Staying Alive: Critical Perspectives on Health, Illness and Health Care

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Abstract

Staying Alive: Critical Perspectives on Health, Illness and Health Care is a Canadian text that looks at health and healthcare through the lens of social epidemiology, critical sociology, political economics and human rights. These perspectives and analyses provide dramatic new insights into our understanding of health and healthcare. The editors have drawn on the work of 20 authors (including their own research) to provide a rich and comprehensive approach to the subject.
Résumé

Staying Alive: Critical Perspectives on Health, Illness and Health Care est un ouvrage canadien qui examine le monde de la santé et des soins de santé par la lentille de l’épidémiologie sociale, de la sociologie critique, de l’économie politique et des droits de la personne. Ces perspectives et analyses enrichissent de façon surprenante notre compréhension de la santé et des soins de santé. Les éditeurs de ce livre se sont appuyés sur le travail de 20 auteurs (y compris leurs propres recherches) pour dresser un portrait riche et exhaustif du sujet.

Staying Alive builds a case for the power of social, economic and political variables in the production of health and illness and the structure and organization of the healthcare industry. It invokes the involvement of competing interests in health and healthcare that many of the players in the field would prefer not to acknowledge. These include, but are not limited to, demands for higher profits (the authors note that despite what we like to admit publicly, approximately 30% of healthcare in Canada is for profit); wages and salaries; provincial and federal expenditures on health; continual monopolies and patents over knowledge, technology and procedures; and the continuing lobby to preserve Canada’s premier social program: in other words, keeping the status quo. The insights provided by these diverse and important perspectives are, according to the editors, intended to bring about change to the health system.

While most readers would agree with the changes suggested, they will also detect in the book’s tone a somewhat naive confidence. This is reflected in the apparent lack of appreciation of the difficulties in changing major public policy at the provincial/territorial and federal government levels and in achieving consensus between and among the 14 governments.

Despite this naivete, Staying Alive has many strengths. It is well organized into four units, with unit openers that introduce chapter content and bring cohesiveness to the range of perspectives.

The first unit deals with four different conceptual perspectives on health, illness and healthcare, from the fields of epidemiology, sociology, political economy and human rights. The book’s second unit provides further discussion and elaboration on the social determinants of health. The major thesis here is that not only are the social determinants of health a rich area for research; they also serve as a platform for social and political action to change public policy in support of societal health.

Part three contains three chapters dedicated to Canada’s healthcare system. This unit addresses the evolution of healthcare in Canada and compares it to developments
in the United States. Such forces as power and influence, politics and economics are described, together with their impact on the development of healthcare and recent attempts at reform. Integral to this discussion is the “private versus public” debate.

The book's final unit examines critical issues in health, illness and healthcare today: gender in health and healthcare, understanding disability and illness, pharmaceutical policy and public health.

The final chapter, written by the three editors, is an excellent summary of the key themes arising from the previous chapters. These include defining the field of health; conflict versus consensus models; prevention versus cure; the “public versus private” debate; constructing illness and disability; the role of public policy; and the future of the welfare state. The editors maintain that Canada’s current political environment is one of opportunity to influence public policy in support of health. Affordable housing, adequate income and a national child care program are all current debates.

The recent Supreme Court of Canada ruling on the unconstitutionality of banning health insurance for private healthcare providers has intensified the dialogue about the funding and delivery of healthcare. The editors argue that the issues and questions they address deserve attention by health researchers, policy makers, service providers and the public. I agree, and would add that these issues have profound implications for the education of future healthcare professionals if Canada is to make progress in health and healthcare.

Overall, Staying Alive is a valuable addition to Canadian healthcare literature. It provides a rich yet broad social, economic and political analysis of health, illness and healthcare that offers some candid observations. For policy makers, including politicians, public servants and healthcare professionals, this text argues the necessity of investing in social policies to support health while continuing to invest in the healthcare industry to provide safe, ethical care. For students in the health professions, this text is a “must” for understanding the broader perspectives on health and illness while valuing the professions’ role in healthcare.