

the importance of sanitation work in care centres and the value of emotional support. In so doing, it challenges deeply engrained understandings about the value of certain approaches to evaluating health care reform that are unable to account for gender discrepancies. Written for a broad audience, this thoughtful work will inspire reflection on the nature of Canada's health care system and encourage future cross-disciplinary research.

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BEYOND CARING LABOUR TO PROVISIONING WORK

Sheila M. Neysmith, Marge Reitsma-Street, Stephanie Baker Collins, and Elaine Porter with Judy Cerny and Sandra Tam
Toronto: University of Toronto Press, 2012

REVIEWED BY JULIE SINGLETON

In *Beyond Caring Labour to Provisioning Work*, Sheila M. Neysmith, Marge Reitsma-Street, Stephanie Baker Collins and Elaine Porter with Judy Cerny and Sandra Tam engage with the concept of provisioning in pursuit of “a fresh understanding of what constitutes work and security” for low-income women in Canada. The book presents the findings of their four-year project that worked

in consultation with six different community organizations to explore the range of women's provisioning responsibilities and the relationships that motivate their provisioning work. The six sites were spread across Ontario and British Columbia, both widely recognized as provinces where social services have faced widespread cutbacks. Across all sites, a total of 138 informants—including site participants, volunteers and staff—participated in individual interviews and focus groups. The researchers also conducted field research and content analysis of relevant policy documents for each organization.

The authors place the concept of provisioning at the centre of their approach. Borrowed from feminist economists, this concept represents a response to the need for “new words” that can broaden our understanding of ‘work’ and foster a dialogue outside of the boundaries of traditional social economic theory. Here, provisioning refers to all types of work performed by women that is invisible to the market economy. Efforts are made to include, yet go beyond, the well-documented (if still undervalued) work often performed by women such as household labour, caring work and volunteer work. Included in the concept of provisioning work here are activities such as making claims to benefits for which participants are entitled, improving community safety, and efforts to envision a better future.

The book is divided into three parts, the first of which outlines the study itself and its major findings, with a separation of provisioning at the level of individual households and collective provisioning that is conducted through work with community organizations. The second part details the research findings for each of three key research sites, examining specific communities including young ‘at-risk’ women, low-income

immigrant and refugee mothers, and older women. Findings associated with the remaining three sites are summarized in the closing chapter of Part Two that explores the intersection between the individual and collective provisioning of low-income women living in smaller urban areas. These chapters provide concrete examples of the more theoretical concepts introduced in the first part. The final section summarizes the wealth of data and the resulting theoretical and policy implications, ending with well-supported arguments that policies must better understand the realities of women's experiences.

The authors argue persuasively that the wide range of women's provisioning work needs to be recognized by policy-makers as central to the well-being of individuals and communities. When social services face repeated cuts and enduring insecurity, the needs of community members do not change—one still requires food, shelter, dignity—it is, rather, people's relationships of responsibility that take up the responsibility to provide for children, partners, relatives, neighbours, friends. Rather than continuing to blame low-income and marginalized groups of women for failing to succeed within a system that does not account for their realities, the authors turn the argument back toward policy-makers, arguing instead that it is their failure to perform effective social provisioning that continues to exacerbate the burden placed on low-income and marginalized women in particular.

One of the most crucial conclusions—that women's individual provisioning is interwoven with their collective provisioning activities—also supports the authors' argument that their conceptual use of provisioning enables them to highlight “how responsibilities flow along pathways of relationships.” By asking women

to explain who they provision for and the forms that such provisioning work takes, this research exposes the multidimensionality of women's lives that is otherwise negated in a neoliberal policy context.

This approach also allows for a deeper exploration of the invisible work most often conducted by women, and is useful in going beyond the limits evident in much of the existing research on caring labour that focuses on the work associated with motherhood. By structuring their study around provisioning, the authors successfully broaden the scope of understanding to reach "beyond caring labour" and household duties to a wider understanding of the realities of work performed by women.

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RURAL WOMEN'S HEALTH

Beverly Leipert, Belinda Leach, and Wilfreda Thurston, Eds.
Toronto: University of Toronto Press, 2012

REVIEWED BY CHERYL VAN DAALEN-SMITH

Beverly Leipert knows of what she writes. Born and raised a Saskatchewan farm girl, Leipert always knew that place mattered when it came to health and quality of life. With great interest, I've watched Leipert's career and scholarship emerge over the years, and the culmination of her ground-breaking work exploring

rurality and health can be found at least in part in her new edited text *Rural Women's Health*. Together with colleagues Belinda Leach and Wilfreda Thurston, Dr. Leipert creates scholarly space for discourse surrounding, well, space. Geography, broadly defined, that is.

Leipert worked as a rural public health nurse in Saskatchewan for over a decade, and shared a similar awakening as did I. From that privileged perch afforded to Canada's public health nurses, we both came to understand health and quality of life as being affected by things far beyond mere biology or so-called "healthy choices." Her focus and thus the focus of the edited text is appropriately fixed on the social determinants of health. For as Canada's leading proponent of a social determinants of health lens, Dennis Raphael argues, "the primary factors that shape the health of Canadians are not medical treatments or lifestyle choices but rather the living conditions they experience." (www.thecanadianfacts.org) According to Raphael (2011) issues like education, income distribution, (un)employment/job security/working conditions, housing, social exclusion, social safety networks, health service access, aboriginal status, gender, race, and disability greatly impact health and quality of life. And the assembled scholars in *Rural Women's Health* have ensured the discourse considers all of these issues and then some.

And ok, I'll admit it. I just love that this is a primarily Canadian text, with discourse and debate representing the many different regions and living circumstances that make up rural Canada. Whether it be an exploration into the relationship of breast cancer and farm work in Ontario; exploring how assumptions affect Older Mennonite Women's health in Ontario; weaving together three generations of women in Newfoundland and Labrador; giving voice to the quality

of life of elder Ukrainian women in Saskatchewan; re-framing pregnancy and health issues in the North West Territories; re-naming PTSD with women living in remote Aboriginal communities; or legitimizing Nova Scotian African Canadian women's definitions of health, this edited volume is as ruggedly honest as is Canada's terrain. Established and budding scholars alike will find the twenty-two chapters thorough and enlightening, to say the least. Who, except Leipert and the emerging group of rural women's health scholars she's assembled, would think about food provisioning practices or food sustainability as impacting rural women's health? In fact when reading those chapters, I was reminded of Vandana Shiva's work exposing women's gender-entrenched role in global food security. She tells us that women plant, nurture, and harvest the food we all need to survive, and works tirelessly to empower women and to keep food security in their hands. In fact, only recently Shiva travelled to Nova Scotia and spoke at several universities regarding gender issues, as they relate to food security, food sovereignty, and seed saving.

Yes, place matters, especially how it intersects with gender-relations, race, class, identity, and power. And *Rural Women's Health* goes there. That rural women's health is deeply linked to women's safety is sadly, perhaps, the most predictable commonality. So much so that in a text meant to illuminate how rural living spaces impact health, a chapter needed to be dedicated to the one issue experienced by many women regardless of space: gender-based violence. And so there we have it. Violence emerges as central. Again.

But Leipert's team didn't stop there. Discussion regarding the experiences, struggles, and required resiliency of rural health care providers takes a prominent spot in the text. For