Health and climate crises will shape Sunak’s legacy

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The UK has its first prime minister of Sotonian origin. It matters little who you are, where your family is from—Southampton or south Asia—or how rich you are. The colour of your skin or your ethnicity is not the apogee of your achievement. The fact that Rishi Sunak also happens to be of south Asian origin has a powerful resonance in the 75th year of the region’s independence from the British empire, but he will be judged by what he stands for and what he achieves.

Sunak, son of a GP and a pharmacist, should have no difficulty in understanding the importance of health and wellbeing, although he has made it clear that the economic crisis is his primary concern. Tough decisions lie ahead. He also speaks of integrity, trust, “levelling up,” and a “stronger NHS.” This cannot be empty rhetoric, but solving the economic crisis while narrowing inequalities and strengthening health and social care is a circle that his predecessors have emphatically failed to square.

A legacy of austerity was excess deaths (doi:10.1136/bmj.02507) and a baseline state of health that left the population vulnerable to a pandemic.1 The question of whether covid-19 is entering a milder phase is a live one (doi:10.1136/bmj.o2515).2 The UK has a lower number of health professionals per head of population than similar European nations and suggests a 10 point plan to tackle the workforce crisis (doi:10.1136/bmj.02567).3 A report on the future of primary care by the UK parliament’s health and social care committee has been well received, particularly its emphasis on continuity of care (doi:10.1136/bmj.o2521).4 Bill Kirkup’s review of the failure of maternity services in Kent asks why lessons aren’t being learnt (doi:10.1136/bmj.02520),5 resulting in harm to patients and cost to the health service.

Our investigation into direct-to-consumer advertising of private testing services for diagnostic and prognostic purposes should prompt a further government review and regulatory change (doi:10.1136/bmj.02518).6 The harms of commercially driven, non-evidence based screening tests include placing an added burden on taxpayer funded care, which has to pick up the cost and the responsibility of following up “abnormal” findings (doi:10.1136/bmj.02517).7 We have reported two companies to UK’s advertising standards authority.

A healthy economy is not one in which commercial determinants detrimental to health are allowed to flourish. The principles of the market don’t readily transfer to the complex business of patient care (doi:10.1136/bmj-2022-071967).8 As our health and care services descend further into the abyss, Sunak may well find that, despite his economic priorities, it is health and social care that shape his political future and determine the final verdict on his leadership.

His family’s immediate past is rooted in Africa, which is now demanding climate justice in the form of compensation (doi:10.1136/bmj.02459).9 That’s a cause that a new international leader whose history straddles the rich and poor worlds could readily champion. Sunak is known for his surefooted fiscal policy making but will be remembered for the vision that he stands for and how successful he is in moving the UK and world towards it.

Yet the answers to improving health with medium and long term economic gains lie in strategies that will outlast the political cycle and are written in the many reports and reviews already available to Sunak. The Care Quality Commission’s annual report describes how underinvestment has left England’s health and care system gridlocked and “unable to operate effectively” (doi:10.1136/bmj.02557).10 A new World Health Organization analysis highlights that the UK has a lower number of health professionals...
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