

## Book Review

### ***Staying Alive: Critical Perspectives on Health, Illness and Health Care* (2nd ed.)**

**Edited by Toba Bryant, Dennis Raphael, and Marcia Rioux**  
**Toronto: Canadian Scholars' Press, 2010, 450 pp.**  
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**Reviewed by Helen Vandenberg**

Critical theoretical approaches are becoming increasingly popular in health-care scholarship. Many nursing researchers now utilize critical theoretical approaches to understand and critique political, economic, and social injustices related to health and health care.

This accessible and well-organized book is divided into four sections. In the first section, the authors describe common conceptual perspectives used to develop knowledge about health and health care, including epidemiological, sociological, political economy, and human rights perspectives. The authors briefly discuss how health studies are shaped by various knowledge paradigms, including positivism, idealism, and realism. Particular attention is paid to various critical analyses, including how researchers employ critical theoretical perspectives to uncover power structures, critique social injustices, and strive towards eliminating inequities.

In the second section, the authors describe how broader social structures such as class, gender, race, and public policy influence the health of societies. The authors critique the influence of neoliberalism and individualism and explain how these ideologies help to depoliticize health care by drawing attention away from broader political, social, and economic determinants of health. They argue that health-care providers must begin to question the dominance of the medical model and the narrow focus of health care at the level of individual behavioural choices, lifestyle, and biology.

In the third section Bryant, Raphael, and Rioux provide a historical overview of the health-care system in Canada. Comparisons are made with the American health-care systems to raise questions about the movement towards privatization. The authors discuss how current financial, jurisdictional, and organizational features of the Canadian health-care system contribute to health inequities. They reveal how key features of the Canadian system, such as private practice-public payment

and federal payment–provincial delivery, are maintained by key players seeking to protect their interests and maintain the status quo.

In the final section of the book, critical perspectives are used to draw attention to several important issues in health care. The authors analyze how health care shapes and is shaped by constructions of gender and disability. They examine how pharmaceutical use and public health have been influenced by political and economic factors. In the final chapter the authors provide an eloquent summary of the key themes of *Staying Alive*. One of the highlights of this section concerns the growing evidence for the impact of social determinants on health worldwide. The authors argue that governments address this evidence according to their political commitment to equitable resource allocation. For example, in Canada and the United States there tends to be less support for resource sharing, while in the United Kingdom, Sweden, and Norway there tends to be more support. There is now compelling evidence showing that those countries that tend to share resources and wealth have healthier populations.

Bryant, Raphael, and Rioux provide an excellent selection of evidence for the strengths of critical perspectives in health and health care. With looming shortages of health-care providers, increasing burnout, monetary inefficiency, and growing demands, the critiques provided in this book are timely and essential. Nevertheless, the volume leaves the reader wanting more. Little is suggested about how the broader social, political, and economic determinants of health might be addressed. Emphasis is placed on helping health-care providers understand and develop more equitable public policies, but is this enough? Further analysis and debate are needed regarding approaches to change. Health-care providers will not be able to change the status quo without resistance from powerful players, nor without losses from attempts to critique dominant structures. Action strategies must be debated before we can have a clearer picture of potential possibilities and pitfalls. Thinking through these solutions and challenges will help to prepare health-care providers for the struggle ahead.

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