Protecting the Health of the Poor

Social Movements in the South

Abraar Karan & Geeta Sodhi (eds)

Zed books: United Kingdom,2015. 312pp

*Reviewed by **Dr. Priya Buldeo (Population Health, Health Systems and Innovation, Human Sciences Research Council, Cape Town)***

Poverty alleviation and poverty reduction remains one of the greatest global challenges. *Protecting the Health of the Poor: Social Movements in the South* by Abraar Karan and Geeta Sodhi is a four part edited collection on legal movements; political movements; interventional approaches; and multi-faceted movements. Each part 'contributes to a diagnosis of the problem in focus: why does a health deficit persist?' (p. xv). The health of the poor (referred to as civil society in the book) and the coexistence of poverty and inequality is common across developing and developed nations where focus has recently shifted to the geo-political differences in the burdens of diseases and experiences of adverse health outcomes.

The volume combines expert voices and case studies from sub-Saharan Africa, Asia and Latin America to unpack fundamental questions of global health; what is 'health', who or what institutions are responsible for health and how can the provision of health be best achieved. It examines

> **The volume combines expert voices and case studies from sub-Saharan Africa, Asia and Latin America to unpack fundamental questions of global health; what is 'health', who or what institutions are responsible for health and how can the provision of health be best achieved**

the dynamics of 'health' across disciplines such as medicine, public policy, human rights, development and economics. Researchers, academics and activists provide viewpoints on whom or what institutions ought to provide healthcare: government, private sector or the public itself. The central principle is the relation between poverty and health. Its interrogation lies in how poverty interrelates with health to impact social, economic and cultural differences in life expectancy. This is discussed according to disease causation, for instance, HIV/AIDS, diabetes, cancer, cardiovascular diseases, malnutrition, H1N1 and 'type III diseases' (p. 105) such as tuberculosis, malaria and schistosomiasis. It offers a cyclical idea that 'poverty infringes on the right to health, which in turn causes poverty' (p. 3). This is 'clearly violated in contexts characterized by high rates of hunger and maternal and child mortality'(p. 183).

No doubt, challenges pose a threat for measuring development which complicates reflections on what an equitable state or governance really is. The collection aptly mirrors the nuances within healthcare systems where each case study provides ➤➤

> **It advocates for reduction in inequalities through policy changes amidst the widening gaps within and between countries that disempower, exclude and marginalize civil society**

perspectives on the dynamic pathways and factors that influence health outcomes. It advocates for reduction in inequalities through policy changes amidst the widening gaps within and between countries that disempower, exclude and marginalize civil society. The volume illuminates and reinforces debates on how social, economic and cultural barriers impact how care is accessed and delivered and the ways in which care is received. In the African context, for example, the health of the poor is deeply entrenched in cultural beliefs that are often inconsistent with the Western treatment paradigm which further complicates treatment and intervention strategies. In other regions, there is emphasis on why lived realities need to be considered alongside poverty as it is 'the larger sociocultural context that influences decision-making behaviours, political and economic environments' (p. 2).

The book is meticulously structured to raise pertinent questions on how innovation is regulated, the right to health claims and the role of multinational organizations and its socio-political contributions to health care. It systematically frames the complexities of poverty that go beyond fiscal disparities between rich and poor nations and advocates for 'people around the world to come together and set a comprehensive agenda to fight against poverty and to protect the health of the poor' (p. 13). It reflects how 'bad health is morally undesirable' (p. xvi) and why more must be done to dismantle oppressive institutions that exploit people who are suffering from, and who are vulnerable to, health-related conditions and diseases. It provides an excellent discussion of the social determinants of health and the interrelatedness with poverty and inequality.

Overall, the book is absorbing and compelling because of its wide-ranging and invaluable addition to

> **The book is meticulously structured to raise pertinent questions on how innovation is regulated, the right to health claims and the role of multinational organizations and its socio-political contributions to health care**

current debates on global health and the public and private sector interactions with civil society. It calls for transformation that extends past moral questions concerning the persistence of poverty to addressing why 'change is badly needed' (p. xviii). The book is strongly recommended to researchers, policy analysts, academics, activists and those with interests in health, politics, social and economic policy and development. NA