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Neoliberalism

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Neoliberalism describes processes of global economic restructuring that intensified from the later decades of the 20th century, and the social and cultural ramifications of this, characterized by the increasing marketization and individualization of social relations.

The term 'neoliberalism' came to prominence in the mid-19th century to describe a set of political and economic theories which advocated free trade and the idea of markets as self-regulating and rational, having no need for the intervention of governments. In the later decades of the 20th century, 'neoliberalism' came into common use to describe the resurgence of those ideas in new, globalized forms. From the late 1980s, national governments around the world began to deregulate trade, privatize publicly owned resources and remove capital controls. Economic reforms in Chile under Augusto Pinochet, in the USA under Ronald Reagan, and in the UK under Margaret Thatcher, were particularly associated with political commitments to 'rolling back' the state and moving away from the idea of governments as direct providers of public goods, such as transport, healthcare and welfare. Rotarou and Sakellariou (2017), for instance, argue that neoliberal economic reforms, including the introduction of a marketized health system with private providers and insurers, 'ended the welfare state' (p. 497) in Chile, with long lasting consequences for health inequalities in the country.

Neoliberal economic policy was globalized through transnational organizations such as the International Monetary Fund and the World Bank, which forced 'structural adjustment' policies on countries in the Global South to manage their rising national debts and incentivize trade and production. Structural adjustment typically entailed the privatization of publicly owned resources, and a reorientation of production to goods for export. The resulting reduced barriers to trade intensified the internationalization of capitalism, as corporations shifted production to where labour was cheapest, yet kept investments and profits in states where taxes were low. As state constraints on capitalism reduced, working lives became more fragmented, and capital accumulated within smaller and smaller elites.

Commentators widely suggest that the influence of neoliberalism is felt far beyond the realm of economic policy itself, with markets perceived not only as the rational basis for organizing economies, but also for understanding social life. Values such as freedom of choice, individual responsibility and the primacy of market relations become accepted as taken-for-granted norms, shaping not just how governments do relate to citizens, but how they should. There is considerable debate, however, around how dominant these discourses are, and how far it is theoretically credible to conflate a number of different processes – including commodification, privatization, globalization and marketization – as consequences or facets of neoliberalism, rather than phenomena with their own drivers, trajectories and

consequences (Castree, 2006; England and Ward, 2007). Whether these changes are the result of a coherent, right-wing political ideology, and the extent to which they are the variable and ad-hoc results of local responses to economic crises, is also much debated, as are the effects of neoliberalism, and its usefulness as a theoretical concept for sociology and other social sciences.

Although the meaning of 'neoliberalism' is often taken for granted, England and Ward (2007) have identified four distinct ways that the term is employed by social scientists: i) neoliberalism as an ideological hegemonic project leveraged by global elites; ii) neoliberalism as policy and programme (for example, policies enacted under the banner of privatization, deregulation, liberalization); iii) neoliberalism as state form; and (iv) neoliberalism as governmentality — i.e. the ways in which the relations among and between peoples and things are reimagined, reinterpreted and reassembled to effect governing at a distance. Despite these different uses of the term, what is generally agreed is that the changes typically described as 'neoliberal' have had far reaching effects on health and well-being around the world. These changes directly impact on determinants of health, such as the stability of employment and wage levels, and on spending on publicly funded health and welfare services. Bloor (2011), for instance, illustrates the interconnections between an increasingly globalized shipping industry and the health of seafarers themselves, though he does not use the term 'neoliberal' itself. In particular, he highlights the ways in which intensified labour processes, smaller and more international crew, and lack of job security, impact on health in an industry that perhaps typified early neoliberal shifts, as shipping became more globalized, with crewing outsourced as casualized labour.

The social and cultural effects of neoliberal economics, then, flow directly from the operation of liberalized markets, such as the health effects of globalized capital. However, sociologists have also studied the ways in which neoliberal discourses of self-reliance, freedom from the state, and the primacy of economic rationality, have framed social relations, and conceptualizations of agency — in other words, the 'neoliberalism as governmentality' lens. For example, based on interviews with women in the UK, Peacock and colleagues (2014) illustrate the ways in which neoliberal ideas become internalized as part of how people understand their own life trajectories. They suggest that this is characterized through a discourse of 'no legitimate dependency': a pervasive individualistic orientation that disavows the notion that individuals are anything other than self-actualizing, empowered and able to exercise agency. Interviewees thus blamed and criticized themselves for their own vulnerabilities and stigmatized others, thereby marginalizing structural or social accounts of misfortune. The psycho-social processes through which blame and stigma become ways of understanding needs for welfare, or living with long term ill-health, are an indirect means through which neoliberal ideologies come to impact on health and well-being. However, the ways in which these discourses play out are neither universal nor inevitable. In a case study comparing how people managed their diabetes in Bulgaria and the UK, Vassilev and colleagues (2017) note that although UK participants described their struggles as about individual responsibilities, Bulgarian participants were more likely to use structural explanations, focusing on system and resource constraints, which were not linked to their own personal failures. Although there were similar challenges for patients, the specific contexts of each country,

including differences in how the health service was funded and managed, and the role of civil society, produced what the authors call different ‘articulations of neoliberalism ... [in the UK] as a logic of managed choice and [in Bulgaria] as a logic of unmanaged consumerism’ (p. 349).

These specificities in how health is conceptualized and suffering attributed (as system failure, or individual responsibility) in neoliberal times suggest some of the problems with the analytical power of neoliberalism as a concept. Empirically, studies of the health consequences of neoliberalism document a diverse range of phenomena in any given domain. Bell and Green (2016), for instance, note that studies of ‘neoliberal diets’ include those that describe the ways in which contemporary consumers are obliged to manage their health risks through making their own ‘healthy’ choices in food purchase and consumption – e.g. eating a certain number of fruit and vegetable portions, considering the provenance of food, eating super foods or organic foods, reducing sugars or fat. Conversely, studies also describe neoliberal diets as those characterized by a lack of agency on the part of consumers, who are constrained in their choices by a powerful globalized ‘Big Food’ industry, producing cheap, unhealthy products (such as sugar-sweetened drinks, or hyper-processed foodstuffs) at the expense of varied local markets, or by the forces of global capital that produce local food deserts and inadequate resources to purchase healthy food.

For some, these apparent contradictions are evidence of the different scales at which neoliberalism operates as a complex political project. Treating obesity as an example of what they term a ‘neoliberal epidemic’, Schrecker and Bamba (2015) point to its links with growing levels of market liberalization and economic insecurity. Thus, if the lens of neoliberal explanation is directed at the macro-level, the focus is on the impact of neoliberalism on globalized food markets and product availability, and the ways they facilitate high-fat, high-sugar diets. If directed at the micro-level instead, the spotlight shifts as the increased obligations for citizens to be self-empowered consumers, responsible for their own health, come into focus (Schrecker, 2016). The same economic drivers can, then, be theorized as producing very different social and cultural effects. However, such explanatory ‘flexibility’ is also seen as symptomatic of problems with the concept of neoliberalism itself. Birch (2017), for example, argues that it ‘has come to mean whatever anyone wants it to mean, leading to a state of affairs in which almost anything nowadays – from university rankings through to pet food advertising – can be theorized as “neoliberal”’ (p. 7).

More fundamentally, some have argued that these differences reflect not just the hybridity and contingency of neoliberal processes, but an inherent weakness in the concept as an abstraction which seeks to conflate so many different processes across time, space, and scale, and which intersects with other social, economic and political changes. Reflecting on these contradictions in the field of geography, Castree (2006) suggests the focus of any neoliberal lens is inevitably ‘fuzzy’, risking an over-determined role for neoliberalism. He suggests the continuing purchase of the concept for critical scholars is a ‘necessary illusion’, leveraged in part to make theoretical sense of varied and contingent local manifestations of different processes. There may be diminishing returns from using neoliberalism as a frame for making sense of how the interplay of global systems and local environments impact on disease, health and well-being. Indeed, there is a growing sense in some quarters that the concept of neoliberalism is actively impeding our grasp of recent political events

such as Brexit. According to Kapferer and Gold (2017: 31), 'too much is being forced into the frame of neoliberalism, sustaining left/right distinctions of the recent past that are losing their relevance and much of their analytical bite'. The unprecedented social, economic and political crisis engendered by the COVID-19 pandemic will perhaps be the greatest test for neoliberalism – as both an economic policy and academic construct. Are government responses to the pandemic illustrations of neoliberal governance par excellence, with the legitimate introduction of massive state surveillance, and the increasing exercise of biopower? Or do pandemic responses represent its opposite: the frailty and demise of neoliberal governance, as resurgent nation states rush to control their borders, and instigate command and control economies? Or something else entirely? Only time will tell.

See also: Material and Cultural Factors; Privatization; Social Class; Stigma; Surveillance and Health Promotion.

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Vassilev, I., Rogers, A., Todorova, E. et al. (2017) 'The articulation of neoliberalism: narratives of experience of chronic illness management in Bulgaria and the UK', *Sociology of Health & Illness*, 39 (3): 349–364.

SUGGESTED FURTHER READING

- Harvey, D. (2007) *A Brief History of Neoliberalism*. Oxford: Oxford University Press.

Harvey's account of neoliberalism describes the global economic changes from the 1970s and various local trajectories, stressing the political dimensions of class relations. He characterizes neoliberalism as a hegemonic discourse and project for consolidating power in a new global elite, made possible through social changes through which the population increasingly understood themselves in individual terms, as having freedoms and individual rights.

- Gatwiri, K., Amboko, J. and Okolla, D. (2020) 'The implications of Neoliberalism on African economies, health outcomes and wellbeing: a conceptual argument', *Social Theory & Health*, 18 (1): 86–101.

This review paper outlines the effects of neoliberal policies on the health of populations in post-colonial economies in sub-Saharan Africa. The authors unpick examples from several countries of consequences of neoliberalism, such as the commercialization of healthcare, the effects of development aid and 'brain drains' of African-trained health professionals. These consequences have eroded access to the determinants of health for many, with resulting poor health an additional barrier for developing sustainable economic growth.

- Keshavjee, S. (2014) *Blind Spot: How Neoliberalism Infiltrated Global Health*. Oakland: University of California Press.

Keshavjee draws on a long experience as a physician and anthropologist in a remote area of Tajikistan to delineate in detail how Western neoliberal ideology is transplanted, often via well-intentioned non-governmental organizations, globally, and becomes constructed as commonsense. As Soviet era conceptualizations of health as a social good, with an emphasis on equity, were replaced with market-driven initiatives, the consequences for health locally were devastating.