Background Framework

Dimensions of life:

The 'givens of life' or the 'nature of things' are the dimensions of life that we all intuitively recognize and experience. They are given in our experience; they just are. In present-day differentiated societies they have become separate dimensions and areas of life. The political, economic, religious, social, etc. are no longer embedded in the whole of a communal way of life. They have become separate even though they are inter-dependent spheres of life.

These different dimensions can be *cognitively approximated* and *abstracted* for the purpose of theorizing and discussion:

- ultimate beliefs or world views: trust, surrender
- ethical: commitment
- juridical: justice, mercy
- economic: sparingly, resourceful,
- social: respect, solidarity, equality
- cognitive: distinguishing
- lingual: clarity, naming
- aesthetic: imaginative, symbolic
- techno-formative: guidance
- psychic: sensitive openness
- biotic: organic
- energy: kinetic, dynamic
- motion: movement
- spatial: extended, location
- numerical: oneness, identity

The Amsterdam School of Philosophy is one example of academics consciously working with these abstracted dimensions and their inter-relatedness.

A more concrete example of the awareness of these dimensions are the Child Psychology textbooks that usually have separate chapters on the child's physical, neural, biological, emotional, lingual, cognitive, skill, aesthetic, social, spiritual, and ethical (fairness, caring, cooperation) development.

Every concrete human act, organization, institution, subject, etc. manifests these basic aspects in their inter-connection, like a hospital, job, sports club, family, government, person, forest, river, etc. (See the sample pages on water and forest and the examples in the book: *The Gods in Whom They Trusted* (2016) on hospitals, psychotherapy, ball clubs, and education.)

An Experiential or Phenomenological Ethics:

These dimensions given in our experience contain a fundamental 'directive', 'touchstone', or 'guideline', which can be implemented in a life-destroying or life-enhancing way. The book gives several examples of such concrete *norms that are given in our experience*. They are like *sign posts* in a forest or a *road sign* at a fork in the road, 'go this way and not that way'. For example:

If we want to preserve a forest, we need to honor its *ecological embeddedness* and *interconnectedness* and if we do, it will thrive; if not, we will destroy the forest and its entire eco system.

If as citizens and politicians we want our nation to flourish, we need to support and create policies that enhance *social justice* and *eco justice* for all, so that all people and all creatures can have their rightful place under the sun and fulfill their lives and unfold; if not, there will be protest, revolt and destruction.

If we want harmony, peace and cooperation in our society, we need to practice and promote respect, equality and solidarity with and for all; if not, there will be bigotry, prejudice, racism, sexism, exclusion, and suffering.

If we want physical health and well-being for all, the body needs to be seen and treated as a *living organism* within the person's total way of life and all *aspects of life need to be cared* for equally; if not, there will be piece-meal and mechanical care, ill-health, decline, and unhappiness,

If we want real economic progress, all people need to make a *good living and fulfill their lives* and all areas of life need to be able to *unfold and flourish*; if not, many people will be marginalized and become expendable and life will become one-dimensional, riches for the few and poverty for many.

And so on; each of these ways point to *guidelines* (ecological interconnectedness, social and eco justice, solidarity, well-ness, etc.) that lead to life-enhancing or life-destroying ways.

What do people care about?

- having a job, making a living
- family
- environment, global warming
- health care
- education
- justice, representation
- housing
- community
- transportation
- etc.

Out of the many possibilities we have chosen one area of life as an example, namely *health care* and well-being (in general). Health care and well-being manifest all the dimensions of life we have mentioned above. We have selected three dimensions of health care and well-being for a closer look: the *ultimate beliefs or worldviews* that directs health care; the *economic dimension* of health care; and the *formative or guiding* aspect. The other dimensions (governing, commitment, social, psychological, organic, etc.) of health care in general could be looked at in a similar way.

There are many other *specific areas* of health care that could be looked at in the same way, like hospitals, walk-in clinics, Medicare, prevention, epidemics, nutrition, diseases, physicians, Health Canada, dying, etc.

1. Ultimate beliefs or convictions that guide health care

(a) Life-destroying visions:

Present day health care is dominated by the neoliberal global market ideology. It is a one-dimensional view in which economic concerns determine health policies and the actual care. Market forces, profitability, technology, expertise, efficiency, focused research and data gathering, target groups, privatization, and affordability dominate the discussions. Health care becomes dependent on the free working of the health market, including health insurance and drug companies with their ever-expanding supply of medicines and health products. The medical industry has become very profitable, providing opportunities for investment. An outbreak of general good health would be financially bad for the health industry.

Within this perspective the human body is reduced to a bio-chemical mechanical object that can be treated and fixed. We can create and buy good health; it is fixable. There is a solution and treatment for every disease and disability. Persons are treated as isolated individuals.

Living becomes a matter of surviving, surviving as long as possible at whatever cost. In this context, health care can be seen as a 're-assurance' industry, re-assurance in the face of loss of control and fear of death. We can cure disease and extend life as long as possible. In this view health becomes a kind of utopia to be attained at all costs.

The assumed hope is that as a result of this market and technical approach, health care will become less anonymous, more patient friendly, more efficient, less fragmented, less expensive, more transparent, less beurocratic and providing more choice. Often the opposite seems to be the case.

(b) Life-enhancing vision:

An alternative view of health care is a holistic and integrated approach to the body, illness, pain, care, health, well-being, birth, and death. It is a view in which bodily health involves every aspect of life. Health and well-being depend on economic means, work situation, housing, community, nutrition, recreation, knowledge, physical environment, etc. Everyone has a right to a good life and a good death. Health and illness is a relational and communal issue. Ultimately health and health care is a human right.

Within this point of view the human body is seen as a living organism that functions in the whole of life, in devotion, meditation, intimacy, delight, exertion, passion, outrage, joy, sorrow, reflection, and so on. It is a view in which birth, infirmity, suffering, dying and death are an integral part of our human existence. A good life is not just a matter of living longer but of fulfillment, relationships and meaning.

2. Economic dimension of health care

(a) Life-destroying policies and practices:

As we have indicated above, health and health care within the neoliberal perspective is seen as a commodity to be bought and sold. It must allow for the free play of supply and demand. Economic concerns, like managing costs, reducing waiting lists, limiting government investment, scarcity in medical care, profitable insurance companies, private clinics, new drugs and advanced procedures, etc. determine policies and practices. In health care debates and reports these are the topics that return again and again. It is an illness dependent system and results in the medicalization of life.

Care is applied as efficiently as possible. Procedures are timed and computerized, sometimes to the minute. The focus is primarily on results and not on the process; curing is the goal and being discharged from hospitals and programs as soon as possible.

(b) Life-enhancing policies and practices:

Within an alternative perspective, the economy as a whole and financing is to *serve*, *support* and make well-being and health care possible in our society. Economic concerns are important and even crucial in a complex society. However, resourcefulness, frugalness, innovation, efficiency, promotion, collaboration, are to serve and make care taking possible. Economic concerns ought not to dominate health care.

3. Formative or care-giving dimension of health and well-being

(a). Life-destroying ways of caring for and self-care:

Health care within the neoliberal approach becomes primarily caring about. It is care that, delivered according to an efficient strategy. Curing is the primary goal, not the process of helping. In that respect it is anonymous, impersonal, instrumental, computer guided, and cost effective. Disease and death are objectified. Even the body is fragmented, each body part and each function requiring a different procedure. Healthcare professionals do not communicate well with each other and the patient. The relationship between doctor and patient is a dependent one. The specialist's recommendations carry the most weight. The patient's life situation is not up for discussion. Because of this fragmented and impersonal approach family members and friends often end up becoming the patient's 'case manager', keeping track of medications, procedures, doctor's visits, providing food, preventing premature termination, organizing home care, etc.

There is an inherent contradiction between daily advertising and indoctrination in a consumer way of life with its processed and fast food, commuting, stressful work conditions, lack of exercise, lack of family time, which are the primary cause of chronic illnesses *and* the promotion of a healthy life style and well-being. Health is primarily determined by social factors. Most health problems are rooted in class, race, gender and power inequalities and poverty both locally, nationally and globally.

(b) Life-enhancing ways of caring for and self-care:

Within a holistic approach, care is not so much a *transaction* but an *interaction* between the care giver and the person needing help. The actions go back and forward in the process of attending to the person. Such care giving involves empathy, respect, understanding, listening, comforting, taking time, offering assistance, learning from the other person what is helpful. It is an integrated form of help. It is help for the whole person and his or her well-being and standing by whatever the person's life circumstances. Such care giving is qualitative; it is a *caring for*, requiring personal involvement. It has to do with the art of living, suffering and

dying; not everyone heals, some remain sick or handicapped, and some life situations cannot be solved. Illness and death cannot be excluded from life; they are an integral part of life.

The care that is given is to *enhance the person's own care taking*, often step by step. This means that life style, exercise, nutrition, prevention become the most important aspects of healing and well-being. Health and illness are primarily the result of outside, social factors and relate directly to the person's quality of life and socio-economic circumstance. Health care needs to be community based and involve different forms of health care that can require outpatient or home care, accessibility, coordinated health information and services, promotion of healthy life styles, and wellness activities, etc. Holistic health care is based on equity, universality, solidarity, accessibility, cultural sensitivity, participation and social justice. In this respect health care is a social or human right.

Resources:

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