

## Letter to the Editor

# What we need is a political-economic public health

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To the Editor:

I fully agree with Choi et al.<sup>1</sup> that ongoing, interdisciplinary collaboration is needed to address complex health problems and improve health for all. However, “clinical public health” as described in this commentary is not going to achieve this.

First, it is well established that the root causes of poor health and health inequities lie in political-economic arrangements anchored in neoliberal capitalism. Due to its profit maximization imperative, these arrangements erode social and ecological determinants of health, and this is experienced in a highly inequitable and unjust manner.<sup>2</sup> Examples include the financialization of housing; subsidies to polluting industries; and polarization of income and wealth, which erodes broad support for a robust public sector. It is untenable to consider that we might address “wicked problems” and “syndemics” without considering this broader political-economic context, including who is benefiting from the status quo.

Moreover, while curative and preventive (“upstream”) activities may be “complementary,” they are certainly not equal. Power and politics combine to perpetuate longstanding and pernicious problems of lifestyle drift and medicalization, which reduce complex, structural determinants to individual problems, allegedly amenable to technical, individual-level solutions.<sup>3</sup> These processes consistently obscure root causes.

To attempt to tackle these issues, a much broader version of interdisciplinary collaboration is required, which includes critical social science scholarship that engages deeply with root causes of health

problems including extractive and exploitative relationships. The challenges to those sorts of collaborations are very significant, but so are the benefits of working to redress them.<sup>4</sup>

All of this is theoretically consistent with a broad version of public health, long defined as the art and science of preventing disease and promoting health through organized efforts of society. Although Choi et al.<sup>1</sup> don’t define public health in their commentary, it is clear that they adopt a narrow version of public health as an arm of the health care/medical system focussed primarily on service delivery and surveillance. Unfortunately, it is this narrow version of public health, which has been building for decades,<sup>5</sup> that we have seen during the COVID-19 pandemic, to the detriment of population health and health equity.<sup>6</sup>

What we need is a broad vision for public health<sup>7</sup> that embraces, rather than brackets, the power and politics that shape all aspects of health and our efforts to improve it.

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