

A Radical Public Health Declaration: *This Is Public Hell!*

Achieving health equity—one of public health’s overarching goals, according to Healthy People 2020—requires that we eliminate all social, political, and economic unfairness in our society and world. *This Is Public Hell*, Radical Public Health’s (RPH) theme for this year’s (2013-2014) events, seeks to shine a bright light on a number of often-overlooked inequities and to raise the necessary critical social, political, and economic consciousness as a foundation for learning and action. Through facilitated discussions, guest lectures, films, conferences, and other events, RPH seeks to:

- Make space for more frequent and enlightened discourse on blatant and latent inequities
- Build collective knowledge about the roots, history, extent, and manners of oppression
- Make central in our deliberations the voices and concerns of those who are impacted by injustice
- Cast appropriate shame on the many actors who perpetuate and benefit from such unfairness
- Build the political and economic will to consistently work toward eliminating social, political, and economic injustice
- Hasten the difficult work of ripping out the roots of these inequities, leading to their elimination

This is a longstanding fight, one that began far before and will last long beyond our *This Is Public Hell* campaign. We believe prudence demands that we endeavor to refocus and redouble public health’s efforts on a number of fundamentally unjust circumstances in our society and world. RPH hopes to make a meaningful contribution toward eliminating injustice through our discourse, learning, and action. As philosopher and activist Dr. Cornel West has often said, “people are catching hell” and it is high time we raise hell about it.

To this end, we have borrowed from and modified the *This Is Public Health* campaign, a popular branding of public health efforts to support population health. That campaign has labeled such efforts as healthy eating, active living, STI prevention, and smoke-free lifestyles—using *This Is Public Health* stickers and buttons—in an effort to raise awareness about public health. We applaud these

necessary and useful efforts to protect and promote population health. That campaign celebrates common public health practices and what might be referred to as “low-hanging fruit;” however, it says nothing about the deep-seated systems of oppression in our society that ensure the continuation of vast negative consequences for the health of the public.

Many public health interventions disregard the roots of health inequities. For example, physical access to fresh produce is being extended to people who can ill-afford it, often by attempting to attract big box stores. Many of the corporations that own such stores (take Wal-Mart, only as one example) often systematically underpay and abuse their employees while forcing their suppliers to do the same. The central unfairness to their economic model and the fact that many people cannot afford healthy food remain untouched by this half-solution to healthy food access. Also, new bike lanes run through (or around) neighborhoods of people whose lives are wrought with maltreatment, abuse, marginalization, and structural economic and physical violence—what might be called a “public hell”—perpetuated by their own society. These are but two examples, but a great many public health efforts do little or nothing to disrupt active structural, economic, and political violence in the U.S. and abroad.

Locally, Chicago’s Mayor Rahm Emanuel continues the trend of utilizing Tax Increment Financing (TIF) for private gain, at the expense of closing down public mental health clinics and schools in low-income communities of color. Emanuel has doled out millions of the public’s tax dollars to private interests, including the Hyatt hotel chain and DePaul (a private university). The result is even greater inequity of money, power, and resources. Much too often, public health practitioners and officials go both unconsulted and, shamefully, quiet or silent on matters of such extreme injustice.

Many of the above noted inequities are the direct results of neoliberalism: the elevation of private interests over public and collective well-being and the prioritization of profit and market interests over others, including the public’s health and education. Politicians from both of the U.S.’ main political parties frequently advocate for and enact neoliberal policies. Unfortunately, as a field, public health rarely contests that the central premises of the neoliberal political and economic agenda are antithetical to equality, equity, and social justice. Public health must assume a constant activist role to counteract



Radical Public Health *Probe. Provoke. Praxis.*
RPH.UIC@gmail.com Facebook.com/RadicalPublicHealth



any and every political and economic agenda that has such deleterious health impacts. Otherwise, the field will remain in a perpetual mode of reaction, measuring the horrendous results of and seeking temporary bandages for these momentous problems, rather than successfully protecting and promoting the health of the public.

Money, power, and resource inequities are often referred to in the definition of the *social determinants of health* within public health discourse and literature. The social determinants of health are defined as

“the conditions in which people are born, grow, live, work, and age, including the health system. These circumstances are shaped by the distribution of money, power, and resources at global, national, and local levels” (World Health Organization).

This language has significant utility, as common names for phenomena tend to help progress toward at least recognition of and, sometimes, solutions to problems. Insofar as inequitable distributions of money, power, and resources are social problems, they are political and economic ones as well, which is worth a consistent focus by the public health community. The question is: How do we change the political economy to provide an equitable—that is, fair—distribution of money, power, and resources for everyone in society? The field of public health has named this problem but has yet to provide a full vision for how—much less, relentless demands—to tangibly distribute money, power, and resources in an equitable fashion.

Time and again, we start out talking about the social determinants of health and then fail to fully address the policies and practices that perpetuate money, power, and resource inequities. The opposition against action is formidable and efforts thus far have been insufficient to counter the corporations and their think tanks, boards, and executives (the 1%) who buy off public policy, often at the expense of the well-being of the public (the 99%); who overpay themselves to the tune of millions of dollars; and who fail to fairly compensate the work of all workers with livable and equitable pay and benefits.

The bankers who crashed the economy and produced the mass housing-eviction crisis have gone unpunished for their offenses but were allowed to keep their untold stolen millions of dollars; millions of people have suffered the consequences. Our own government claims to want peace, however it spends more money arming itself than any other country while it simultaneously exports more weaponry than any other. Rather than promoting peace, such actions lead to a more militarized, more violent

world with greater money, power, and resource stratification. In the U.S., Blacks and Latinos are arrested and incarcerated for drug use, abuse, and addiction—if anything, what should be treated as a health issue—at rates that are grossly disproportionate to their rates of drug use. That is to say explicitly that drug policies are often applied in a racist manner with severe consequences for the individuals, their families, communities, and society; meanwhile, the “War on Drugs” has been proven largely ineffective in addressing the drug abuse and addiction it claims to target. This list could certainly go on, but the point is clear that oppression—often along lines of race and class—and different forms of violence are still prevalent in our city, country, and world. Public health is not doing its part to challenge it.

The inequitable distribution of money, power, and resources is wholly antisocial. These injustices are creating hellish conditions that stand in the way of extending social and economic justice and of having a fair society that is free of health inequities. Those working in public health who claim social justice as a value and health equity as a goal must speak up and actively work to change these *antisocial* determinants of *unhealth* for such claims to have any true meaning or value. We do not underestimate the many forces that will oppose a social justice agenda, but there is no excuse for allowing such injustice to continue; for failing to protest in the streets, boardrooms, and capitols; and for providing any space for those who perpetuate such structural violence to continue their actions in an atmosphere of comfort and tacit approval. There is no room for injustice within the just society and world we in public health strive to create.

Radical Public Health’s events joined by this theme, *This Is Public Hell*, will emphasize that social justice is a principle that requires our constant attention and enforcement. *This Is Public Hell* will also attempt to show the intertwined and compounding negative impacts of the many layers of these fundamentally unfair conditions while exploring real solutions. This language is honest about the depth of these problems: In public arenas many of those most in need of the help of society are frequently cast out, are permitted access to fewer resources than others, and are continually the victims of many different forms of political, economic, and social oppression.

In other words, *This Is Public Hell* for many people, and only an explicit, sustained focus on, hostility toward, and opposition against such systemic oppression and its concurrent political, physical, and structural violence will ever cause it to crack, crumble, and cease.