

Out of Hours

Youth unemployment:

a public health problem set to worsen if older people work longer

In 2012 the coalition government decided to increase the retirement age and reform public sector pensions.¹ The logic behind this is that increased life expectancy makes payouts under the old terms unsustainable for the public purse. I believe this move is misguided for several reasons. Life spans have indeed increased, but a longer old age does not automatically mean a healthier one. We, more than anyone, can testify to the burden of chronic illness in an ageing population, and the escalating consumption of healthcare resources during the last third of life.² Vital functions such as eyesight, memory, and agility decline during middle age, well before evolving to hard diagnoses such as macular degeneration, dementia, or arthritis. While there are many older people who wish to work beyond usual retirement age, this should be voluntary. Surely the most potent argument against making it compulsory is that it will exacerbate one of the most under-rated scourges of our time: the ticking time bomb of youth unemployment.

The soubriquet NEET describes young adults not in employment, education, or training. The NEET population in the UK was around 13% in 2004,³ and since that year, well before the official recognition of recession in 2008, it has been rising inexorably and currently stands at 17%.³ The statistics are grim enough, but the human and societal costs do not bear contemplating. The late teens to mid-20s are pivotal years when young adults should hone the knowledge, skills, and attitudes, including interpersonal relationships, to prepare them for their working lives. If this 'golden decade' is squandered, future employment prospects vanish. Opening the market to this generation is surely wiser than squeezing the last pips out of the 65–70 years age group, many of whom, not least NHS professionals, may have clocked up over 40 years in public service.

Should the current situation worsen as seems likely, the effect on public health will be considerable. Unemployment is positively associated with poverty, social isolation, loss of self-esteem, depression, poor physical health, and earlier mortality, all of which hit the young hardest.⁴ Boredom is likely to make drug and alcohol misuse, already rife, increase; indeed, telltale signs are emerging. The alcohol-fuelled mayhem blighting city and town centres at pub and

club closing times was once the preserve of the late teen to mid-20s age group, but now involves a greater proportion of revellers in their 30s and 40s.⁵ This is the 'older-young' generation whose social and economic aspiration has plateaued. The politically expedient trend to mask unemployment by gravitating to sickness certification will accelerate, with pressure on GPs to certify people as unfit on (often dubious) medical grounds: a gatekeeper role few of us desire.⁶ The direct cost to the exchequer in terms of benefit payments would be colossal, with an even worse tax burden on middle-income earners. Little wonder that in a speech to the BMA, Michael Marmot has declared youth unemployment a public health emergency.⁷

It is not as if senescent workers who are prevented from clearing their desks are the only obstacle for younger workers. During the last decade an unprecedented level of economic migrants, chiefly Polish and citizens of the other A8 countries, have entered the UK workforce.⁸ The merits, or otherwise, of this loom large in current public discourse; however, it is surely reasonable to question why a semi-skilled sector such as catering, where the majority of new jobs are taken by migrants, could not gainfully employ more home-grown youngsters. In their book *Jilted Generation: How Britain has Bankrupted its Youth*⁹ Ed Howker and Shiv Malik poignantly describe how, in a reversal of the usual view of ageism, there is ritual discrimination against young adults, who are seeing the doors shut on opportunities taken for granted by previous generations. Sadly, even our own profession is guilty. I have chronicled how, in the middle of the last decade, offers of partnerships in general practice all but vanished, with retiring colleagues typically replaced by a cadre of salaried doctors, assistants, and locums.¹⁰ The inference is that, almost overnight, a consensus among mid-career doctors prevailed that younger graduates from vocational training schemes were more dispensable, and less worthy of engagement on equal terms.

However, it is property ownership that most starkly illustrates the chasm in opportunity, and decline in living standards between the baby boomer generation — who will have enjoyed cradle-to-grave welfare — and their children. Soaring property prices — quite out of kilter with an

ADDRESS FOR CORRESPONDENCE

Edin Lakasing

Chorleywood Health Centre, 15 Lower Road, Chorleywood, WD3 5EA, UK.

E-mail:

Edin.Lakasing@chorleywoodhealthcentre.nhs.uk

economy that has been in reverse for half a decade — have locked many young adults completely out of the housing market. Even those fortunate enough to have stable employment often live with their parents until well into their 30s or beyond, hardly conducive to wellbeing, or maturing into a full adult role.

David Cameron and his coalition government could do worse than show some humility and reverse their changes. Sadly recent governments of all hues, including this one, have become noticeably more autocratic, despite, perhaps even because of, an inability to effect imaginative solutions to what ails the country, and the gap between rhetoric and reality is widening all the time.¹¹ While soothsaying about devolving power, the reality is inexorable centralisation to Whitehall. The economic corollary is that bolstering the City, despite its damaged image, has been almost the sole aim. While creating wealth beyond avarice for a few, the idea of a trickle-down effect is a fallacy; the reality has been a 'flood-up' effect towards a small cadre of oligarchs, financiers, and entertainment celebrities. It is an indictment of the political class that they have been so supine, indeed complicit with corrosive inequalities. It is hardly controversial to suggest that investing in the young is shrewd planning for the future, and the recent record of our elected leaders in this domain has been abysmal.

Edin Lakasing,

GP, Chorleywood Health Centre, Chorleywood.

©British Journal of General Practice

This is the full-length article (published online 1 Jul 2013) of an abridged version published in print. Cite this article as: Br J Gen Pract 2013; DOI: 10.3399/bjgp13X669248

REFERENCES

1. HM Treasury. *Independent public service pensions commission: final report*. London: HM Treasury, 2011. cdn.hm-treasury.gov.uk/hutton_final_100311.pdf (accessed 10 Jun 2013).
2. Yach D, Hawkes C, Gould CL, Hofman K. The global burden of chronic diseases: overcoming impediments to prevention and control. *JAMA* 2004; **291(21)**: 2616–2622.
3. The ACEVO Commission on Youth Unemployment. *Youth unemployment: the crisis we cannot afford*. London: ACEVO, 2012. <http://www.bristol.ac.uk/cmpo/publications/other/youthunemployment.pdf> (accessed 10 Jun 2013).
4. Dorling D. Unemployment and health. *BMJ* 2009; **338**: b829.
5. Valentine G, Holloway SL, Jayne M, Knell C. *Drinking places. Where people drink and why*. York: Joseph Rowntree Foundation, 2007. <http://www.jrf.org.uk/sites/files/jrf/2113-where-people-drink.pdf> (accessed 10 Jun 2013).
6. Hussey S, Hoddinott P, Wilson P, *et al*. Sickness certification system in the United Kingdom: qualitative study of views of general practitioners in Scotland. *BMJ* 2004; **328(7431)**: 88.
7. Limb M. Scale of youth unemployment is a public health emergency, Marmot says. *BMJ* 2011; **343**: d7608.
8. Home Office. *Accession monitoring report May 2004–December 2008*. London: HMSO, 2008. http://www.migrantsrights.org.uk/files/Accession_Monitoring_Report_may04sept08.pdf (accessed 10 Jun 2013).
9. Howker E, Malik S. *Jilted generation: how Britain has bankrupted its youth*. London: Icon Books, 2010.
10. Lakasing E. The rise of the medical McJob: why we should turn the clock back. *Br J Gen Pract* 2009; **59(562)**: 380–382.
11. Osborne P. *The triumph of the political class*. London: Pocket Books, 2008.