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**Gideon, Jasmine (2014) *Gender, Globalization, and Health in a Latin American Context*. Palgrave Macmillan (London), xi + 271 pp. £62.50 hbk.**

Gideon's book is an exciting and meticulously researched work. The author fruitfully scrutinises the nuances emerging when looking at the impact of globalisation on labour, human well-being and gender justice. Her perspective is particularly compelling because it analyses gender biases embedded in health systems. By focusing on the specific case study of Chile, she also provides examples from other Latin American countries to talk about similarities and differences in social policy. Her findings are anchored within a solid analytical framework based on a gendered political economy of health, unfolding power relations at different levels ('the Global-Macro-Meso-Micro' p.24). By doing so, she proposes an overview of different structural inequalities with an in-depth analysis of gender, and the link between health and work.

The book is divided in seven chapters; chapter one provides a general background on the Latin American context, and whether or not social policies in the region have been able to challenge gender inequalities. Chapter two deals with her analytical framework based on a wide range of literature from feminist economics, gender, development and health, recognising two key elements which are often ignored in social policies: i. the contribution of female unpaid care to the health and well-being of the household; ii. the health sector as a gendered structure. While chapter three looks at the historical development of gender norms in Latin American health systems, chapter four examines gendered governance in health. Chapter five and six are particularly fascinating, describing the gendered tensions between new forms of work and health that have occurred within the context of economic liberalisation. The case study of migrant Peruvian women working in Chile as informal workers is particularly interesting, as it offers a useful example to shed light on how gender,

health and globalisation interlink. It also informs on racial tensions. The overall structure of the book is well-thought and consistent with the final conclusions in chapter seven.

The findings in this book are based on an extensive period of research in Chile, beginning with the author's PhD fieldwork between 1998 and 1999, and followed by several trips between 2000 and 2010. Qualitative research, mainly participant observation and semi-structured interviews, was skilfully used to capture nuances that show the gap between abstract policy models and everyday life.

Chile, identified as one of the most advanced economies in the region and the only country that has fully implemented a large-scale health reform, is an interesting case study to discuss issues about universalism in health and exacerbated health inequalities that neoliberal health reforms have failed to address. With the structural adjustment policies of the eighties and the legacy of the military regime, the first democratic government inherited a dual health system: a private well-provisioned network for the wealthy social classes and a drained public one for the majority of the population (Missoni and Solimano, 2010). Gideon powerfully shows how gender inequalities reinforce barriers to health care access. Her work also emphasises a gap between reality and 'pro-gender' rhetoric in health reforms.

For instance, the continuous focus on 'patriarchal maternalism' in social policy interventions, viewing women primarily as mothers rather than workers or citizens, does not help to overcome gender bias. Moreover, men's needs and role in reproductive health are completely neglected as if they were not important in defining social constructed relations. Other gender biases that were also observed include disparities in health entitlements, depending on men's participation in formal labour. Lack of health provision was highlighted as an issue by Chilean home-workers and represents an important concern for informal workers in general.

I think that the most inspiring contribution of this book is the depiction of the household as a site of production and consumption of health care, powerfully showing how health care is in practice fragmented, often constrained between different forms of provision (e.g. public, private and philanthropic) and embedded in gendered political economies of 'resource gaps' and care. Within this context, Gideon skilfully argues that male biases still influence the shaping of health services.

This book provides an invaluable contribution to different fields: gender, health service provision/delivery as well as Latin American and development studies. It helps us to better understand international issues surrounding the privatisation of health care systems, and the interplay between transnational migration, globalisation, health and gender. As well as benefiting students and researchers in the fields mentioned above, it is also recommended for policy-makers and those interested in gaining greater understanding of embedded power relations in health care systems.

#### References

Missoni, Eduardo, and Giorgio Solimano. "Towards universal health coverage: the Chilean experience." *World health report* (2010).

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