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How Politics Makes Us Sick: Neoliberal Epidemics

By Ted Schrecker and Claire Bambra,
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Described by one reviewer as a 'strident little tome'¹ and by another as a 'well written, engaging and mind opening book',² *How Politics Makes Us Sick: Neoliberal Epidemics*, challenges the reader to take a political stance on the effects of inequality in a market society on health.

The impact of social determinants on health and illness are well known and the connections between inequality, poverty and health conditions such as obesity are well established. However, such claims often focus on the need for social change; with the politics often implicit rather than explicit. Schrecker and Bambra ensure that the call for political action is forefront and centre of the debate, arguing that political systems, and in particular those that are classified as neoliberal, are at the heart of illness issues attributed to excessive food consumption, insecurity, and poverty. The political cure required therefore focuses attention squarely at the liberal democratic societies of the West and the market policies embraced by such democracies.

The authors focus their analysis on what they call four neoliberal epidemics – obesity, insecurity, austerity and inequality – in order to make their claims about the health damaging effects of neoliberal politics. The first of these, obesity, examines the lack of regulation of the food markets, and the conditions (mostly stress related) in which people overeat. The second, insecurity, refers primarily to job insecurity and changing patterns of work – notably insecure, casualised, inflexible work practices, and increased underemployment. The third epidemic, extremely pertinent since 2008, and in economies such as Greece currently, continues the theme of insecurity, but with a focus on social protection policies, lack of housing security and poverty. Finally, the epidemic of inequality is considered. Here three case studies are presented – spatial inequality (the geographic health divide between north and south England); the impact of incarceration in the United States;

and privatisation and marketisation of the National Health Service in the United Kingdom.

All these issues should be of concern to public health researchers. However, the packaging of the four cases as 'epidemics' may be off-putting. I think that a clearer exploration of specific health conditions which then teases out the links between inequality, austerity and insecurity, in particular, may be a more accepted way of arguing about the health effects of particular political systems. The presentation of data to illustrate the key argument may also be questioned by some. The authors argue (rightly) that because the effects of 'multiple complex and lengthy pathways' (p. 113) to conditions such as obesity, we need to make choices about the standard of proof required in order to tell the 'convincing causal story' (p.114); but some of the links that they make may not sit well with all of our public health colleagues.

The authors have chosen to look cross-nationally at different political, health and social systems, to explore outcomes, and make their claims. While there is certainly value in doing this, it is also difficult to compare countries, particularly when taking proxy measures as evidence of the claims. For example, the claims about anti-depressant medication as an indicator of stress needs to be nuanced, and at least give a nod to different practitioner prescribing and payment systems, including issues of diagnosis; and also acknowledge those cases where the evidence may not always be supportive of the claims being made. For example, the Scandinavian countries, which are viewed in the book as being more moderate in their uptake of neoliberal policies, also demonstrate a rise in uptake of anti-depressant medication (pp. 53-54).

In their concluding chapter, Schrecker and Bambra point to the important issue of intergenerational transmission – and this is an issue of concern to many of those in public health. Here they point (albeit briefly) to three key mechanisms that need to be taken into account in understanding intergenerational transmission – the impact of declining social mobility; stereotypes that reinforce the location of blame within individual behavior; and the more recent field of epigenetics and genetic epidemiology.

While I remain unconvinced about the labelling of the four epidemics as such, and do not entirely agree with the use of data to present their argument, I do think this book

makes a valuable contribution to politicising the inequality in its various forms and the effects of inequality on health. It is a powerful antidote to the dominance of the lifestyle discourse that focuses on the individual. Taking a big picture approach to the types of societies we live in and in this case reorienting us from the 'social determinants' to the 'political determinants' provides a valuable analytical tool. The book will be of interest to public health policy makers and practitioners; public health advocacy groups; and students of social and public health policy.

References

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