

## Review of: "We Don't Have a Health Problem, We Have a Village Problem"

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Potential competing interests: No potential competing interests to declare.

Overall, the article "We Don't Have a Health Problem, We Have a Village Problem" presents a compelling critique of modern health systems, highlighting the importance of community in health creation. It encourages a paradigm shift, proposing a rethinking of how health is defined and achieved. With some adjustments in balance between theory and practice, and a deeper exploration of policy recommendations, this could become a landmark paper in advocating for community-driven health solutions.

## Areas for Improvement:

**Over-reliance on Theory**: While the theoretical discussions, especially around ABCD, are well-articulated, there is a risk of overwhelming the reader with abstract concepts, particularly in addressing the social and political root causes of health problems. However, the critique of social prescribing is somewhat premature, and the article could offer more practical solutions for integrating community-based approaches with existing healthcare systems.

**Clarity in Definitions**: The concept of "village" is central to the article, but its meaning can be somewhat vague. The author might consider elaborating on what specifically constitutes a "village problem" in diverse contexts (rural, urban, global South vs. global North) and how solutions might differ based on these variables.

**Further Exploration of Limitations**: The article presents social prescribing as a well-meaning but flawed intervention. However, it could benefit from more detailed exploration of how social prescribing could be adapted or improved in combination with community-building approaches, rather than dismissing it as insufficient.

Greater Engagement with Policy Implications: The article critiques current health systems and their focus on individual medicalization. A more in-depth analysis of how policymakers can create environments that foster community-based health initiatives—especially in countries with different levels of resources—would add practical value. What specific changes are needed at the governmental or institutional level to support ABCD approaches? How can existing health systems integrate this framework more effectively?

Incorporate More Quantitative Data: The article relies heavily on qualitative examples and theoretical discussion.

Incorporating quantitative data—such as statistics on the impact of social isolation or the success of ABCD initiatives—would provide additional support for the argument and appeal to a broader audience, including policymakers and



practitioners.

**Consider Ethical Dimensions**: The article touches on social justice but could delve deeper into the ethical considerations of the current healthcare model and the ABCD approach. How does ABCD address issues of equity, particularly in underresourced communities? This could enrich the discussion and highlight the broader societal implications of the author's argument.