

Health Systems

The Health of Nations: Why Inequality Is Harmful to Your Health, by Ichiro Kawachi and Bruce P. Kennedy, 232 pp, \$25.95, ISBN 1-56584-582-X, New York, NY, New Press, 2002.

AFTER READING *THE HEALTH OF NATIONS: Why Inequality Is Harmful to Your Health*, you will hold these truths to be self-evident: more than two centuries after the Declaration of Independence was penned, social, economic, and political inequalities are (still) impeding “Life, Liberty, and the pursuit of Happiness” from being inalienable rights.

In this empirically rich yet widely accessible volume, Harvard School of Public Health professors Ichiro Kawachi and Bruce Kennedy build a convincing case for why prosperous nations in which there are high levels of inequality, most notably the United States, experience worse overall health than do countries that are more egalitarian, such as Costa Rica, regardless of their level of wealth. The authors bring together several decades of research and lively debate in the fields of sociology, economics, and public health with clear illustrations of how the continued existence of social inequalities imperils basic values of progress and well-being.

The authors begin by demonstrating that not only does money *not* buy happiness, but—surprising to many—it does not buy health. Much of the ensuing argument is in dialogue with the work of Richard Wilkinson (see, for example, Wilkinson’s *Unhealthy Societies: The Afflictions of Inequality* [Routledge, 1996]) whose cross-national studies show that above an income level of approximately \$5000 per capita (at which point basic health needs such as nutrition and sanitation become satisfied), it is the degree of income equality—rather than per capita wealth, health care spending, or lifestyle—that appears to best explain national differences in life expectancy. Because these findings have also been shown to hold within countries—Minnesota with its relatively narrow income spread has a longer life expectancy than Alabama where there is greater income inequality—they cannot be explained away by historical or

cultural factors. A growing number of researchers understand this relationship to be mediated by social factors, with unequal societies exhibiting lower levels of trust, weaker social ties, and greater isolation than more egalitarian ones.

The book’s title is, of course, an ironic echo of Adam Smith’s manifesto for free-market capitalism, and Kawachi and Kennedy focus much of their critique on the deleterious effects of the consumer society that Smith’s *Wealth of Nations* (also written in 1776) sought to unleash. The rise of the consumer society has led to a “spending race” in which people compete to acquire goods that purportedly advance their position in society but which often leads to debt, bankruptcy, longer working hours, estrangement from friends and family, and the disintegration of community. In parallel, relative deprivation—not owning a car in a car-owning society, for example—limits employment opportunities, confines personal networks, and becomes a stain on self-worth, with dangerous social, psychological, and health consequences. The greater the inequality in a particular society, the more entrenched consumer culture becomes, making the unequal and consumption-driven United States an illuminating bad example rather than a global model of success.

Rebutting classic sociological arguments that inequality is good for society, the authors point to considerable evidence that wide pay disparities impede workplace productivity. Rather than spurring hard work, competitive incentives often result in less teamwork, less workforce stability, and poor quality of work. Furthermore, although millions of Americans are desperately seeking the Horatio Alger dream of improving their position in society, most will end up frustrated and disappointed because by definition a society marked by inequality can allow only a limited number of people to rise to the top.

Ultimately, the book argues, we pay for the social and economic dysfunctions of inequality twice: as individuals—who are working more, under greater stress, with less vacation, less time for social interaction, and feeling

more lonely—and as a society that is less supportive of taxes for schools and neighborhoods, less civically involved, less concerned about the physical environment, more fearful of crime, and with a lower life expectancy.

This clarion call for the United States to replace its competitive consumer culture with a politics of redistribution and social justice is compelling. By focusing on income and prestige, however, Kawachi and Kennedy leave aside underlying factors of social class, discrimination, and power differences in the workplace. A convincing body of research shows that mortality rates are highly correlated with the extent to which persons have control over the work process and workplace decisions; this association persists even when controlling for income.^{1,2} Still, reducing the pay discrepancy between company executives and workers from the current 300-fold difference to a three-fold or even a 30-fold difference would go a long way toward diminishing social inequalities—and increasing life expectancy—in the United States.

The troubling questions that *The Health of Nations* poses are not just for politicians and policy analysts. Physicians, in particular, might be challenged to understand that the health of their patients is framed by a far larger context than their daily choices (if such choices are even possible) regarding diet, exercise, and smoking or by the therapeutic armamentarium of modern medicine. Far from denuding doctors of their healing role, however, Kawachi and Kennedy’s thesis elevates it: physicians are ideally placed to observe and to advocate for medicine’s greater effectiveness in a society with fewer inequalities.

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1. Johnson JV, Johansson G, eds. *The Psychosocial Work Environment: Work Organization, Democratization and Health: Essays in Memory of Bertil Gardell*. Amityville, NY: Baywood Press; 1991.

2. Marmot M, Siegrist J, Theorell T, Feeney A., Health and the psychosocial environment at work. In: Marmot M, Wilkinson RG, eds. *Social Determinants of Health*. New York, NY: Oxford University Press; 1999.