



## Britain's Socialized Healthcare System Is Overwhelmed

The British Broadcasting Corporation (BBC) reported last week that patients are dying in the United Kingdom's socialized hospital corridors as safety is compromised by "intolerable" conditions. Of course, the BBC did not attribute such horrific conditions to the fact that the British healthcare system is socialized. Instead, in typical socialist fashion, the solution offered was that more tax dollars need to be pumped into the system.



Hugh Chamberlen was the first politician to declare that socialized medicine was "an idea whose time had come." This was in 1689, and Chamberlen was a member of the British Parliament when he proposed a national healthcare insurance system so that "care might be taken that all sick, as well poor as rich, shall be advised and visited when needful by approved physicians and surgeons furnished with the necessary medicines in all diseases except the pox, midwifery, and cutting for stone."

Chamberlen's plan got no traction, but the United Kingdom eventually adopted a national healthcare system in 1948, over the objections of a fair number of Conservative Party politicians, such as Winston Churchill. But as is so often the case, once adopted, politicians of all stripes eventually fell in line, and despite its well-known problems, no major politician has since dared challenge the premise that the provision of health care is the responsibility of government.

Prime Minister Margaret Thatcher led the denationalization of many failing socialized industries during her time at 10 Downing Street, but not even "the Iron Lady" dared touch Britain's National Health "Service."

This pattern continues today, even as 68 physicians sent an open letter to Prime Minister Theresa May, informing her of the massive problems they are facing in British hospitals. The letter, from doctors in England and Wales, informed May that "patients are having to sleep in makeshift wards set up in side rooms; trolley waits of up to 12 hours are being routinely seen as staff struggle to find free beds; thousands of patients are left stuck in the back of ambulances waiting for staff to take them in; and more than 120 patients a day are being managed in corridors in some places. And some are dying prematurely."

Rosie Dawson was taken to Torbay Hospital earlier this month with a gynecological problem that had left her with severe pain and bleeding. She told the BBC that she encountered chaos inside the hospital, with trolleys everywhere, and lines of ambulances outside, with more patients in urgent-care situations.

Since there was no room available to examine her privately, staff was forced to examine her in front of other patients. "There was no dignity. It was degrading," she said. "I couldn't fault the staff; there nothing they could do. It was chaos."

Chris Hopson, speaking for the NHS, naturally blamed underfunding of the socialized healthcare system. "We have reached a watershed moment where either we fund the NHS to the extent that is needed to meet those standards or, and this absolutely not what we want, we abandon those



Written by [Steve Byas](#) on January 24, 2018

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standards.... We are now at the point where we cannot deliver the NHS constitutional standards without a long-term funding settlement.”

Prime Minister May blamed the intolerable conditions on higher than normal cases of the flu, while Hopson also added, “The cold weather is taking its toll.” (This could lead to another article on the controversy over the pros and cons of global warming and whether human beings are healthier in warmer or colder climates.) If quality of care is the standard by which the system is to be judged, Britain’s socialized system has always been a failure: Fifty years after the National Health Service began, the U.K. government released the Atcheson Report, which showed that inequality in treatment between rich and poor was worse than when the system started, with [poorer people having vastly lower survival rates for treatments](#). (*The New American* has a series of articles on how to fix America’s healthcare crisis, beginning with the article “[Healthcare: Which Fix Should We Follow?](#)”)

The elephant in the room in Britain, however, is that the fundamental problem is not the cold weather, the flu, or insufficient levels of funding, but rather the socialized nature of Britain’s healthcare system. It is not surprising that those within that system point to supposed inadequate funding as the problem, as they stand to benefit from the government throwing even more money at the structurally unsound system.

As George Pickering wrote for the Mises Institute, “The popular caricature of the NHS as suffering from chronic underfunding is simply a myth. In fact, even when adjusting for inflation, it is clear that government funding to the NHS has been increasing at an extraordinary rate since the turn of the millennium, much more quickly than during the early years which its supporters look back on so fondly.”

Today, under the “Conservative” government of 2015-2016, almost 30 percent of Britain’s public services budget was spent on its monopoly healthcare system. During the first decade of the NHS, under the Socialist Labour Party, the system received only 11 percent.

The lessons of the British socialized system of medicine are quite clear for Americans. Perhaps more than anything else, it should teach us that we should avoid socialized medicine in the USA. Second, we should note that while it is politically possible to oppose socialized medicine before it is implemented — once implemented, it is almost impossible to abolish it, no matter how obvious it is that it is not working. It will always have its defenders, despite horror stories such as Rosie Dawson receiving a gynecological examination in a hallway in plain view of other patients.



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