

## Letter to Editor

# Politics as a Determinant of Health: A Foucauldian Perspective on Governance, Norms, and Health Equity

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Received: 23 May 2025

Accepted: 16 Sep 2025

Published: 08 Oct 2025

**Keywords:** COVID-19, Foucauldian Discourse Analysis; Good Governance; Political Determinants of Health.

**Cite this article as:** Moradi S. Politics as a Determinant of Health: A Foucauldian Perspective on Governance, Norms, and Health Equity. *Soc Determinants Health.* 2025;11(1):1-3. DOI: <http://dx.doi.org/10.22037/sdh.v11i1.48480>

Dear Editor,

The political determinants of health significantly shape the health outcomes of individuals within society by structuring relationships, distributing resources, and administering power in ways that can either advance health equity or exacerbate disparities. From a Foucauldian discourse analysis perspective, politics functions as a form of power/knowledge that governs populations through the regulation of health-related norms, policies, and institutional practices (1). This governance operates not only through visible political structures but also through subtle mechanisms of surveillance, discipline, and normalization that define what counts as health, risk, and acceptable behaviour.

To explore the link between politics and health through a Foucauldian discourse analysis, researchers examine how political power operates via discourses that produce knowledge and shape social norms around health. This approach involves systematically analysing texts, policies, speeches, and institutional practices to identify the underlying power relations and regimes of truth (1) that govern health behaviours and policy decisions. Key methodological steps include interpreting how discourses construct categories of health and risk, tracing how these shape

governance mechanisms, and uncovering the subtle practices of surveillance, discipline, and normalization embedded within political institutions (2). By revealing these dynamics, Foucauldian discourse analysis provides a critical lens for understanding how political determinants influence health equity beyond visible political structures.

### *Politics as a Social Determinant of Health*

Politics, as a social determinant, sets the framework within which social determinants such as environment, housing, education, and access to healthcare are distributed (3). Political systems and their stability influence health outcomes by shaping policy priorities and resource allocation. Empirical evidence suggests that democratic regimes tend to have better individual health outcomes, partly through their positive impact on income and healthcare quality, whereas political instability correlates negatively with health (4). Thus, political determinants are deeply intertwined with economic and social determinants, reinforcing or mitigating health inequities.

### *Good Governance and Health*

Good governance is a critical political determinant that ensures the effective stewardship of health systems and the equitable provision of healthcare services.

It encompasses transparency, accountability, participation, organizational integrity, and policy capacity (5). These governance principles create the conditions for continuous quality improvement, patient safety, and the protection of vulnerable populations. Good governance also entails the political will to enforce rules and provide incentives that promote positive health behaviours and equitable access to resources.

From a Foucauldian lens, good governance can be seen as a regime of truth (1) that legitimizes certain health policies and practices while marginalizing others. It produces knowledge about health needs and risks, shapes health discourses, and disciplines populations through regulatory frameworks and surveillance systems. The participatory aspect of governance reflects a shift toward more dispersed power, where citizens and communities engage in co-producing health policies, thus challenging traditional top-down models of power.

### ***Example from the COVID-19 Pandemic***

The COVID-19 pandemic vividly illustrates the role of political determinants and governance in health outcomes. Countries with strong governance structures—characterized by transparency, accountability, and effective communication—were generally more successful in managing the crisis (6). They implemented timely public health measures, coordinated cross-sectoral responses, and maintained public trust, which are all essential for compliance and collective action. Conversely, political instability, misinformation, and lack of accountability undermined pandemic responses in some contexts, exacerbating health inequities and mortality rates (7).

Foucault's concept of bio politics (1) is particularly relevant here, as governments exercised power over life by regulating populations through lockdowns, testing, vaccination campaigns, and health surveillance. These measures involved the

normalization of new health behaviours and the disciplining of bodies to conform to public health imperatives. The pandemic exposed how political decisions and governance regimes directly impact population health, revealing the power dynamics embedded in health policy and practice.

### **Conclusion**

In sum, politics as a social determinant of health operates through complex power relations that shape health equity and access. Good governance plays a pivotal role in ensuring the health of society by fostering transparency, accountability, and participation, which are essential for effective health system performance and equitable health outcomes. A Foucauldian discourse analysis highlights how political power is exercised through health governance, producing knowledge and norms that regulate populations. The COVID-19 pandemic exemplifies these dynamics, demonstrating the profound influence of political determinants and governance on public health. The letter argues for health researchers and policymakers to more critically engage with the intersections of politics, power, and health equity.

### **References**

1. McGivern, G. Governmentality in health care (Chapter 17). In *The Oxford Handbook of Healthcare Innovation* (in press, 2025). Oxford University Press.
2. Khan TH., MacEachen E. Foucauldian Discourse Analysis: Moving Beyond a Social Constructionist Analytic. *International Journal of Qualitative Methods*. 2021; 20: 1-9
3. Lynch, J. The Political Economy of Health: Bringing Political Science In. *Annual Review of Political Science*. 2023; 26: 389–410
4. Vu V T. Revisiting the effect of democracy on population health. *Oxford Economic Papers*. 2025; 77(2): 400–426.
5. Abimbola, S., & Topp, S. M. Health System Governance. In *Making Health Systems Work in Low and Middle Income Countries*. Cambridge University Press. 2022; pp. 51–66.

6. Grout L, Gottfreðsson M, Kvalsveg A, Baker MG, Wilson N, Summers J. Comparing COVID-19 pandemic health responses in two high-income island nations: Iceland and New Zealand. *Scand J Public Health*. 2023; 51(5):797-813.

7. Chowell G, Islam N. Political Determinants of Health: Has COVID-19 Exposed the Worst of It? *Am J Public Health*. 2024; 114(9):879-881.