on average African and Caribbean children are taller than white children, while South Asians are smaller. Country comparisons may also be tricky, if ways of measuring differ.

But deprivation clearly goes in hand with stunting. A comparison of 10- and 11-year-olds (all white, to set aside any ethnic difference) finds the average boy in the most deprived area of Britain is now 1.3cm shorter than one in the least deprived area

Text 7 - Britain's hunger and malnutrition crisis could be easily solved – yet politicians choose not to

Michael Marmot

We have more than enough to go round, but large proportions of the population lack the basic necessities of life

5 *The Guardian*, Wed 27 Dec 2023

What causes a famine? It isn't a lack of food. Nor does lack of food cause the kind of food insecurity, just short

10 of a famine, that Britain is facing. In analyses of specific famines, the economist and philosopher Amartya Sen showed that social organisation and a lack of access to food for socially deprived people were the real causes of starvation.

15 As 2023 ends, Britain may not be facing a famine, as people are in north-eastern Nigeria, South Sudan,

Yemen or Somalia, but that is a low bar. The UK's current levels of food insecurity will damage physical and mental health and increase health inequalities for 20 years to come.

The Food Foundation tracks moderate or severe **food insecurity*** in the UK, which is defined as how many people in the past month had smaller meals or skipped meals; had been hungry but not eaten; or had not eaten for a whole day – each because of lack of access or inability to afford food. In June 2023, the latest tracker, 9 million adults in the UK, 17% of households, experienced moderate or severe food insecurity (a massive rise from 7.3% in June 2021). Nearly a quarter of households with children experienced food insecurity.

How will this widespread food poverty affect people's health? Recent research has shown an alarming increase in admissions to hospital resulting from deficient intakes of micronutrients. And whereas lack of money (among individuals or groups) may lead to starvation in countries threatened by famine, moderate or severe food insecurity in Britain is associated with obesity.

There is now fairly general agreement that a Mediterranean-style diet – rich in fruit and vegetables, olive oil, seeds and nuts, with modest intake of fish, meat and dairy – is good for health. But as is now well recognised, energy-dense food, high in fat, sugar (and salt), is cheaper. The inevitable result is that inequalities in childhood obesity are increasing. Obesity is linked to cancer, diabetes, high blood pressure, heart disease and arthritis.

Crucially, food insecurity is also linked to more general economic insecurity. There is an important debate going on between those in government who think the way to combat obesity is information about healthy eating, and those who want more activist approaches such as restricting promotions of cheap calorie-dense

55 foods, and advertising aimed at children. But fundamentally, people aren't eating healthily, in part, because they cannot afford healthy food.

Unicef's latest "report card", which examined changes in relative child poverty between 2012 and 2021, found that the UK was the worst performer among 39 high-income countries. Our rates of relative child poverty had increased by nearly 20%. The government likes to claim that it has reduced absolute child poverty. It should be careful in making such claims. A recent report from the Joseph Rowntree Foundation defined destitution as doing without two or more of: housing, light, heat, food, appropriate clothing or toiletries. In 2022, 1 million children in the UK were in a state of destitution – 2.9 times the level five years earlier. Among adults, 2.8 million were in destitution because of inability to afford these six basics.

Such destitution will damage physical health, not only because of food insecurity, but because poor quality housing and cold homes are also potent contributors. Such insecurity will also damage the mental health of adults and children. The Unicef report shows clearly that the more time children spend in poverty, the more likely they are to experience depression as teenagers, as well as having increased risk of obesity.

Returning to Amartya Sen's diagnosis of famines, the UK has the resources to provide all six of the basics that would eradicate destitution. We don't do it. It means that large proportions of the population lack the basic necessities of life, and experience the profound insecurity this leaves in its wake. It is hard to see this as anything other than a fundamental, catastrophic failure.

Michael Marmot is professor of epidemiology at University College London, director of the UCL Institute of Health Equity, and past president of the World Medical Association

NIHR Southampton
Biomedical Research Centre

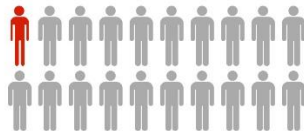
NHS
National Institute for
Health Research

Research tackling malnutrition & identifying NHS savings*

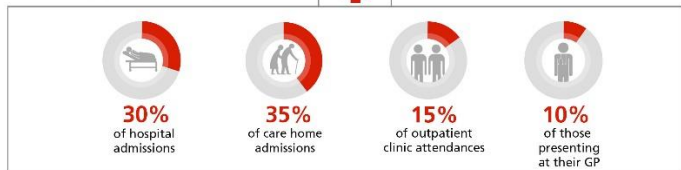
*Source: The cost of malnutrition in England and potential cost savings from nutritional interventions, Marinos Elia

Facts & Statistics

Three million or **1 in 20 adults** in England are affected by malnutrition



Malnourished adults account for:



Can we reduce the cost?

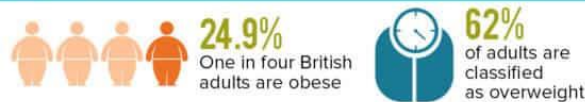
Investing in implementing **just 1 NICE quality standard**



could bring NHS...

£200 Million Savings

OBEESITY STATISTICS IN THE UK



The Future of Obesity in the UK

At current rates, there will be **11 million** more obese adults by 2030



World Health Organisation (WHO)
The Health and Social Care Information Centre
<http://www.nhs.uk/>
<http://www.ic.nhs.uk/pubs/hse11trends>

re:new BARIATRICS. www.renewbariatrics.com

Text 9 - England heads for obesity disaster as minister frets about nanny state

The Guardian, December 25, 2023

Less than three weeks into her new role as health secretary, Victoria Atkins left health campaigners aghast when she suggested her approach to tackling obesity would largely focus on dietary advice.

Obesity is a devastating public health problem harming millions of people in the UK that will never be resolved by tips on what to eat and what to avoid. Two in three adults are overweight or obese and the problem costs £100bn a year.

The country's food environment is in such a sorry state that everywhere you look, unhealthy food options dominate – every workplace, every leisure facility, every shop, every corner. Tens of millions of people are struggling with their weight – it's not about a lack of individual willpower or self-control. Even those who spend every waking hour trying desperately hard to shed the pounds are often thwarted by relentless advertising, easy availability and low-cost promotions.

Yet Atkins, who says there is no conflict of interest with her husband's role as managing director of one of the world's largest sugar companies, signalled she is very unlikely to take any significant action.

"We could all do with help and advice on how to be healthier," she told the Times this month. "We've got to try to do that in a way that is not nanny-stateish but if we give people information then that can be part of helping us try to lead healthier lives."

Atkins said she believed tackling obesity was “incredibly important” but added that she wants to ensure “all of us have a healthy relationship with food” as she prioritises diet advice.

The government vowed to introduce a range of measures to tackle obesity in England, including curbing junk food advertising and restricting volume offers like buy-one-get-one-free.

20 But the plans, to the utter dismay of doctors, public health professionals and health campaigners, have since been shelved – until October 2025. Even then there are no guarantees. Atkins says she “will want to convince myself as to the effectiveness of measures that have been announced”.

25 Now a new report, commissioned by the government’s own obesity research unit and obtained by the Guardian, provides vital new evidence on obesity – and a call for action. Far from it being a problem that simply requires more responsibility from society, the report shows that many people are trapped into making poor decisions and buying unhealthy food.

One of the paper’s authors, Dr Paul Coleman, told the Guardian that after conducting more than 100 interviews with adults across the socioeconomic spectrum, it was clear most were aware of what constitutes a healthy diet.

30 The problem, according to those interviewed, was the dizzyingly wide availability and promotion of cheap junk food – and the comparatively higher cost of healthier options.

“For many families, particularly those relying on insecure and unpredictable income, it is often the most affordable and appropriate option to rely on processed and less healthy ready meals,” Coleman said.

“This is due to rising food and energy costs, time pressures, low quality kitchen spaces, and a fear of spending a limited budget on more expensive fresh produce which may be left uneaten and wasted.

35 “In contrast ultra-processed meals, which are cheap to purchase and prepare, are unlikely to go off or be wasted before being consumed. Families were aware of the negative health impacts but felt they had little choice but to purchase these products.”

The report found that because little action has been taken to promote healthy food or tackle unhealthy food, millions of families, particularly those on low incomes, are failing to prevent their children’s poor diets becoming
40 normalised – permanently. [...]

See also

- <https://www.theguardian.com/uk-news/series/hand-to-mouth-britains-food-insecurity-crisis>
- https://foodfoundation.org.uk/sites/default/files/2021-10/1-Briefing-Malnutrition_vF2.pdf

Part 3 – The NHS Crisis

Text 10 - Junior doctors to strike over five days, BMA says

BBC News, 9 February

Junior doctors* in England will strike on five days from 24 to 28 February, in an ongoing dispute with the government about pay.

The British Medical Association (BMA), which represents junior doctors, wants a 35% pay increase - a proposal previously rejected by ministers.

Many routine hospital services are likely to be disrupted or cancelled.

The government said it wanted to find a "reasonable solution" and is prepared to "go further" on a pay offer. Junior doctors received a pay rise averaging nearly 9% this financial year - and during talks at the end of 2023, the option of an extra 3% on top of that was discussed.

But those talks ended in early December without a deal being reached.

'Credible offer'

The BMA said the government had "failed to meet the deadline to put an improved pay offer on the table".

Junior doctors committee co-chairs Dr Robert Laurenson and Dr Vivek Trivedi said: "We have made every effort to work with the Government in finding a fair solution to this dispute whilst trying to avoid strike action. They added that they believed the forthcoming strike could still be called off if a "credible offer" was made.

The BMA previously said the pay increase it was calling for would make up for what it said had been below-inflation rises since 2008.

Health secretary Victoria Atkins said: "This action called by the BMA Junior Doctor Committee does not signal that they are ready to be reasonable. "We urged them to put an offer to their members, but they refused. Five days of action will put enormous pressure on the NHS and is not in the spirit of constructive dialogue."

This will be the 10th strike by junior doctors since March 2023. It will follow **a six-day strike** by junior doctors in January, the longest in the history of the NHS, which saw about 100,000 appointments cancelled.

Nearly half of NHS doctors are junior doctors - a group that spans those just out of university through to some who have 10 years or more experience.

More than 1.2 million medical appointments have been cancelled since December 2022, due to strikes by NHS workers, including nurses, paramedics and consultants.

The union is currently in talks with the government about a fresh pay deal for consultants, after rejecting the most recent offer.

TEXT 11 - Why is Britain's health service, a much-loved national treasure, falling apart?

By Christian Edwards, CNN, Mon January 23, 2023 – Extracts

Most winters, headlines warn that Britain's National Health Service (NHS) is at "breaking point." The alarms sound over and over and over again. But the current crisis has set warning bells ringing louder than before. "This time feels different," said Peter Neville, a doctor who has worked in the NHS since 1989. "It's never been as bad as this."

5 Scenes that would until recently have been unthinkable have now become commonplace. Hospitals are running well over capacity. Many patients don't get treated in wards, but in the back of ambulances or in corridors, waiting rooms and cupboards – or not at all. "It's like a war zone," an NHS worker at a hospital in Liverpool told CNN.

10 These stories are borne out by the data. In December, 54,000 people in England had to wait more than 12 hours for an emergency admission. The figure was virtually zero before the pandemic, according to data from NHS England. The average wait time for an ambulance to attend a "category 2" condition – like a stroke or heart attack – exceeded 90 minutes. The target is 18 minutes. There were 1,474 (20%) more excess deaths in the week ending December 30 than the 5-year average.

15 Ambulance staff and nurses have staged a series of strikes over pay and working conditions, with the latest walkout by ambulance workers happening Monday. More are planned for the coming weeks. (...)

While the NHS has suffered crises before, this winter has brought a new reality: In Britain, people can no longer rely on getting healthcare in an emergency.

20 Founded shortly after World War II, the NHS is treated with an almost religious reverence by many. Britons danced for it during the 2012 London Olympics and clapped for it during the pandemic. "Our NHS" is a source of national pride.

Now, it is coming unstuck. (...)

25 Some of these strains can be seen elsewhere in Europe. Doctors in both France and Spain have held strikes in recent weeks, as many countries face the same problems of providing care to an increasingly aging population – when inflation is at its highest level in decades. Yet there are fears that the NHS is in worse shape than its international peers, and CNN spoke with experts who said they fear they're witnessing the "collapse" of the service.

So how did Britain get here?

Covid-19

30 When Covid-19 hit, the NHS went into full crisis-fighting mode, diverting staff and resources from across the organization to care for patients with the disease. But, for many in the NHS, Covid-19 remains a crisis from which they are yet to emerge.

Explanations for the current crisis “have to start with a consideration of Covid-19,” Ben Zaranko, an economist at the Institute for Fiscal Studies (IFS) whose work focuses on Britain’s health care system, told CNN. “There’s the simple fact that there are beds in hospitals occupied by Covid patients, which means those
35 beds can’t be used for other things.” Covid also created a strain on the amount of work the NHS can do. “If you add up all the time that staff spend doing infection control measures, donning protective equipment and separating out wards into people with and without Covid ... that might impede the overall productivity of the system,” Zaranko said. Rates of NHS staff sickness are also considerably higher than they were pre-pandemic, according to IFS analysis.

40 But, again, Britain was not alone in battling the pandemic, yet it appears to have suffered a worse hit than comparable nations.

Capital expenditure

Even with the increase in funding since the pandemic, the UK is still playing catchup, after what critics say is more than a decade of underfunding the NHS.

45 Neville, a consultant in a hospital, judges 2008 the “best” he has seen the NHS in more than 30 years of working in it. By that time, the NHS had enjoyed nearly a decade of hugely increased investment. Waiting lists fell substantially. Some even complained about getting doctor appointments too quickly.

“When the Labour government came in in 1997, they injected considerably more money into the NHS. It enabled us to appoint an adequate number of staff and get on top of our waiting lists,” Neville told CNN.

50 But this level of investment did not last. In response to the 2007-2008 financial crisis, the Conservatives elected in the coalition government in 2010 embarked on a program of austerity. Budgets were cut and staff salaries frozen. For Neville, the ensuing decade saw a gradual “erosion” of the system: “Slow, subtle, but nonetheless happening.” (...)

55 During this period, capital expenditure – the amount spent on buildings and equipment – was especially low, according to the Health Foundation analysis. The UK has far fewer MRI and CT scanners per person than the Organisation for Economic Co-operation and Development (OECD) average, meaning staff often have to wait for equipment to become available. Hospital beds are particularly scarce. Over the past 30 years the number of beds in England has more than halved, from around 299,000 in 1987 to 141,000 in 2019. (...)

Social care

60 The bed shortage has been made even more acute by the fact that many of those in hospital no longer need to be there – there is simply nowhere else for them to go.

The problem is caused by a crisis in another sector: Social care. Patients that could leave the hospital end up staying there because they cannot access more modest care in a home setting and so cannot be safely discharged.

65 Health and social care are separate sectors in the UK system. Healthcare is provided by the NHS, whereas social care is provided by local councils. Unlike the NHS, social care is not free at the point of use: It is rationed and means-tested. There have long been calls to integrate the two systems, since a crisis in one system feeds through into the other.

70 “If you allow us to regain the enormous number of beds that are currently occupied by people awaiting social care, then I would be very confident that the immediate snarl-up in A&E and ambulances waiting outside would pretty much disappear overnight,” Neville said.

With an increasingly aging population – the latest census data show nearly 19% of the population of England and Wales is now 65 or older – demand for social care is increasing. But the sector is struggling to provide it in the face of staffing shortages, rising costs and funding pressures.

75 Care work can be grueling and underpaid. Most supermarkets offer a better hourly wage, analysis from the King’s Fund found. So, it is perhaps unsurprising that the sector reported 165,000 vacancies in August.

Staffing

The NHS is also reporting an alarming number of vacancies, with about 133,000 open positions as of September.

80 This points to a deeper crisis: Morale.
Jatinder Hayre, a doctor completing the foundation program at a hospital in East London, told CNN that morale is “at an all time low.” Staff are “stressed, fatigued, tired,” he said. “There doesn’t seem to be an end to this.”

A doom loop?

85 The concern is that these issues get worse the longer they go untreated.

When patients finally get seen, their treatments take more time, forcing those after them to wait even longer as they get sicker. “In terms of the system performance, it feels like we’re past the tipping point,” Zaranko said.

90 It is unclear how the NHS regains its footing. Some compare this crisis to a period in the 1990s when services were rapidly deteriorating. The NHS was in bad shape, but restored its levels of service after a decade of historically high investment while Labour was in power.

Injections of cash on this scale are unlikely to be replicated. The most recent budget announced by the government in November will see NHS England spending rise by only 2% in real terms on average over the next two years. (1307 words)

Text 11 - Au Royaume-Uni, au-delà des grèves du NHS, le modèle de santé en question

Par [Cécile Ducourtieux](#) (Londres, correspondante), *Le Monde*, 06 février 2023

(Selon les syndicats, le mouvement qui devrait mobiliser des dizaines de milliers d’infirmiers et d’ambulanciers à partir de lundi est le plus massif de l’histoire.

Des dizaines de milliers d’infirmiers et d’ambulanciers anglais devaient de nouveau être en grève, à partir de lundi 6 février, leur troisième débrayage en trois mois, à l’appel des syndicats Unite, GMB et Royal

5 College of Nursing (RCN)) (...)

Au-delà de ce conflit social inédit, c’est la question du modèle du NHS qui est posée. Mais pour l’heure, ni les conservateurs, au pouvoir depuis treize ans, ni les travaillistes, qui espèrent gagner Downing Street aux prochaines élections générales (en 2024), n’osent y répondre franchement. Quand il a été fondé il y a soixante-
10 **quinze ans, le NHS était un service public révolutionnaire : il était complètement gratuit. Il le demeure : les rendez-vous avec des médecins généralistes, les prises en charge par une ambulance, les passages aux urgences ou les hospitalisations se font sans que les patients – qui doivent au préalable être enregistrés auprès du NHS – n’aient à déboursier 1 livre.**

Seuls les médicaments sont payants, mais les sommes sont modiques. Essentiellement financé par l’impôt des
15 **Britanniques, le budget du NHS est le poste le plus important du budget de l’Etat britannique (180 milliards de livres sterling par an, soit 200 milliards d’euros) et a été épargné durant la décennie d’austérité imposée par les conservateurs, à partir de 2010.** « *Son budget n’a cependant augmenté que d’environ 1,5 % par an entre 2010 et 2019, ce qui n’est pas suffisant pour couvrir les besoins d’une population vieillissante, et de plus en plus sujette aux maladies chroniques (diabète, etc.). Le manque d’investissement est criant dans les infrastructures et les équipements médicaux* »,
20 souligne Stuart Hoddinott, expert à l’Institut for Government (IfG), un think tank londonien indépendant. Le Royaume-Uni est notamment l’un des pays de l’OCDE les moins pourvus en scanners et appareils d’IRM.

En 2019, Boris Johnson avait promis la construction de quarante nouveaux hôpitaux dans le pays d’ici à 2030. L’*Observer* a révélé dimanche que seuls une dizaine de chantiers avaient été approuvés. En outre, le pays n’a pas assez formé de médecins, rendu les études d’infirmières payantes (environ 9 000 livres sterling par an), et limité le nombre de
25 lits d’hôpitaux disponibles pour la population. « *Dès le milieu des années 2010, en hiver, le taux d’occupation des lits d’hôpitaux était maximal* », souligne Stuart Hoddinott.

La pandémie a aggravé une situation déjà critique. Epuisés, en manque de reconnaissance salariale, beaucoup de personnels ont quitté le navire (les restrictions migratoires instaurées par le Brexit ont aussi réduit la part des personnels européens) et les listes d'attente ont atteint un record : fin 2022, plus de 7 millions de personnes attendaient des soins 30 ou des opérations. Obtenir un rendez-vous en présentiel avec son généraliste est devenu très difficile. Nombre de malades se retrouvent aux urgences, certains attendent des heures qu'une ambulance les y conduise.

Rencontré le 11 janvier, lors d'une précédente grève à Waterloo, l'ambulancier Marcus Davis, 50 ans, témoignait d'un NHS qui craque de partout. « *Quand j'ai commencé ce travail, en 2000, je pouvais faire douze allers-retours à l'hôpital par jour. Aujourd'hui, je n'en effectue que trois ou quatre : les urgences manquent de lits, nous devons attendre 35 avec les patients dans l'ambulance que des places se libèrent. Les lits d'hôpitaux sont occupés par des gens qui devraient être en maisons de retraite mais celles-ci manquent aussi de place.* »

Augmenter les impôts pour mieux financer la prise en charge des personnes âgées et soulager le NHS ? Le gouvernement Johnson a tenté une hausse de la National Insurance (une taxe sur les revenus), mais elle a été annulée par la première ministre Liz Truss à l'automne 2022. Pour Rishi Sunak, pas question de la rétablir : les élus conservateurs 40 ne jurent que par les baisses d'impôts. Du côté des travaillistes, on propose de former davantage de médecins, sans se risquer à parler financement. Faire payer l'accès au NHS en instaurant un système d'assurance maladie ? Sajid Javid, ex-ministre de la santé de Boris Johnson, a suggéré en janvier, dans le *Times*, que les consultations de généralistes et les visites aux urgences soient facturées.

Sa proposition a été accueillie avec une extrême froideur. Les travaillistes ont hurlé à la « *privatisation* » du système 45 de santé, un argument avancé à chaque élection générale. Les conservateurs sont restés silencieux. Parler de rendre payant le NHS, le service public auquel les Britanniques tiennent le plus, reste tabou même si le marché des soins privés existe : en dentisterie ou pour des traitements contre le cancer, ceux qui ont les moyens y ont déjà recours. Fils d'un médecin et d'une pharmacienne du NHS, Rishi Sunak s'était, lui, risqué l'été dernier à proposer une amende de 10 livres pour ceux qui ne se rendaient pas à leur rendez-vous avec leur médecin. Mais il s'est vite ravisé en arrivant à Downing 50 Street à l'automne.

See also

https://www.nytimes.com/2023/07/16/world/europe/uk-nhs-crisis.html?unlocked_article_code=1.Xk0.2QOo.MuSq7sknKdag&smid=url-share

Part 4 - Dropping Life Expectancy in the US

The short, predigested version for those in a hurry 😊

Text 12 - Les causes de la baisse de l'espérance de vie aux Etats-Unis

Mister Prepa (!), 9 juin 2023

Aux Etats-Unis, **l'espérance de vie à la naissance a baissé de 2,7 ans entre 2019 et 2021**. Ce recul s'explique par une multitude de causes, **entre crise des opioïdes, manie des armes à feu et « morts de 5 désespoir »**.

L'alarmant déclin de l'espérance de vie aux Etats-Unis Le 31 août 2022, les autorités sanitaires américaines ont annoncé que l'espérance de vie des Américains a diminué de presque un an en 2021, après avoir déjà 10 perdu un an et demi en 2020, notamment en raison de la 13

pandémie de Covid-19. Selon le Centre de prévention et de lutte contre les maladies, **une personne née aux États-Unis en 2021 a actuellement une espérance de vie de 76,1 ans** (plus précisément, à 79,1 15 ans pour les femmes et 73,2 ans pour les hommes).

Jamais, depuis un siècle, **la durée de vie moyenne n'a accusé une telle régression aux États-Unis**, situation d'autant plus tragique qu'elle s'inscrit dans une tendance à long terme de détérioration de la longévité 20 dans ce pays par rapport à ses pairs. « Cette baisse de 77

à 76,1 ans a porté **l'espérance de vie à la naissance aux Etats-Unis à son plus bas niveau depuis 1996** ».

Parmi les nations les plus développées, **les Etats-Unis sont le seul pays à connaître une telle situation**. « Certains pays à haut revenu n'ont subi aucune perte d'espérance de vie pendant la pandémie et d'autres qui avaient subi une perte en 2020 ont largement regagné le terrain perdu en 2021 », relève Noreen Goldman, professeur de démographie et d'affaires publiques à la Princeton School of Public and International Affairs. A titre d'exemple, en France, l'espérance de vie a très fortement diminué en 2020, avant d'augmenter en 2021, à **82,5 ans, revenant quasiment au niveau pré-pandémique (82,9 ans)**. Elle est de 79,3 ans pour les hommes et de 85,4 ans pour les femmes.

La réglementation sur les armes à feu participe à la diminution de l'espérance de vie

Le 6 mai 2023, un tireur a ouvert le feu dans un supermarché au Texas, tuant huit personnes, dont plusieurs enfants, avant d'être abattu par la police. Particulièrement sanglant, cet épisode n'est pas rare aux Etats-Unis : **c'est la 22ème tuerie de masse** (ayant entraîné la mort de plus de quatre personnes) cette année. Le 24 janvier 2023, selon Gun Violence Archive, **4 300 décès des suites d'une fusillade de masse étaient recensés depuis 2014**.

Les morts par arme à feu sont l'une **des causes de la chute de l'espérance de vie aux Etats-Unis**. **Les enfants âgés de 5 ans vivant aux Etats-Unis ont une chance sur vingt-cinq de mourir avant leur 40ème anniversaire**, selon les calculs du « Financial Times ». Pour d'autres pays développés, dont la France, **ce taux est plus proche d'un sur cent**.

La crise des opioïdes menace l'espérance de vie des états-unis

La crise des opioïdes frappe les Etats-Unis depuis plus de 30 ans. Le 7 février 2023, Joe Biden a partagé devant le Congrès une histoire bien connue de millions d'Américains, celle de « **Courtney, qui a découvert les pilules au lycée. Cela s'est transformé en addiction et l'a menée à la mort d'une overdose de fentanyl. Elle avait 20 ans.** »

Ces dérivés de l'opium regroupent à la fois des antalgiques légaux, comme la morphine ou l'oxycodone, prescrits contre la douleur, et des substances illicites comme l'héroïne. **Trop prescrits par les médecins, encouragés par une industrie pharmaceutique peu scrupuleuse, ils ont eu pour conséquence de faire basculer des centaines de milliers d'Américains dans la dépendance**. Les

overdoses par fentanyl sont désormais la première cause de décès pour les 18-49 ans aux Etats-Unis, selon le « Washington Post ».

75 Rappelons que sous sa forme autorisée, le fentanyl est utilisé dans le traitement de douleurs graves, par exemple pour les cancers en phase terminale. **Mais depuis 2019, des cachets fabriqués illégalement (et souvent avec un dosage bien trop élevé) sont devenus une drogue de rue bon marché, abondante et extrêmement addictive**.

Selon les Centres de prévention et de contrôle des maladies américains, plus de 564 000 Américains sont morts d'une overdose de l'un de ces produits entre 1999 et 2020. Et la crise s'est accélérée : **les opioïdes ont coûté la vie à près de 82 000 personnes entre février 2021 et février 2022**.

Les « morts de désespoir » accentuent la diminution de l'espérance de vie

Des chercheurs s'alarment d'une **hausse des « morts de désespoir » aux Etats-Unis**. Cette catégorie comprend les décès par overdose, mais aussi ceux liés à l'alcoolisme et les suicides. **Les taux de suicide ont augmenté, en particulier parmi les groupes d'âge moyen**. Des problèmes de santé mentale non traités, le stress, l'isolement social et d'autres facteurs ont été identifiés comme des causes potentielles de cette augmentation des taux de suicide.

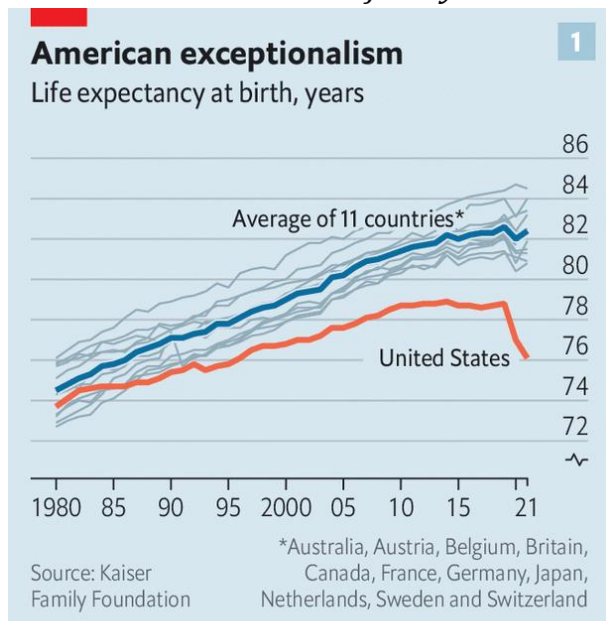
100 Dans leur livre *Morts de désespoir. L'avenir du capitalisme*, Anne Case et Angus Deaton analysent **cette tendance inquiétante, qui touche surtout les hommes blancs peu éduqués**, mais aussi les femmes n'ayant pas fait d'études. Deux catégories de population particulièrement touchées par **la mondialisation et l'automatisation de certaines tâches**.

Au lieu d'embaucher des salariés à temps plein, les entreprises choisissent de plus en plus des **contrats flexibles du type autoentrepreneurs**, ce qui ôte aux personnes qui n'ont pas fait d'études **la possibilité de grimper dans la hiérarchie**. « Les piliers qui structuraient la vie et aidaient à lui donner du sens – un travail avec des perspectives d'évolution, une vie de famille stable, une voix dans la communauté – **ont tous disparu** », note l'auteure.

Pour conclure, aux Etats-Unis, **l'espérance de vie ne cesse de diminuer depuis des années et le phénomène ne semble pas s'enrayer**. Les causes sont multiples mais la **réglementation sur les armes à feu**, la crise des opioïdes et les « morts de désespoir » semblent accentuer le phénomène.

Text 13 - Horrifying numbers of Americans will not make it to old age

America tolerates rates of early death well beyond those of other rich countries



The Economist

The Economist, Jul 31st 2023

Walk into the Rebound recovery centre, on the Main Street of Hazard, Kentucky, a small Appalachian coalmining town, and you will get an instantly friendly welcome. Yet the stories you hear are bleak. On a white board at the end of the room, across from the sofas, the names of former clients who have died of overdoses in the past few years are listed. Though the town has a population of just 5,000, there are at least 20 names. James Colwell, a 33-year-old former heroin addict, who has been clean for eight years, and who now works at the centre, says that the toll keeps growing. Heroin addiction is actually less common than it used to be, he says, thanks in part to the proliferation of treatment. The problem is that “everyone is on meth. And they’re putting fentanyl in the pills.” The very next day, he says, he is going to the funeral of a middle-aged former nurse who died after accidentally taking fentanyl, a powerful synthetic opiate.

Hazard was named after Oliver Hazard Perry, a naval hero of the war of 1812, rather than for its character. Yet it is an appallingly dangerous place to live. In 2019, even before the deadly pandemic, the town and surrounding area, Perry County, came sixth-from-bottom out of America’s 3,142 counties on a measure of age-standardised mortality. At every age, people were far more likely to die. Opiates, which began to spread around 25 years ago, when doctors prescribed them to former coalminers for chronic pain, are a large

part of the reason. But heart attacks are also more common. So are traffic deaths, something local police put down to the refusal of people driving on the winding mountain roads to wear seat belts. Last year the town flooded, and mountain walls slid onto houses. And guns are everywhere. It all adds up to a lot of death. On average, people in Perry could expect to live to just 69 in 2019, compared with 79 in America as a whole.

In the past 20 years, on economic measures, America has outperformed other rich countries. Over that period, median wages grew by 25%, compared with just 17% in Germany. Managers at Buc-ee’s, a Texas-based chain of stores, can make more than experienced doctors earn in Britain. But on a more fundamental measure of wellness—how long people live—America is falling behind. To its detractors, this is a cause for Schadenfreude. “Many people say it is easier to buy a gun than baby formula in the us,” gloated a statement released by the Chinese Ministry of Foreign Affairs last year, which also pointed to declining life expectancy in general. In the past few years, according to some estimates, life expectancy in China overtook that in America. For Americans, that ought to be a more serious source of introspection than it is.

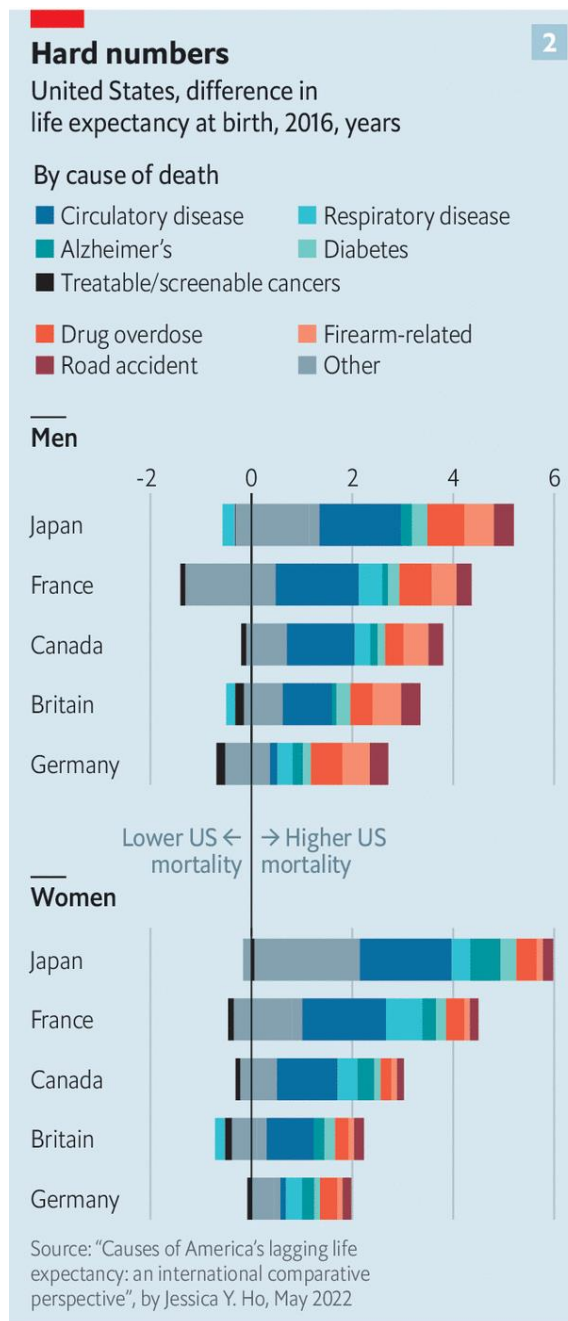
According to a study by Jessica Ho of the University of Southern California, published last year, which looked at 18 high-income countries, from a fairly average position in 1980, by 2018 America had fallen

to dead last on life expectancy. In the 1960s Americans could expect to live seven or eight years longer than people from Portugal, the country in the study that now 60 has the next-lowest life expectancy. By 2018 they could expect to live over a year less. Areas like eastern Kentucky, which have been worst hit, help illustrate why.

In the past three years, all of those figures have 65 probably worsened, owing partly to the coronavirus. A study by kff, a non-profit organisation, found that by 2021, in the worst of the pandemic, Americans could expect to live fully six years less than people in other rich countries (see chart 1). The virus reduced American 70 life expectancy by just over 2.5 years; in peer countries, the average decline was two months. Though the virus now kills far fewer people, overall mortality rates remain elevated. Death caused by opiates, car crashes and murder have all increased. The pandemic 75 underlined something that has been true for decades: America does not do a very good job of keeping its people safe.

What is killing Americans so much more? Ask almost any public-health expert, and they will point to 80 the huge burden of poor health. Tom Frieden, a former head of the Centres for Disease Control and Prevention (cdc), explains that progress on reducing mortality from chronic diseases has stalled. In the 20th century laws helped improve public health dramatically, bringing 85 about massive reductions in smoking and air pollution. Cholesterol levels tumbled, too. But now the rising burden of obesity is countering the benefits. Roughly 11% of Americans suffer from diabetes, against a figure of just 6% in France; two-fifths of American adults are 90 clinically obese, double the rate across the oecd, a club of mostly rich countries. “Despite the fact we’re making progress in some areas, we’re going backwards overall,” says Dr Frieden.

But this does not fully not explain why America is 95 doing so much worse than elsewhere. Obesity and diabetes are rising almost everywhere; rates have been higher in America for decades. And indeed, increasing access to the best health care is one of the few ways in which Americans are catching up with, or even leaping 100 ahead of, people in other rich countries. Cancer-survival rates in America are the highest in the world. Of sufferers of prostate cancer, in America 98% survive for at least ten years. In Britain the figure is only 78%. Access to health care has improved greatly. Last year 105 the proportion of Americans without health insurance fell to its lowest-ever level.



The Economist

The problem lies outside the doctor's clinic. Covid-110 19 aside, in recent years it is rising violent deaths that explain America's divergence from the rest of the rich world (see chart 2).

The facts of death

To quote William Farr, an early pioneer in medical 115 statistics, "Death is a fact. All else is inference." Life-expectancy estimates are made by extrapolating probabilities from the total raw death rate at every age each year. This means that deaths at younger ages have bigger effects. Something that shaves a year off 120 everybody's life has a similar effect on life-expectancy estimates as something that leads to the premature death of one baby in 80. And what is most shocking about

America is how many people—especially men—die young.

125 In 2021, 38,307 Americans aged between 15 and 24 died. In England and Wales the equivalent figure was just 2,185. As a share of the population, roughly three times as many Americans of that age group died in 2021 as English and Welsh. Ms Ho's research suggests that
130 Americans are more likely to die than people in other rich countries at every age up to 85. If you make it to that advanced age, your chances of surviving longer are roughly the same as elsewhere.

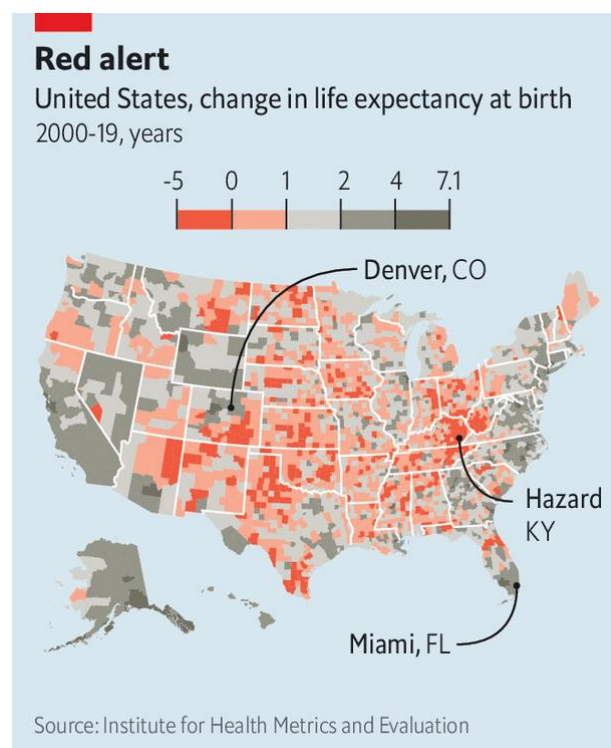
Even in 2021, as covid deaths soared, increases in
135 what the CDC calls "unintentional injuries" accounted for 16% of the decline in life expectancy they estimated happened that year over 2020. Opiates are a huge part of that. In 2021, according to the CDC, 107,000 people died of drug overdoses, the vast majority linked to
140 heroin or fentanyl. No other rich country comes close to this rate of drug deaths (though Scotland is not that far off). And in 2021 around 43,000 Americans died in car crashes, which was the highest figure since 2005 (the number fell a bit last year); in Germany the rate was a
145 quarter of America's. Around 26,000 were murdered, against just 300 in Italy.

In fact, almost any horrible death you can think of, Americans are more likely to suffer it. Over 5,000 people died in 2021 in workplace accidents, up by 9%
150 on the previous year; the figure in Britain was 123. Nearly 4,000 people died in fires, the highest number in close to 20 years, making for a death rate of nearly twice that of western Europe. Americans are more than twice as likely to drown as the Dutch (though the French, with
155 their long holidays by the ocean, drown at even higher rates).

For an explanation, a look at America's geography is revealing. According to Laura Dwyer-Lindgren, an academic with the Institute for Health Metrics and Evaluation at the University of Washington in Seattle, who analysed decades of mortality data by county, **the national trend of stagnant life expectancy reveals huge regional variation** (see map). In a place like Hazard, in eastern Kentucky, life expectancy is
160 lower now than it was in 1980. In a place like Manhattan, or some wealthier counties of Colorado, it has increased by not much less than anywhere in Europe. According to Ms Dwyer-Lindgren's data, somebody in their early 60s living in Manhattan is four
170 times less likely to die in a given year than somebody in Hazard. The highest death rates are in a band that runs across the south and south-east of the country. The

lowest are increasingly concentrated on the coasts, and in rich, mountain retreats, like Colorado.

175



The Economist

This partly reflects diverging economies. Eastern Kentucky is desperately poor. Many people turned to opiates after losing their jobs in coalmining, says Tom Vicini, of Operation unite, an NGO which tries to tackle addiction in the region. "If you look at the community that I live in now, it's changed drastically over the last
180 20 or 30 years, from a thriving coal industry to...now almost no jobs," he says. Other places that have suffered
185 as badly are also dirt poor—they include Indian reservations in South Dakota, which never had many jobs to begin with, and rural parts of the Mississippi Delta where agricultural work has dried up. But poverty cannot entirely explain what is happening. Hazard is not
190 that poor by international standards. Next to the Rebound Centre is a hip coffee shop and a smart toy shop; the streets are lined with expensive cars. Nor is death limited to the poor. Across the southern United States people on average incomes die at higher rates
195 than even the very poor in New York City.

The problem is not only that America has become less safe (though in some ways it has). It is also that other countries have improved and America has not. Take, for example, car crashes. Calculations by the
200 Urban Institute, a think-tank, show that in the 1990s French people died in crashes at a rate slightly higher than Americans—and per mile driven, at a rate roughly

double. Now, however, Americans are more than twice as likely to die in car crashes. Over the past two decades European roads have been redesigned with roundabouts, speed cameras and pedestrian barriers. American ones have been widened. Other countries have tightened up gun ownership. America has expanded it. Even opiates stand out. In the 1980s Europe also suffered a devastating epidemic of heroin abuse when heavy industry declined. Unlike America, it quickly made substitutes such as methadone widely available, and did not have another.

Lethal politics

215 Could this help explain America's drifting politics? A generation ago Ronald Reagan won re-election with an optimistic slogan, "It's morning again in America", depicting people living happy, sunny lives. In May Donald Trump launched his own version—"It's mourning again in America"—featuring fentanyl, transgender athletes and a doddering Joe Biden. Mr Trump thrived in the areas with the highest death rates, and in particular among white working-class voters, for whom death rates have increased most. In places where people die less, the Democrats are generally doing better. Katherine Cramer, a political scientist from the University of Wisconsin-Madison, suggests that much of Mr Trump's success is driven by "resentment", particularly that of white rural people who feel left behind relative to people in big cities. Dying so much earlier would seem a legitimate cause for resentment.

Yet Mr Trump's solutions hardly seem likely to fix things. Matthew Ruther, a geographer at the University of Louisville, argues that the problem is in part cultural. "The social contract is different here than it is with other countries," he says. Americans, he suggests, have a strong belief in personal responsibility, and do not expect the state to shield them from poor decisions.

A drive around Kentucky tends to support the impression that personal choices do indeed play a part. Your correspondent counted a dozen motorcyclists on his visit. Not one was wearing a helmet. Half of passenger deaths in car crashes involve somebody who is not wearing a seat belt. A visit to a gun shop in London, a town around 50 miles west of Hazard, is also revealing. Asked about opiate deaths in eastern Kentucky, the owner laments the toll but then says: "They choose to do it! I guess they just think it won't be them."

250 "The mentality in the United States is to pull yourself up by your bootstraps. Yeah no they can't," says Barbara Ramp, whose son Alec died of a heroin overdose nearly a decade ago, at the age of 20. She describes how Alec was told not to seek methadone treatment for his addiction, because he should focus on getting truly clean. "Our government just doesn't seem to be protecting people," she says. Some Republicans suggest that it is not the government's job to protect people. "It's worth [it] to have a cost of, unfortunately, some gun deaths every single year so that we can have the Second Amendment," said Charlie Kirk, a prominent conservative activist, in April. Live free and die.

In fact, Americans do still generally see protection from death as the responsibility of government. The problem is that they often search for outside enemies to defeat, rather than solutions that would help Americans help themselves. To combat fentanyl, politicians such as Dan Crenshaw, a congressman, have proposed launching military strikes against drug gangs in Mexico. Yet the politicians take years to implement more direct life-saving measures. Until April this year, in Kentucky fentanyl testing-strips—which can save lives by alerting drug users to contaminated wares—were classed as illegal "drug paraphernalia". A few other states also legalised the strips this year, including hard-hit ones such as Mississippi, Ohio and Pennsylvania. But they remain illegal in several others, including Texas, Mr Crenshaw's home state.

Reducing the death toll will take more than bombing Mexico. It will also take a politics that is more sympathetic to human frailty, and at times more willing to inconvenience people. Change can happen. Under Pete Buttigieg, the transport secretary, federal money for highway improvements made available under the Infrastructure Act increasingly comes with requirements that roads be redeveloped to be safer to drive on. That mostly means making drivers go more slowly. Last year, a modest gun-control bill that expanded background checks was passed by Congress with bipartisan support, despite the opposition of the National Rifle Association, which argued it will inconvenience law-abiding gun purchasers. For tens of thousands of Americans a year, such changes cannot happen soon enough. ■

See also (for the very brave)

- **A short video**

https://www.youtube.com/watch?v=lmxF2owm3Gg&ab_channel=BBCNews

- **A long interactive article** <https://www.washingtonpost.com/health/interactive/2023/american-life-expectancy-dropping/>

- **An radio programme + thorough analysis by the health experts from NPR**

<https://www.npr.org/sections/health-shots/2023/03/25/1164819944/live-free-and-die-the-sad-state-of-u-s-life-expectancy>

Last minute addition – Culture wars and health

Text 14 - Florida surgeon general defies science amid measles outbreak

By Lena H. Sun and Lauren Weber, *The Washington Post*, February 22, 2024

As a Florida elementary school tries to contain a growing measles outbreak, the state’s top health official is giving advice that runs counter to science and may leave unvaccinated children at risk of contracting one of the most contagious pathogens on Earth, clinicians and public health experts said.

Florida **surgeon general*** Joseph A. Ladapo failed to urge parents to vaccinate their children or keep unvaccinated 5 students home from school as a precaution in a letter to parents at the Fort Lauderdale-area school this week following six confirmed measles cases.

Instead of following what he acknowledged was the “normal” recommendation that parents keep unvaccinated children home for up to 21 days — the incubation period for measles — Ladapo said the state health department “is deferring to parents or guardians to make decisions about school attendance.”

10 The controversial move by Ladapo follows a pattern of bucking public health norms, particularly when it comes to vaccines. Last month, he called for halting the use of mRNA coronavirus vaccines, in a move decried by the public health community.

Ben Hoffman, president of the American Academy of Pediatrics, said Florida’s guidance flies in the face of long-standing and widely accepted public health guidance for measles, which can result in severe complications, including 15 death. “It runs counter to everything I have ever heard and everything that I have read,” Hoffman said. “It runs counter to our policy. It runs counter to what the [Centers for Disease Control and Prevention] would recommend.”

Measles outbreaks have been on the rise in recent years. So far in 2024, at least 26 cases in at least 12 states have been reported to the CDC, about double the number at this point last year. In addition to the six cases confirmed in the Florida school, cases have been reported in Arizona, California, Georgia, Maryland, Minnesota, Missouri, New Jersey, 20 New York City, Ohio, Pennsylvania and Virginia.

Experts say the outbreaks are linked to the growing number of parents seeking exemptions from childhood vaccinations in recent years following political backlash to coronavirus pandemic mandates and rampant misinformation about the safety of vaccines.

In January, the CDC issued a warning to health providers to be on alert for more measles cases. Infected people are 25 contagious starting four days before a rash develops and until four days afterward. ecause measles virus particles can linger in the air and on surfaces for up to two hours after an infected person leaves the area, up to 90 percent of people without immunity will contract measles if exposed. People who have been infected or received the full two doses of the MMR vaccine are 98 percent protected and very unlikely to contract the disease. That is why public health officials typically advocate for vaccination amid outbreaks.

30 “The reason why there is a measles outbreak in Florida schools is because too many parents have not had their children protected by the safe and effective measles vaccine,” said John P. Moore, a professor of microbiology and immunology at Weill Cornell Medical College. “And why is that? It’s because anti-vaccine sentiment in Florida comes from the top of the public health food-chain: Joseph Ladapo.”

When asked to comment, the Florida health department responded with a link to Ladapo’s letter.

35 Ladapo’s unwillingness to use public health tools echoes the movement by conservative and libertarian forces to defang public health’s ability to contain diseases like the highly infectious measles. In a measles outbreak in Ohio that began in late 2022, most of the 85 children infected were old enough to get the shots, but their parents chose not to do so, officials said. The state legislature in 2021 had stripped health officials’ abilities to order someone suspected of having an infectious disease to quarantine.

40 Ladapo’s letter to parents comes at a time of heightened worry about the public health consequences of anti-vaccine sentiment, a long-standing problem that has led to drops in child immunization rates in pockets across the United States. The percentage of kindergartners whose parents opted them out of at least one state-required childhood vaccinations rose to the highest level yet during the 2022-2023 school year — 3 percent — according to federal data released last year.

45 Paul Offit, a pediatric infectious diseases expert at Children’s Hospital of Philadelphia, said Ladapo’s failure to urge vaccination endangers children. “Is he trying to prove that measles isn’t a contagious disease when the data are clear that it is the most contagious vaccine-preventable disease, far more contagious than influenza or covid?” Offit wrote in an email.

The measles virus is extremely contagious, and infections spread rapidly. Young children are especially vulnerable because the first dose is not given until a child is 12 to 15 months old. The CDC recommends two doses of MMR vaccine, with the second dose at 4 through 6 years old.

A drop below 95 percent vaccination coverage for measles can compromise herd immunity and allow a virus to spread more quickly. Florida’s state vaccination coverage is 90.6 percent, but statewide vaccination coverage does not identify pockets where there may be lower coverage.

55 The outbreak will explode exponentially, becoming a much bigger community threat, if unvaccinated people exposed to the virus don’t follow public health recommendations and stay home from school during the potentially contagious period, said Patsy Stinchfield, president of the National Foundation for Infectious Diseases and a nurse practitioner in Minneapolis.

About 1 in 5 unvaccinated people in the United States who contract measles is hospitalized, according to the CDC. 60 As many as 1 out of 20 children develop pneumonia, the most common cause of death from measles in young children. About 1 child out of every 1,000 with measles will develop swelling of the brain that can lead to convulsions and leave the child deaf or with an intellectual disability. For unvaccinated babies who contract measles, 1 in 600 can develop a fatal neurological complication that can lie dormant for years.

Text 15 - Are culture wars costing lives?

BY SCOTT A. RIVKEES, OPINION CONTRIBUTOR – The Hill, 19 March 2023 03/19/23 11:00 AM ET

Culture wars have pitted conservatives against moderates and liberals and Republicans against Democrats in a struggle for dominance of beliefs, policies and laws.

5 Culture wars have existed for decades but have been escalating in ferocity over the past several years in many states. Current culture wars include calls against critical race theory, restrictions on transgender athlete competition, banning books in school libraries, 10 abolition of diversity, equity and inclusion programs, restrictions on transgender medical care for children, challenges to reproductive rights and the anti-woke movement.

Lost in this conversation is the notion that cultural 15 wars, like other wars, are claiming lives.

When one examines the leading causes of death in the U.S., we find major age-related differences. We also see

that culture war issues affect leading causes of death in all age groups.

20 In children, the leading causes of death are unintentional injury, suicide and homicide. A common link among these pediatric deaths is firearms. Just over the past year, firearms passed accidents as the leading cause of death in children. Despite recognition of this 25 problem and a seemingly endless stream of mass shootings using assault-style weapons, there has been little, if any, legislative action to address gun safety issues. In fact, gun control regulations may be moving backward. Five years after the shooting massacre in 30 Parkland, Fla., which resulted in the murder of 14 children and three adults, culture wars are now calling for open carry laws with minimal restriction in that state.

Conservative culture war proponents claim that 35 mental health issues underlie mass shootings and mental and behavioral health should be addressed to curb the problem. We also see bipartisan recognition of the escalating mental health crisis affecting children and in the U.S., along with a clarion call to address it.

40 However, culture wars are interfering with these efforts. Under the guise of parental rights, guidance counselors in some states are banned from having open, confidential conversations with children about what bothers them. School mental health programs in some 45 areas are prohibited from focusing on social and emotional learning, which can help children deal with stress. Culture wars now mean that the notion of parental rights is also being applied to education in unclear ways, but not when it comes to gender- 50 affirming care where personal parental and child medical decisions are ignored.

During the pandemic, in-person versus remote learning was a fractious issue, with the consequences of remote learning and lack of socialization recognized. 55 We also saw anti-mask movements spill over into the school setting with claims that mask-wearing disrupts the child's education and socialization. As recommended by the pediatric community, it is wonderful to see children and adolescents back in 60 school and socializing. Yet the mental and behavioral health consequences of the pandemic linger, and children are under more stress and are more despondent than at any time in recent history, stress that is also affecting parents.

65 At a time when children need less, not more stress in their lives, students and teachers in many states are having to deal with political-induced stresses. Culture clashes in schools for the sake of parental rights now reach down into influencing what books children can 70 read at a time when fewer children read books, what subject matter teachers can discuss at a time there are massive teacher shortages, and how Black studies can be taught.

We are also seeing states now refusing to 75 participate in a critically important national survey to assess the well-being of youth, meaning that assessing the state of pediatric mental health will be even more challenging. These clashes are also spilling over into higher education. One must ask, are these restrictions a 80 greater imposition on student speech, thought and socialization than face masks?

Without making a judgment related to causality, we need to recognize that gun-related deaths, suicides and homicides are greater in states where these culture

85 clashes are influencing legislation than in those where they are not. But it is important that we recognize causality.

In young adults from 25 to 45 years old, the leading cause of death is unintentional injury, with drug 90 overdoses predominating. Rates of overdose deaths have increased by 30 percent over the past three years. In 2022, more than 100,000 people died of drug overdoses, with young adults predominating.

Culture wars have led to the stigmatization of the 95 drug user rather than the recognition that action is needed for death prevention efforts and treatment. Whereas some states have attempted to stop acute deaths by making the opioid antidote naloxone widely available and encouraging treatment program access, 100 there is a pervasive notion that increasing naloxone availability or supporting needle exchange programs to combat drug-use-related infections will promote drug use rather than being useful public health measures. It is gratifying to see some states now pivoting to 105 implement programs that will reduce drug-related deaths and encourage treatment programs. Yet, we must recognize that opioid deaths are high in many states with culture wars.

Shifting to those individuals who are 55 years of age 110 and older, we find that COVID-19 is the third leading cause of death, following cancer and heart disease. When COVID-19 vaccines became available at the end of 2020, there was national enthusiasm for vaccination and long lines at vaccination centers. However, by early 115 2021 we saw the rise of COVID-19 vaccine disinformation and the rising influence of the anti-vaccine movement in Republican Party politics as this was recognized as a political wedge issue. By the spring of 2021, the U.S. saw a decline in vaccination rates. 120 The sad fact about vaccination culture wars is that political affiliation is one of the greatest risk factors for COVID-19-related deaths. Adjusting for age, COVID-19 deaths are higher in red counties than in blue counties, with rural America hit particularly hard.

125 Whereas it might be tempting to believe that the impact of culture wars is limited to policy decisions related to ideology and morality, data show otherwise. The culture wars directly affect our health and mortality, and that of our children who have little say in these 130 matters. We need to ask ourselves are these political wedge issues worth it.

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