

MOVEMENT AND CRISIS:  
A SOCIAL HEALTH MANIFESTO

ALEJANDRO BANUELOS & AARON CLARKE

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ABSTRACT

In this Article, we employ the terms Health (as a white supremacist mode of being) and social health to demystify how race and health are mobilized by the state and its representative bodies to shift accountability away from their role in crafting an anti-Black world, contain and quell Black protest, and how Black communities have dreamt and practiced alternative definitions of health whereby empowerment was achieved both nutritionally and politically.

ABOUT THE AUTHORS

Aaron Clarke teaches history at Dr. Pedro Albizu Campos Puerto Rican High School. His research interests include decolonial and abolitionist pedagogies, Asian-American radicalism in/as philosophy, and epistemologies of race and gender. He is a graduate of Northwestern University and the University of Illinois-Chicago.

Alejandro Banuelos is an activist from Los Angeles organizing around racial justice, police, and prison abolition.

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I. HISTORIES OF HEALTH

The movement for Black life has achieved renewed steam. No less in response to a litany of police executions than by the deepening precarity of Black life brought on by the COVID-19 pandemic. The Los Angeles County

Department of Public Health along with governing bodies in Los Angeles are attempting to center structural racism in their explanations of why Black people are suffering more under COVID-19. But they have been sluggish to respond to communal demands for an immediate reduction of the jail population and to defund law enforcement, which are institutions and practices rooted in anti-Blackness with correctional settings in particular serving as hotbeds for COVID-19 transmission. This moment demands a deeper understanding of race and health.

Health has long been a priority for organizers in Los Angeles. For example, Community Coalition (CoCo), a Black and Brown nonprofit organization in South Los Angeles, was founded during the world-shattering events known as the crack and HIV/AIDS epidemics. Black and Brown community members in South LA were dealing with the fallout of deindustrialization, economic disinvestment, police repression, and invention of a drug capable of stealing life from a person's eyes. As an organization committed to nurturing the leadership of Black and Brown South LA community members to transform their neighborhoods, CoCo understands racism and capitalism as moving in lockstep with diminishing health and life outcomes for Black and Brown people in South LA. Before CoCo, there were the Black Panthers advancing a model of liberation for which armed insurgency was inseparable from feeding the community and improvising medical clinics. For these groups, maintaining Black people's health was and is a liberatory aim.

We are concerned with the deep histories from which these crises emerge. To better understand the historical forces shaping South LA today, we are pursuing an intellectual practice rooted in radical historicization which considers how the entangled legacies of systematic domination and collective radicalism manifest in the here and now. The method of radical historicization will provide space to think through the lineage of anti-Black pathologization as inhabited in the statements of Barbara Ferrer, LA County Director of the Department of Public Health, and the McCone Commission written in 1965 after the Watts rebellion.

We cannot begin to move through the general genocidal atmosphere of policing and a pandemic without drawing on the ways we have already moved through these conditions. This idea of radical historicization recognizes both domination and radicalism as intermingling historical forces. That neither can be understood in isolation from the other is the terrible and beautiful inheritance of our present work.

This inheritance leads us to a set of questions: What is the relationship between a global pandemic and racism? What happens when the institutions illuminating the racial contours of policing and COVID-19's impact on

Black and Brown South LA communities are the same institutions involved in the ongoing assault on Black and Brown life? How did people survive when being healthy was defined and manifested in opposition to their existence? Put differently, how have Black and Brown communities in South LA defined and practiced health differently? The answer lies in cartographies of struggle tasked with protecting and restoring the body and soul of Black and Brown communities.

In this Article, we employ the terms Health (as a white supremacist mode of being) and social health to demystify how race and health are mobilized by the state and its representative bodies to shift accountability away from their role in crafting an anti-Black world, contain and quell Black protest, and how Black communities have dreamt and practiced alternative definitions of health whereby empowerment was achieved both nutritionally and politically.

## II. HEALTH AS A WHITE SUPREMACIST MODE OF BEING

In response to the George Floyd, Breonna Taylor, and Tony McDade uprisings, LA County Public Health Director Barbara Ferrer released a statement declaiming racism as a public health issue. Many corporations, elected officials, and state representatives have released similar communiques. Some are genuine strides toward reconciliation while many feel trite as they masquerade statements of solidarity as solutions to the enduring presence of race in the structural violence against Black and Brown life. The COVID-19 infection rate among Black and Brown communities in South LA has mirrored national trends.<sup>1</sup> In a devastating reminder of how quickly the virus can spread, twenty-eight members of a Latinx family in South LA tested positive for COVID-19.

Referring specifically to Black folks, Barbara Ferrer accounts for racialized health outcomes by saying:

We know that Black Americans fare worse than other groups on virtually every measure of health status. And it has become all too common to blame this on individual behaviors when in fact the science is clear: the root cause of health inequities is racism and discrimination and how it limits access to the very opportunities and resources each of us need for optimal health and well-being

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<sup>1</sup> *Compare LA County COVID-19 Surveillance Dashboard*, L.A. CNTY. PUB. HEALTH, [http://dashboard.publichealth.lacounty.gov/covid19\\_surveillance\\_dashboard](http://dashboard.publichealth.lacounty.gov/covid19_surveillance_dashboard) [https://perma.cc/9RLC-AEBW] (last visited Aug. 11, 2020) (follow “Demographics” hyperlink; then select “Race/Ethnicity” characteristic), with *Health Equity Considerations and Racial and Ethnic Minority Groups*, CTRS. FOR DISEASE CONTROL & PREVENTION (July 24, 2020), <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/racial-ethnic-minorities.html> [https://perma.cc/Z7TZ-J2NZ].

It starts at birth, with higher rates of Black infant mortality and shockingly higher rates of maternal mortality among Black women, and extends through adulthood, when we see Black residents of LA County experiencing earlier onset of heart disease, hypertension, and diabetes and early deaths [A]ddressing law enforcement violence and racism are core to public health, [and] the rush to justice has to be part of our prescription.<sup>2</sup>

Some might claim Ferrer's antiracist messaging provides the grounds for certain progressive demands, but this statement recognizes the problem while ignoring its roots. As Ferrer pays lip service to racism and scarce resources, these structural concerns wind up displaced onto Black people who are sick and dying. The only inequalities Ferrer makes visible are the different rates of heart disease and maternal mortality, which are biological phenomena located within a racialized body, instead of the structural and epistemological conditions that produce them. Even as Ferrer attempts to undo the notion that individual lifestyles or choices are to blame by identifying racism and its maintenance of disparate resources as the root cause, she can only ever articulate such racism in terms of a biological account where Blackness and sickness converge.

Health—as it is deployed by progressive political-economic assemblages—is not a neutral category; it is a white supremacist mode of being incapable of more liberatory aims. We must deconstruct and reimagine Health by refusing anti-Black pathologization at its heart. Ferrer's epistemological orientation of social-scientific empiricism is indistinct from the thought system structuring public health and liberal policy creation in LA more broadly. Such an approach, which has already been critiqued down handedly by the work of Katherine McKittrick,<sup>3</sup> Denise Ferriera Da Silva,<sup>4</sup> and Sylvia Wynter,<sup>5</sup> deploys a mode of pathological counting where Black death becomes a medico-mathematical fact.

What we are left with is a murderous tautology, where the only culprit for Black death is prior Black death. The architecture of a public health apparatus that orders and is ordered by white supremacy is unacknowledged in Ferrer's statement, perhaps because it is the very apparatus Ferrer plays a role in steering. Given her institutional position and epistemic orientation, it is unsurprising

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<sup>2</sup> Barbara Ferrer, *Monthly Message*, CNTY. L.A. PUB. HEALTH (June 2, 2020), <http://publichealth.lacounty.gov/media/director/MonthlyMessage> [<https://perma.cc/X4FR-L7XH>].

<sup>3</sup> See, e.g., SYLVIA WYNTER: ON BEING HUMAN AS PRAXIS (Katherine McKittrick ed., 2015).

<sup>4</sup> See, e.g., DENISE FERRIERA DA SILVA, *TOWARD A GLOBAL IDEA OF RACE* (2007).

<sup>5</sup> See, e.g., Sylvia Wynter, *Unsettling the Coloniality of Being/Power/Truth Freedom: Towards the Human, After Man, Its Overrepresentation—An Argument*, 3 *NEW CENTENNIAL REV.* 257 (2003).

Ferrer names racism as producing scarce resources leading to Black death while failing to also name how the institution she commands is racialized and keeping intact a state of expendability for Black life.<sup>6</sup> That inclination in her thinking winds up turning Black death and sickness into established biomedical objects used to postpone criticism of institutionalized medical practices in Black and Brown communities. Ferrer's statement reveals how anti-Blackness, as a meta-physical and structural arrangement, controls and limits dominant institutional imaginings of community wellness in LA's present and future. This anti-Black constraint reveals itself in the history of South LA's resistance and vulnerability to the dominant concept of "optimal health and well-being."

The paradigm of anti-Black pathologization should be understood as a structuring force in the historical development of South LA. From the Moynihan Report to the Watts riots to the experiment of LA Police Department's (LAPD) urban militia called the Community Resources Against Street Hoodlums (CRASH) in response to the 1992 uprisings, pathologization has been fastened to Black life through decades of material and discursive moments. Within this arc, the McCone Commission's *Violence in the City*, written in 1965 after the Watts rebellion, is relevant for how its social-scientific liberalism grappled with interlaced matters of health crisis, policing, and social upheaval in South LA.<sup>7</sup> In *Violence in the City*, a discourse of Health as politicoeconomic subjectivity is sustained by anti-Black pathologization as the text diagnostically constructs South LA as a space of illness to be cured through the medicine of white liberal reforms.

The section "Welfare and Health" provides an important entry point to consider the entanglement of sickness, struggle, and subjecthood. In this chapter, the Commission explains its view that the Watts rebellion was caused by poor biomedical health outcomes. To rehearse this line of thinking succinctly: *The riots were a product of the poor conditions experienced by Black people in South LA. One dimension of this is the variety of illnesses and diseases disproportionately plaguing such communities. By addressing the poor health in these communities, LA can prevent riots.* Public health interventions were being imagined as a strategy for stifling and stopping insurgency and protest. The McCone Commission did not seek to safeguard the Black body against whooping cough or tetanus as much as it attempted to placate a form of Black fugitivity the state can only ever register as a threat to the prevailing social order. For the McCone

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<sup>6</sup> See JOHN D. MÁRQUEZ, *BLACK-BROWN SOLIDARITY: RACIAL POLITICS IN THE NEW GULF SOUTH* (2014).

<sup>7</sup> GOVERNOR'S COMM'N ON THE L.A. RIOTS, *VIOLENCE IN THE CITY —AN END OF A BEGINNING?* (1965) [hereinafter *VIOLENCE IN THE CITY*].

Commission, Health and Sickness were categories inseparable from the political and economic arrangements it hoped to preserve. What we are most concerned with is how the logic of “keep people healthy so they do not riot” ends up defining Health in direct opposition to a Black abolitionist ethic intent on creating conditions of restoration and protection for Black communities.

The introduction framing the McCone Commission elaborates on the racial and geographic dimensions of Health and illness. It begins with the following diagnosis: “These riots were a symptom of the sickness at the center of our cities.” While this sickness remains a fragile metaphor throughout the report, the framing is employed throughout the introduction, spatializes the malady at the core of South LA, and anchors sickness in notions of marginality, idleness, and despair. The report gives sickness its own kind of gravity, with life spinning around it in a “dull, devastating, spiral of failure.” By positioning this ailment at the center of the city, the report makes sickness a preexisting condition arising from the nature of the ghetto, as opposed to a violence externally imposed. This negative pathology is tied to specific biomedical ideas about disease rates, but it also marks South LA as a space of disintegrating families, rampant criminality, and widespread lack (of economic resources, education, and so on).

Gesturing toward Hortense Spillers and Alexander Weheliye, the McCone Commission mobilizes a “racialized assemblage” to render the community a “living laboratory.”<sup>8</sup> South LA’s significance as a living laboratory goes beyond its objectification under the gaze of diagnosis and study. Below the surface are the principles of experimentation and discovery. The McCone Commission is able to innovate and invent policy through the abject positioning of South LA. The idea of sickness serves as the foundation to the idea of a cure capable of moving the community from deprived and violent to productive and functioning. To quote the McCone Commission:

The road to the improvement of the condition of the disadvantaged negro . . . through education and employment is hard and long Of what shall it avail our nation if we can place a man on the moon but cannot cure the sickness in our cities?”<sup>9</sup>

By drawing on Health to anchor its aspirations, McCone establishes the recovery of Law and Order by providing a pathway for the disadvantaged to become productive participants in the economy.

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<sup>8</sup> See, e.g., ALEXANDER G. WEHELIYE, *HABEAS VISCUS: RACIALIZING ASSEMBLAGES, BIOPOLITICS, AND BLACK FEMINIST THEORIES OF THE HUMAN* (2014); Hortense J. Spillers, *Mama’s Baby, Papa’s Maybe: An American Grammar Book*, *DIACRITICS*, Summer 1987, at 65, 68.

<sup>9</sup> VIOLENCE IN THE CITY, *supra* note 7, at 9.

Understanding Health as economic subjectivity matters because anti-Black pathologization as a transhistorical discourse legitimates and upholds a political agenda insistent on professionalizing our young people (teaching them to decriminalize themselves) rather than dismantling the network of racial power enacting criminalization. According to the McCone Commission, education and employment are the antidotes for revolutionary insurrection. Similar logics form the basis for contemporary progressive policy agendas hoping to guide LA's transition from sickness to Health which is often measured in capitalism's viability within Black and Brown futures.

Narrating the materiality of oppression in the blur of our past and present demands a different lens. We already know the system has assembled an institutional coalition to discipline lifeways emanating from Black and Brown communities: the police, hospitals, banks, and schools. Health is a crucial organizing principle by defining what it means to be productive and human. With this knowledge, we can move against the prevailing assertions of health under crisis in the present and toward an understanding of Health and its role in producing notions of wellbeing hewn to racial capitalism as the continuous crisis.

### III. SOCIAL HEALTH AND LEGACIES OF CARE

“The Watts manifesto is a response to realities that the McCone Report is barely beginning to grasp.”

—Bayard Rustin

Radically historicizing the present allows us to see Health as a mode of being essential to the maintenance of the crisis known as racial capitalism. We are also given a chance to read and regard the uprisings differently. Bayard Rustin encourages us to listen to the collective wisdom offered by the Watts rebellion by framing revolt not as an accumulation of senseless acts, but rather as a Black-owned manifesto. Rustin insists the Watts manifesto was both a material and discursive act conveying deeply “the hard facts of negro deprivation.”<sup>10</sup> To the degree Watts says something profound about deprivation, we believe it is saying something even more profound about how people have survived it.

The ways people live amidst terror are documented in everyday practices. The meaning of what must be done is manifested in service and struggle, just as utopian futures come about by loving our neighbors through the present. Revolutionary praxis produces knowledge because ideas emerge from efforts to build relations and protect one another which forms the impetus and desire to

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<sup>10</sup> Bayard Rustin, *The Watts*, COMMENTARY MAG., March 1966.

continue freedom planning. We are concerned with ideas generated through the communal activity of revolution. They are ideas necessary to this movement for the alternatives they afford.

The idea we are talking about is Social Health, an alternative way of being in the world, equally bound and implicated in Black radicalism. We arrive at this idea of health as more than just one's self, more than just one's body, through care, mutual aid, and sustaining our communities with the strategies, capacities, and resources already in arms reach. One theorizes Social Health by enacting it. South LA is writing its own political theory, elaborating and revising the Watts manifesto, which we could think of as a collective speech act improved on in 1992, 2020, and every moment of insurgent life lived in between.

Social health, as an alternative way of being in the world, was given to us by the Black Panther Party to represent the love they had for the body and soul of their people. Alondra Nelson coined Social Health as an analytic through deep historical engagement with the Panthers' health activism. Her account of the Panthers' past gives us resources to redefine our movements in the present:

With the phrase "social health" I mean to characterize the activists' efforts on the terrain of health and biomedicine as being oriented by an outlook on well-being that scaled from the individual, corporeal body to the body politic in such a way that therapeutic matters were inextricably articulated to social justice ones. The Party's socialhealth "frame" was also distinctly elastic. As a praxis, social health linked medical services to a program of societal transformation.<sup>11</sup>

The historicity of Social Health, as a practice, does not lead to calcification. Instead, it imbues it with the elasticity and range needed for fugitive organizing in the present. Social Health is not a category to be imposed, but a legacy to move and think through, so communities in South LA can be safe and well. For the Panthers, this meant serving eggs, grits, and vegetarian sausages to children before school, while engaging their parents in a reading group around the work of Frantz Fanon and using the clinic to check their grandparents' blood pressure. Social Health meant getting what was needed by any means necessary, be it leftovers from the dining halls of UCLA or the free space provided by a church basement. And in the critical practice of gathering resources and meeting the material needs of their present, the liberatory horizon was always at center. Social Health is about social reproduction by deepening and elongating a legacy of care talked about by Huey Newton under the rubric of "revolutionary

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<sup>11</sup> ALONDRA NELSON, *BODY AND SOUL: THE BLACK PANTHER PARTY AND THE FIGHT AGAINST MEDICAL DISCRIMINATION* 11–12 (2011) (footnotes omitted).

intercommunalism.” In this way, Social Health generates modes of living for people in South LA which acts as an archive where self-definitions of health generate a foundation for radical modes of being.

Since shelter-in-place orders in LA County brought communal life to a halt, CoCo has been supporting City Council Representative Marqueece Harris-Dawson to execute his office’s free meals delivery service program to elders in South LA. As an organizer at CoCo, Alejandro has made daily calls to South LA elders to sign them up for the program, field questions around the kind of food they were to expect, and hold space for their concerns. The program was able to feed thousands of elders a week.

While this program eventually came to an end, what emerged were the limits of a binary common among nonprofits where providing sustenance and political organizing are seen as distinct. This divide is maintained among nonprofit organizations because the roles of providing direct services and organizing communal power are seen as best deployed separately so one does not impede the other. During moments of deepening crisis, however, there is also a reformulation of what racial justice is and how it is measured by its capacity to deliver on the future in the here and now while continuing to transform the conditions threatening Black and Brown futures. In other words, we step up to feed one another in moments of need, and, through the act of mutual aid, we reinforce the link between individual health and the geographic, political, and spiritual project of abolition.

The partnership between CoCo and Dawson emerges from a professional relationship; Dawson is a former CoCo executive director, but also comes from an understanding of wellness in South LA which is inextricably linked to combating the conditions fostering poverty, criminalization, and diminished health outcomes for Black and Brown community members. The scarcity of grocery stores, healthy food options, and hospitals in South LA does not culminate in a death count, but instead is a political concern where a form of organizing reared in South LA is employed as a tool to carry out a vision of mutual aid.

#### IV. DEMANDS

Demands contain histories. Those histories come before and envelope the singular moments in which demands are enunciated. A list of demands is a radical document too often gutted of its liberatory potential by the process of liberal policy making. We continue making demands, however, because they reflect histories of resistance and guide how we imagine liberation for Black and Brown people. We continue demanding a different world because we refuse to let those in power demarcate the bounds of justice or determine what is possible. There

are many things we can demand now to protect and restore Black life. A few are listed here:

- Free healthcare for all Black, poor, and undocumented communities in LA County
- Access to non-Western forms of medicine and healing Abolish law enforcement in LA County
- Abolish police in all schools in LA County
- Renovate schools which look and operate like prisons Abolish Public and Private prisons in LA County
- Block federal access to communities in LA County for the purpose of deportation
- Reinvest law enforcement dollars in Black, Brown, Indigenous, poor, and houseless communities
- Create a community oversight board of Black, poor, system-impacted, and houseless folks at the City and County levels to ensure resources are equitably directed to communities most denied resources
- Reparations for all Black communities in LA County Return stolen lands to Indigenous communities