The impact of social determinants on health and illness are well known and the connections between inequality, poverty and health conditions such as obesity are well established. However, such claims often focus on the need for social change; with the politics often implicit rather than explicit. Schrecker and Bambra ensure that the call for political action is forefront and centre of the debate, arguing that political systems, and in particular those that are classified as neoliberal, are at the heart of illness issues attributed to excessive food consumption, insecurity, and poverty. The political cure required therefore focuses attention squarely on the liberal democratic societies of the West and the market policies embraced by such democracies.

The authors argue (rightly) that because the effects of ‘multiple complex and lengthy pathways’ (p. 113) to conditions such as obesity, we need to make choices about the standard of proof required in order to tell the ‘convincing causal story’ (p.114); but some of the links that they make may not sit well with all of our public health colleagues.

The authors choose to look cross-nationally at different political, health and social systems, to explore outcomes, and make their claims. While there is certainly value in doing this, it is also difficult to compare countries, particularly when taking proxy measures as evidence of the claims. For example, the claims about antidepressant medication as an indicator of stress needs to be nuanced, and at least give a nod to different practitioner prescribing and payment systems, including issues of diagnosis; and also acknowledge those cases where the evidence may not always be supportive of the claims being made. For example, the Scandinavian countries, which are viewed in the book as being more moderate in their uptake of neoliberal policies, also demonstrate a rise in uptake of anti-depressant medication (pp. 53-54).

In their concluding chapter, Schrecker and Bambra point to the important issue of intergenerational transmission – and this is an issue of concern to many of those in public health. Here they point (albeit briefly) to three key mechanisms that need to be taken into account in understanding intergenerational transmission – the impact of declining social mobility; stereotypes that reinforce the location of blame within individual behavior; and the more recent field of epigenetics and genetic epidemiology.

While I remain unconvinced about the labelling of the four epidemics as such, and do not entirely agree with the use of data to present their argument, I do think this book makes a valuable contribution to politicising the inequality in its various forms and the effects of inequality on health. It is a powerful antidote to the dominance of the lifestyle discourse that focuses on the individual. Taking a big picture approach to the types of societies we live in and in this case reorienting us from the ‘social determinants’ to the ‘political determinants’ provides a valuable analytical tool. The book will be of interest to public health policy makers and practitioners; public health advocacy groups; and students of social and public health policy.