

BOOK REVIEW/COMPTE RENDU

Sarah Payne, *The Health of Men and Women*. Oxford: Polity Press, 2006, 240 pp., \$29.99 paper (978-0-1456-3454-8), \$75.99 hardcover (978-0-7456-3453-1).

In *The Health of Men and Women*, Sarah Payne states two reasons for a book that addresses the health and illness experiences of women and men. First, a tension between women's health and the emerging field of men's health needs to be resolved, particularly over gender equity and health policy. Second, women's and men's global health patterns are complex and far from straightforward. Existing health models no longer reflect their experiences and the prevailing wisdom regarding the paradox of women's longevity combined with poor health (women get sicker, but men die quicker) is an oversimplification that does not adequately reflect the current health patterns of men and women. The author argues that there is a need for a new model reflecting the health and illness patterns of women and men across the lifecourse. This model would also need to include an understanding of the interdynamic between sex and gender, as well as other forms of social difference. On the whole, the book offers a comprehensive and detailed look at how sex, gender, and other structuring social relations and practices shape the health and illness experiences of women and men in a number of complex ways.

The central aim of this text is to bring together evidence regarding similarities and differences in the health of women and men in both developed and developing countries. The focus is upon the relationship between biological sex (hormones, genetic makeup), gender, and health. This includes developing an understanding of how other forms of difference — social class, ethnicity, sexuality, age, and disability — intersect with women's and men's experiences of health and illness: "At the end of the day, what we find using such an approach is that our health is affected by a wide range of factors, and that sex and gender are both significant elements within a larger framework" (p. 20).

Using Oakley's (1972) sex and gender distinction, sex is defined as biological difference based on physical features, and gender as differences based on cultural definitions. Although more current and sophisticated conceptualizations of the sex/gender nexus exist and could have also been used to characterize the complex relationship between the biological and the social, the author critically addresses a number of the issues and

tensions surrounding these two concepts (e.g., both sex and gender are to some extent socially constructed). Payne depicts the relationship between the biological and the social as mediated and complex, and illustrates how gender as a social construction can be incorporated into the body.

The complex interplay between sex and gender, and other forms of difference (social class, ethnicity, sexuality) are addressed by examining how aspects of the biological (hormones, genetic makeup), gendered behaviours, and women's and men's experiences with the health care system shape and influence morbidity and mortality risks in multiple and complex ways. For example, Payne shows how female hormones (especially during women's reproductive years) and gendered health behaviours (regularly eating fresh fruits and vegetables, wearing sunscreen) can have a protective effect on women's health, but gendered social relations (women's caring responsibilities) and inequities in access to health care and treatment can negatively impact women's health. In line with Payne's assertion of the need for a new approach to understanding women's and men's health that reflects a multiplicity of complex and mediating factors, other aspects of women's and men's experiences of mental, reproductive and sexual health, illness, and mortality are examined, always stressing the complex ways in which sex and gender, and intersections of social class, ethnicity, and sexuality shape these conditions. She proposes a health model that incorporates sex and gender, but develops gender differences into three related areas: structural and material forces, gendered discourses, and the types of treatment (and research) that are available.

The Health of Men and Women would have benefitted from a more thorough discussion of the theoretical literature on sex and gender, especially on how the biological too is a multiple, complex and contradictory dynamic that is contextually mediated and subject to a many influences. Also, while the book is rich in details and information, there is little consideration of disability, although it is mentioned as an important relation of difference. An understanding of how disability in its various manifestations mediates the dynamic between sex, gender and other forms of diversity in the health and illness experiences of women and men would have been useful. Still, this is a very informative and useful treatise on the complex patterns of health and illness among women and men and would serve as an excellent resource for those interested in the areas of women's and men's health, gender studies, social class, and race and ethnicity.

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