

Books & electronic media

Ethnicity, race and health in a multicultural environment: foundations for better epidemiology, public health and health care

Author: Raj S Bhopal

Publisher: Oxford University Press, Oxford, 2007
ISBN-13: 978-0-19-856817-9; paperback;
384 pages; price £32.50

This book is a thoughtful and useful addition to my reading list as a teacher of nursing, health care and research. It provides researchers and health-care practitioners with a strong foundation upon which to begin to think about race, ethnicity, multiculturalism and health care. This will be a useful textbook for health-care and research students at the postgraduate level; although undergraduates would find it a useful starting point to exploring the topic in greater depth. The intended audience for this book is wide, however: medical scientists, social scientists, health-care practitioners and researchers. The scholarly, but at the same time personal and inviting, style in which the book is written immediately engages the reader and encourages active and consolidated learning. Each chapter has a clearly stated objective, summary and conclusion, which provide the reader with a readily assimilable overview of the material being presented.

Raj Bhopal, a well known researcher in the area of race, ethnicity and health care, has a great deal to say about how health-care providers must begin to start thinking about research on, and the provision of, health care in a multicultural society. He acknowledges that multiculturalism and multicultural living are challenges for health-care providers but insists that they need to be addressed if we are to

“meet social, ethical, legal and policy obligations to deliver evidence-based health care.” For it is our failure to attend to multiculturalism in a balanced way that has led to unfair and inequitable health-care provision. There is a need for this book because there is poor understanding of how ethnicity and race influence health care in a multicultural society and hence little is being done to address the problem at the practical level. As Bhopal says, the “quality of the research leaves much to be desired” and the service fails to adapt to meet the needs of ethnic minority users.

In this book, the author provides readers with the knowledge and skills to deconstruct ethnicity, race and multiculturalism in health care, i.e., he provides historical and sociological explanation of these concepts, which unpick layers of historical and social and cultural meanings. He explores the context in which they emerged and how this context influences their accepted dominant meanings in today's health-care practice. Much of this may be uncomfortable reading for those of us who are white and have failed to see how such meaning has often shaped poor delivery of health care and poor research. It is through this process of deconstruction that readers are encouraged to reflect on taken-for-granted assumptions and hence to begin the process of thinking about and hopefully changing their practice as researchers or health-care practitioners. The book's clear presentation of methods of enquiry grounded in examples of health-care policy and planning is designed to encourage changes in actual practice. As Bhopal states “it is the intention that the reader will acquire the depth of knowledge to use the concepts and not merely be aware of them.” ■

Helen Therese Allan^a

The global family planning revolution: three decades of population policies and programmes

Editors: Warren C Robinson & John A Ross
Publisher: World Bank, Washington DC, 2007
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470 pages; price US\$ 45

The birth control movement initially focused on the individual woman and her well-being. However, falling death rates in the twentieth century, without a similar reduction in numbers of births, led to concerns about the adverse effects of large populations. Actions were taken in different countries to tackle the potential problem of population explosion. For example, in 1952, India developed its first national family planning policy. Around the same time, the International Planned Parenthood Foundation and the Population Council were established, thus marking what is arguably the start of the modern family planning movement.

Using case studies from 23 countries, this book chronicles the history of family planning in the second half of the twentieth century, more specifically between the 1950s and the 1980s. The authors of these case studies are pioneers who share their experience, often first hand, in establishing family planning programmes. The enthusiasm of the initial approaches, the disappointments and challenges which led to the evolution of successful programmes are covered well. What emerges is that there is no single global strategy for success: multiple approaches are required for successful programme implementation.

The statement “Development is the best contraceptive,” made by Dr Karan Singh at the World Popula-

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tion Conference in Bucharest in 1974, highlighted a change of thinking and the need for a more balanced approach to population control. Social development had a role in reducing the fertility rate at this time by creating a more conducive environment. By the mid-1990s, however, the focus had moved from the narrow area of family planning to reproductive rights and reproductive health.

The book also documents the change in donor interest in family planning over time. Initially, these activities were supported by private foundations in the United States of America. Later, the governments of the USA and of some European countries (Sweden, in particular) provided large-scale funding for family planning programmes. Also, the World Bank recognized that rapid population growth is a major hindrance to devel-

opment and provided assistance; and the United Nations Fund for Population Activities (UNFPA) was set up to support family planning programmes. More recently, however, funding for population growth issues from the USA has decreased.

The bulk of the book consists of 23 country case studies, one per chapter, that document the promotion of family planning in these settings. The information provided is not easily accessible elsewhere and give an insider's view into the major events that have contributed to the evolution of the programmes. All the case studies use a similar format: a box presented near the beginning of each provides a quick overview of the major events that have influenced the family planning programme in the country concerned, followed by a detailed description and analysis of the situation. That roughly

half the case studies deal with Asia reflects the early uptake of family planning programmes in this continent. In contrast, only two case studies are from sub-Saharan Africa.

This book should interest all who work in the area of public health, policy and programme implementation. The experience of implementing family planning programmes in the 23 countries that it reports provides useful information that can be applied in other countries. Moreover the lessons learned from the global experience in a controversial but integral part of primary care will be useful when the world faces other priority health challenges against a background of limited resources.

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