Stephens’ book provides post-graduate students and public health practitioners with a wonderful resource. It pulls together insights from public health psychology and community health psychology, highlighting the social psychological dimensions of health inequalities and health promotion. Whilst this is very definitely a textbook and not a polemic, it provides a useful synthesis of some of the existing and generally rather fragmented research into the social psychology of health inequalities – as well as highlighting the value of a range of social theorists whose work is too often neglected within the field of health promotion.

The actions of critical health activists have long been motivated by the belief that struggles to improve health in marginalized communities need to be pursued through a combination of ‘top-down’ and ‘bottom-up’ efforts to change the social conditions which deprive so many people from the opportunities to be healthy. With a view to enabling the ‘bottom up’ dimension, decades of projects in both rich and poor countries have sought to work with marginalised communities to develop the skills and capacities to fight for more health-enabling social environments – social contexts that enable and support the possibility of health.

Much of this work has been driven by a series of deeply social psychological assumptions about the social psychological dimensions of power, ‘empowerment’ and social change. However, much of this work has gone undocumented and unrecognised in the western academic literature. Health and community activists have been too busy or lacked the skills or interest to write up their work, or didn’t see the relevance of the academic arena to grassroots political struggles. And, albeit with some notable exceptions, few
academic psychologists or psychology departments have been noted for their contributions to developing frameworks for understanding and action for radical social change. Path-breaking social theorists, such as Paulo Freire, whose work provides deep insights into the social psychological dimensions of social change within a broader social justice framework, have more often been ‘claimed’ by departments of education and communication than departments of psychology.

Against this background' this book is important and useful insofar as it starts to pull together the previously rather dispersed body of work that throws light both on the contribution social psychologists can make to understanding social inequalities, and on the role of community-level action promoting health-enhancing social change, particularly amongst marginalised groups. Stephens’ careful review and integration of work from community psychology and critical health promotion, as well as her inclusion of insights from critical writers such as Bourdieu, Habermas and Freire, make this a valuable resource for more politically oriented social psychologists and health promoters looking for empirical evidence to inform critical research or activism.

The book has 8 chapters, each of which is structured with exemplary care and clarity. Chapters conclude with a useful summary and a wisely chosen, carefully annotated list of suggestions for further reading – both of which make the book an excellent and very student-friendly teaching tool. A core aim of the book is to highlight the links between theories, research methods and intervention designs – links that constitute vital conceptual scaffolding for health activists and professionals, and which students often battle to grasp. Students are not only invited to be reflexive about their own values and practices, but are also provided with conceptual tools to inform such reflexivity.

A brief outline of chapters gives some insight into the nature of the book. In Chapter I Stephens outlines her commitment to shifting the focus of health promotion from individual behaviour and lifestyles, to a view of health as the
socially structured product of social relations. In Chapter 2 she uses a focus on health policy in Africa, the United States, England, New Zealand and Sweden as the starting point for a discussion of the ethical and value-laden nature of much health research and action. Chapter 3 presents a careful sifting through the often bewildering mass of evidence for inequalities in health, looking at research and debates on the role of poverty, social status (the health gradient), gender, racial and ethnic inequalities in shaping health. This chapter highlights how all theoretical frameworks are value-laden in ways that frame how these factors are conceptualised and understood.

Chapter 4 details the bodies of theory that inform health debates and interventions: neo-positivist, interpretative; indigenous (e.g. Maori conceptualisations of health); and social constructionist/ post-structuralist. A thumbnail overview of the methods used in health research is given in Chapter 5, ranging from more traditional survey and interview methods to more critical participatory action approaches, such as Photovoice and Narratives.

Chapter 6 provides an account of dominant models of health promotion, including those framed by ecological, social determinants and cultural approaches, as well as looking briefly at the role of the media in health promotion. This is followed in Chapter 7 by a series of case studies of socially oriented community health interventions. These include interventions targeting chronic illness in Finland, Canada and the US; AIDS-prevention in South Africa, Cambodia and India; and community capacity building in Canada, Australia and Brazil. Chapter 8 concludes with a thoughtful discussion of the challenges of programme evaluation.

Stephens’ work constitutes a valuable contribution to documenting the theoretical, empirical and policy/intervention frameworks that constitute the conceptual and practical toolkit of many community health psychologists. My only criticism of an otherwise excellent book is that she chose to foreground ‘Health promotion’ in the title, particularly in the light of the individual-focused and conservative orientation that continues to dominate the field of health
promotion, despite a long history of critical challenges from many quarters. Furthermore her labelling of her approach as ‘psycho-social’ draws attention away from the more radical and political way in which her work could have been interpreted by activists with a social change focus. The book’s title serves to depoliticise Stephens’ material, and in so doing arguably undermines its intellectual ‘added value’ to current debates about health and social change.

The title does this through its tacit implication that the types of social and structural problems that Stephens postulates as key drivers of health inequalities (social status, gender, ethnicity and so on) can be effectively resisted through ‘psycho-social’ projects falling under the rubric of ‘health promotion’. In my view the potential of the book would have been more clearly flagged up by a title that associated its material with a radical break from the tired and conservative ‘health promotion’ approach – with its misplaced focus on the narrowly conceived ‘psycho-social’ as an appropriate level of analysis and action for tackling social inequalities rooted in political and economic injustices. Although the title was probably chosen to maximise sales in the mainstream market, it will be a pity if this alienates the more critical and intellectual slice of Stephens’ potential readers, many of whom will not be attracted to a book with such a conservative and mainstream label.

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