

many other determinants of health. The notion of power is central in health because the use of power leads to the fundamental health inequities between population groups. Davies does not capitalise on the critical theory base of the global in her analysis. In relation to conflict and health, for example, the role of oil and multinational corporations' exercise of power is ignored.

Furthermore, there are many statements throughout the book which could imply a 'blame the victim' view of ill health because if it is only the state and the individual, then too much agency is given to individuals and to individual choice. Choice and responsibility is always within the context of the conditions in which people live and these conditions, in the form of the many determinants of health, are largely invisible, or at least implicit in the analysis. She acknowledges the forces which 'drive a variety of different health agendas' (p. 11) but health is more so determined by forces which drive non-health related agendas but which have enormous impacts on population health. This breadth of perspective is missing and cripples the analysis. Davies' argument against the position that humanitarian aid and

activity is neutral is both powerful and compelling. However, her contentions that humanitarian actors contribute to suffering or inadvertently prolong suffering and are part of the context that accompanies human populations' displacement and vulnerability run the danger of ascribing these actors with a degree of agency they do not have. But to understand their limited agency requires an acknowledgement of the wide range of political and economic forces which impinge on the health of vulnerable populations.

The narrow purview of the analysis and the dichotomous use of state and global results in many over simplistic conclusions, such as when she concludes, in relation to health tourism, that 'states are all too willing to simply compromise the health of their poor for gains to a privileged few' (p. 185) as if states also have full agency and are not influenced by more powerful forces, including the power of the medical profession amongst others.

Overall, for those in public health, the book is disappointing in its lack of understanding of the state of knowledge in, and the complexities of, public health. This detracts from the usefulness of the work.

### **Exploring disability**

Colin Barnes and Geof Mercer (2010)  
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There is no doubt that the authors of this book, Colin Barnes and Geof Mercer, have been instrumental in establishing disability studies as a discrete field of sociological inquiry. Their level of influence has been wide ranging, both as founding members of the Centre for

Disability Studies, University of Leeds and the Disability Press, a leading independent international publishing press for the field of disability studies. Moreover, their active engagement with the disability movement has assured that their work has been grounded within the realm of praxis, bringing to disability studies, the 'voices' of disabled people. Given the rich history of both authors, it is not surprising that this book covers a wide breadth of issues pertinent to the field of disability studies.

Although not articulated as such, the book is conceptually broken into two discrete parts. Chapters 1–4 outline the historical development of disability within Western sociological thought. The rise of modern medicine and its hegemonic consensus in positioning the disabled body as a site of biological inferiority are stripped back to

reveal the complex connections between medicine and public policy responses to disability. From here, the remaining four chapters seek to enunciate the varying sociological approaches that have developed to situate disability within the field. Theories covered include Parson's functionalism, Goffman's theory of stigma, phenomenology, and finally, the political economy of medicine and illness. The final chapter within this section elucidates sociological understandings of disability that have directly emerged from disabled people's contestation and struggles to politicise disability, as a social, political and cultural identity.

The remaining chapters of the book, Chapters 5–10, cover some of the key concerns that have emerged from the disability movement. The chapters navigate the topics of social exclusion and disabling environments; independent living; disability politics; culture, media and identity; the right to life; and finally, disability in the global south. Each of these chapters is then broken into a range of sub-themes, encompassing a diverse 'body' of scholarship connected to the overarching topic. For example, Chapter 5, which is dedicated to social exclusion and disabling barriers, provides a brief discussion on disability and the welfare state, education, financial circumstances, employment, the built environment, housing and transport and leisure and social participation. Thus, the authors have attempted the mammoth task of amalgamating some of the disability movement's primary concerns into a single text.

This of course raises questions about the plausibility of such a task. Does it work, as either a general introductory text, or as a book for a broader general readership? Given the level of breadth within the text, questions are raised about the level of depth of the discussion provided. From our reading, however, we would suggest that new entrants to the field would benefit from greater attention given to the subtleties within disability theory. As feminists, this is a particularly salient issue, as we would suggest that the gendered nature of disability cannot be

captured within a brief two page overview (pp. 86–87), nor intermittently dispersed throughout without substantive discussion to explicate the role of gender in mediating disability socio-relations. 'Other' identity categories, such as race, sexuality and class, are also given little space within the text. Thus, throughout the text, the disabled identity is mostly presented as an homogenous category. This is despite the growing work within the field of disability studies that seeks to reveal the complex reality of the disabled identity and its intersectionality with gender, race/ethnicity, class, sexuality and rurality (see Pothier & Devlin, 2005 as an example). Further to this, the text has limited engagement with the recent turn within the field of disability towards critiquing the construction of 'ableism' (see Campbell, 2010).

For those looking at the book as a potential text to use with students another concern is that they may be disappointed in that it lacks the contemporary approach and style of many of today's text. Its pedagogical focus is on student as recipient of knowledge rather than student as a co-producer of knowledge and on information dissemination rather than critical thinking, analysis and evaluation. There is, for example, no use of rich case studies or discussion questions which could be utilised to stimulate discussion and debate and enable students to make connections between the descriptions of the literature and their own lives beliefs and values. Graphics, photographs, text-boxes and other stylistic tools that are commonly used in most text-books today to assist the learning experience are also either absent or rare. Finally, there is no connection made between the descriptions of issues and relevant new media even when the topic under focus speaks directly to this increasingly dominant communication landscape such as in terms of disability politics or culture and identity. Overall, these limitations mean that the relevance and dynamism of studying the sociology of disability is not fully conveyed by the text despite the territory it transverses in terms of subject matter.