

Devolution and health policy: The United Kingdom in Comparative Perspective

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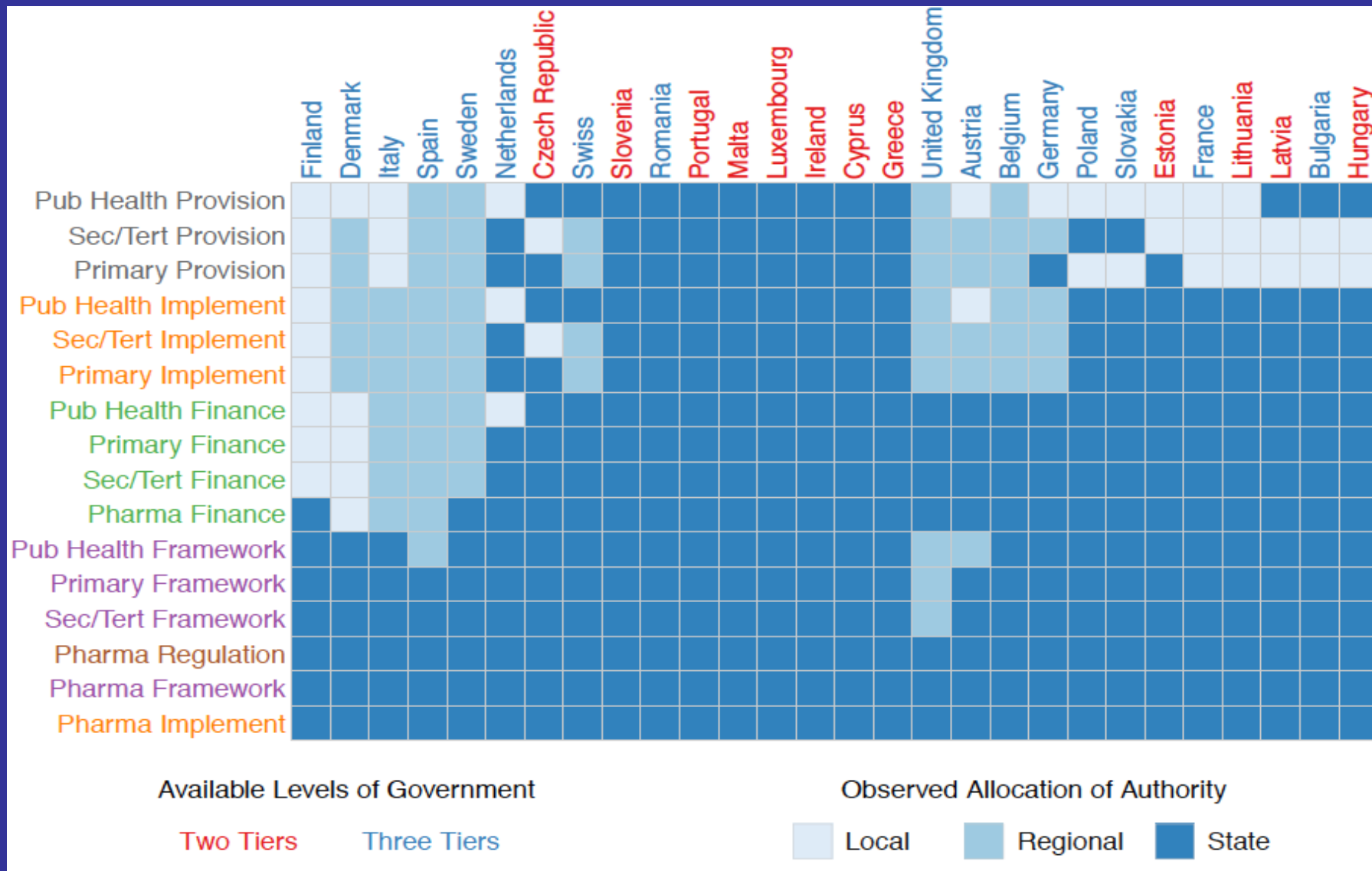
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Authority in comparative perspective



Institutional Constraints

	UK	Spain
Asymmetry	Highly asymmetric; UK governs England, with 84-85% of economy and population.	Symmetrical, with limited extra powers for some autonomous communities
Framework legislation	None. Legal controls variable and contained in legislation. No obvious legitimacy for frameworks.	Constitutionally required.
Finance	Fiscal policy tightly centralized but spending power highly decentralized; DAs spend within block budgets.* (*local government and 3%)	Some tax powers; borrowing powers.

Devolved autonomy

- Considerable devolved autonomy over health services organisation and some public health policy (e.g. smoking in public places)
- Limited but important autonomy in determining spending priorities across social policy
- Almost no intergovernmental competition
- Few tools to redistribute or affect overall social (and health?) inequalities
- Centralized political pressure in crisis

Decisions

- Three axes:
 - Health care versus public health
 - Exit versus voice as managerial techniques
 - Faith in management
- History and similarities matter: similar problem definitions, policies, and *constraints* over time and space.

