



Beyond Empathy to System Change: Four Poems on Health by Bertolt Brecht

William MacGregor¹ · Martin Horn² · Dennis Raphael³ 

Accepted: 30 March 2023

© The Author(s), under exclusive licence to Springer Science+Business Media, LLC, part of Springer Nature 2023, corrected publication 2023

Abstract

Bertolt Brecht's poem "A Worker's Speech to a Doctor" is frequently cited as a means to raise awareness among health workers of the health effects of living and working conditions. Less cited is his Call to Arms trilogy of poems, which calls for class-based action to transform the capitalist economic system that sickens and kills so many. In this article, we show how "A Worker's Speech to a Doctor," with its plea for empathy for the ill, contrasts with the more activist and often militant tone of the Call to Arms trilogy: "Call to a Sick Communist," "The Sick Communist's Answer to the Comrades," and "Call to the Doctors and Nurses." We also show that, while "A Worker's Speech to a Doctor" has been applied in the training of health workers, its accusatorial tone towards health workers' complicity in the system the poem is critiquing risks alienating such workers. In contrast, the Call to Arms trilogy seeks common ground, inviting these same workers into the broader political and social fight against injustice. While we contend that the description of the sick worker as a "Communist" risks estranging these health workers, our analysis of the Call to Arms poems nevertheless indicates that their use can contribute to moving health workers' educational discourse beyond a laudable but fleeting elicitation of empathy for the ill towards a structural critique and deeper systemic understanding in order to prompt action by health workers to reform or even replace the capitalist economic system that sickens and kills so many.

Keywords Medical humanities · Bertolt Brecht · Capitalism · Social determinants of health

The canalization of a river
The grafting of a fruit tree
The education of a person
The reconstruction of a state.
These are all instances of a fruitful critique
And they are also
Instances of art.
—Bertolt Brecht, "On the Critical Attitude"

✉ Dennis Raphael
draphael@yorku.ca

¹ Graduate Program in Health Policy and Equity, York University, Toronto, ON, Canada

² Montreal, Canada

³ School of Health Policy and Management, York University, 4700 Keele Street, Toronto, ON M3J 1P3, Canada

Introduction

In this paper, we examine the content of four poems by Bertolt Brecht that have a critical focus on health and illness, and we discuss how these poems can be applied in the education of health workers. There is a well-established literature concerned with applying the humanities and arts in the education of health workers (Crawford et al. 2015; Freeman and Bays 2007; Jones 2013; Moniz et al. 2021; Saffran 2014). Most of these efforts aim to improve health care by promoting empathy, sympathy, and sensitivity towards patients (Adams and Reisman 2019; Jones 2013). Less effort, however, is devoted towards having the health workers comprehend, much less act to change, the living and working conditions that not only cause illness and make managing it difficult but also profoundly affect the health and material well-being of health workers themselves (Donohoe 2009, 2012; Kumagai and Naidu 2019; Lawrence 2019).

An excellent model for how to employ the humanities and arts to promote the appreciation of how living and working conditions cause illness is provided by German poet and playwright Bertolt Brecht's 1938 poem "A Worker's Speech to a Doctor" (Brecht [1938] 2019). In it, the Worker under examination rebukes his Doctor's suggestion that the cure-all for his health issues is simply to "put on weight." The Worker points to the rags he is wearing, naming the root cause of both his tattered clothes and his poor health: explicitly, the living and working conditions associated with living in poverty and, implicitly, the economic system of capitalism. Brecht provides additional accusations against the conditions many workers experience in a set of three poems, the Call to Arms trilogy (Brecht [1937] 2019). While written around the same time as "A Worker's Speech to a Doctor," the Call to Arms poems express a more militant, critical, and activist tone. The trilogy begins with the poem "Call to a Sick Communist" with the provocative use of the word *communist* to refer to a sick worker, which is then followed by "The Sick Communist's Answer to the Comrades" with its explicit accusations of oppressors allowing the capitalist economic system to first sicken and then kill workers. The third poem of the trilogy, "Call to the Doctors and Nurses," exhorts health care workers to join the struggle for social justice, appealing both to their ethical responsibility as health care providers and to their own exploitation inside the economic order.

In this paper, we explore the potential value of these poems in the education of health workers through (1) processes of enhanced empathy on the part of health care providers; (2) raising issues of power and inequitable distribution of wealth as determinants of illness; and (3) establishing the need for a profound reform or even replacement of the present capitalist economic system. We suggest that while "A Worker's Speech to a Doctor"—even with its adversarial tone—is on its face more accessible to health workers than the Call to Arms poems, its failure to unambiguously implicate the current economic system as a threat to people, in fact, limits its value in educating health workers as to the broader structural issues and inequities that shape health. The provocative Call to Arms trilogy, by contrast, not only raises these issues but also invites health workers' participation in the fight against injustice through appeals to both their ethical and moral obligations, pointing to their own exploitation by oppressive capitalist systems. However, the description of the sick worker as a communist in two of the poems, while likely presenting challenges in their use with health workers due to negative societal perception of the term, also provides opportunities for critical reflection on received wisdom, as well as deeper analysis of the broader factors that shape health.

Following these analyses, we provide means by which these poems can be applied to educate and mobilize health workers to take action consistent with Brecht's (2001, 425)

view that “art is not a mirror held up to reality but a hammer with which to shape it.” We also consider reasons for the neglect, to date, of such efforts to promote transformations of the capitalist economic system and how such barriers can be surmounted.

Background

Despite the expansive literature concerned with promoting health equity through the improvement of living and working conditions, the continuing resistance of the health sciences research and practice communities to recognize and act upon these issues (i.e., the social determinants of health) is well documented (Bezruchka, 2022; Hofrichter 2003; Popay, Whitehead, and Hunter 2010). Advocacy for public policy that equitably distributes these social determinants of health has had little effect on public policy development and delivery in liberal welfare states such as Australia, Canada, the United Kingdom, and the United States, where governing authorities—acting on behalf of the interests of the corporate sector via deregulation of the workplace, assaults on organized labor, privatization of previous public entities and services, and tax cuts for the wealthy—make the creation and implementation of such public policy difficult (Baum et al. 2020; Bezruchka 2022; Boyle, Hickson, and Gomez 2023; Raphael and Bryant 2022; Ross and Savage 2020). These activities have been linked to increasing mortality rates and a decline in life expectancy in Australia, Canada, the US, and the UK (Boyle, Hickson, and Gomez 2023; Bryant and Raphael 2020; Burton 2022; Woolhandler et al. 2021).

The humanities and arts provide numerous instances across a range of disciplines, forms, and media in which the effects of living and working conditions on health and well-being are key themes (see, especially, Bamforth 2003). In contrast, most health workers in health care and public health—and the instruction provided in professional schools, staff development, and continuing medical education—usually focus on clinical treatments and health behaviors such as diet, activity, and tobacco and drug use. In the US, focus on social conditions is usually limited to only how they influence these behaviors, with little discussion of the root material causes (Bann et al. 2022; Westbrook and Harvey 2023).

There are many examples of literature that illustrate the effects of poverty, marginalization, and discrimination on human functioning and well-being, and these works are increasingly drawn upon in the training of health workers. For the most part, however, these efforts are concentrated on promoting empathy for these “victims of circumstances” rather than a recognition of the significant influence of material conditions and deprivation on ill health. Using the humanities and arts to mobilize health workers in support of health-promoting public policies is even less common; indeed, critiques of the capitalist economic system that drives public policy and the necessity of reforming or even replacing it are virtually non-existent. It is these latter areas where the German poet and playwright Bertolt Brecht’s poems can play a revelatory role.

The humanities and arts in medical, nursing, and other health professions education

The belief that the arts and humanities can contribute to health workers' education is well-established, especially in the US. Not only are there numerous academic departments of health humanities devoted to such activities and scholarship, the academic literature on the use of the arts and humanities in training health care workers is now vast. Most of these activities take place in medical and nursing schools (Jones 2013).

Dennhardt and colleagues (2016) identified no fewer than 11,045 academic works concerned with the use of arts and humanities in medical education as of 2013, while Carr and colleagues (2021) located 8,594 concerned with the health professions, broadly defined, between 2015–2020. Dennhardt et al. (2016, 288–99) identified the epistemic purpose of these activities as overwhelmingly focused on “art for mastering skills” and “art for interaction, perspective taking and relational aims.” A third category was identified as “art for personal growth and activism” (Dennhardt et al. 2016, 299), but growth and activism were focused primarily on reforming medical education. Carr et al. (2021) found the humanities were used primarily to develop students' capacity for perspective, reflexivity, self-reflection, and person-centered communication. The dominant theme in this literature is that the arts and humanities can promote empathy and understanding of patients' situations and facilitate communication, thereby improving medical and nursing practice (Moudatsou et al. 2020).

There is rather less effort directing action to effect broader social and political change, despite Dennhardt et al.'s identification of a distinct category of “art for personal growth and *activism*” (Dennhardt et al. 2016, 299; emphasis added). Moreover, even when this activist and reformist focus is present, what precisely these efforts are expected to accomplish is unclear. Donohoe's (2009, 600) suggestions are typical: “Curricula covering public health, social justice, and global bioethics might be more interesting and provocative if they incorporated works of literature.” He suggests having students read George Orwell's *How the Poor Die*, Anton Chekhov's *Ward Six*, and Upton Sinclair's *The Jungle* to promote greater understanding. For Donohoe, these activities can:

Introduce basic principles of social medicine and community health; facilitate discussion between students regarding the social determinants of illness, the health of populations, and the public health responsibilities of physicians; increase empathy, understanding, and appreciation of alternative viewpoints; and encourage students to undertake further studies and/or research in public health and publicly work towards solutions to sociomedical problems.” (Donohoe 2009, 600)

However, what exactly is to be done remains vague. Another instance is where Kumagai and Wear (2014) invoke Brecht's theory of the theater as means to promote reflection, suggesting that the socio-political turn of “making strange” can prompt medical students to critically examine, question, and challenge existing social structures and power relationships. The authors quote Brecht's view that “the theatre became an affair of philosophers, but only for such philosophers as wished not just to explain the world but also to change it” (Kumagai and Wear 2014, 974). However, what exactly the newly reflective medical student is supposed to do with this new and critical perspective—and how they should set about accomplishing this change—remains unstated.

Finally, Donohoe provides an extensive bibliography of such efforts on his Public Health and Social Justice website (<https://phsj.org/>). His volume *Social Justice and*

Public Health contains a chapter related to this goal, which states: “Physicians also have a responsibility to oppose, individually and collectively, those forces which contribute to the spread of poverty, over-consumption, the maldistribution of wealth, the economic, political, legal, and educational marginalization of women, environmental degradation, racism, human rights abuses, and militarization and war” (Donohoe 2012, 602). However, while he urges involvement in advocacy to address these issues, no mention is made of the foundational role the capitalist economic system may play in issues of poor health and material deprivation.

The need to address system change

There has been increasing—though still limited—recognition by the public health community of the role that the US, Canada, the UK, and Australia’s unrestrained global capitalist economic systems play in threatening health (Benach et al. 2019; Freudenberg 2021; Harvey 2021; Levins 2003; Raphael and Bryant 2022; Waitzkin 2018). Freudenberg, for example, argues: “Now my thinking is that the vast majority of people in the United States and the world are harmed in some very direct ways by the current ways that capitalism operates” (quoted in Rosza 2021). This is the case as Freudenberg sees the capitalist economic system and how it inequitably distributes resources adversely affecting six key areas that shape health: food, education, healthcare, work, transportation, and human relations (Freudenberg 2021).

Also particularly relevant in relation to the lives of both health workers and their patients is the imposition of austerity in many nations, which involves reductions in budgetary expenditures for services and benefits in combination with tax cuts to the wealthy (Whiteside et al. 2021). Raphael and Bryant (2023) provide other instances of this emerging public health literature. As noted, efforts to have educational institutions address these much broader systemic concerns through the use of artistic works are uneven, and we believe that these four Brecht poems, all concerned with health and its material influences, can stimulate such discussions with the goal of pushing beyond empathy to promote action to effect system change.

Bertolt Brecht and the politics of health

The German playwright and poet Bertolt Brecht produced an extensive repertoire of plays, poems, and other works concerned with politics, public policies, and the lived experiences of individuals in the twentieth century (Giles and Kuhn 2015). Brecht was a self-avowed communist who spent decades exploring the structures and processes of capitalism and their effects on all aspects of life (Parker 2014).

Brecht wrote extensively on the role the arts can play in transforming society in the service of the people, and his theories of theater and its potential to effect political change have profoundly influenced the arts and humanities (Kuhn 2000). Brecht’s approach was one of using the “Epic” theater—and a similar technique in his poetic work—to promote both critical reflection on the current state of affairs and to provoke political action in order to change the status quo. “Epic theatre refers to a form of didactic drama presenting a series of loosely connected scenes that avoid illusion and often interrupt the story line to address the audience directly with analysis, argument, or documentation” (Encyclopaedia Britannica Online 2022). Brecht’s (2001) view of the arts and politics is best summed up in his statement that: “Art is not a mirror held up to reality but a hammer with which to shape it.”

The poems

These four poems are part of the *Svendborg Poems* (*Svenborger Gedichte*), a collection written by Brecht while in exile in Svendborg, Denmark (Kuhn and Constantine 2019). Brecht's exile began after a mysterious fire in the German Parliament on February 27, 1933, enabled Hitler to declare a state of emergency, effectively ending democratic rule in Germany (Rosenhaft 2006). The next day Brecht, like many other intellectuals and artists, fled the country into exile (Sacks 2006).

Brecht settled in Svendborg, a rural Danish municipality over 100 miles from Copenhagen which became his home until 1938 (Glahn 2014). During exile, Brecht was prolific, writing poems and essays as well as producing plays across Europe. This productivity reflected an increasing urgency on his part to combat the ascendant Nazis as country after country fell to the Blitzkrieg. The *Svendborg Poems* were written throughout the mid-to-late 1930s and were due to be published in Prague in 1938; however, the Nazi occupation of Czechoslovakia meant that the rescued proofs were finally published in Scandinavia in 1939 (Kuhn and Constantine 2019; Sacks 2006).

Kuhn and Constantine (2019, 650) declare the *Svendborg Poems* to be “one of the great collections of political verse, in any language and in any tradition.” This collection, produced in the extraordinary circumstances of Brecht's exile and published several years before the apogee of Nazi domination, provides a critical examination of fascism and explicitly links it to capitalist systems of oppression. Additionally, the *Svendborg Poems* encourage resistance and promote collective action to not only upset the status quo but to overthrow all oppressive systems.

The urgency Brecht felt to address these issues is evident in “A Worker's Speech to a Doctor” and the Call to Arms trilogy. The poems are immediate and arresting, yet they differ in tone and approach. In “A Worker's Speech to a Doctor,” the critique of the capitalist economic system is implicit, and its attitude towards the doctor is adversarial. In contrast, the poems of the trilogy are explicitly critical of the capitalist economic system, yet their approach is more cooperative, with the last poem, “Call to the Doctors and Nurses,” seeking to establish common ground between health care workers and their fellow citizens before imploring these workers to join a broader coalition of action to overthrow these oppressive systems. This is reflective of the dialogic and public discourse-minded orientation of the *Svendborg Poems* in general, and these poems in particular; Kuhn notes that the entire subsection in which these works feature is expressly political, comprised wholly of “addresses, appeals, pleas, word of praise and even epitaphs” (Kuhn 2000, 58).

To provide context for our exploration of how these poems can be applied, we first utilized Google Scholar by using a search strategy with the following (combination of) terms to review the academic literature: (1) *A Worker's Speech* and *health* or *education* or *medicine* or *nursing* or *public health*; and (2) *Brecht* and *health* or *education* or *medicine* or *nursing* or *public health*. Searches using Embase and Medline did not find any additional materials. We then applied the same search strategy using Google Search.

We found 66 instances where “A Worker's Speech to a Doctor” is evoked within academic articles, course-related materials, conference presentations, news reports, and blogs (see Farrell 2019; Hanna-Attisha 2018; Vgenopoulou et al. 2015 for examples). Most authors see the poem as increasing sensitivity to patients' conditions and improving communication, thereby furthering health care. Additionally, most offer implicit admonitions to change health-threatening conditions, but what these actions might be are usually vague, with little reference to the importance of public policy and the means of influencing it.

We did not find any discussions of Brecht's central concern with the health-threatening characteristics of capitalism and how it can first weaken, then sicken, and finally kill many workers. This is despite a changing political context, as the role capitalism plays with regard to population ill health is an increasingly a popular topic, reflecting the growing popularity of democratic socialists in the US. This is demonstrated by an increasing number of more direct and explicit critiques of the deleterious effects of capitalism by public figures like Alexandria Ocasio-Cortez (2022) and Bernie Sanders (2023), as well as Jeremy Corbyn in the UK (2022).

In the following sections, we revisit "A Worker's Speech to a Doctor" and then focus on how its themes and those of the Call to Arms trilogy can serve to first educate and then mobilize health workers to address the living and working conditions that threaten health. We provide the full poems to enable readers to apply our suggestions in their own educational practices.

Applying the poems in the service of health

A Worker's Speech to a Doctor

Brecht wrote "A Worker's Speech to a Doctor" in 1938 (see Fig. 1), and the poem differs from the Call to Arms trilogy in that it is adversarial in nature, casting the Worker and Doctor in opposition, and lacks the dialogic and persuasive elements of the other three. The text of the poem is the direct address of a Worker to a Doctor, presumably in the latter's examination room, and the social and economic divide between the two is established nearly immediately, as the Worker comments to the Doctor, "When we're ill word says / You're the one to make us well" (Brecht [1938] 2019). The social and economic divide between the two is further emphasized by Brecht's striking use of juxtaposing imagery, particularly when the Worker comments (about the Doctor's medical training): "For ten years, so we hear," the Worker states, "You learned how to heal in *elegant* schools / Built at the people's expense" (emphasis added).

The characterization of medical schools as places of refinement and sophistication is starkly contrasted by the Worker's description of the coarse bodies and ragged clothing of the patients in the clinic, descriptions connoting dire poverty and deprivation: "When we visit you / Our clothes are ripped and torn / And you listen all over our naked body." This stark image of a "naked body" under clinical inspection conveys a sense of exposed vulnerability and even supplication as the dehumanized body of the worker is examined. Brecht's use of similar imagery and juxtaposition throughout the poem signals a deliberate and critical contrast between the material and social positions of the Doctor and the Worker; indeed, this juxtaposition can be read as an effort by Brecht to provide a deliberate ironic contrast, to highlight the deprivation of the Worker and the status and prestige of the Doctor through a biting comparison of the image of the elegant and urbane medical school, and the dirty and rag-clad body of the patient. Another important — though less obvious — component of the poem is the Worker chastising the Doctor as being complicit with the economic system that causes his illness: "You have studied in fine schools / Built at the expense of the people," "How much time will you have for us? / We can see: a carpet in your apartment costs the equivalent of five thousand doctor's appointments". This final image of the poem, of a rug that costs five thousand consultations, is a pointed

Fig. 1. A Worker's Speech to a Doctor Reprinted from *The Collected Poems of Bertolt Brecht*, by Bertolt Brecht. Translated by Tom Kuhn and David Constantine. Copyright © 2019, 2015 by Tom Kuhn and David Constantine. Underlying copyright © Bertolt-Brecht-Erben / Suhrkamp Verlag. Used with permission of the publisher, W. W. Norton and Company, Inc. All rights reserved

A Worker's Speech to a Doctor

We know what makes us sick!
When we're sick, we hear
You are the one who will heal us.

For ten long years, they say
You have studied in fine schools
Built at the expense of the people
And learnt to heal, and on your learning
You have expended a fortune.
So you must be able to heal.

Can you heal us?

When we come to you
Our rags are torn off
And you tap around our naked bodies.
As to the cause of our illness
A glance at our rags would
Tell you more. It is the same cause that wears out
Our bodies and our clothes.

The strain in our shoulder
Comes, you say, from the damp; from which
The mould in our flats comes too.
So tell us:
Where does the damp come from?

Too much work and too little food
Make us weak and gaunt.
Your prescription:
You must put on weight.
You might as well tell the reeds
To keep their feet dry.

How much time will you have for us?
We can see: a carpet in your apartment
Costs the equivalent
Of five thousand doctor's appointments.

You will probably say, you
Are not to blame. The damp patch
On the wall of our flat
Says much the same.

comment on the wealth and income disparity between the two. The Worker continues his critique, challenging the Doctor to look beyond the immediate physical manifestation of ill health, and onto the innate structural and material influences on sickness: “As to the cause of our illness / A glance at our rags would be more / Revealing”, “You will probably say, you are not to blame. / The damp patch on the wall of our flat says much the same.”

One of the central aspects of this poem that contains the greatest potential for educational utility is the clear association Brecht makes between material conditions and population health. The Worker notes that: “The pain in our shoulder comes / You say, from the damp; and this is also the cause / Of the patch on the apartment wall.” This passage speaks to Brecht’s argument concerning the true root cause of illness as being the poor living conditions of the Worker. Indeed, the confrontation between the Worker and the Doctor culminates with the former directly challenging the latter: “So tell us then: / Where does the damp come from?” Brecht, through the voice of the Worker, challenges medical practitioners to look beyond the surface, to look beyond their narrow and myopic training, and to seek out the true source of illness in order to broaden their understanding of the *causes* of illness (Meili 2017); this is, in sum, the heart of Brecht’s goal in this poem.

Thus, the passage at the beginning of the poem can be read as a deeper challenge: “When we’re ill word says / You’re the one to make us well / That means you can make us well / *Can you make us well?*” (emphasis added). Read in context and in consideration of the structural critique of the poem, this passage can be read as a challenge to the broader medical community to work to enact substantive change to the inequitable systems that produce ill health; in other words, to truly make people *well*, medical practitioners must move beyond narrow downstream conceptions of medicine and towards reforming the broader oppressive structure that creates illness and health inequity.

Additionally, we suggest that not enough attention has been devoted to this latter aspect of the poem and its confrontational elements potentially alienating aspiring health workers—especially physicians in training. One of the concerns of using “A Worker’s Speech to a Doctor” in medical education settings is that healthcare workers may experience the adversarial aspects of the poem as implying they do not understand their own profession or a personal attack that will spark emotions of discomfort or resentment. This may, despite the best of intentions, prompt a defensive response that closes off these healthcare workers from truly taking in Brecht’s critique, and thus his broader message about material conditions and health will not be received by healthcare workers. Educators should be prepared for such reactions and the need to work through these class-related responses.

We found a number of instances where “A Worker’s Speech to a Doctor” was used to promote understanding of patients’ illnesses and the difficulty of managing them. Hanna-Attisha, in her 2018 volume *What the Eyes Don’t See*, presents pediatric residents with the poem because “Physicians need to be trained to see symptoms of the larger structural problems that will bedevil a child’s health and well-being more than a simple cold ever could” (Hanna-Attisha 2018, 23–24). The purpose of her general approach is described as follows:

My objective for this Community Pediatrics rotation is to get the residents out of the hospital and into the city, into the lived experience and environment of our kids. They would become familiar with the city’s weaknesses and needs but

also feel a sense of solidarity and empathy with the people of Flint—and see the city’s deeper potential. That’s the feeling I wanted to imbue them with most of all: that there’s hope in this town, not hopelessness. It just needs some nurturing and care to build. And they needed to see their privileged role as builders, shoulder to shoulder with our neighbors.” (Hanna-Attisha 2018, 27)

However, with regards to directly commenting on these issues in the text of *What the Eyes Don’t See*, there is little mention concerning equity-promoting public policy and the capitalist economic system, although the author does note in the prologue: “Because the real villains live underneath the behavior, and drive it. The real villains are the ongoing effects of racism, inequality, greed, anti-intellectualism, and even laissez-faire neoliberal capitalism” (Hanna-Attisha 2018, 13–14). But the rest of her volume, while both inspirational (with regards to how she and others caught the attention of policymakers, the media, and the public) and accusatory (in documenting the negligence and perfidy of many governing authorities), provides very little guidance on how to go about countering the power of those who generate “racism, inequality, greed, anti-intellectualism, and even laissez-faire neoliberal capitalism” (Hanna-Attisha 2018, 14). In the end, Hanna-Attisha simply concludes, “The most important medication that I can prescribe is hope” (Hanna-Attisha 2018, 325).

It is notable that Mona Hanna-Attisha is the pediatrician who helped expose the Flint lead scandal in 2014, which was impacted by the forces of global capitalism that progressively gutted the manufacturing base in places like Flint and precipitated the era of austerity cuts that ultimately resulted in the city’s lead crisis. Why she and others arguably fail to provide a clear critique of these structural issues and influences is considered in later sections.

Farmer (2013, 141) uses “A Worker’s Speech to a Doctor” to argue that “public health is all about telling us where the damp comes from and finding solutions.” He outlines three issues for consideration in the practice of public health: (1) “The first concerns social justice. ... a new equity plan if we are to get these lifesaving interventions to those who need them most”; (2) “alternatives to the Balkanization of medicine and public health. ... integrating prevention and care ... [to] make common cause between clinicians and epidemiologists and policymakers”; and (3) recognizing that the mantra of “scarce resources” is “chicanery” as there are enough resources for all (Farmer 2013, 141). However, he makes no mention of the capitalist economic system that causes the inequitable distribution of resources, which leads to the material conditions that cause the damp spots to begin with.

Discussion questions about “A Worker’s Speech to a Doctor”

As noted, the use of “A Worker’s Speech to a Doctor” in education has generally been limited to promoting empathy, sensitivity, and improved communication with patients. We propose initial sets of questions for discussion of this and the three other Brecht poems that can move beyond these limited purposes and engage with health workers—both in initial training and in professional training for those already employed in health care and public health—to consider broader structural issues related to the social determinants of health and the economic systems that shape their quality and distribution. Prompts for discussion are provided in Box 1.

Box 1 Discussion Questions about "A Worker's Speech to a Doctor"

1. Why does Brecht use the noun "worker" instead of "patient"?
 2. What is the author referring to when he states: "It is the same cause that wears out our bodies and our clothes"?
 3. What are the reasons the worker states, in response to the prescription to gain weight, "You might as well tell the reeds to keep their feet dry"?
 4. What is the tone of the poem towards the doctor? Why does the poet adopt this tone?
 5. What are some of the issues the poem has raised for you?
-

These discussion questions are similar to those already in use by others as they direct attention to living and working conditions as determinants of health. The novel aspects of our questions include the query about the term worker and the tone of the worker towards the doctor. These questions can be used to raise issues of class and stratification and the relationship of these factors to material conditions and health, all issues which are frequently neglected in the health education literature.

Call to Arms trilogy

The Call to Arms trilogy was also written during Brecht's stay in Svendborg (see Figs. 2, 3, 4). We did not find a single instance of the three poems in the Call for Arms trilogy applied in the education of health workers in academic works or online blogs or other media. There was one instance where the entire "Call to a Sick Communist" was an introductory epigram to illustrate structural violence in a master's thesis on migration and health during the COVID-19 pandemic (Sedas 2021).

There could be numerous reasons for the neglect of these three poems. First, these poems were not included in Willet and Manheim's 1976 collection of Brecht's poems and only appeared in Kuhn and Constantine's 2019 collection. The second is the prominence of the "communist" label in the titles of two of the poems, a word which could be especially off-putting to American audiences. The third could be these poems' explicit attack on an exploitative capitalist system that causes the living and working conditions that sicken and kill. Since health workers—particularly medical students but also nurses—continue to come from favored groups in society (Conway-Hicks and de Groot 2019; Beagan et al. 2022), instructors may perceive that these students would experience these poems as an attack that threatens their own position in, and perhaps more fundamentally understanding of, the social and economic order they live in. As a consequence, they could therefore be resistant to joining in the broader struggle against these oppressive systems. However, changing circumstances regarding the position of nurses and even doctors in Canada, the UK, and the US related to the imposition of austerity may be shifting these class allegiances (Cadigan 2017; Morley et al. 2019; Rafferty 2018).

A striking aspect of the Call to Arms trilogy is Brecht's utilization of a *letter form* in these poems (Carrdus 2000). "Call to a Sick Communist" and "The Sick Communist's Answer to the Comrades" are dialogic exchanges between a communist ill with tuberculosis and the comrades still engaged in their "great struggle" to achieve "the victory of humanity over the scum of the earth." The defiant rhetoric and steely optimism of these two poems provide "encouraging models of protest and opposition" (Carrdus 2000, 146).

"Call to Doctors and Nurses" likewise employs this *letter form* in order to directly address healthcare workers, urging them to remember "your own struggle against your own exploiters / Who threaten you every hour with that same hunger /

That has brought our comrade low”; it continues by imploring these workers to join the struggle against the forces of “exploitation and oppression.” Considering the context of the late 1930s, Brecht is here utilizing a rhetoric of struggle and even hope in order to discourage inaction and feelings of despair against what must have seemed (in the late 1930s) as insurmountable opposition (Carrdus 2000). We consider each of the three poems and potential discussion questions in turn.

Call to a Sick Communist

In this poem, Brecht characterizes the tuberculosis experienced by the addressee not as unlucky happenstance but rather an attack by the oppressors who “Exposed you, poorly clothed and in damp housing to hunger.” In response, the reader, the convalescing communist, is urged to “take up the struggle at once against sickness and against oppression with all possible cunning, rigor, and tenacity.” Prompts for discussion are provided in Box 2.

Box 2 Discussion Questions about “Call to a Sick Communist”

1. What do you make of the term “communist” used in the title?
2. How would you respond if the term used was “socialist” instead of “communist”?
3. What diseases are caused by poor living and working conditions?
4. Who would these “oppressors” have been in 1937? In the present?
5. How do these “oppressors” come to cause these conditions?
6. What are the struggles to be taken up?
7. What concrete actions can be undertaken to rectify the situation?

Fig. 2. Call to a Sick Communist Reprinted from *The Collected Poems of Bertolt Brecht*, by Bertolt Brecht. Translated by Tom Kuhn and David Constantine. Copyright © 2019, 2015 by Tom Kuhn and David Constantine. Underlying copyright © Bertolt-Brecht-Erben / Suhrkamp Verlag. Used with permission of the publisher, W. W. Norton and Company, Inc. All rights reserved

Call to a Sick Communist

We hear you have been taken ill with tuberculosis.
 We entreat you: see this
 Not as a turn of fate, but
 As an attack by the oppressors, who
 Exposed you, poorly clothed and in damp housing
 To hunger. That is how you were made sick.
 We charge you take up the struggle at once
 Against sickness and against oppression
 With all possible cunning, rigor, and tenacity
 As a part of our great struggle, which
 Has to be waged from a position of weakness
 In utter misery, and in which
 Everything is permitted which will aid our victory, a victory
 Which is the victory of humanity over the scum of the earth.
 We await your return, as soon as possible
 To your post, comrade.

These discussion questions are clearly more contentious than what we provide for “A Worker’s Speech to a Doctor.” Yet, as data indicates that a majority of American and Canadian youth have positive attitudes toward the term socialism, we believe promoting discussion concerning the contrast between socialism and communism would be fruitful in this changing context. Indeed, even in the American South, college students, including Republicans, when given a description of a social democratic economy, preferred it over the current US economic system (Liebertz and Giersch 2022). The figure for UK youth preferring socialism over capitalism is a striking 67 percent (Institute for Economic Affairs 2021). And in Canada, a full 13 percent of youth characterize communism as the ideal economic system (Saad 2019; Clark and Grant 2023). In reflection of these realities, our discussion questions prompt consideration of both socialism and communism before moving on to more general questions about the social determinants of health, the forces behind their quality and equitable distribution, and the means of promoting their quality and equitable distribution.

The Sick Communist’s Answer to the Comrades

In his response back to his comrades, the sick communist identifies the causes of his illness as being “hunger, poor housing and inadequate clothing,” promising to do battle against the sickness funds and “The daily abuses committed against sick members of the oppressed classes.” The sickness funds were the Weimer Republic’s public insurance program that covered—apparently not very well—costs for workers’ illnesses; a comparison can perhaps be drawn to private insurance programs that supplement (or replace) public medical care programs across liberal welfare states. Prompts for discussion are provided in Box 3.

Box 3 Discussion Questions about “The Sick Communist’s Answer to the Comrades”

1. Who are the “guilty ones” the worker names?
 2. What are some of the problems with our health care system?
 3. What are some of the groups especially disadvantaged by how it works?
 4. What are some of the forces that prevent the provision of accessible universal health care?
 5. What concrete actions can be undertaken to rectify the situation?
-

These questions direct attention to the health care system. In the US, the for-profit aspect of much of the health care system is a ripe area for critical discussion and reflection (Waitzkin 2018). In Canada and the UK, the increasing privatization of these systems also seems to be an area for rich discussion (Bodner et al. 2022; Roderick and Pollock 2022). Australia has a two-tiered system that continues to be a source of debate (Fisher et al. 2022). These questions also provide an opportunity to discuss issues related to disadvantaged groups in these and other nations.

Fig. 3. The Sick Communist's Answer to the Comrades Reprinted from *The Collected Poems of Bertolt Brecht*, by Bertolt Brecht. Translated by Tom Kuhn and David Constantine. Copyright © 2019, 2015 by Tom Kuhn and David Constantine. Underlying copyright © Bertolt-Brecht-Erben / Suhrkamp Verlag. Used with permission of the publisher, W. W. Norton and Company, Inc. All rights reserved

The Sick Communist's Answer to the Comrades

Comrades, by hunger, poor housing and inadequate clothing
 I was made sick and removed from your ranks.
 I immediately took up the struggle for my recovery.

I declare to everyone who sees me
 The cause of my sickness
 I explicitly name the guilty ones.
 ,

At the same time I wage the struggle against the sickness funds
 Who seek to cheat me at every little turn.
 I wage the struggle from my sickbed.

I have informed myself about the liabilities of the hospital
 The daily abuses committed against sick members of the oppressed classes.
 I apply every resource which will help me
 Recover my good health.
 And so, although stricken and wounded
 I have not left your ranks. I will stick with you
 Until my last breath. I have no thought of yielding.
 I beg you
 Continue to depend on me.

Call to the Doctors and Nurses

In this poem, Brecht appeals to doctors and nurses to “Remember their obligation to those who have a human face” and to support the sick “In their struggle against the sickness funds and the practises of the hospitals.” Brecht, in contrast to his adversarial approach utilized in “A Worker’s Speech to a Doctor,” here implores these health workers to join the cause of reform, pointing out to these workers that by joining with the communists, “You are, after all, only waging your own struggle against your own exploiters who threaten you every hour with that same hunger that has brought our comrade low.” Prompts for discussion are provided in Box 4.

Box 4 Discussion Questions about “Call to the Doctors and Nurses”

1. How do you think doctors and nurses and other health workers think about issues of marginalization and oppression of workers?
2. How do the relative class positions of health workers affect their sensitivity to patient issues?
3. How are the worsening working conditions many health workers are experiencing leading them to have a greater sense of solidarity and shared concerns with workers in general?
4. How have you thought about the commonalities of your struggles with those of others?
5. How are doctors, nurses and other health workers able to assist in addressing these problems?
6. What do you take away as a health worker from reading these poems?

Fig. 4. Call to the Doctors and Nurses Reprinted from *The Collected Poems of Bertolt Brecht*, by Bertolt Brecht. Translated by Tom Kuhn and David Constantine. Copyright © 2019, 2015 by Tom Kuhn and David Constantine. Underlying copyright © Bertolt-Brecht-Erben / Suhrkamp Verlag. Used with permission of the publisher, W. W. Norton and Company, Inc. All rights reserved

Call to the Doctors and Nurses

Now to you, doctors and nurses. We suppose
There must be some amongst you
Few perhaps, but some all the same, who
Remember their obligation to those who
Have a human face. These amongst you
We challenge to support our sick
In their struggle against the sickness funds and the practises of the hospitals
With regard to the oppressed.
We know, in order to do that you will have to
Take up the struggle against others too, the compliant tools
Of exploitation and deception. We ask that you
Look upon these as your own enemies. By so doing
You are, after all, only waging your own struggle against your own exploiters
Who threaten you every hour with that same hunger
That has brought our comrade low.
Join our struggle!

These questions explore issues of potential class contradictions between healthcare and public health professionals (which Marx would have referred to as the *petit bourgeoisie*) and most workers (i.e., the proletariat). Those who achieve comfortable, materially secure lives in an elevated class position are likely to have less incentive to reform or replace existing societal structures. Yet even these professional groups are increasingly experiencing high levels of burnout and the effects of austerity and may be increasingly inclined to transcend class contradictions and establish greater solidarity with the larger class of workers (Dobson et al. 2021; Murthy 2022; Statistics Canada 2022; Sumner and Kinsella 2021).

Discussion questions about the capitalist economic system

Finally, all four poems can be used to promote discussion of how the capitalist economic system distributes the social determinants of health amongst the population. These questions seem especially important as, to date, little focus has been placed on the economic system as a determinant of health by the health care and public health communities. Prompts for discussion are provided in Box 5.

Box 5 Discussion Questions about the Capitalist Economic System

1. What are some of the ways that our capitalist economic system causes illness and disease?
 2. What are some of the forces responsible for how it operates?
 3. Which groups are especially disadvantaged by how the economic system distributes resources?
 4. What can be done to rectify the situation?
 5. What might be some of the alternatives to the current form of our present economic system?
 6. What would a new, healthier system look like?
-

These questions get at the root of emerging public health concerns about the health effects of unrestricted capitalist practice, which is becoming especially apparent in Canada, the UK, and the US. Likely, this may be the first time that health workers are asked to reflect upon these issues. Raphael and Bryant (2023) provide numerous sources that can be drawn upon to facilitate discussion about the effects of the economic system on health.

Discussion

Social murder and structural violence

There is increasing recognition in the public health community that the source of many of the problematic living and working conditions that sicken and kill so many is rooted in our current capitalist economic system (Raphael and Bryant 2023). This is not a new observation. As early as 1845, Friedrich Engels, in *The Condition of the Working Class in England*, accused society—the owners and managers of capitalist enterprises and their political supporters in government—of committing social murder since they knew their employment practices spawned the living and working conditions that sent workers and their families prematurely to the grave yet did nothing about them. In the current era, increasing recognition of how living and working situations in many nations are deteriorating has led to increased interest in the social murder concept (Medvedyuk, Govender, and Raphael 2021).

Paul Farmer (2004, 2013) popularized the concept of structural violence and its adverse health outcomes: “Structural violence is often embedded in longstanding ubiquitous social structures, normalized by stable institutions and regular experience” (Farmer et al. 2006, 1686). Farmer’s concept of structural violence would seem to have similarities with Engels’s concept of social murder. However, unlike Engels, Farmer does not explicitly direct attention to the structures of the economic system and those who profit from its health-threatening inequitable distribution of economic and social resources. As such, it should not be surprising that the concept of structural violence is more commonly applied in the health humanities (see, e.g., Kumagai and Naidu 2019). Perhaps the concept of social murder might be a greater spur to action for health workers and provoke discussion of the role capitalism plays in a variety of health problems (Raphael et al. 2022). However, one does not have to call for an end to our capitalist economic system to recognize the threats to health posed by unrestrained capitalist practice and call for major reforms (Freudenberg 2021).

Using the poems

In many instances, the groundwork has already been prepared for the use of these poems. As just one example, the University of British Columbia’s Master of Public Health Program has on its splash page the statements: “Health doesn’t begin with medical care. Health begins where we are born, grow, live, work and age” and “These conditions are shaped by power dynamics related to gender, class, race, sexuality, among others” (University of British Columbia, n.d.). The City University of New York’s Master of Public Health Program states: “The curriculum addresses the social determinants of

disease and health inequalities with a corresponding emphasis on structural theories of change, informed by social justice principles” (City University of New York 2022).

The Department of Family and Community Medicine at the University of Toronto states on its Social Accountability page: “Structural determinants of health refer to the social, economic and political mechanisms that generate hierarchies of power, access to resources and prestige. In this way, structural determinants of health shape, and are the upstream causes of, social determinants of health” (University of Toronto 2023). In the US, the *New England Journal of Medicine* published a special double issue on “Health Care’s New Emphasis on Social Determinants of Health” (Berkowitz 2023).

“A Worker’s Speech to a Doctor” can be used to extend these analyses to a broader critique of the economic system but requires significant effort to clearly identify the structural critique while running the risk of the confrontational tone alienating health workers. In contrast, the poems of the Call to Arms trilogy explicitly raise these issues in a manner that seeks not to confront health workers but to invite them into a broader coalition for equitable reform. Brecht’s critique of traditional theater is especially relevant in terms of using the arts and humanities in the service of the education of health workers. As we pointed out earlier, many of these uses—including “A Worker’s Speech to a Doctor”—have focused on the promotion of empathy for the afflicted. While “A Worker’s Speech to a Doctor” has also been used to raise awareness of the forces that shape health, these forces are not as apparent as in the Call to Action trilogy, which explicitly addresses the broader structural and systemic influences on ill health, as well as having the clear goal of promoting the transformation of society to a more just and equitable distribution of resources.

Brecht’s ([1948] 2001) writings on the arts—both performance and poetic—were opposed to their use in promoting empathy. He believed that rather than being emotionally involved with the performances and texts, observers should be distanced from them in order to be able to reflect on their meanings and their implications for transforming society: “We need a type of theatre which not only releases the feelings, insights and impulses possible within the particular historical field of human relations in which the action takes place, but employs and encourages those thoughts and feelings which help transform the field itself” (Brecht [1948] 2001, 7).

This is a direct challenge to traditional theater, which is concerned with affective responses and promoting audience identification with characters. Indeed, the French philosopher Rousseau was distrustful of theater on the basis that the emotional catharsis it provided the audience could obviate practical action on real-world problems identified in performances (Trachtenberg 1995). Upon our own reflection, we see how the use of the *communist* label in two of the Call to Arms trilogy poems can facilitate such a distancing and provoke thoughtful reflection on the themes presented in the poems. If, however, the distancing is too extreme, any attempt at promoting reflection on these themes may be difficult.

These poems can be used in a variety of ways: as part of courses about the social determinants of health, public policy, and the history of medicine and care. The emergence over the past decade in medical schools of courses in the science of health systems—which focus on structural factors and provide practical experiences for students that encourage real-world action such as patient navigation, working in health care teams, and community collaboration and broader analysis related to population and public health and the social determinants of health—would be another area where these poems might be useful (Davis and Gonzalo 2019; Gonzalo and Ogrinc 2019; Penn State College of Medicine 2023).

Promoting reflection and overcoming barriers

There are barriers in our educational, health care, public health, and political environments that make raising and acting upon structural issues related to our economic system difficult. Some of these are longstanding and have to do with the general aversion in capitalist nations to any critique of the economic system, something that is especially acute in liberal welfare states such as Australia, Canada, the UK, and the US, where neo-liberal inspired hyper-capitalism is holding sway. Consider how Hanna-Attisha (2018) avoids an explicit critique of the US's economic system as creating the public health disaster in Flint, Michigan. She does recap how developments during the post-New Deal Era led to prosperity for many Flint workers and also describes its decline, but explicit analysis of the forces causing these developments is sparse to non-existent. The Flint situation would seem an ideal instance to apply the Brecht poems to stimulate reflection and discussion about the structural issues—especially the capitalist economic system—in a manner that would be less threatening to instructors.

Another contemporary health issue that could draw upon some of our pedagogical suggestions is the increasing number of what has been described as deaths of despair—that is, mortality from drug overdose, suicide, and alcoholism (King et al. 2022; Scheiring, Stuckler, and King 2020). The finding that the incidence of these deaths of despair is related to the extent of income inequality, degree of unionization, and public spending at both the national and state (US) or provincial levels (Canada) will help make the links between the concepts presented in Brecht's poems and overall health and provision and effectiveness of health care (Woolhandler et al. 2021; Muller and Raphael 2021).

Deaths of despair are clearly a modern crisis that is bound up with structural shifts—many would call them failures—of our economic system over the last 50 years. And since the linking of these deaths of despair in the US to capitalism by prominent academics Anne Case and Angus Deaton in their 2022 volume *Deaths of Despair and the Future of Capitalism* has spawned numerous reviews and responses, health workers' reflections on these issues could be supplemented by considering the issues raised in these reviews. It should be noted, however, that Case and Deaton do *not* call for radical changes in the economic system, such as full employment, socialization of production, or addressing the power imbalance between labor and capital (Lepley 2022). Their work at least puts the issue of capitalism as it manifests in the US on the table for discussion.

These barriers to critiquing capitalism and calling for its reform or replacement will not be easy to overcome, and this is especially the case in the US. Indeed, the US House of Representatives recently passed a motion condemning “socialism”—“Congress denounces socialism in all its forms, and opposes the implementation of socialist policies in the United States of America”—in a 328–86–14 vote. Most Democrats—109 of them—voted with all Republicans for the resolution, while 86 voted against it, and 14 voted “present” (Schnell 2023). Raphael and Bryant (2023) make a case for a new post-capitalist socialist vision of public health and provide resources to assist in this quest.

The second barrier is the generally favored class placement of health professionals in general, and health humanities academics in particular, which is in opposition to the life situations of many working people. There is extensive literature documenting such biases in admission to medical schools and treatment of patients but rather less in relation to course curricula and inclusion in curricula of issues related to social class, the economic system, and access to health care and adverse health outcomes (Beech et al. 2021; Capers et al. 2018; Markowitz 2022).

And as noted earlier, schools of public health in the US generally avoid emphasis on broader structural issues in favor of behavioral approaches to promoting health and preventing illness. This may be less the case in Canada and the UK, but even then, health education about broader determinants of health may then clash with established practices out in the field. It may be that such pre-existing class differences between health workers and the public may be weakening under the imposition of excessive work demands and impositions of austerity that is affecting the health and well-being of health workers. Raising issues associated with these Brecht poems may facilitate such feelings of solidarity.

The final barrier to addressing structural issues related to the economic system is less apparent. It has been suggested that the cultural and post-structuralist turn in modern universities has diminished focus on materialist/structuralist critiques which were more common during the nineteenth and twentieth centuries. The current emphasis on identity-related issues (e.g., race, gender, Indigeneity) has diverted attention from social class discourse (Higgs and Scambler 1998; Williams 2003) and led to a weakening of the left and prospects for reforming or even replacing the economic system seen by many as causing adverse health outcomes (Winlow and Hall 2022).

It should not be surprising that the modern university and its health care and public health training arms should be subject to such forces. However, rather than two approaches (class versus multiple types of oppression) being in opposition, these discussion questions may provide opportunities to discuss intersectionality and the ways in which structural factors like racism and sexism intersect with capitalist forces to negatively affect the health of marginalized populations (McCartney et al. 2019). These Brecht poems can provide discursive space to make these issues more subject to examination and debate.

Our final observation concerns how “A Worker’s Speech to a Doctor” directs criticism towards the doctor in contrast to the exhortation of doctors and nurses to join the struggle for social justice provided in the *Call to Arms* trilogy. We do not know to what extent health workers may respond to these differing tones. We welcome the exploration of this question and intend to do such exploration with our own health studies undergraduate and graduate students.

Conclusion

In this paper, we have suggested four poems by Bertolt Brecht that can be used to raise important issues among prospective and already practicing health workers related to health and the provision of health care. Previous work has focused on the value of “A Worker’s Speech to a Doctor.” The poem was seen as promoting an understanding of the broader factors that shape health. We have considered the potential value of three additional poems, which make explicit many current concerns about the capitalist economic system and how it threatens health. We have also shown how one poem raises issues about health care systems and how they meet the needs of patients.

Finally, we contend that these poems—as an ideal example of Denhardt et al.’s (2016, 289) category of “art for personal growth and activism”—can inspire health workers to action, both on behalf of the needs of their patients and for themselves. For after all, as Brecht writes: “By so doing / You are, after all, only waging your own struggle against your own exploiters / Who threaten you every hour with that same hunger / That has brought our comrade low. / Join our struggle!”.

acknowledgments The authors greatly appreciate the support provided by Dr. Tom Kuhn of Oxford University for this endeavor and his permission to reproduce the poems from his and David Constantine's *Collected Poems of Bertolt Brecht*. The comments provided by the anonymous reviewers were very helpful.

Declarations

Conflicts of Interest The authors have no conflicts of interest to declare.

This manuscript is original content that has not been submitted elsewhere. Because this article provides an analysis of existing published literature, it is our understanding that the statements regarding ethics approval and patient consent are not applicable to our submission. Permission to reproduce the poems was provided by the publisher, W. W. Norton and Company, Inc.

Endnotes

¹ The liberal welfare states (for example, Australia, Canada, the United Kingdom, and the United States) provide modest benefits such that the State usually provides assistance when the market fails to meet citizens' most basic needs (Esping-Andersen 1990, 1999). Their political and social history is one of dominance by business interests resulting in the population relying on the employment marketplace rather than the State as the source of economic and social security. These liberal welfare states are the least developed in terms of provision of citizen economic and social security. Changes since the mid-1980, which have seen even greater dominance by business interests, have led some to now call these nations neo-liberal welfare states (Beech 2017).

² The merger of the State with corporate power is, by definition, a form of fascism, a linkage that has drawn attention to the similarities between the contemporary scene and the 1930s Weimar Republic, in which Brecht wrote prior to his exile (Rayner et al. 2020).

³ Martín-Martín et al. (2018, 1175) show that Google Scholar "finds significantly more citations than the WoS Core Collection and Scopus across all subject areas." It was also found that Google Scholar surpasses Web of Science and Scopus in its coverage of literature in the social sciences and humanities.

References

- Adams, Zoe, and Anna Reisman. 2019. "Beyond Sparking Joy: A Call for a Critical Medical Humanities." *Academic Medicine* 94 (10): 1404. <https://doi.org/10.1097/ACM.0000000000002871>
- Bamforth, Iain, ed. 2003. *The Body in the Library: A Literary Anthology of Modern Medicine*. New York: Verso.
- Bann, Maralssa, Savannah Larimore, Jessica Wheeler, and Lauren Olsen. 2022. "Implementing a Social Determinants of Health Curriculum in Undergraduate Medical Education: A Qualitative Analysis of Faculty Experience." *Academic Medicine* 97 (11): 1665–72. <https://doi.org/10.1097/ACM.0000000000004804>
- Baum, Fran, Belinda Townsend, Matthew Fisher, et al. 2022. "Creating Political Will for Action on Health Equity: Practical Lessons for Public Health Policy Actors." *International Journal of Health Policy and Management* 11 (7): 947–60. <https://doi.org/10.34172/ijhpm.2020.233>
- Beagan, Brenda L., Anna MacLeod, Michelle Owen, Tara M. Pride, and Kaitlin R. Sibbald. 2022. "Lower-Class Origin Professionals in Canadian Health and Social Service Professions: 'A Different Level of Understanding.'" *Social Science & Medicine* 309 (September): 115233. <https://doi.org/10.1016/j.socscimed.2022.115233>
- Beech, Bettina M., Chandra Ford, Roland J. Thorpe Jr, Marino A. Bruce, and Keith C. Norris. 2021. "Poverty, Racism, and the Public Health Crisis in America." *Frontiers in Public Health* 9:699049. <https://doi.org/10.3389/fpubh.2021.699049>
- Beech, Matt. 2017. "Neoliberalism, New Labour, and the Welfare State." In *Liberalism and the Welfare State: Economists and Arguments for the Welfare State*, edited by Roger E. Backhouse, Bradley W. Bateman, Tamotsu Nishizawa, and Dieter Plehwe, 118–30. Oxford: Oxford University Press.
- Benach, Joan, Juan Michael Pericàs, Eliana Martínez-Herrera, and Mireia Bolívar. 2019. "Public Health and Inequities under Capitalism: Systemic Effects and Human Rights." In *Philosophical and Methodological Debates in Public Health*, edited by Jordi Vallverdú, Angel Puyol, and Anna Estany, 163–79. New York: Springer.
- Berkowitz, Seth A. 2023. "Health Care's New Emphasis on Social Determinants of Health." *NEJM Catalyst Innovations in Care Delivery* 4, no. 4 (April). <https://doi.org/10.1056/CAT.23.0070>
- Bezruczka, Stephen. 2022. *Inequality Kills Us All: COVID-19's Health Lessons for the World*. New York: Taylor and Francis.
- Bodner, Aidan, Sarah Spencer, M. Ruth Lavergne, and Lindsay Hedden. 2022. "Exploring Privatization in Canadian Primary Care: An Environmental Scan of Primary Care Clinics Accepting Private

- Payment." *Healthcare Policy* 17, no. 3 (February): 65–80. <https://doi.org/10.12927/2Fhcpol.2022.26727>
- Boyle, Mark, James Hickson, and Katalin Ujhelyi Gomez. 2023. "An Unequal Pandemic: Neoliberalism, Variegated Vulnerability, and Uneven Disease Burdens." In *COVID-19 and the Case Against Neoliberalism: The United Kingdom's Political Pandemic*, 155–179. Cham: Springer International Publishing.
- Brecht, Bertolt. (1937) 2019. "Call to Arms." In *The Collected Poems of Bertolt Brecht*, edited and translated by Thomas Kuhn and David Constantine, 701–703. New York: Liveright Publishing Corporation.
- _____. (1938) 2019. "A Worker's Speech to a Doctor." In *The Collected Poems of Bertolt Brecht*, edited and translated by Thomas Kuhn and David Constantine, 700–701. New York: Liveright Publishing Corporation.
- _____. (1945) 2019. "On the Critical Attitude." In *The Collected Poems of Bertolt Brecht*, edited and translated by Thomas Kuhn and David Constantine, 927. New York: Liveright Publishing Corporation.
- _____. (1948) 2001. "A Short Organum for the Theatre." In *Brecht on Theatre: The Development of an Aesthetic*. Edited and translated by Steve Giles, Marc Silberman, Thomas Kuhn, and John Willett. New York: Hill and Wang.
- _____. 2001. *Brecht on Theatre: The Development of an Aesthetic*. Edited and translated by Steve Giles, Marc Silberman, Thomas Kuhn, and John Willett. New York: Hill and Wang.
- Bryant, Toba, and Dennis Raphael. 2020. *The Politics of Health in the Canadian Welfare State*. Toronto: Canadian Scholars' Press.
- Burton, Tom. 2022. "Pandemic Deaths to Reduce Australia's World-Leading Life Expectancy." *The Guardian*, November 10, 2022. <https://www.afp.com/politics/federal/pandemic-deaths-to-reduce-australia-s-world-leading-life-expectancy-20221110-p5bx4k>
- Cadigan, Sean T. 2017. Review of *Public Sector Unions in the Age of Austerity*, edited by Stephanie Ross and Larry Savage. *Labor* 14 (2): 147–48.
- Carr, Sandra E., Farah Noya, Brid Phillips, et al. 2021. "Health Humanities Curriculum and Evaluation in Health Professions Education: A Scoping Review." *BMC Medical Education* 21:568. <https://doi.org/10.1186/s12909-021-03002-1>
- Capers, Quinn, Leon McDougale, and Daniel M. Clinchot. 2018. "Strategies for Achieving Diversity through Medical School Admissions." *Journal of Health Care for the Poor and Underserved* 29 (1): 9–18. <https://doi.org/10.1353/hpu.2018.0002>
- Carrdus, Anna. 2000. "The Uses of Rhetoric in Brecht's Svendborg Poems." In *Brecht's Poetry of Political Exile*, edited by Ronald Spiers, 135–51. New York: Cambridge University Press.
- Case, Anne and Angus Deaton. 2020. *Deaths of Despair and the Future of Capitalism*. Princeton: Princeton University Press.
- City University of New York. 2022. "MPH in Community Health in Collaboration with UAH." Degrees and Programs. Accessed April 25, 2023. <https://sph.cuny.edu/academics/degrees-and-programs/mp-program-with-university-of-alcala/mp-in-community-health-in-collaboration-with-uah/>
- Clark, Chase, and Alex Grant. 2023. "One Million Canadian Youth Want Communism." *Fightback*, March 7, 2023. <https://www.marxist.ca/article/one-million-canadian-youth-want-communism>
- Conway-Hicks, Siobhan, and Janet de Groot. 2019. "Living in Two Worlds: Becoming and Being a Doctor among Those Who Identify with 'Not from an Advantaged Background.'" *Current Problems in Pediatric and Adolescent Health Care* 49 (4): 92–101. <https://doi.org/10.1016/j.cppeds.2019.03.006>
- Corbyn, Jeremy. 2022. "Free Market Capitalism Has Led to the Most Grotesque Inequalities in the World." *EFSYN*, January 23, 2022. https://www.efsyn.gr/politiki/synteneyxeis/328882_jeremy-corbyn-free-market-capitalism-has-led-most-grotesque
- Crawford, Paul, Brian Brown, Charley Baker, Victoria Tischler, and Brian Abrams. 2015. "Health Humanities." In *Health Humanities*, edited by Paul Crawford, Brian Brown, Charley Baker, Victoria Tischler, and Brian Abrams, 1–19. London: Palgrave Macmillan.
- Damsgaard, Janne Brammer. 2021. "Integrating the Arts and Humanities Into Nursing." *Nursing Philosophy* 22 (2): e12345. <https://doi.org/10.1111/nup.12345>
- Davis, Christopher R., and Jed D. Gonzalo. 2019. "How Medical Schools Can Promote Community Collaboration Through Health Systems Science Education." *AMA Journal of Ethics* 21 (3): e239–47. <https://doi.org/10.1001/amajethics.2019.239>
- Dellasega, Cheryl, Paula Milone-Nuzzo, Katherine M. Curci, James O. Ballard, and Darrell G. Kirch. 2007. "The Humanities Interface of Nursing and Medicine." *Journal of Professional Nursing* 23 (3): 174–79. <https://doi.org/10.1016/j.profnurs.2007.01.006>

- Dennhardt, Silke, Tavis Apramian, Lorelei Lingard, Nazi Torabi, and Shannon Arntfield. 2016. "Rethinking Research in the Medical Humanities: A Scoping Review and Narrative Synthesis of Quantitative Outcome Studies." *Medical Education* 50 (3): 285–99. <https://doi.org/10.1111/medu.12812>
- Dobson, Hannah, Charles B. Malpas, Aidan J. C. Burrell, et al. 2021. "Burnout and Psychological Distress amongst Australian Healthcare Workers during the COVID-19 Pandemic." *Australasian Psychiatry* 29 (1): 26–30. <https://doi.org/10.1177/1039856220965045>
- Donohoe, Martin T. 2009. "Stories and Society: Using Literature to Teach Medical Students about Public Health and Social Justice." *International Journal of Creative Arts and Interdisciplinary Practice*, no. 8 (October): 1–21. <http://phsj.org/wp-content/uploads/2007/10/Stories-and-Society-IJCAIP1.pdf>
- _____. 2012. "Using Literature to Teach Medical Students about Public Health and Social Justice." In *Public Health and Social Justice: A Jossey-Bass Reader*, edited by Martin T. Donohoe, 597–608. San Francisco: Jossey-Bass.
- Encyclopaedia Britannica Online. 2022. "Epic Theatre (Dramatic Genre)." Last updated October 31, 2022. <https://www.britannica.com/art/epic-theatre>.
- Engels, Friedrich. (1845) 2009. *The Condition of the Working Class in England*. Oxford: Oxford University Press.
- Esping-Andersen, Gosta. 1990. *The Three Worlds of Welfare Capitalism*. Princeton, NJ: Princeton University Press.
- _____. 1999. *Social Foundations of Postindustrial Economies*. Oxford: Oxford University Press.
- Farmer, Paul. 2004. "An Anthropology of Structural Violence." *Current Anthropology* 45 (3): 305–25. <https://doi.org/10.1086/382250>
- _____. 2013. *To Repair the World: Paul Farmer Speaks to the Next Generation*. Edited by Jonathan Weigel. With a foreword by President Bill Clinton. Berkeley: University of California Press.
- Farmer, Paul, Bruce Nizeye, Sara Stulac, and Salmaan Keshavjee. 2006. "Structural Violence and Clinical Medicine." *PLoS Medicine* 3, no. 10 (October): e449.
- Farrell, Coleen. 2019. "'We Know What Makes Us Ill.' Poverty, Homeless, and Health in the Poetry of Bertolt Brecht." Medium. #MedHumChat No. 6, March 14, 2019. <https://medium.com/@colleenfarrell/we-know-what-makes-us-ill-1d802394ff52>
- Fisher, Matthew, Toby Freeman, Tamara Mackean, Sharon Friel, and Fran Baum. 2022. "Universal Health Coverage for Non-communicable Diseases and Health Equity: Lessons from Australian Primary Healthcare." *International Journal of Health Policy and Management* 11, no. 5 (May): 690–700. <https://doi.org/10.34172/2Fijhpm.2020.232>
- Freeman, Linda H., and Cathy Bays. 2007. "Using Literature and the Arts to Teach Nursing." *International Journal of Nursing Education Scholarship* 4 (1): 15. <https://doi.org/10.2202/1548-923X.1377>
- Freudenberg, Nicholas. 2021. *At What Cost: Modern Capitalism and the Future of Health*. New York: Oxford University Press.
- German, Carol P. 1986. "Using Literature to Teach Nursing." *Journal of Nursing Education* 25 (2): 84–86. <https://doi.org/10.3928/0148-4834-19860201-15>
- Giles, Steven, and Thomas Kuhn, eds. 2015. *Brecht on Art and Politics*. London: Bloomsbury Publishing.
- Glahn, Philip. 2014. "Early Exile: 'Singing about Dark Times,' 1933–41." Chap. 4 in *Bertolt Brecht*. Chicago: Reaktion Books.
- Gonzalo, Jed D., and Greg Ogrinc. 2019. "Health Systems Science: The 'Broccoli' of Undergraduate Medical Education." *Academic Medicine* 94 (10): 1425–32. <https://doi.org/10.1097/ACM.0000000000002815>
- Hanna-Attisha, Mona. 2018. *What the Eyes Don't See: A Story of Crisis, Resistance, and Hope in an American City*. London: One World.
- _____. 2021. "A Single Ohio Hospital Reveals All That's Wrong with American Health Care." *New York Times*, April 8, 2021. <https://www.nytimes.com/2021/04/08/books/review/the-hospital-brian-alexander.html>
- Harvey, Michael. 2021. "The Political Economy of Health: Revisiting Its Marxian Origins to Address 21st-Century Health Inequalities." *American Journal of Public Health* 111, no. 2 (February): 293–300. <https://doi.org/10.2105/AJPH.2020.305996>
- Higgs Paul, and Graham Scambler 1998. "Explaining Health Inequalities: How Useful Are Concepts of Social Class?" In *Modernity, Medicine and Health: Medical Sociology towards 2000*, edited by Graham Scambler and Paul Higgs, 82–99. London UK: Routledge.
- Hofrichter, Richard. 2003. "The Politics of Health Inequities: Contested Terrain." In *Health and Social Justice: Politics, Ideology, and Inequity in The Distribution of Disease*, edited by Richard Hofrichter, 1–56. San Francisco: Jossey Bass.
- Institute for Economic Affairs. 2021. "67 Percent of Young Brits Want a Socialist Economic System, Finds New Poll." *Institute for Economic Affairs Media*, July 6, 2021. <https://iea.org.uk/media/67-per-cent-of-young-brits-want-a-socialist-economic-system-finds-new-poll/>

- Jones, Anne Hudson. 2013. "Why Teach Literature and Medicine? Answers from Three Decades." *Journal of Medical Humanities* 34 (4): 415–28. <https://doi.org/10.1007/s10912-013-9241-9>
- King, Lawrence, Gábor Scheiring, and Elias Nosrati. 2022. "Deaths of Despair in Comparative Perspective." *Annual Review of Sociology* 48:299–317. <https://doi.org/10.1146/annur-ev-soc-030320-031757>
- Kuhn, Tom. 2000. "Visit to a Banished Poet: Brecht's *Svendborg Poems* and the Voices of Exile." In *Brecht's Poetry of Political Exile*, edited by Ronald Spiers, 47–65. Cambridge: Cambridge University Press.
- Kuhn, Tom, and David Constantine. 2019. *The Collected Poems of Bertolt Brecht*. New York: Liveright Publishing.
- Kumagai, Arno. K., and Thirusa Naidu. 2019. "The Cutting Edge: Health Humanities for Equity and Social Justice." In *Routledge Handbook of the Medical Humanities*, edited by Alan Bleakey, 83–96. New York: Routledge.
- Kumagai, Arno. K., and Delese Wear. 2014. "'Making Strange': A Role for the Humanities in Medical Education." *Academic Medicine* 89, no. 7 (July): 973–77. <https://doi.org/10.1097/ACM.0000000000000269>
- Lawrence, Robert. 2019. "Promoting Social Justice Through Education in Public Health." In *Social Injustice and Public Health*, 3rd ed, edited by Barry Levy, 421–35. New York: Oxford Academic.
- Lepley, John. 2022. Review of *Deaths of Despair and the Future of Capitalism*, by Angus Case and Anne Deaton. *Review of Radical Political Economics* 54 (3): 383–90. <https://doi.org/10.1177/04866134221093098>
- Levins, Richard. 2003. "Is Capitalism a Disease? The Crisis in US Public Health." In *Health and Social Justice: Politics, Ideology, and Inequity in the Distribution of Disease*, edited by Richard Hofrichter, 365–84. San Francisco: Jossey Bass.
- Liebertz, Scott, and Jason Giersch. 2022. "Perceptions and Assessments of Socialism versus the US System: Experimental Evidence." *The Social Science Journal*, June 6, 2022, 1–13. <https://doi.org/10.1080/03623319.2022.2066878>
- Markowitz, David M. 2022. "Gender and Ethnicity Bias in Medicine: A Text Analysis of 1.8 million Critical Care Records." *PNAS Nexus* 1, no. 4 (September): pgac157. <https://doi.org/10.1093/pnasnexus/pgac157>
- Martín-Martín, Alberto, Enrique Orduna-Malea, Mike Thelwall, and Emilio Delgado López-Cózar. 2018. "Google Scholar, Web of Science, and Scopus: A Systematic Comparison of Citations in 252 Subject Categories." *Journal of Informetrics* 12, no. 4 (November): 1160–77. <https://doi.org/10.1016/j.joi.2018.09.002>
- McCartney, Gerry, Mel Bartley, Ruth Dundas, et al. 2019. "Theorising Social Class and Its Application to the Study of Health Inequalities." *SSM-Population Health* 7 (April): 100315. <https://doi.org/10.1016/j.ssmph.2018.10.015>
- Medvedyuk, Stella, Piara Govender, and Dennis Raphael. 2021. "The Reemergence of Engels' Concept of Social Murder in Response to Growing Social and Health Inequalities." *Social Science and Medicine* 289 (November): 114377. <https://doi.org/10.1016/j.socscimed.2021.114377>
- Meili, Ryan. 2017. *A Healthy Society: How a Focus on Health Can Revive Canadian Democracy*, 2nd ed. With a foreword by Roy Romanov. Saskatoon, SK: Purich Books.
- Moniz, Tracy, Maryam Golafshani, Carolyn M. Gaspar, et al. 2021. "How Are the Arts and Humanities Used in Medical Education? Results of a Scoping Review." *Academic Medicine* 96 (8): 1213–22. <https://doi.org/10.1097/ACM.0000000000004118>
- Morley, Georgina, Jonathan Ives, and Caroline Bradbury-Jones. 2019. "Moral Distress and Austerity: An Avoidable Ethical Challenge in Healthcare." *Health Care Analysis* 27:185–201. <https://doi.org/10.1007/s10728-019-00376-8>
- Moudatsou, Maria, Areti Stavropoulou, Anastas Philalithis, and Sofia Koukouli. 2020. "The Role of Empathy in Health and Social Care Professionals." *Healthcare* 8 (1): 26. <https://doi.org/10.3390/healthcare8010026>
- Muller, Jessica, and Dennis Raphael. 2021. "Does Unionization and Working under Collective Agreements Promote Health?" *Health Promotion International*, December 13, 2021, daab181. <https://doi.org/10.1093/heapro/daab181>
- Murthy, Vivek. 2022. "Confronting Health Worker Burnout and Well-Being." *New England Journal of Medicine* 387:577–79. <https://doi.org/10.1056/NEJMp2207252>
- Ocasio-Cortez, Alexandria. 2022. "AOC: Capitalism Is 'Not a Redeemable System for Us.'" Interview by Andy Serwer. *Yahoo News*, February 3, 2022. <https://ca.news.yahoo.com/aoc-capitalism-not-redeemable-system-110000599.html>
- Parker, Stephen. 2014. *Bertolt Brecht: A Literary Life*. London: A&C Black.
- Penn State College of Medicine. 2023. Health Systems Science. Accessed April 26, 2023. <https://med.psu.edu/health-systems-science>

- Popay, Jennie, Margaret Whitehead, and David J. Hunter. 2010. "Injustice Is Killing People on a Large Scale—But What Is to Be Done about It?" *Journal of Public Health* 32, no. 2 (June): 148–49. <https://doi.org/10.1093/pubmed/fdq029>
- Rafferty, Anne M. 2018. "Nurses as Change Agents for a Better Future in Health Care: The Politics of Drift and Dilution." *Health Economics, Policy and Law* 13, no. 3–4 (July): 4475–91. <https://doi.org/10.1017/S1744133117000482>
- Raphael, Dennis, and Toba Bryant. 2022. "Emerging Themes in Social Determinants of Health Theory and Research." *International Journal of Health Services* 52 (4): 428–32. <https://doi.org/10.1177/00207314221109515>
- . 2023. "Socialism as the Way Forward: Updating a Discourse Analysis of the Social Determinants of Health." *Critical Public Health*, February 15, 2023. <https://doi.org/10.1080/09581596.2023.2178387>
- Raphael, Dennis, Toba Bryant, Piara Govender, Stella Medvedyuk, and Zsafia Mendly-Zambo. 2022. "Desperately Seeking Reductions in Health Inequalities in Canada: Polemics and Anger Mobilization as the Way Forward?" *Sociology of Health & Illness* 44, no. 1 (January): 130–46. <https://doi.org/10.1111/1467-9566.13399>
- Rayner, Jeremy, Susan Falls, George Souvlis, and Taylor C. Nelms, eds. 2020. *Back to the '30s? Recurring Crises of Capitalism, Liberalism, and Democracy*. Cham, Switzerland: Palgrave Macmillan.
- Roderick, Peter, and Allyson M. Pollock. 2022. "Dismantling the National Health Service in England." *International Journal of Health Services* 52 (4): 470–79. <https://doi.org/10.1177/00207314221114540>
- Rosenhaft, Eve. 2006. "Brecht's Germany: 1898-1933." In *The Cambridge Companion to Brecht*, 2nd ed., edited by Peter Thomson and Glendy Sacks, 3–21. Cambridge: Cambridge University Press.
- Ross, Stephanie, and Larry Savage, eds. 2020. *Labour under Attack: Anti-unionism in Canada*. Halifax: Fernwood Publishing.
- Rozsa, Matthew. 2021. "A New Book Asks Whether Capitalism Is Compatible with Public Health. (The Answer Is No)." *Salon*, March 14, 2021. <https://www.salon.com/2021/03/14/a-new-book-asks-whether-capitalism-is-compatible-with-public-health-the-answer-is-no/>
- Saad, Lydia. 2019. "Socialism as Popular as Capitalism among Young Adults in U.S." *Gallup*, November 25, 2019. <https://news.gallup.com/poll/268766/socialism-popular-capitalism-among-young-adults.aspx>
- Sacks, Glendyr. 2006. "A Brecht Calendar." In *The Cambridge Companion to Brecht*, 2nd ed., edited by Peter Thomson and Glendy Sacks, xv–xxv. Cambridge: Cambridge University Press.
- Saffran, Lise. 2014. "'Only Connect': The Case for Public Health Humanities." *Medical Humanities* 40 (2): 105–10. <https://doi.org/10.1136/medhum-2014-010502>
- Sanders, Bernie. 2023. *It's Ok to Be Angry about Capitalism*. New York: Crown.
- Scheiring, Gábor, David Stuckler, and Lawrence Kind. 2020. "Deindustrialization and Deaths of Despair: Mapping the Impact of Industrial Decline on Ill Health." Political Economy Research Institute (PERI), Working Paper No. 530, November 30, 2020, University of Massachusetts. <https://doi.org/10.7275/27137530>
- Schneider, Eric C., Arnav Shah, Michelle M. Doty, Roosa Tikkanen, Katharine Fields, and Reginald D. Williams II. 2021. *Reflecting Poorly: Health Care in the US Compared to Other High-Income Countries*. Fund Reports, August 4, 2021. New York: Commonwealth Fund.
- Schnell, Mychael. 2023. "House Passes Resolution Denouncing Socialism, Vote Splits Democrats." *The Hill*, February 2, 2023. <https://thehill.com/homenews/house/3841636-house-passes-resolution-denouncing-socialism-vote-splits-democrats/>
- Sedas, Ana Christina. 2021. "Biosocial Analysis of Migration and Health in Mexico, LAC and Beyond: Exploring the Right to Health for People on the Move Before, During and Beyond the COVID-19 Pandemic." Master's diss., Harvard Medical School. <https://dash.harvard.edu/handle/1/37368601>
- Statistics Canada. 2022. "Experiences of Health Care Workers during the COVID-19 Pandemic, September to November 2021." *The Daily*, June 3, 2022. <https://www150.statcan.gc.ca/n1/daily-quotidien/220603/dq220603a-eng.htm>
- Sumner, Rachel C., and Elaine L. Kinsella. 2021. "Grace under Pressure: Resilience, Burnout, and Wellbeing in Frontline Workers in the United Kingdom and Republic of Ireland During the SARS-Cov-2 Pandemic." *Frontiers in Psychology* 11:576229. <https://doi.org/10.3389/fpsyg.2020.576229>
- Trachtenberg, Zev. 1995. "Rousseau's Critique of Catharsis." In *Rousseau and Criticism*, edited by Lorraine Clark and Guy LaFrance, 195–204. Ottawa: North American Association for the Study of Jean-Jacques Rousseau.
- University of British Columbia. n.d. Master of Public Health. Accessed April 26, 2023. <https://spph.ubc.ca/programs/mph/>
- University of Toronto. 2023. "Social Accountability." *Global Health & Equity*. Accessed April 26, 2023. <https://dfcm.utoronto.ca/social-accountability>
- Vgenopoulou, Ioanna, Vasiliki Adamopoulou, and Foteina Tzavella. 2015. "Sociological Factors that Influence Access to Primary Health Care (PHC) Settings." *International Journal of Occupational Health and Public Health Nursing* 2 (3): 13–20.

- Waitzkin, Howard. 2018. *Health Care Under the Knife: Moving Beyond Capitalism for Our Health*. New York: Monthly Review Press.
- Wald, Hedy. S., Jonathon McFarland, and Irina Markovina. 2019. "Medical Humanities in Medical Education and Practice." *Medical Teacher* 41 (5): 492–96. <https://doi.org/10.1080/0142159X.2018.1497151>
- Westbrook, Mansa, and Michael Harvey. 2023. "Framing Health, Behavior, and Society: A Critical Content Analysis of Public Health Social and Behavioral Science Textbooks." *Critical Public Health* 33 (2): 148–59. <https://doi.org/10.1080/09581596.2022.2095255>
- Whiteside, Heather, Stephen McBride, and Bryan Evans. 2021. *Varieties of Austerity*. Bristol: Bristol University Press.
- Williams, Gareth H. 2003. "The Determinants of Health: Structure, Context and Agency." *Sociology of Health & Illness* 25, no. 3 (April): 131–54. <https://doi.org/10.1111/1467-9566.00344>
- Winlow, Simon, and Steve Hall. 2022. *The Death of the Left: Why We Must Begin from the Beginning Again*. Bristol: Policy Press.
- Woolhandler, Steffie, David U. Himmelstein, Sameer Ahmed, et al. 2021. "Public Policy and Health in the Trump Era." *The Lancet* 397 (10275): P705–53. [https://doi.org/10.1016/S0140-6736\(20\)32545-9](https://doi.org/10.1016/S0140-6736(20)32545-9)

Publisher's Note Springer Nature remains neutral with regard to jurisdictional claims in published maps and institutional affiliations.

Springer Nature or its licensor (e.g. a society or other partner) holds exclusive rights to this article under a publishing agreement with the author(s) or other rightsholder(s); author self-archiving of the accepted manuscript version of this article is solely governed by the terms of such publishing agreement and applicable law.