

Whose voters suffer if inequalities in health remain?

A mortality league table for Cabinet Ministers?

Danny Dorling,
School of Geographical Sciences,
University Road,
Bristol,
BS8 1SS

Note: This paper reports on a set of statistics first presented to the annual meeting of the Radical Statistics Group in February 1998 and updates a study of the relationship between voting and mortality conducted earlier by George Davey Smith and the author (Davey Smith and Dorling 1996, 1997). The paper was first published in the *Journal of Contemporary Health* (Dorling 1998) and was updated again in 1999, to allow for Cabinet and Shadow Cabinet reshuffles, so that the results could be presented to at the Economic and Social Research Council presentation in the House of Commons in February 1999. I am indebted to Iain MacAllister, Mary Shaw and Helena Tunstall for helping put the data used in this paper together and for commenting on an earlier draft of the paper.

Introduction: Is it worth reducing inequalities in health?

The set of statistics presented here attempts to show how closely the distribution of voting mirrors the distribution of premature mortality in Britain. The paper goes on to show how spatial inequalities in mortality are reflected in the spatial distribution of members of parliament and, in particular, Cabinet Ministers. The paper argues that, given the unequal life chances of their own constituents, reducing inequalities in health in Britain should be a priority for our present government. Thus it may be a little surprising that the Green Paper on health, produced just before this paper was first presented (DoH 1998), set no explicit targets to reduce the inequalities which are described here. Similarly the government's independent inquiry into inequalities in health, published in November 1998, did not recommend specific targets and did not prioritise its recommendations (Davey Smith et. al. 1998). The government has still to respond to the inquiry's report other than in saying it would form a "key input" to policy, and this was only a press comment from Frank Dobson, Secretary of state for health.

The paper shows that every year analysed in the 1990s 119 people die unexpectedly and prematurely in Frank Dobson's constituency of Holburn and St. Pancras. This is because people aged under 65 have a mortality ratio 50% above the national average there, the 21st highest in the country and the 2nd highest amongst Cabinet Ministers. In the 1980s Holburn and St. Pancras had a mortality ratio for this age group that was 38% above the national average, 49 fewer people died unexpectedly a year under the age of 65. Inequalities in mortality are increasing, with the effects being seen most clearly amongst the constituencies of the people who voted for the ministers of the current government. Since Frank Dobson became MP for Holburn and St. Pancras in 1979 at least 1,500 more of his constituents will have died prematurely than in the average constituency in Britain. The primary reason for this level of inequality in health is inequalities in wealth, most obviously reflected through levels of poverty. In Frank Dobson's constituency 36% of households and 56% of households with children live in poverty, compared to 21% and 27% nationally (using Breadline Britain methodology).

Given such a long legacy of the effects of poverty on ill health amongst the Cabinet's constituents, a naive analyst might expect government policy to have concentrated on the eradication of poverty and inequalities in health in Britain. This paper concludes by suggesting an electoral explanation as to why reducing inequalities in general may not be a real political priority for this government. Perhaps ministers, and Members of Parliament in general, need to be reminded of the extent of inequalities in health, precisely who those inequalities affect, how they are worsening, and why they first fought to gain office?

British Democracy is weakest where peoples' lives are shortest

TABLE 1 Excess mortality and voting by ten groups of parliamentary constituencies containing equal electorates

Decile Group	Adults in '91 (millions)	Excess deaths 1981-1992	Excess deaths per year	Proportion of the Electorate Voting in May 1997:			
				Abstentions	Conservative	Labour	Lib Dem
1	4,489,754	37%	5,031	36%	10%	39%	8%
2	4,519,899	21%	2,804	33%	13%	41%	7%
3	4,430,633	14%	1,857	31%	15%	40%	8%
4	4,450,592	7%	925	30%	18%	40%	8%
5	4,285,230	1%	144	28%	21%	35%	11%
6	4,337,816	-4%	-439	27%	26%	31%	12%
7	4,324,558	-9%	-1,089	26%	27%	28%	15%
8	4,312,125	-13%	-1,579	25%	30%	24%	17%
9	4,249,041	-18%	-2,195	25%	32%	20%	20%
10	4,330,387	-23%	-2,945	24%	33%	20%	18%
Britain	43,730,035	2%	2,514	28%	22%	32%	12%

Notes

- 1: Adults populations are taken from the estimating with confidence project (and exceed the electorate).
- 2: Mortality Rates are age sex standardized SMRs for deaths under 65, England and Wales=100.
- 3: Voting figures do not sum to 100% because of voting for minor parties.

Table 1 shows the basic statistics on which most of this paper is based. To construct the table the age-sex standardized mortality ratio of each 1997 parliamentary constituency was calculated for people who died under the age of 65 between 1981 and 1992 (See Davey Smith and Dorling 1996, 1997 for further details). The mortality data is updated later to 1995 for the constituencies of Ministers and Shadow Ministers. Mortality below age 65 is termed premature mortality from here on. All the constituencies of mainland Britain were then ranked and divided into ten groups - each containing almost the same number of electors. These are termed decile groups from here on. The first decile group is made up of those constituencies which contain the 10% of the electorate living in areas with the highest premature mortality ratios (these constituencies are listed in Table 4). The second contains the tenth of the population living in constituencies with the next highest mortality ratios and so on, up to decile 10 which contains the last tenth of the population living in the constituencies with the lowest premature mortality ratios.

Figure 1. Chance of Premature Mortality Below Age 65 by Constituency (Decile Group)

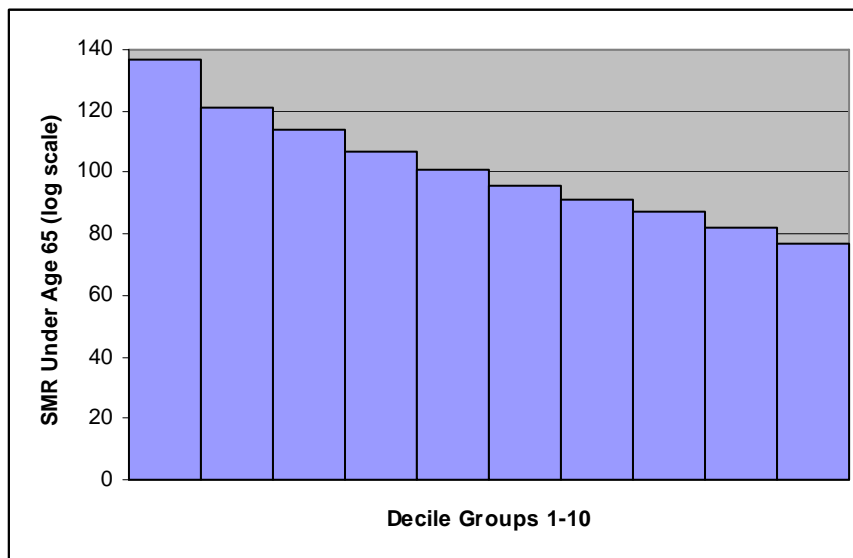
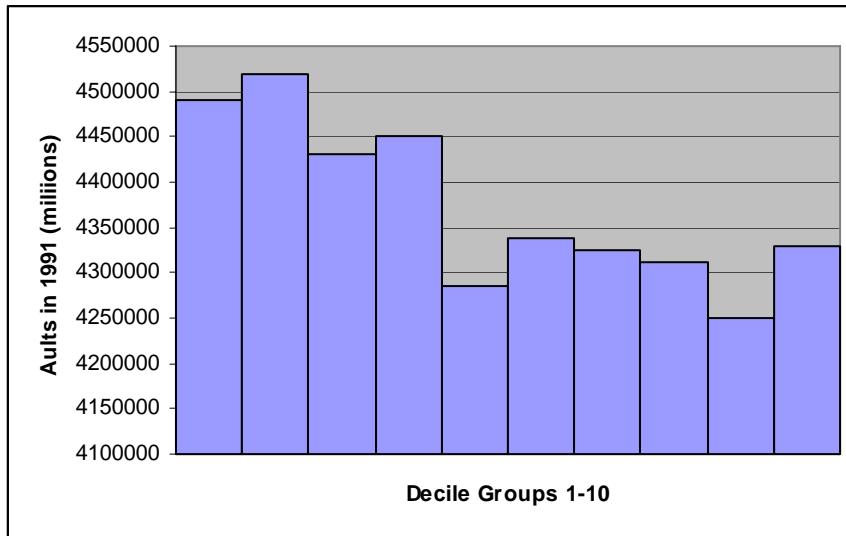


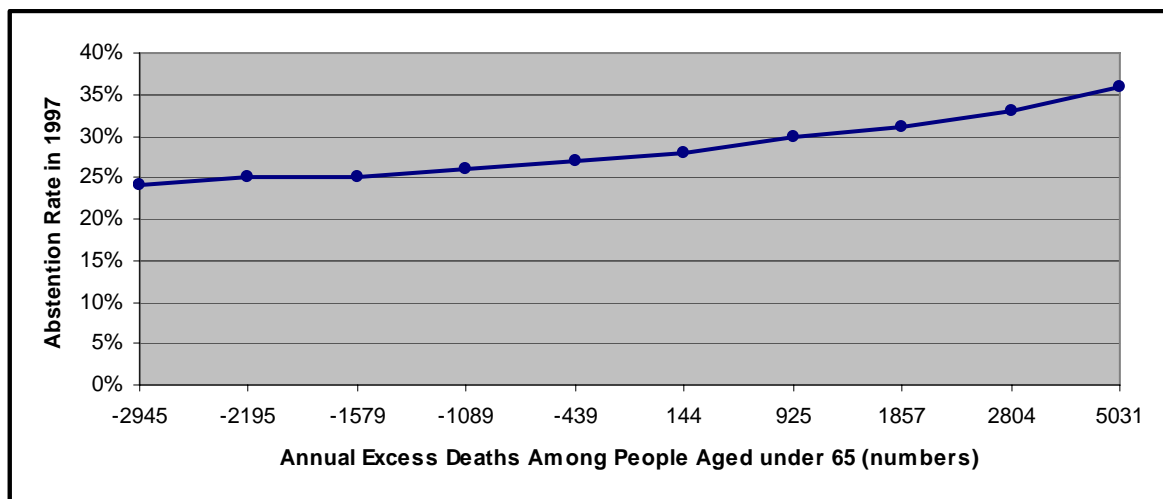
Table 1 requires some explanation. When we compare these decile groups of constituencies we are not comparing exactly the same numbers of adults as not all adults in Britain are registered to vote. The second column in Table 1, and Figure 1, shows how many adults actually lived in each decile group in 1991. Note that the 40% of the electorate living in areas with the highest premature mortality ratios (decile groups 1 to 4) contain disproportionate numbers of adults.

Figure 2: Population at Risk of Premature Mortality by Decile Area



The third column in Table 1 shows the proportion of premature deaths (under age 65 in these areas) which would not have occurred had the mortality ratios in the areas been the same as for England and Wales as a whole. This ranges from there being a third more premature deaths between 1981 and 1992 in decile group 1 than would be expected, to there being a quarter fewer in decile group 10. These statistics are put another, and more direct, way in the next column in the table, which shows how in the worst decile 5,031 more people die each year under age 65 than we would expect under equality. Because English and Welsh rates are being used to derive the expected number of deaths in an area, the ratios for Britain are slightly higher than one as they include Scotland where mortality rates are higher than in England and Wales. Figure 2 shows the distribution of excess death rates by decile area and demonstrates that there is a near log-linear continuum. Britain is not divided into areas with poor health and areas with good health, but contains a continuum of places which, when graphed, show a neat pecking order in terms of life chances. The people of decile group 1 are slightly out of line - with the jump in mortality from the second to the worst set of areas being greater than that between any other groups. This widening of the gap between the worst areas and the average opened up during the 1980s, and such spatial polarization in life chances had not been seen before then in Britain (Dorling, 1997).

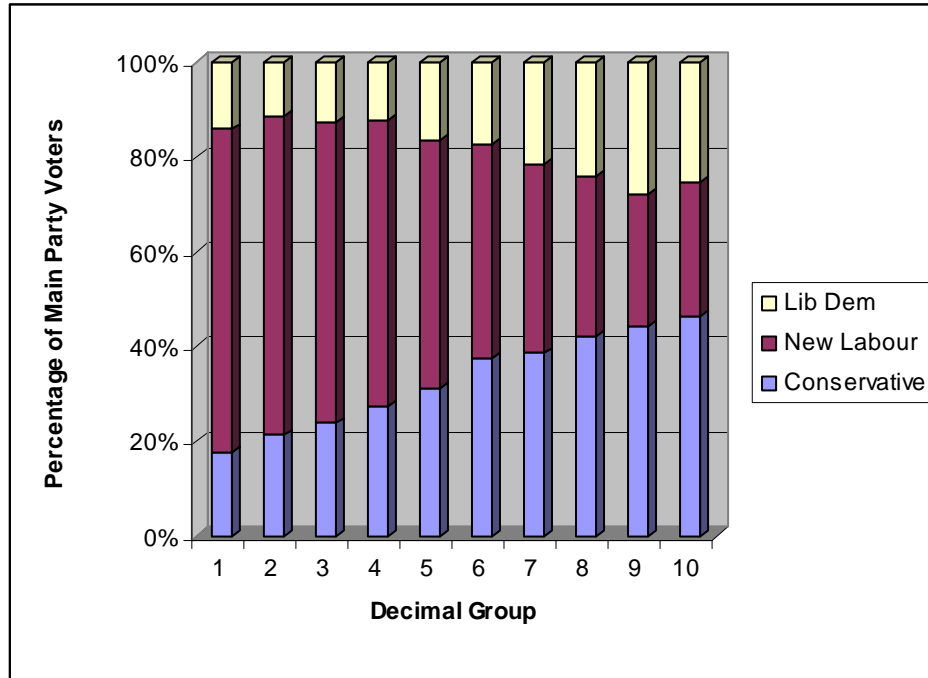
Figure 3. Premature Mortality and Voting Abstention



The fifth column in Table 1 gives the abstention rate (proportion of the registered electorate not casting a valid vote) in the constituencies in each decile group at the 1997 general election, while the final three columns show the proportion of the electorate who chose to vote for each of the three major parties. In the first seven decile areas, representing 70% of the electors of Britain, the largest proportion of electors voted for (new) Labour, while in the last three decile group the Conservatives were most popular. The abstention rate and the Labour vote rose as mortality rose, while the Conservative and Liberal votes fell. Figure 3 shows how strong the relationship is between the abstention and mortality rates in decile

groups. For every extra 600 people who died prematurely in a decile area every year between 1981 and 1992, another 1% of the electorate chose not to vote at the general election of 1997. Because the number of voters is so large and the number of deaths so (relatively) small, this relationship cannot be due to excess mortality rates in an area leading to inflated electoral rolls (although dead people can remain on the electoral roll for many months after they have died). The distribution of support for the three main parties amongst those who do choose to vote for them is shown in Figure 4.

Figure 4. Main Party Voting by Decimal Group



The proportions of the electorate shown in Table 1 do not sum to 100% because voting for the minor political parties has not been included on that table. Table 2 presents the results for any minor party that gained more than 0.5% of the electorate in any decile group. Note that although Martin Bell (the Independent MP who stood in Tatton) appears in this table, not a single English party to the left of Labour features in the table. Even in the most deprived tenth of constituencies the left-wing parties could find no noticeable support. The table shows that inequalities in health work to the detriment of people living in areas where there is support for the SNP, and to the benefit of people living in areas where the Referendum party received its strongest support. The table also shows, in its last column, the proportion of adults in each decile area who were not registered to vote, which is highest in decile group 1. When these adults are added to those who are registered but choose not to vote we see that the most popular "choice" for adults in the tenth of Britain with the highest premature mortality ratios, chosen by 40%, was not to take part in the political process at all. British democracy is weakest where peoples' lives are shortest.

TABLE 2 Voting for minor parties and not registering to vote by the ten groups of parliamentary constituencies

Decile Group	Scottish National Party	Plaid Cymru	Referendum Party	UK Independence	Martin Bell	Adults not Registered
1	5%	0%	1%	0%	0%	4%
2	4%	0%	1%	0%	0%	3%
3	2%	0%	2%	0%	0%	2%
4	1%	1%	2%	0%	0%	2%
5	1%	1%	2%	0%	0%	1%
6	1%	1%	2%	0%	0%	1%
7	0%	1%	2%	0%	0%	0%
8	0%	0%	2%	0%	1%	0%
9	0%	0%	3%	1%	0%	0%
10	0%	0%	3%	0%	0%	0%
Britain	1%	0%	2%	0%	0%	1%

Notes

- 1: No other parties registered the votes of more than 0.5% of the electorate in any decile group.
- 2: Estimates of the numbers of adults not registered assumes zero net migration between 1991 and 1997 and that the census count of non- commonwealth and Irish born adults approximates nationalities.

New Labour have a monopoly on premature mortality

TABLE 3 Seats won in 1997 by the ten groups of parliamentary constituencies containing equal electorates

Decile Group	Total Seats	Labour	Conservative	Liberal Democrats	Nationalist Parties	Others
1	70	67	0	3	0	0
2	68	65	1	1	0	1 (Speaker)
3	66	62	0	1	3	0
4	66	64	1	0	1	0
5	64	54	2	5	3	0
6	63	40	16	5	2	0
7	63	31	19	12	1	0
8	60	21	30	8	0	1 (Mr Bell)
9	60	8	46	6	0	0
10	61	6	50	5	0	0
Britain	641	418	165	46	10	2

Notes

- 1: There are more seats in decile group one because these seats have few electors than average (but more adults).
- 2: The Conservative constituency in decile 2 is Cities of London & Westminster (Peter Brooke MP, SMR 175).
- 3: Labour MPs in the most healthy constituencies include Mr Stephen Twigg (Southgate).

If instead of looking at votes we look at seats, and the Party elected, we see a very different picture. Despite a minority of adults voting for Labour in the constituencies with the highest mortality rates (and less than two fifths of those who did vote, voting for that party - see Table 1), they won 67 of the 70 seats. Table 3 shows how many seats each party won in each decile group of constituencies. Labour have a majority of the seats in the 70% of the population with the highest premature mortality rates and the Conservatives have a majority in the remaining 30%. The Liberal Democrats had their greatest success at the interface of these two groups (winning 12 of the 63 constituencies in decile group 7) reflecting their political position between the main two parties. Figure 5 shows the dominance of Labour more clearly.

Figure 5. Parliamentary Representation by Decile Group Following 1997 General Election

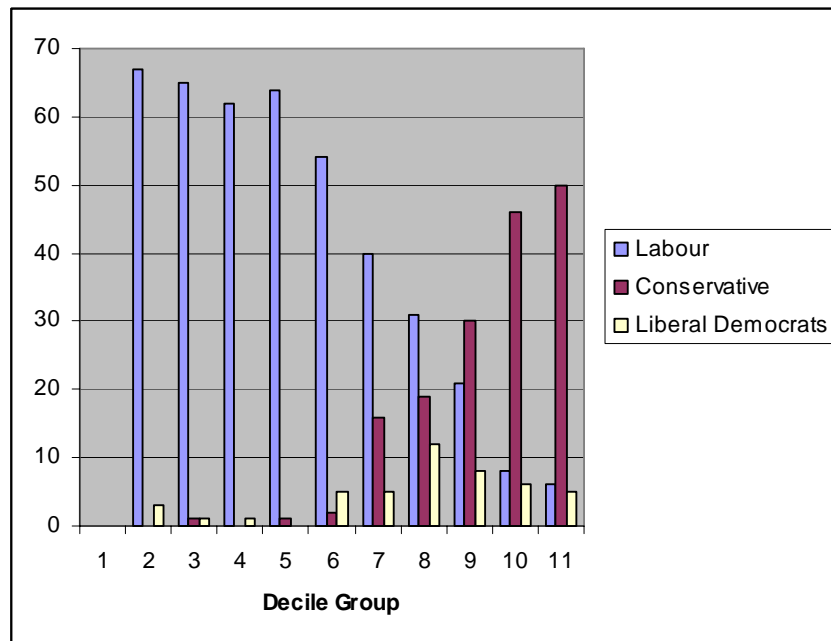


TABLE 4 Constituencies which constitute Decile 1

	Death Rate >100	People /year	Constituency	MP	Party	Title
1	95%	151	Glasgow Shettleston	Mr David MARSHALL	Labour	
2	83%	151	Glasgow Springburn	Mr Michael MARTIN	Labour	
3	74%	136	Glasgow Maryhill	Mrs Maria FYFE	Labour	
4	64%	157	Manchester Central	Mr Tony LLOYD	Labour	Minister of State
5	62%	120	Glasgow Pollock	Mr Ian DAVIDSON	Labour	
6	62%	142	Liverpool Riverside	Mrs Louise ELLMAN	Labour	
7	60%	114	Glasgow Baillieston	Mr Jimmy WRAY	Labour	
8	55%	104	Glasgow Anniesland	The Rt Hon Donald DEWAR	Labour	Secretary of State for Scotland
9	54%	114	Salford	Ms Hazel BLEARS	Labour	
10	52%	80	Glasgow Govan	Mr Mohammed SARWAR	Labour	
11	52%	70	Glasgow Kelvin	Mr George GALLOWAY	Labour	
12	51%	108	Tyne Bridge	Mr David CLELLAND	Labour	Assistant Whip
13	48%	80	Greenock & Inverclyde	Dr Norman GODMAN	Labour	
14	46%	106	B'ham Ladywood	Ms Clare SHORT	Labour	Se'y of State for Int'l Development
15	45%	99	Manchester Blackley	Mr Graham STRINGER	Labour	
16	44%	99	Vauxhall	Ms Kate HOEY	Labour	
17	44%	96	Leeds Central	Mr Derek FATCETT	Labour	Minister of State
18	43%	75	Hamilton North & Bellshill	Dr John REID	Labour	Minister of State for the Armed Forces
19	41%	100	Middlesbrough	Mr Stuart BELL	Labour	
20	40%	79	Birkenhead	Mr Frank FIELD	Labour	Minister of State for Social Security and Welfare Reform
21	40%	63	Paisley North	Ms Irene ADAMS	Labour	
22	40%	71	Airdrie & Shotts	Mrs Helen LIDDELL	Labour	Economic Secretary
23	39%	57	Manchester Gorton	The Rt Hon Gerald KAUFMAN	Labour	
24	39%	80	Poplar & Canning Town	Mr Jim FITZPATRICK	Labour	
25	38%	70	Holborn & St Pancras	Mr Frank DOBSON	Labour	Secretary of State for Health
26	38%	70	Paisley South	Mr Gordon McMASTER	Labour	
27	38%	56	Cunninghame South	Mr Brian DONOHOE	Labour	
28	35%	56	Motherwell & Wishaw	Mr Frank ROY	Labour	
29	35%	53	Hamilton South	Mr George ROBERTSON	Labour	Secretary of State for Defence
30	34%	71	Stoke Central	Mr Mark FISHER	Labour	Parliamentary Under-Secretary for the Arts
31	34%	54	Glasgow Rutherglen	Mr Tom McAVOY	Labour	Comptroller to Her Majesty's Household
32	34%	73	Bradford West	Mr Marsha SINGH	Labour	
33	33%	59	Camberwell & Peckham	Ms Harriet HARMAN	Labour	Secretary of state for Social Security
34	33%	73	Bethnal Green & Bow	Oona KING	Labour	
35	33%	53	Glasgow Cathcart	Mr John MAXTON	Labour	
36	32%	65	Bootle	Mr Joe BENTON	Labour	
37	32%	65	Bolton South East	Dr Brian IDDON	Labour	
38	32%	62	Southwark North & Bermondsey	Simon HUGHES	Liberal Democrat	
39	31%	63	Hackney South & Shoreditch	Mr Brian SEDGEMORE	Labour	
40	31%	51	Coatbridge & Chryston	Mr Tom CLARKE	Labour	Minister for Film and Tourism
41	31%	61	Edinburgh North & Leith	Mr Malcolm CHISHOLM	Labour	
42	31%	68	B'ham Sp-brook & Small Heath	Mr Roger GODSIFF	Labour	
43	31%	68	Liverpool Walton	Mr Peter KILFOYLE	Labour	Parliamentary Under-Secretary
44	30%	70	Preston	Mrs Audrey WISE	Labour	
45	28%	65	Liverpool West Derby	Mr Robert WAREING	Labour	
46	28%	64	Blackburn	Mr Jack STRAW	Labour	Secretary of State for the Home Department
47	28%	57	Newcastle East & Wallsend	Mr Nick BROWN	Labour	Parliamentary Secretary to the Treasury and Chief Whip
48	28%	42	Edinburgh Central	Mr Alistair DARLING	Labour	Chief Secretary to the Treasury
49	27%	51	Kilmarnock & Loudoun	Desmond BROWN	Labour	
50	27%	53	Nottingham East	Mr John HEPPELL	Labour	

51	27%	59	Sheffield Central	Mr Richard CABORN	Labour	Minister for Regions, Regeneration and Planning
52	27%	56	Bradford North	Mr Terry ROONEY	Labour	
53	26%	49	Merthyr Tydfil & Rhymney	Mr Ted ROWLANDS	Labour	
54	26%	55	Rochdale	Ms Lorna FITZSIMMONS	Labour	
55	26%	53	Sunderland North	Mr Bill ETHERINGTON	Labour	
56	26%	58	Hartlepool	Mr Peter MANDELSON	Labour	Minister without Portfolio
57	26%	46	Dundee West	Mr Ernie ROSS	Labour	
58	26%	56	St Helens South	Mr Gerry BERMINGHAM	Labour	
59	26%	42	Ross, Skye & Inverness West	Mr Charles KENNEDY	Liberal Democrat	
60	26%	55	Burnley	Mr Peter PIKE	Labour	
61	26%	41	Aberdeen Central	Mr Frank DORAN	Labour	
62	26%	49	Islington South & Finsbury	Mr Chris SMITH	Labour	Secretary of State for National Heritage
63	26%	18	Western Isles	Mr Calum MacDONALD	Labour	
64	25%	57	Hammersmith & Fulham	Mr Iain COLEMAN	Labour	
65	25%	63	Blackpool South	Mr Gordon MARSDEN	Labour	
66	25%	42	Falkirk West	Mr Dennis CANAVAN	Labour	
67	25%	63	Birmingham Erdington	Mr Robin CORBETT	Labour	
68	25%	32	Caithness, Sutherland & Easter Ross	Robert MacLENNAN	Liberal Democrat	
69	25%	50	Stoke North	Mrs Joan WALLEY	Labour	
70	24%	40	Clydebank & Milngavie	Mr Tony WORTHINGTON	Labour	Parliamentary Under-Secretary for Education, Training, and Employment, Health and Community Relations

Politically, the people living in the half of Britain with higher than average premature mortality ratios are represented almost exclusively by one political party: Labour. Since the Labour party have always represented poorer people and poorer people are more likely to die prematurely from the effects of poverty, this relationship is not surprising. However, it is interesting to see that the population of the tenth of the country with the highest premature mortality ratios (and, when we look at other measures the highest levels of poverty overall) are represented by the highest number of Cabinet Ministers and parliamentary secretaries of all the groups being analysed here. Table 4 shows which Members of Parliament represent the 70 constituencies making up decile group 1. They include, amongst many others, Donald Dewar (Secretary of State for Scotland), Clare Short (Secretary of State for International Development), Frank Dobson (Secretary of State for Health), George Robertson (Defence), Harriet Harman (Social Security), Alistair Darling (Treasury), Jack Straw (Home Office) and Chris Smith (National Heritage). These are the people who run government ministries, who sit in Cabinet and who are empowered to make the decisions which can either harm or help peoples' lives. Labour have a monopoly of the population with premature mortality and Labour Ministers represent an even more marginal set of constituents than do their parliamentary party members. In general, the higher the number of premature deaths, the safer the seat and the more senior the Labour politician elected.

The mortality figures for the constituencies of every member of the Cabinet and Shadow Cabinet are shown in Table Five. These include the rank of their constituency in terms of the premature mortality rate of their constituents, the proportion of premature deaths that could be avoided if mortality ratios were equalized, and how many excess deaths a year this proportion represents. Every Cabinet Minister who has a constituency represents people in areas of above average premature mortality. Every day between 1981 and 1992, an extra three people died below the age of 65 in the current Cabinet's constituencies than in the country as a whole. Put another way there were ten thousand additional premature deaths in the 1980s decade in the current Cabinet's twenty constituencies alone. The Prime Minister, Tony Blair's constituents experience 47 more deaths under 65 a year than do the voters of an average constituency (although the premature death rate in his constituency is average for a member of the Cabinet).

TABLE 5 Ministers' And Shadow Ministers' Mortality League Table 1997
5a Ministers' Mortality League Table: Deaths Under Age 65 between 1981 and 1992

Minister	Status	Rank of 641	% excess mortality	Excess Deaths per Year	Constituency
Donald DEWAR	Secretary of State for Scotland	8	55%	104	Glasgow Anniesland
Clare SHORT	Secretary of State for International Development	14	46%	106	Birmingham Ladywood
Frank DOBSON	Secretary of State for Health	26	38%	70	Holborn & St Pancras
George ROBERTSON	Secretary of State for Defence	28	35%	53	Hamilton South
Harriet HARMAN	Secretary of state for Social Security	33	33%	59	Camberwell & Peckham
Alistair DARLING	Chief Secretary to the Treasury	46	28%	42	Edinburgh Central
Jack STRAW	Secretary of State for the Home Department	48	28%	64	Blackburn
Chris SMITH	Secretary of State for National Heritage	61	26%	49	Islington South & Finsbury
David CLARK	Chancellor of the Duchy of Lancaster	71	24%	52	South Shields
Gavin STRANG	Minister of Transport	70	24%	42	Edinburgh East & Musselburgh
David BLUNKETT	Secretary of State for Education and Employment	85	23%	47	Sheffield Brightside
Tony BLAIR	Prime Minister	95	22%	47	Sedgefield
Gordon BROWN	Chancellor	106	21%	36	Dunfermline East
Robin COOK	Foreign Secretary	128	18%	27	Livingston
Ann TAYLOR	Leader of the House	129	18%	28	Dewsbury
Mo MOWLAM	Secretary of state for Northern Ireland	139	17%	40	Redcar
Jack CUNNINGHAM	Minster for Agriculture, Fisheries and Food	155	15%	26	Copeland
John PRESCOTT	Deputy Prime Minister	156	15%	38	Hull East
Margaret BECKETT	Secretary of State for Trade and Industry	184	13%	30	Derby South
Ron DAVIES	Secretary of State for Wales	216	9%	18	Caerphilly

5b Shadow Ministers' Mortality League Table

Minister	Status	Rank of 641	% excess mortality	Excess Deaths per Year	Constituency
Michael JACK	Shadow Secretary of State for Agriculture, Fisheries and Food	345	-2%	-4	Fylde
Alistair GOODLAD	Shadow Secretary of State for International Development	366	-4%	-8	Eddisbury
Michael HOWARD	Shadow Foreign Secretary	379	-5%	-10	Folkestone & Hythe
Nicholas LYELL	Shadow Attorney General	439	-9%	-17	North East Bedfordshire
Gillian SHEPHARD	Shadow Leader of the House	429	-9%	-21	South West Norfolk
William HAGUE	Leader of the Opposition	431	-9%	-18	Richmond
Brian MAWHINNEY	Shadow Home Secretary	449	-10%	-19	North West Cambridgeshire
Michael ANCRAM	Constitutional Affairs	472	-12%	-26	Devizes
John MAPLES	Shadow Secretary of State for Health	521	-15%	-35	Stratford-on-Avon
Andrew MacKAY	Shadow Secretary of State for Northern Ireland	544	-17%	-35	Bracknell
George YOUNG	Shadow Secretary of State for Defence	543	-17%	-36	North West Hampshire
Peter LILLEY	Shadow Chancellor	577	-20%	-41	Hitchin & Harpenden
Iain DUNCANSMITH	Shadow Secretary of State for Social Security	600	-22%	-43	Chingford & Woodford Green
Stephen DORRELL	Shadow Secretary of State for Education and Employment	610	-23%	-49	Charnwood
Norman FOWLER	Shadow Secretary of State for the Environment	617	-24%	-53	Sutton Coldfield
John REDWOOD	Shadow Secretary of State for Trade and Industry	638	-26%	-45	Wokingham
Francis MAUDE	Shadow Secretary of State for Culture, Media and Sport	636	-26%	-48	Horsham

The Conservative Shadow Cabinet represent a set of seats which could not be more different to those of the Cabinet (See Table 5). All Shadow Ministers represent constituents living in areas of low premature mortality. This is not true of all Conservative MPs, but Shadow Ministers tend to be the more focussed of their colleagues and to secure safe Conservative seats where premature mortality rates are lowest. Labour Ministers, represent some of the safest Labour seats in the country which hence have some of the highest mortality rates. In essence people who are well off tend to vote Conservative and tend also to live longer because of their material advantages. Successful politicians in Britain manage to secure the safer seats and hence the widest inequalities in life chances can be seen between the people who live in the constituencies of the Cabinet and those of the Shadow Cabinet.

Changes in the Cabinet 1997 to 1999

The tables show above refer to the Cabinet and Shadow Cabinet that were in place immediately after the General election of 1997. The tables below (6a and 6b) update these lists for the Cabinet and Shadow Cabinet in place in February 1999. There have been a few changes to the Labour Cabinet. Alistair Darling, Ann Taylor, Jack Cunningham and Margaret Beckett have changed posts since 1997 but remain in the Cabinet. Four Ministers have left the Cabinet and four junior Ministers have been promoted. Most notably, Peter Mandelson has entered and left the Cabinet. But as he was neither a Minister in May 1997, nor in February 1999, his comings and goings do not effect the overall picture. In short these changes have lead to government Ministers representing people who are slightly better off in terms of mortality, with, in total, 952 of their constituents dying prematurely per year between 1981 and 1992. Just over one less premature death per Minister per year, but due entirely to reshuffling rather than to any improvement in inequalities.

On the Conservative side of the house the reshuffling of the Shadow Cabinet has been too complex to describe in words. Only Michael Howard, Nicholas Lyell, William Hague and Andrew MacKay remain at their original posts, and who knows for how long? The net effect of all these changes to the Shadow Cabinet has been to increase the number of avoided premature deaths to 604, so making inequalities in mortality even less of an issue for the Conservatives. Note however, that the recasting of Peter Lilley as Deputy Leader has increased the size of the Shadow Cabinet by one.

TABLE 6 Ministers' And Shadow Ministers' Mortality League Table 1999

6a Ministers' Mortality League Table: Deaths Under Age 65 between 1981 and 1992

Minister	Status	Rank of 641	% excess mortality	Excess Deaths per Year	Constituency
Donald DEWAR	Secretary of State for Scotland	8	55	104	Glasgow Anniesland
Clare SHORT	Secretary of State for International Development	14	46	106	Birmingham Ladywood
Frank DOBSON	Secretary of State for Health	26	38	70	Holborn & St Pancras
George ROBERTSON	Secretary of State for Defence	28	35	53	Hamilton South
Alistair DARLING	Secretary of state for Social Security	46	28	42	Edinburgh Central
Nick BROWN	now Minister for Agriculture, Fisheries and Farming	47	28	57	Newcastle East & Wallsend
Jack STRAW	Secretary of State for the Home Department	48	28	64	Blackburn
Chris SMITH	Secretary of State for Culture, Media and Sport	61	26	49	Islington South & Finsbury
David BLUNKETT	Secretary of State for Education and Employment	85	23	47	Sheffield Brightside
Tony BLAIR	Prime Minister	95	22	47	Sedgefield
Gordon BROWN	Chancellor	106	21	36	Dunfermline East
Stephen BYERS	now Secretary of State for Trade and Industry	127	18	37	North Tyneside
Robin COOK	Foreign Secretary	128	18	27	Livingston
Ann TAYLOR	now Chief Whip	129	18	28	Dewsbury
Mo MOWLAM	Secretary of state for Northern Ireland	139	17	40	Redcar
Jack CUNNINGHAM	now Minister for the Cabinet Office	155	15	26	Copeland
John PRESCOTT	Deputy Prime Minister	156	15	38	Hull East
Alan MILBURN	now Chief Secretary to the Treasury	177	13	27	Darlington
Margaret BECKETT	now Leader of the House	184	13	30	Derby South
Alun MICHAEL	now Secretary of State for Wales	191	12	24	Cardiff South & Penarth

Note, since May 1997 four Ministers have left the Cabinet as well as Peter Mandelson who came late and went early (these are listed below). Four junior Ministers were promoted to the Cabinet and are included above: Nick BROWN, Stephen BYERS, Alun MICHAEL and Alan MILBURN.

Former Minister	Title	Rank of 641	% excess mortality	Excess Deaths per Year	Constituency
Ms Harriet HARMAN	was Secretary of state for Social Security	33	33	59	Camberwell & Peckham
Mr Peter MANDELSON	was Minister without Portfolio and then Secretary of State for Trade and Industry	55	26	58	Hartlepool
Dr Gavin STRANG	was Minister of Transport	70	24	42	Edinburgh East & Musselburgh
Dr David CLARK	was Chancellor of the Duchy of Lancaster	71	24	52	South Shields
Mr Ron DAVIES	was Secretary of State for Wales	216	9	18	Caerphilly

TABLE 6 Ministers' And Shadow Ministers' Mortality League Table 1999

6b Shadow Ministers' Mortality League Table: Deaths Under Age 65 between 1981 and 1992

Minister	Status	Rank of 641	% excess mortality	Excess Deaths per Year	Constituency
Michael HOWARD	still Shadow Foreign Secretary	379	-5	-10	Folkestone & Hythe
David WILLETTS	now Shadow Secretary of State for Education and Employment	415	-8	-17	Havant
Gillian SHEPHARD	now Shadow Secretary of State for the Environment	429	-9	-21	South West Norfolk
William HAGUE	still Leader of the Opposition	431	-9	-18	Richmond
Nicholas LYELL	still Shadow Attorney General	439	-9	-17	North East Bedfordshire
Ann WIDDECOMBE	new Shadow Secretary of State for Health	500	-13	-28	Maidstone & the Weald
Peter AINSWORTH	now Shadow Secretary of State for Culture, Media and Sport	508	-14	-33	East Surrey
John MAPLES	now Shadow Secretary of State for Defence	521	-15	-35	StratfordonAvon
George YOUNG	now Shadow Leader of the House	543	-17	-36	North West Hampshire
Andrew MacKAY	still Shadow Secretary of State for Northern Ireland	544	-17	-35	Bracknell
Peter LILLEY	now Deputy Leader of the Opposition	577	-20	-41	Hitchin & Harpenden
Tim YEO	now Shadow Secretary of State for Agriculture, Fisheries and Farming	584	-20	-38	South Suffolk
Gary STREETER	now Shadow Secretary of State for International Development and Overseas Pensions!	585	-20	-37	South West Devon
Iain DUNCANSMITH	still Shadow Secretary of State for Social Security	600	-22	-43	Chingford & Woodford Green
Liam FOX	now Shadow Minister for Constitutional Affairs	615	-24	-49	Woodspring
Norman FOWLER	now Shadow Home Secretary	617	-24	-53	Sutton Coldfield
Francis MAUDE	now Shadow Chancellor	636	-26	-48	Horsham
John REDWOOD	still Shadow Secretary of State for Trade and Industry	638	-26	-45	Wokingham

Note, since May 1997 five Shadow Ministers have left (listed below) Five junior Shadow Ministers were promoted as was Ann Widdecombe. The Shadow Secretary of State for International Development now includes Overseas Pensions in its remit.

Minister	Status	Rank of 641	% excess mortality	Excess Deaths per Year	Constituency
Michael JACK	was Shadow Secretary of State for Agriculture, Fisheries and Farming	345	-2	-4	Fylde
Alistair GOODLAD	was Shadow Secretary of State for International Development	366	-4	-8	Eddisbury
Brian MAWHINNEY	was Shadow Home Secretary	449	-10	-19	North West Cambridgeshire
Michael ANCRAM	was Shadow Minister for Constitutional Affairs	472	-12	-26	Devizes
Stephen DORRELL	was Shadow Secretary of State for Education and Employment	610	-23	-49	Charnwood

Changes in mortality 1981 to 1995

It would be wrong to assume that Cabinet reshuffles have actually resulted in the constituents of the Labour Cabinet being slightly better off in terms of indicators of their health because, of course, the geography of health changes, just as the geography of Cabinet Ministers' constituents change. We will not have figures on mortality for 1999 until about 2001, but what we can do is look at the most recent data we do have (for 1991-95) by the current Cabinet and this is shown in table 7a. Because inequalities in mortality continued to rise into the 1990s this, most recent table, by the most recent Cabinet, produces the most extreme picture of variation across the country The biggest relative increases in mortality ratios have been in the constituencies of the Secretary of state for Scotland (Donald Dewar), the Secretary of state for health (Frank Dobson) and the deputy Prime Minister (John Prescott). By 1995 over one thousand extra people a year were dying early in the Cabinet's constituencies, or more than one a week for each Cabinet Minister (compared to the average for England and Wales).

TABLE 7 Ministers' And Shadow Ministers' Mortality League Table 1999

7a Ministers' Mortality League Table: Deaths Under Age 65 between 1991 and 1995

Minister	Status	Rank of 641	% excess mortality	Excess Deaths per Year	Constituency
Donald DEWAR	Secretary of State for Scotland	5	81	192	Glasgow Anniesland
Frank DOBSON	Secretary of State for Health	21	50	119	Holborn & St Pancras
Clare SHORT	Secretary of State for International Development	22	48	133	Birmingham Ladywood
George ROBERTSON	Secretary of State for Defence	34	42	78	Hamilton South
Alistair DARLING	Secretary of state for Social Security	43	37	63	Edinburgh Central
Nick BROWN	now Minister for Agriculture, Fisheries and Farming	56	31	64	Newcastle East & Wallsend
Jack STRAW	Secretary of State for the Home Department	59	30	72	Blackburn
Chris SMITH	Secretary of State for Culture, Media and Sport	64	28	56	Islington South & Finsbury
John PRESCOTT	Deputy Prime Minister	82	25	61	Hull East
David BLUNKETT	Secretary of State for Education and Employment	86	24	49	Sheffield Brightside
Alun MICHAEL	now Secretary of State for Wales	120	19	39	Cardiff South & Penarth
Mo MOWLAM	Secretary of state for Northern Ireland	124	19	44	Redcar
Alan MILBURN	now Chief Secretary to the Treasury	127	18	37	Darlington
Stephen BYERS	now Secretary of State for Trade and Industry	141	17	33	North Tyneside
Tony BLAIR	Prime Minister	156	16	32	Sedgefield
Gordon BROWN	Chancellor	163	14	25	Dunfermline East
Robin COOK	Foreign Secretary	166	14	24	Livingston
Jack CUNNINGHAM	now Minister for the Cabinet Office	192	11	18	Copeland
Margaret BECKETT	now Leader of the House	196	11	23	Derby South
Ann TAYLOR	now Chief Whip	233	5	8	Dewsbury

TABLE 7 Ministers' And Shadow Ministers' Mortality League Table 1999

7b Shadow Ministers' Mortality League Table: Deaths Under Age 65 between 1991 and 1995

Minister	Status	Rank of 641	% excess mortality	Excess Deaths per Year	Constituency
Liam FOX	now Shadow Minister for Constitutional Affairs	640	-35	-44	Woodspring
Tim YEO	now Shadow Secretary of State for Agriculture, Fisheries and Farming	633	-31	-37	South Suffolk
George YOUNG	now Shadow Leader of the House	618	-27	-40	North West Hampshire
William HAGUE	still Leader of the Opposition	511	-18	-27	Richmond
John REDWOOD	still Shadow Secretary of State for Trade and Industry	641	-35	-42	Wokingham
Andrew MacKAY	still Shadow Secretary of State for Northern Ireland	584	-24	-37	Bracknell
Ann WIDDECOMBE	new Shadow Secretary of State for Health	538	-20	-31	Maidstone & the Weald
Peter AINSWORTH	now Shadow Secretary of State for Culutre, Media and Sport	540	-20	-33	East Surrey
John MAPLES	now Shadow Secretary of State for Defence	533	-20	-35	StratfordonAvon
Nicholas LYELL	still Shadow Attorney General	458	-13	-20	North East Bedfordshire
Gillian SHEPHARD	now Shadow Secretary of State for the Environment	453	-13	-24	South West Norfolk
Gary STREETER	now Shadow Secretary of State for International Development and Overseas Pensions!	582	-24	-32	South West Devon
Peter LILLEY	now Deputy Leader of the Opposition	574	-23	-32	Hitchin & Harpenden
Michael HOWARD	still Shadow Foreign Secretary	398	-8	-13	Folkestone & Hythe
Norman FOWLER	now Shadow Home Secretary	607	-26	-37	Sutton Coldfield
Francis MAUDE	now Shadow Chancellor	609	-26	-33	Horsham
Iain DUNCANSMITH	still Shadow Secretary of State for Social Security	549	-21	-27	Chingford & Woodford Green
David WILLETTS	now Shadow Secretary of State for Education and Employment	325	-2	-4	Havant

The changes were less conspicuous for the Shadow Cabinet, although the largest relative falls in mortality were for the constituents of three new Shadow Cabinet Ministers: the Shadow Minister for constitutional affairs (Liam Fox), the Shadow Secretary of state for agriculture, fisheries and farming (Tim Yeo) and the Shadow leader of the house (George Young - who was Secretary of state for defence). In short, the position of the constituents of the Labour Cabinet has deteriorated over time, while the advantage of the Shadow Cabinet's constituents has been maintained. Britain is become even more unequal in terms of the life chances of its people and some of the worst aspects of this rising inequality is reflected by contrasting the day to day experiences of the constituents of the people who are, nominally, in charge of the country or in opposition to the government.

The 1997 general election was not won by Labour, but lost by the Conservatives

The medical-political geography of Britain described above may not be too surprising to many readers, although the degree of polarization between those living in areas of poor and good health may be larger than expected. What may be more interesting is to look at how the Labour Party won the last general election with such a huge landslide, in terms of the premature mortality rates of its constituents. Table 7 presents the swings in aggregate votes for the main parties between 1992 and 1997 and the changes in abstentions and in the electorate, in terms of the premature mortality ratios experienced in the preceding 12 years (1981-1992). To be able to conduct this analysis, the results of the 1992 general election had to be reassigned to 1997 constituencies. This work was conducted by David Rossiter (see Pattie et al. 1996, 1997, Johnston et al. 1997 and Dorling et al. 1998).

TABLE 8 Change in voting between 1992-1997 in the ten groups of parliamentary constituencies containing equal electorates

Decile Group	Abstentions	Labour	Conservative	Liberal Democrats	Nationalist Parties	Other	Change in Electorate
1	6%	1%	-7%	-2%	0%	2%	-2%
2	7%	3%	-9%	-2%	0%	2%	-2%
3	7%	3%	-11%	-1%	0%	2%	-2%
4	7%	4%	-10%	-2%	0%	2%	-1%
5	6%	5%	-11%	-2%	0%	2%	0%
6	6%	7%	-12%	-3%	0%	2%	1%
7	6%	6%	-12%	-3%	0%	2%	1%
8	6%	6%	-13%	-2%	0%	3%	2%
9	6%	6%	-13%	-2%	0%	3%	3%
10	5%	6%	-13%	-1%	0%	3%	2%
Britain	6%	4%	-11%	-2%	0%	2%	0%

Notes

- 1: For Britain as a whole the first six columns sum to 0% and show the changing proportion of the electorate voting for each party.
- 2: The final column shows the change in the electorate as a proportion of the 1992 electorate and hence represents a combination of the effects of net migration and voter registration and non-registration in each decile group.

The general election of 1997 was not won by Labour but was lost by the Conservatives. Nationally (New) Labour increased their vote (as a share of the electorate) by only 4%, while the Conservative vote fell by 11%. However, Labour were very careful to ensure that they won votes in the right places, whereas the Conservatives lost them most where they needed them most. It appears likely that most former Conservative voters who chose not to vote for that party abstained and so the national abstention rate rose by 6% of the electorate between 1992 and 1997. The Liberal Democrats lost 2% of their support while other parties (mainly the referendum party, who won votes from the Conservatives) gained 2%.

As Table 8 shows both the national swings of the electorate and what the swings were in each of the ten decile groups, it is possible to see how parts of the country with different excess mortality rates changed their votes. The rise in abstentions was quite uniform across the decile groups. It is likely that this was the result of abstentions rising in poor areas due to dissatisfaction with the political process and in rich areas where voters who not Conservative but could not bring themselves to vote for any party. The Labour Party's swing was strongest where it needed the votes most, in decile 6 areas, where many votes were required to win what were thought to be safe Conservative seats. Their vote swing was weakest in the areas where they already held most of the seats, in the decile 1 group of constituencies, with the poorest health. These were also the areas where the Conservatives lost fewest votes. The poor (in terms of health among other measures) did not swing to Labour half (or even a quarter as much) as the richer voters did in 1997. Finally column 7 of the table shows how the electorates of the constituencies in each group changed over the five years. The areas with the highest premature mortality ratios lost the most registered voters, while the number of potential voters increased in the areas now largely

represented by Conservative MPs. It is difficult to disentangle the factors behind this shift in the registered population. A combination of natural change (births less deaths), migration effects and changes in the propensity of adults to register to vote will all have contributed.

Conclusion

The relationship between voting, premature mortality and political representation in Britain is remarkably close. The recent polarization in mortality rates by area and the swings in the marginals seats at the last general election made that relationship even clearer than before. The poorer half of Britain votes for the Labour Party and dies earlier. The poorest tenth of Britain dies earliest and now supports some of the most powerful politicians in this country through their votes. Are the politicians likely to try to reduce this level of inequality in life chances? The 1979-1997 Conservative government had little direct incentive or experience to attempt this. Their constituents were unlikely to present stories about their lives that made the reality of health polarization evident and this was most true of the constituents of that party's leaders. Conservative MPs were probably unaware of the differences in health to be found across Britain, and if they were aware I suspect that they blamed this on the behaviour of people they were unlikely to have ever met and whose political support they never relied on.

The story with (New) Labour should be different. It is hard to believe that Members of Parliament, some of whom have represented their constituencies for many years, are not aware that their constituents tend to live very much poorer lives than themselves and certainly have much higher chances of dying young than the MPs themselves do. Many MPs do not live in their constituency, of course, and some may not care at all about their constituents, other than requiring their votes every five years. If they do know their constituents well they may still not be aware that in other parts of the country life chances are so much better. However, to date the Labour government has not committed itself to any actions which are likely to narrow the gap in life chances between their constituents and the rest of British society. They have made an enormous number of token gestures and many, many speeches, but none of these can have an effect of any relevance. For instance, Health Action Zones: even if their introduction reduced mortality to the average for Britain in the proposed areas, the areas are too small to have any significant effect on the national pattern of inequality. The Green Paper's targets for health do not focus on inequality, indeed these new targets could all be met without any reduction in the level of inequality in health in Britain. The independent enquiry into inequalities in health has brought little that is new to the debate and has not presented what was known before with any degree of force. New Labour may care, but so far they do not appear to care enough to act decisively.

At the root of inequalities in health are inequalities in wealth, poverty, income and opportunity. This has been known for long enough. Unfortunately those without wealth, with low incomes and little opportunity are unlikely to punish their political representatives if the latter do not improve their life chances. Those who are poor and left-leaning have no party to vote for now that Labour has moved to the centre. They are a captive set of Labour supporters and can hence be ignored. Instead it is, as Figure 5 shows, the middle fifth of the country in terms of health (and by inference wealth) who determine which party is in power. The constituencies in decile groups 5 and 6 are the most marginal politically and have standardized mortality ratios that are close to the national average.

Since the second world war, the rich have always elected Conservative MPs while the poor have always elected Labour MPs. The Liberals have confused this pattern only slightly. The last election did not alter that pattern, but it did, through the rhetoric of its campaign, and the subsequent actions of its victors, show that the real concern of the party of the poorest had shifted to the centre, to the average, to the voters who live in areas where the chances of dying young are already close to the national average. In terms of winning elections in Britain, inequality is not an issue amongst the voters who matter most. They are, on average, neither rich nor poor, healthy or unhealthy. To them, initiating un-targeted action, such as "reducing waiting lists" nationally, to raise the general level of any service or condition is most likely to be beneficial. Squeezing "fat cats" and "scroungers" simultaneously will be most popular. The policy makers of the present government appear to agree. Their actions suggest that they believe that Ms/Mr Average is not interested in inequality and Ms/Mr Average matters most. It is rare to be average, in that most people in Britain aren't, or don't live in "average areas". Thus policy to suit the average is policy for the few rather than the many.

References

- Davey Smith G. and Dorling D. (1996) I'm all right John: Voting patterns and mortality in England and Wales, 1981-92, *British Medical Journal*, 313, 1573-1577.
- Davey Smith, G. and Dorling D. (1997) Association between voting and mortality remains, refereed letter, *British Medical Journal*, 315, 430-431.
- Davey Smith, G., Morris, J. N. and Shaw, M. (1998) The Independent Inquiry into inequalities in health. *BMJ*, 317:1465-6.
- Department of Health (1998) *Our Healthier Nation*, London: The Stationery Office.
- Dorling, D. (1997) *Death in Britain: how local mortality rates have changed: 1950s-1990s*, Report published by the Joseph Rowntree Foundation.
- Dorling, D., Rallings, C. & Thrasher, M. (1998) The epidemiology of the Lib. Dem. vote, *Political Geography*, 17, 1, 45-80
- Dorling, D. (1998) Whose voters suffer if inequalities in health remain?, *Journal of Contemporary Health*, 7, 50-54.
- Johnston, R., Pattie, C., Dorling, D., Rossiter, D., Tunstall, H. and MacAllister, I. (1997) Spatial variations in voter choice: modelling tactical voting at the 1997 general election in Great Britain, *Geographical & Environmental Modelling*, 1,2.
- Pattie, C., Dorling, D., Johnston, R. and Rossiter, D. (1996) Electoral registration, population mobility and the democratic franchise: the geography of postal voters, overseas voters and missing voters in Great Britain, *International Journal of Population Geography*, 2, 239-259.
- Pattie, C., Johnston, R., Dorling, D., Rossiter, D., Tunstall, H. and MacAllister, I. (1997) New Labour, new geography? The electoral geography of the 1997 British General Election, *Area*, 29, 3, 253-259.