Life|Death...Health|Justice (WST 395)
Prof. Lisa Diedrich

One thing that can be said for an eight-month course of cancer treatment: it is highly educational. I am learning to suffer.
—Prof. Vivian Bearing in Margaret Edson’s Wit

In fact, the Hmong view of health care seemed to me to be precisely the opposite of the prevailing American one, in which the practice of medicine has fissioned into smaller and smaller subspecialties, with less and less truck between bailiwicks. The Hmong carried holism to its ultima Thule. As my web of cross-references grew more and more thickly interlaced, I concluded that the Hmong preoccupation with medical issues was nothing less than a preoccupation with life. (And death. And life after death.)
—Anne Fadiman, The Spirit Catches You and You Fall Down

What does it mean to shift our ideas of access and care (whether it’s disability, childcare, economic access, or many more) from an individual choice, an unfortunate cost of having an unfortunate body, to a collective responsibility that’s maybe even deeply joyful?
—Leah Lakshmi Piepzna-Samarasinha, Care Work

I conceive of care as the way someone comes to matter and the corresponding ethics of attending to the other who matters.
—Lisa Stevenson, Life Beside Itself

In this course, we will explore big questions about life and death and health and justice. We will investigate these questions through particular case studies, moving from the phenomenological experience of bodies in the world to the way global events and transnational structures affect embodied experiences. Our first series of case studies will look at various relationships and forms of care within and beyond the institution of medicine. We will consider how knowledge, power, and choice are enacted in a variety of spaces of care. We will then expand out from clinical and caring practices to larger global events and transnational structures that affect the health and well-being of peoples throughout the world, historically and in the present. We will explore how illness experiences and events are documented in a variety of texts—medical, media, and activist documents, as well as literature, film, comics, and other forms of creative expression. We will explore biopolitical issues, including the racialized and gendered politics of health and illness, as well as forms of structural violence that mean some people are at greater risk for illness and premature death than others. Some of our organizing questions for the semester include: What constitutes personhood and how is it enacted, maintained, and denied? Why and how are health and illness political? What factors impact health? What does good care look and feel like?