



EASIER TO IMAGINE

By Ben Brisbois

He says there aren't any easy answers. I say he's not looking hard enough!
-Bart Simpson

The moving stories collected in healthpunk provide a wealth of ideas for imagining and realizing healthier futures in the face of looming global crises. As a researcher and educator in public health I immediately thought of challenges to this task posed by Western biomedical professions and the ways of knowing they have generated. In this commentary I explore what I see as the most important such obstacle: capitalism.

It is easier to imagine the end of the world than the end of capitalism. This quote, usually attributed to Fredric Jameson, captures how concern over climate change and other looming disasters often jumps post-apocalyptic visions civilization crumbling, rather than imagining changes to the capitalist power structures that got us here. Slavoj Žižek describes apocalyptic films where our subconscious desire to escape those capitalist structures finds misplaced expression disasters that just blow the whole

but where thing up, market structures are magically resilient "as if, even after a global cataclysm, capitalism will somehow continue" (Zižek, 2011, p. 334). Anthropocene' as a concept conveys a related lack of understanding of the nature and history capitalism. It holds that our current era began sometime in the late 19th century despite apocalyptic and much earlier impacts of capitalism's globally imperialist spread, such as the massive environmental change and human devastation accompanied European colonization of the Americas (Davis and Todd, 2017). In public health, fields such as planetary health Anthropocene worries into new academic empires and interventions that envision the continuation or even intensification of capitalism. The dominant Rockefeller Foundation version of planetary health, for example, looks at the disastrous consequences of industrial development and proposes...more capitalism, in the form financialized investment vehicles and (patentable) technological innovations (David et al., 2021). Planetary health may thus represent yet another "colonial proposal for preserving the capitalist order in the face of the perceived need to avoid environmental deterioration and its impacts on human health" (Baquero et al., 2021, p. 4).

With even complexity-informed fields in public health appearing to take capitalism's continuation as a given (and therefore helping to ensure that it is), can health fiction speculative writers otherwise? Healthpunk authors weren't specifically asked to, but promising ideas nevertheless emerged. 'Time' evokes time's role in capitalist accumulation, factory owners lengthening the working day to extract more value from the bodies of workers (cf. Marx, 1992). After the story's abolition of measured time, "Work now means completing things that fulfill us but contribute towards maintaining shared assets such as food sources, sources, life. education." The commodification of land in capitalism is also challenged in 'Cantadoras de historias,' in which the lands of the Tabajara and Potiguara peoples in what is today known as Brazil have become demarcated in the healthier future they envision. This rematriation of underscores the fact that Indigenous control over their own territories has been systematically and disastrously eroded for over five centuries in the Americas by the rapacious spread of Eurocentric capitalism, at the same time as that spread was creating the climate crisis (Moore, 2017; Rivera Cusicanqui, 'A 2012). future note to bodyworkers' white portrays

privilege as an actual source of embodied illness, "potentially caused by the fact that the patients, or their ancestral roots, are on the side of causing the climate crisis, and the enormous sense of guilt, whether conscious or unconscious, coming from it." This condition evokes Martinican psychiatrist Frantz Fanon's observations on the psychological distress experienced by agents of French colonial violence in Algeria, and calls to mind the inextricably white supremacist nature of actually-existing capitalism (Fanon, 2004; cf. Pulido, 2017). These examples thus show that healthpunk's authors are not limiting themselves to the status quo futures that public health finds easier to imagine.

Given how economic growth is fueled (literally), a related challenge involves energy and the ways in which it is obtained. Electricity rationing and energy-producing mood bracelets in 'If we could turn our emotions into light' and the photosynthetic post-humans 'Homo sapien' show healthpunk authors wrestling with such difficult questions, which go well beyond fossil fuel combustion and inequitably-distributed impacts. The hugely unfair environmental and social justice implications of renewable energy include land grabbing for biofuels and solar and wind farms, and 'extractivist' development models based on large-scale mining of the components of renewables. That the from and benefits activities economic flow along centuries-old racialized, gendered

and ecocidal channels dug by Euro-American imperialism demonstrates the importance of confronting 'CO2lonialism' and the futility of trying to do so using markets and assumptions of endlessly growing economies and energy demands (Dunlap, 2018; Hazlewood, 2012).

Avoiding the trap of such easy answers in imagining healthier futures will likely be complicated by the biomedical ways of knowing in which many of us are schooled. Medicine's historical co-evolution with capitalism saw it adopt a focus individual behavioural technical factors that would not ruffle feathers by challenging societal power structures (Turshen, 1977). Medicine simultaneously evolved the 'subject positions' which biomedical professionals can inhabit in society – as when privileged individuals enter health professions and related academic careers through competitive making processes, investments in capitalism's continuation inherent to life as a healthcare professional (Foucault, 1973). The fact that healthpunk's stories often come from students who are not necessarily committed to such careers may be a helpfully disruptive of resistance to source investments in the capitalist status quo, whether emotional, intellectual, professional or financial.

Such resistance would also need to transcend other 'easier to imagine' tendencies, such as biomedicine's focus on discrete, commodifiable medical interventions and technologies that can be deemed evidence-based (and high impactfactor publications about them). This focus enables careers as successful health professionals and 'academic capitalists,' but misses opportunities for societal changes that would vastly improve health. For example, holistic understandings social of ecological determinants of health those long held as Indigenous peoples around the world were casualties of biomedicine's reductionist co-dependency with capitalism (Redvers et al., 2020). Health in 'Cantadoras de historias,' in contrast, is comprised of reciprocal and caring relationships among plants, animals, winds and ancestors, paralleling Indigenous models of health and land relations in places far northeastern Brazil Richmond, 2015). Following this example could lead us to imagine futures in which broad attention to fairness and reciprocity communities (both human and nonhuman) hugely reduces the overall burden of disease needing existing or imagined healthcare interventions. future would require profoundly rethinking both structures of capitalism driving social and environmental injustice and – by extension – the nature of lives in the health professions and disciplines.

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