

The paradox of ‘women being sicker but men dying quicker’ is one that has been evident for over twenty years. *Gender and Health* addresses this paradox by providing a comprehensive review of research on gender differences in mortality, health and health behaviours. It proposes a conceptual framework based on ‘constrained choices’ to better understand what underlies gender differences in health.

*Gender and Health* starts from an interdisciplinary basis, arguing for the importance of the synthesis of social and biological understandings. The authors use both social and biomedical research to discuss the sex- and gender-based patterns of mental and physical health over the life course and the biological and social explanations of these patterns. One of the goals of the book is to encourage cross-disciplinary research among social and biomedical researchers.

The authors, who are both sociologists, argue that the best conceptual framework to understand gender and health is one of ‘constrained choices’. Their conceptualisation is that men’s and women’s opportunities and choices are constrained by decisions and actions taken at three levels. The highest level relates to governmental or national social policies, e.g. health and safety legislation, the availability of childcare and eldercare services. The second level relates to communities and neighbourhoods, and to what extent community actions and neighbourhood environments facilitate or hinder health behaviours. The third level relates to work and family life, in particular how constraints of working lives in combination with family roles and relationships impact on men’s and women’s health choices.

The first chapter provides an overview of research evidence on gender differences in health and life expectancy. Detailed attention is paid to gender differences in cardiovascular disease and immune function/imunologic disorders. This is followed by a re-examination of research evidence on gender differences in mental health, particular depressive disorders and substance abuse disorders. The second chapter presents the authors conceptual model of ‘constrained choices’ in everyday decisions. This is followed by three chapters (chapters 3-5), addressing each of the levels at which constraints operate, namely the societal level relating to national social policies, the level of communities and neighbourhoods, and the constraints of work and family lives. The chapter on national social policies presents interesting and important data illustrating variation between countries in gender differences in health, and the ways that different social policies can act to reduce gender and socio-economic inequalities in health and thereby improve population health in general.

The authors’ theoretical model suggests that ‘constrained choices’ operate by affecting the individual’s ability to prioritise health and to undertake actions to promote their own health. This is discussed in chapter 6 on ‘Gender and individual health choices’,
which examines gender differences in the traditional health behaviours of smoking, alcohol consumption, diet and physical activity, and contains useful cross-national comparisons of individual health behaviours. The final chapter examines broader opportunities for change, and in particular proposes actions to increase men’s and women’s opportunities to pursue healthy lives via a ‘platform for prevention’ that would benefit both individual and population health. A range of actions are outlined at each of the three levels that could be undertaken to reduce (or remove) constraints on the choices of individuals.

In a book on *Gender and Health*, it is surprising that so little attention is devoted to explanations relating to the role of masculinities or literature from men’s health studies, for example, in chapter 1, reviewing research on gender and health, barely one page is devoted to the work of Courtney and others on masculinities (page 38), and in chapter 6 there is one page on men’s social role expectations and shifting notions of masculinity (page 209) with only Courtney’s research cited. Thus, although the book is titled *Gender and Health*, the predominant focus is on women’s health and on gender differences, without a sustained analysis of research on men’s health.

Overall, *Gender and Health* provides excellent reviews of relevant research literature published over the last 20 years on gender and health. It provides a valuable conceptual model of the ways in which ‘constrained choices’ at the three levels (of national social policies, the community and neighbourhood, and work and family life) differentially affect men’s and women’s health. However, there is little attention to the ways that masculinities and femininities are linked to health and health behaviours, and therefore this book is likely to be of less relevance to those interested in men’s health than might have been expected from the title.

**SARA ARBER**
Department of Sociology, University of Surrey, Guildford, UK
[SArber@surrey.ac.uk](mailto:SArber@surrey.ac.uk)

Words: 736 words