Hive Life -

Marmot's and Wilkinson's *The Social Determinants of Health* (2003) is an analysis of the social conditions that determine health inequality between people in and across societies. While access to proper medical care has long been considered foundational in the treatment and diagnosis of serious illness, Marmot and Wilkinson locate care among several factors determining the quality of health in social groups *before* help has been sought out. These factors include:

- Income
- Early childhood
- Working conditions
- Job satisfaction
- Unemployment
- Substance abuse
- Access to social support
- Diet, and
- Transport policy

The report presents a summary of thousands of short-term and long-term studies at the individual-international level, and links socio-economic status to health outcomes and life expectancy. The results are spread across the full socio-economic spectrum, with low ranking office workers experiencing illness and early death at rates significantly higher than high ranking office workers. However important individual susceptibilities to illness and disease may be, the most common causes of ill health that affect populations are environmental (Marmot & Wilkinson 2003, p. 7). Social isolation created by stress, violence, poverty, discrimination, unemployment, lack of access to support, over-work, and poor social policy, all increase the risk of pregnancy complications, infant malnutrition (cardiovascular, respiratory, pancreatic, and kidney disease), mental illness, infection, diabetes, high blood pressure, heart attack, stroke, aggression, and premature death. In contrast, the existence of trust, mutual obligation and respect in communities helps to protect people and their health (Marmot & Wilkinson 2003, p. 22). Designing facilities to encourage meeting and social interaction can reduce rates of violence and disease (p. 22), and improve mental health and pregnancy outcomes among vulnerable people.

Hive Life, a project in collaboration with Respace, aims to build a community space for alternative approaches to healing. The project challenges the imperatives of capitalist public health policy by shifting the focus from individual to community healing and restoring the relationship between people and their environments. As others have pointed out (e.g. Ross 2012, p. 25), Western medicine is itself a form of cultural medicine. As all cultural traditions are shaped by their histories and origins, so is bio-medicine shaped by the forces of industrialisation and capitalism, biotechnology, and globalization. In the last century, Western medical practice has shifted the context of healing from balance, harmony, and personal well-being to standards and norms, protection, liability, mechanisation, and functionality (Ross 2012, p. 25). Restoring this context has the potential to not only improve experiences of care, but address the conditions that make people ill and in need of professional help in the first place (Marmot & Wilkinson 2003, p. 7).

References

Marmot, M & Wilkinson, R 2003, 'Social Determinants of Health: the solid facts', *World Health Organisation*. Available from: http://www.euro.who.int/ data/assets/pdf file/0005/98438/e81384.pdf

Ross, A 2013, The Anthropology of Alternative Medicine, Berg, London.