Book Review

Edited by Jordan Mansell

Ted Schrecker and Clare Bambra, *How Politics Makes Us Sick: Neoliberal Epidemics* (New York, NY: Palgrave Macmillan, 2015), 167 pages. ISBN: 978-1-137-46306-7. Hardcover \$110.00.

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In How Politics Makes Us Sick, Ted Schrecker and Clare Bambra describe the effect of neoliberal politics as an "epidemic" for the public health of democratic nations. Focusing on the United States (U.S.) and United Kingdom (U.K.) as the major suffers of this epidemic, the book's main thesis is the democratic countries with active social safety nets have healthier citizens than neoliberal nations with political systems dominated by market-based public policies. The authors demonstrate how neoliberal politics, which encourage public policies that weaken social safety nets, may be responsible for systematic factors causing individuals to live in fiscal uncertainty and stress, as well as adopting poor lifestyle choices which adversely affect their health. Thus, the underlying cause of social determinants, lifestyle choices, and the overall public health of a nation is the structure of the nation's politics.

The book's argument on the effect of neoliberal policies on public health is organized into a single chapter with four additional chapters examining case studies of obesity, insecurity, austerity, and economic inequality. The core of Schrecker and Bambra's argument is that neoliberalism causes individuals to be less financially secure and consequently they are unable to afford healthy food and experience conditions of chronic stress; due to declining investment in public programs, individuals lack assistance in alleviating these public problems. The practice of fiscal austerity, especially in the U.S. and U.K. since the Great Recession, results in less spending on public programs and decreases in the social welfare state. The health of economically-disadvantaged individuals suffers in an environment of public austerity. Market-based mechanisms of neoliberalism produce

doi: 10.1017/pls.2016.18

small social safety nets and the outcome is economic inequality among a nation's populations. In such an environment, overall health outcomes decline as lower economic earners have less access to quality health care.

The authors construct their argument through examining political, socioeconomic, and health data among industrial democracies. In particular, Schrecker and Bambra's analysis organizes nations into those with more market-based politics (neoliberalism), those with more government-based politics (social democracy), and nations that are in the middle (Bismarkian nations such as Germany). This organization may be an oversimplification of these nations, but the typology allows for the analysis of how politics affects health outcomes. The authors pay special attention to politics and health in their home country, the U.K. The data are mostly from public sources, such as the data collected by the Organization for Economic Cooperation and Development (OECD). Neoliberalism's influence on health outcomes is examined through studying obesity rates, chronic stress rates, the effects of fiscal austerity, and the effects of economic inequality. The book's focus on the relationship between politics and the public health of nations may be of interest to scholars in a variety of fields, but students of public health, comparatives politics, public policy, economics, and public administration will find the arguments particularly beneficial to their research. The book is easy to understand and would be appropriate to use in upper-level undergraduate courses as well as graduate courses focused on public health, economics, and politics.

Schrecker and Bambra present an empirical argument for the link between politics and health outcomes. However, their case would have been stronger if they had included an analysis combining the effects of social determinants, lifestyle choices, and politics. The book also could have been strengthened by including additional regression analysis that took into account the interaction of variables explaining health outcomes in order to isolate the influence of neoliberal politics. Original modeling of the interactive effects of neoliberal politics on lifestyle choices and social determinants of health would have been useful for the reader to clearly see the statistical relationship the book discusses. Still, the authors' use of descriptive data and secondary

analyses make an effective argument that politics is making us "sick." As a researcher who has mostly focused on collecting primary data by surveying public managers, the effective use of the nations' descriptive data is refreshing. However, if there had been time series regression modeling, such as the work being done by The Equality of Opportunity Project led by Raj Chetty and Nathaniel Hendren, 1 it would have benefitted the authors' argument.

How Politics Makes Us Sick also demonstrates the importance of place for explaining health outcomes. The book's main thesis aligns with the explanation that politics, people, and place drive health outcomes. In the U.S., there are regions, like Central Appalachia and the Mississippi Delta, where political geography are powerful indicators of health outcomes. The residents of these regions lack access to care, often make poor lifestyle decisions, and face social influences that harm their health. The book shows how political systems cause place to be such a powerful force in the health of regions and nations. In addition to strengthening the evidence on the effects of politics on health care, the book contributes to the literature on the geography of health. Health outcomes are the product of more than lifestyle choices and social determinants—people, place, and politics matter, and How Politics Makes Us Sick reinforces this fact.

It should be noted the connection between politics and health outcomes is not a novel topic in academic literature. For instance, Navarro *et al.* (2006) found political parties in industrial democracies affect both social policies and health outcomes. *How Politics Makes Us Sick* extends this finding by highlighting how politics, in particular neoliberalism, create an environment where people may be more likely to make unhealthy lifestyle choices, coupled with a government that does not provide support to economically-disadvantaged citizens. Therefore, this book highlights that while social determinants and lifestyle matter, neoliberalism is an epidemic that is making it more likely citizens will be sick.

This is the main contribution of the work. The book is important to the public health literature because it highlights how politics, according to the authors' policies rooted in neoliberalism, can impact lifestyle choices and result in the construction of institutional barriers that adversely affect the health of a nation's citizenry. The authors link relevant studies and data sources into a sound argument regarding the health effects of political behavior. According to the authors, politics is linked to health outcomes through limiting individuals' food choices (obesity) and weakening fiscal stability (austerity and economic inequality), causing restriction of social programs and chronic stress.

The authors' solutions to the epidemic caused by neoliberal policies on public health are relatively straightforward. The authors argue for nations to move away from neoliberal politics; they recognize this is likely unfeasible and therefore argue for citizens to advocate for taxation policy changes and more democratic control over politics through the promotion of robust social nets for public health. This would signal a movement away from neoliberal politics, but these goals are certainly just as difficult to achieve in the current political climates of nations such as the U.S. and U.K. The authors' solutions would be further strengthened by a more nuisance-minded treatment of political realities. Specifically, their solutions need to recognize the challenges facing policy reformers and the difficulties limiting the implementation of their reforms. The current literature on public policy and administration would help the authors construct a viable solution, and such a work would serve as another example of how life science benefits from the research of social sciences.

References

1. Vincente Navarro, Carles Muntaner, Carme Borrell, Joan Benach, Águeda Quiroga, Maica Rodríguez-Sanz, Núria Vergés, and M. Isabel Pasarín, "Politics and health outcomes," *The Lancet*, 2006, 368(9540): 1033–1037.

¹For more information about the project, see http://www.equalit y-of-opportunity.org.