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The Politics of Women's Health: Exploring Agency and Autonomy

The Feminist Health Care Ethics Research Network: Susan Sherwin, Coordinator, Françoise Baylis, Marilynne Bell, Maria De Koninck, Jocelyn Downie, Abby Lippman, Margaret Lock, Wendy Mitchinson, Kathryn Pauly Morgan, Janet Mosher, Barbara Parish. Philadelphia, PA: Temple University Press, 1998; 321pp., \$39.90

This book resulted from a four-year collaboration among Canadian researchers committed to a feminist analysis of health care ethics. Consequently, it has both great depth and breadth, with issues taken up in several chapters from various perspectives. The “f” word (as it was described at a recent consultation of health researchers) is front and centre, and one of the achievements of this book is making the epistemological and theoretical positions clear to a potentially wide audience. Each chapter stands alone; however, the whole book is a rich source of critical analysis of the organization of Canadian health care and the values that inform practice, both historically and currently. In the introduction, Sherwin notes that “feminist health care ethics does not only change the way we handle traditional bioethical problems; it also changes the agenda of the discipline by making visible a whole range of new ethical problems.” (p. 10) Those who want to hone their skills for understanding what needs to be done to obtain justice and equity in Canadian health care will be pleased with its content. This should include anyone working in public health, particularly health promotion practitioners.

The introduction describes the work of the research network and introduces the two major themes of the book: autonomy and agency as related and important concepts; and the dominance of an individualistic model that ignores social conditions in both therapeutic and health-promoting interventions. Another theme that runs throughout the book is a caution against essentializing or assuming that any group or population – women, men, nurses, doctors, or feminists, for example – is homogenous. Each subsequent chapter is outlined in chapter 1 so that linkages are immediately apparent. Chapter 2 discusses problems with notions of autonomy, agency and informed consent and offers a relational model for ethical analysis in health. Subsequent chapters address meanings of health; the tendency to seek genetic explanations for a variety of phenomena; women in relationship with physicians; the requirement that women participate in decision-making around technology transfer; assumptions about female aging; medicine's response to wife abuse; and research ethics.

This book is a valuable resource for learning and teaching about gender analysis, and more broadly about the use of critical thinking and critical analysis in general. It is well referenced and has an extensive index. While it deals with issues globally, the Canadian roots and understanding of our health system are extremely refreshing and valuable. The current classification is Health Care/Women's Studies/Bioethics, and to these I would add Health Promotion/Masculinities. The book offers no simple solutions, but it makes substantial progress in proposing a framework for seeking solutions to some of the health problems facing both women and men today.

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