A socioecological discourse of care or an economistic discourse: which fits better with transition?

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Increasing inequality and environmental degradation are major threats to human and ecosystem health.[1-5] Transition to more equal and ecologically sustainable societies is needed.[1,6-8] In 2019, a letter signed by more than 11,000 scientists argued that:

> Our goals need to shift from GDP growth and the pursuit of affluence toward sustaining ecosystems and improving human well-being by prioritizing basic needs and reducing inequality.[9]

This report analyses the discourse of people working to promote equity and environmental sustainability, compares it with dominant political discourse, and discusses how these discourses fit with societal transition.

The research was community-based participatory action research in three Primary Care Partnerships (PCPs) in Victoria, Australia. PCPs are partnerships of local health and community organisations, usually covering several municipalities.[10]

The three PCPs had identified reducing health inequalities and promoting environmental sustainability – or addressing climate change – as strategic priorities in 2009. Staff members from organisations in the PCPs were working with community members in local health promotion, for example, around housing sustainability, community gardening and active transport. The aims of the action research were to strengthen practice and develop theory in health promotion addressing equity and environmental sustainability.

Abstract

Objective: To analyse a 'socioecological' health promotion discourse and its relationship to orthodox 'economistic' discourse in Australia.

Method: In research on health promotion addressing equity and environmental sustainability, we identified a socioecological discourse, based on an ethic of care for people and ecosystems. Using Foucault's concept of discourse as a regime that produces and legitimises certain kinds of knowledge, and ecofeminist historical analysis, we analysed this discourse and its relationship to economism.

Results: The socioecological discourse takes social and ecological wellbeing as primary values, while economism takes production and trade of goods and services, measured by money, as primary. Following British invasion, property-owning white men in Australia had the right to control and profit from land, trade, and the work of women and subordinate peoples. A knowledge regime using money as a primary measure reflects this history. In contrast, a First Nations' primary value expressed in the study was 'look after the land and the children'.

Conclusion and implications for public health: Public health often attempts to express value through economism, using monetary measures. However, socioecological discourse, expressed for example through direct measures of social and ecological wellbeing, appears more fit for purpose in promoting a fair and sustainable society.

Key words: equity, environmental sustainability, climate change, discourse, ecofeminism

As previously reported,[11] the research found participants had the capacity to promote health, equity and environmental sustainability, but faced significant challenges, including the politicisation of climate change, which was particularly bitter at this time. There was a marked decline in PCPs addressing environmental sustainability or climate change from 2009 to 2013.

This appears to reflect party politics. In 2009, the Australian Labor Party (ALP) was in power in Victoria and federally. Labor governments encouraged health and community agencies to address health inequalities and climate change. Subsequently, Liberal National Coalition (LNC) governments were elected at state and federal level in 2010 and 2013 and stopped supporting (or actively opposed) climate change action.

In this report, however, we suggest the 'economistic' political discourse of both major parties is also a challenge. Below we describe the economistic discourse and an alternative discourse, which we describe as a socioecological discourse of care, found in the action research.

Economistic political discourse in Australia

Researchers have identified 'economism' as a major discourse shaping public policy.[12-15] The term has a history in Marxist theory,[16,17] but is often used more recently to describe a discourse associated with neoliberalism and the imposition of 'market values' on 'public service'.[18,18]

Economism has been described in health promotion as "[understanding] economic considerations and values [as] … most important",[19(p357)] and in feminist climate change research as "privileging of economic concerns over political, social, and environmental concerns".[20(p365)] These authors do not specify exactly what they mean by 'economic', however 'the economy' is commonly understood as something like Gross Domestic Product (GDP), the estimated value in monetary terms of goods and services produced within a country.[21] We say 'something like' because 'the economy' can have fluid meanings, as discussed later.

The platforms the two major parties took to the 2019 federal election provide examples of political discourse in Australia at a key moment.

The Liberal party (the dominant LNC partner) had a platform in which the economy, publicly represented as 'jobs and growth',[22] was clearly positioned as most important. (The 2019 platform is no longer available, but the economy is still given priority on the Liberal party website).[23] Australians were urged to "vote for a party which puts the economy first".[24]

The ALP platform was also framed in economistic terms, although paying more attention to inequality. It contained a commitment to developing broader measures of "economic performance and social progress … [to] complement" GDP, including measures of societal wellbeing and sustainability.[25(p15)] However, "a strong economy" and "economic growth" were the lead goals.[25(p13)]

The chapter on climate change, energy and environment focused mainly on climate change, framed as a risk to "Australian society and economy".[25(p74)] The limited discussion of environment included this statement:

> … the environment isn't an impediment to our prosperity, it's an asset that underpins it.[25(p75)]

This can be understood as a reaction by the ALP to an adversarial contest in which the LNC claims pro-environmental policies are a 'threat' to the economy.[26] Nevertheless, both parties primarily positioned ecosystems as resources for people and 'the economy'.

The position can probably be best summarised by saying the LNC clearly operates within an economistic discourse, and the ALP, while aware of problems with the discourse, does not effectively challenge it. This presumably reflects that in Australia, the ALP instituted the shift to neoliberalism from the late 1980s (often described at the time as 'economic rationalism').[18,27] The shift was expressed particularly through 'Competition policy',[28] redefined in the early 2000s as 'National Reform', addressing 'human capital' as well as competition.[29(pp35-42)]

As discussed, the 'economy' and 'economic growth' are generally understood as measured by GDP, the estimated value in monetary terms of final goods and services produced within a country.[21] Ecofeminist analysis shows this concept of the economy-as-GDP assumes unpaid work (frequently done by women) and the ecosystem as not having value, since they do not have a monetary, or 'market', price.[30-33] Similarly, subsistence work is not valued. This has particular significance for societies such as First Nations pre-invasion, in which everyday needs were met by subsistence work, rather than specialisation and trade (although these had important functions).[30,34] The economy-as-GDP also fails to capture or grossly undervalues 'externalities' of production, including damage to health, the environment and other species.

As a knowledge regime,[35] the economistic discourse produces and legitimises knowledge about the production of goods and services for monetary trade and fails to produce or de-legitimises knowledge about unpaid work and ecosystem, except as 'resources'[31(p228)] (or 'natural capital',[36] 'ecosystem services',[37] or similar) for the economy-as-GDP.

In practice, 'the economy' is also used by politicians in a way that does not simply represent economy-as-GDP. For example, in 2020 the LNC Government's economic stimulus was particularly directed towards male-dominated areas such as construction, while areas of high female representation, such as childcare, received least.[38] Politicians from both parties often appear with people in hard hats and hi-vis vests when making economic announcements.[39] Such phenomena convey assumptions about what constitutes the 'real' economy. Feminist researchers have demonstrated that an aspect of such discursive fluidity is that paid work, when done by men, is valued more highly than the same work done by women.[40-43]

Analysis of discourse in the action research project

The theoretical approach for the research drew on health promotion and action research theory,[44-49] cultural theory and theories of social practices,[50-52] within an overarching framework of ecofeminist theory.[53-56]

The key analysis used for this report is discourse analysis,[57-59] including historical discourse analysis. Historical discourse analysis here refers to using historical analysis to understand discursive regimes, drawing on Foucault's definition of discourse as a regime which produces and legitimises certain kinds of knowledge and thus materialises relations of power.[60] Discursive power has been described as the power to influence what will be attended to, how problems will be framed and "the production of knowledge and evidence".[61]

Our approach shares with Liamputtong[57] the view that close attention should be paid to interrogating assumptions, including those of researchers, and exploring unspoken content, and dynamics of the group, including power relationships within it.[62,63] It also goes beyond this, to include other discourses, including discourses in broader society. In this, it fits the approach described by Cook[58] as critical discourse analysis, relevant in research aiming:

> … to explore the links between hegemonic and ideological discourses underlying social structures and the everyday actions and experiences of research participants.[58(p133)]

The analysis uses as primary sources material generated in the research, including recordings and transcripts, and draws on direct observation, including the first author's experience as a PCP health promotion coordinator, and a reflective journal, a project blog, and documents produced by the PCPs, government and media, as well as relevant secondary sources, as cited. Further information can be found in Kay (2018).[64]

This is a transdisciplinary approach to public health, in which the authors are drawing on our research backgrounds in Australian social and economic history, and the first author's

life experience as a former political researcher, office bearer and political candidate between 1997 and 2004.

The stages of action research

The research had three stages, following the action research cycle of: i) planning; ii) action and observation; and iii) reflection.[65] In the first stage, 2009–12, participants from a metropolitan PCP[66-68] developed a draft framework for promoting health, equity and environmental sustainability at forums in late 2011 and early 2012.

The first forum began with expert speakers presenting on health equity and on climate change and health. Participants then discussed principles for promoting equity and environmental sustainability. The second forum was about action. Many participants were already working on promoting equity and environmental sustainability, so they shared information on what was already being done and identified areas for future work.

The second stage, 2012–14, was an investigation of practice in the original PCP and two regional PCPs.[69-72] The researcher met with participants to discuss their work in promoting equity and environmental sustainability, and factors that helped or challenged this work.

In the third stage, 2014–16, the researcher provided a summary report and gave presentations at meetings where participants were invited to reflect on findings and their implications.

Action research participants included 38 staff members from organisations in the PCPs and 12 local community members (from the first PCP only, as it was not practicable to recruit community members in the other PCPs). All community members were members of, and frequently office bearers in, voluntary groups concerned with equity or environment. They included people with experience of inequity (such as poverty and homelessness), people of Aboriginal or Torres Strait Islander identity, public housing tenants and people whose first language was not English. In these respects, they were similar to clients of local community health services.[73] Staff members were more likely to be from English-speaking backgrounds and to be owners, purchasers or renters of private homes.

Approximately 60 other people, who were not formally action research participants, took part in forums or meetings or commented on a publicly accessible project blog in stages

two and three. Notes from these meetings, and comments, are used in an anonymous form.

Ethics approval for the research was given by the Monash Human Research Ethics Committee (CF11/0411 – 2011000154) and The Alfred Ethics Committee (402/11).

Findings

An emerging socioecological discourse of care

The process of developing the framework revealed a discourse of shared meanings and values among participants, with some areas of uncertainty. The meaning of equity was not tightly defined. Suggested definitions from the first forum ranged from improved "access" to services, through "more than just opportunity", to "capacity to fulfil & achieve potential".

Participants saw building community and promoting social inclusion as important but recognised that many social determinants of health are not determined at the local level. They discussed the need for advocacy for determinants such as secure jobs and public education, with emphasis on being credible, using real-life stories, finding champions and using media. Action research participants referred to the need to overcome systemic barriers in health:

> Zoe* (staff member): … we tend to be the ambulance at the bottom of the cliff, and we forget we should be up here [gesture], advocating for policy change.

> [*Direct quotes from named sources are from action research participants, using pseudonyms.]

Overall, even within this group of people committed to promoting equity, responsibilities might be imagined as anything from improving access to local health and community services to advocating for major social change.

Participants were not asked to define environmental sustainability, but it was evident the meanings they gave to it include caring for the natural environment and other species. People were at times talking specifically about climate change:

> Climate change is a great big issue – reduce from global issue to a local answer shared by everyone (Notes from the first forum).

Commonly, however, they were talking about environmental issues in a broader framework of people's relationship to land and nature:

> Ongoing relationship to the land needs to continue, we need to band together – individuals cannot do it alone.

> Learn from the Mob: Look after the land and the children [From a group that included an Indigenous Elder] (Notes from the first forum).

An environmental sustainability officer at the second forum said their team was encouraging residents to think of themselves as belonging to the land, rather than land belonging to them. The similarity between this and the First Nations' approach, 'Learn from the Mob: look after the land and the children', was apparent. Megan (staff member) commented:

> … the thing that struck me today … was that chap's comment about belonging and ownership, and I think at that level we were changing the way … we think about things.

This suggests a shift to a socioecological consciousness, thinking about ecosystems not as 'for' humans, but about humans as part of ecosystems.[74,75] The term 'socioecological' as used here derives from the Ottawa Charter, the foundation document of contemporary health promotion. The Ottawa Charter in 1986 called for a socioecological approach, identified as recognising the "inextricable links between people and their environment".[76] Health promotion in practice has not always expressed a socioecological approach, but it has been an important strand of health promotion theory.

One group of community members spent much time discussing and translating concepts. A research participant, Bron (community member) suggested later that the terms equity and environmental sustainability were too 'professional'. Nevertheless, themes emerged. Participants saw themes of starting small and building community as related. This was discussed between Vera and Sophia (community members whose first language was Russian) and a Russian interpreter, who interpreted their views as:

> This should be started in small communities – so they can work with residents … Because it's easy to unite these communities and it's easy to start work with them.

In another group, Bob, a community member, suggested:

> … you have to generate that sense of 'yes, we're part of this', part of community.

Being part of a community, addressing local issues and involving everyone were seen as

important to address these complex issues of equity and sustainability.

The draft principles developed at the planning forums are shown in Figure 1. Taken together, the principles and discussion suggest a discourse of meanings, values and assumptions among participants, which we describe as a socioecological discourse of care, reflecting the (to some extent, emerging) understanding that humans are part of the ecosystem and we need to care for other species and ecosystems, as well as for each other. In this discourse, inclusion, cooperation, caring, localism and accountability are valued. Affect and rationality are both valued. Professional or expert knowledge is valued, and life or experiential knowledge is also valued. First

Nations and multicultural knowledge are specifically valued. There is an emerging sense of people as 'belonging to land', rather than being 'owners' of it.

'Our circles and other circles': different discourses

In the forums, participants were talking about what should and could be done. They were aware their ideas were not necessarily shared by everyone in their organisations or society: their comments often implied an alternative 'mainstream' discourse in which 'entitlement' to unequal wealth and environmentally damaging action is taken as normal, similar to Bourdieu's concept of 'heterodox' discourse in relation to 'orthodox' discourse.[77]

For example, Angela (staff member) suggested many people felt "a sense of entitlement" to drive their large "four-wheel drives". In talking about equity, Heather (staff member) commented that people thought they had a "right" to their income and "shouldn't have to share it".

At this time, conservative politicians were using the term 'entitlement' to argue that access to publicly funded services should be restricted.[78] This illustrates conflicting discursive positions: in a discourse where equity is valued, the entitlement of higher-income groups who don't want to share income by paying taxes is critiqued; in a discourse where inequality is normalised, the entitlement of people to taxpayer-funded services is critiqued.

It was evident that participants could move between discourses. Angela said "in our circles" talking about equity is understood, whereas in "other circles" ideas have to be expressed differently. Moreover, in talking about what 'other people' may think, participants were not necessarily rejecting their ideas. For example, it was not within the capacity of the project to agree on such a difficult issue as to how equal societies should ultimately be. Later, in the final reflective stage, one participant commented that different discourses should not necessarily be depicted as 'right' and 'wrong'.

Perceived discursive differences were evident in the second stage of research, investigating what participants were doing to promote equity and environmental sustainability, and factors that helped or challenged this work. Themes about helpful factors included evidence and local knowledge, supportive government policy, relationships and networks. Lack of support from management and organisations, politicisation, particularly around climate change, and difficulties engaging 'hard-to-reach' people were some challenges.[11]

Underlying these were discursive themes about values and meaning. Regarding helpful factors, Galina and Vera suggested people generally care about children, "the future" and a "good life". Several people spoke about ensuring everyone felt respected. An Indigenous Elder stressed the importance of "deep listening". All these statements express values of care.

Discussing challenges, Louise (staff member) said thinking on health, equity and climate change is "siloed" rather than "holistic".

Figure 1: Draft principles for promoting health, equity and sustainability

ISEPICH Framework for promoting health, equity and sustainability
Principles

1. Taking a community development approach

Work with people in settings where they live, love, work and play. Start small – 'street by street' – and build out

Advocate to government and powerbrokers

2. Respecting elders, seeking knowledge

Ensure that the wisdom of Aboriginal heritage and of diverse cultures is respected and given voice in programs

Build on evidence from research and practice – look for and use evidence from what others have done

3. Addressing causes

Create the conditions for health and wellbeing by addressing the determinants: social and economic factors that affect health, equity and environmental sustainability

Health and community services can help people to cope with the impact of inequity or environmental change, but focus should not only be on responding after harm has happened

4. Making equity and sustainability everybody's business

Include and engage disadvantaged and minority groups

Ensure that wealthy and powerful groups take responsibility

5. Focusing efforts where they will have most effect

Early life

Outcomes for disadvantaged groups

6. Ensuring good communication

Have targeted messages, be clear about what we are saying

Ensure the voice of disadvantaged groups is heard

Appeal to both emotion and reason (seek a balance)

7. Planning for clear outcomes

Identify what we are trying to achieve and develop measures to assess this (indicators, targets, benchmarks)

Measure and evaluate these regularly

Advocate for government and organisations to do this also

Clare (staff member) noted some health and community organisations had not participated in a climate change project because "they just could not see where it fitted in with their core business". Mel (staff member) suggested a local "car culture" made it difficult to promote active transport. These factors are discursive in the sense of reflecting what is seen as legitimate, normal or important (or otherwise) in broader society.

A comment illustrating how discursive power works in hierarchical organisations was made by Andrew (community member) who said that in a council consultation, ideas about community gardens did not "get on the table". Other participants later revealed that community gardens were regarded with disfavour by some councillors in this council, and thus seen by council staff as unlikely to be accepted in municipal plans. This was not known at the time to Andrew, who perceived only that staff conducting the consultation did not seem to take the idea seriously.

Sarah (staff member) mentioned that the health of Aboriginal and Torres Strait Islander peoples should be a priority for equity, but if they are only a small proportion of the local population, senior managers may not accept this. Sarah commented, "that's a point of view". It was not one Sarah shared, but her comment acknowledged that while this might reflect racism or a lack of care for equity, it might also reflect the position of a senior manager accountable to government for measurable items such as the number of people engaged in services, rather than hard-to-quantify improvements in health equity. While several projects in the study involved partnerships between Aboriginal and non-Aboriginal organisations and community members, these relationships require care and time to build trust and would be difficult to establish if senior management were unsupportive. In such an environment, that which can be said – and that which cannot – can usually be readily distinguished, shaping the conditions of possibility for what can be done.

Overall, without forcing distinctions, research participants' comments suggest two discourses, one of which particularly values caring for people and ecosystems, building relationships and trust, while the other particularly values measurable outputs, consumer goods (such as cars) and wealth. The latter fits with the economistic discourse of the major parties. It is not within the scope of this report to say how far people (including participants in the research and in society more generally) subscribe to one or the other, or how much they shift between them, although this is clearly relevant for further analysis.

Discourse and power

In discourse analysis, what is *not* talked about is relevant;[12] 'listening to the silences' is part of the analysis. In the research, observation showed gender and hierarchy were relevant, but rarely discussed by participants. Over the whole study, 98% of staff members participating were women, although participants were not recruited or selected by sex. Statistics suggest between 75% and 90% of the paid health and community services workforce are female.[79-84] Participants may be representative of the health promotion workforce in Victoria, as all were serving on health promotion committees or related groups, although many were not formally health promotion workers. However, establishing this is difficult, given a lack of precise demographic information about this workforce. The high proportion of women may also reflect greater concern among women than men about environmental issues.[85-87] In any case, the gendered pattern is a significant observation that should not be taken for granted.

In contrast, half of the twelve community members participating were men. Again, community members were not recruited or selected by sex. In Victoria, women and men volunteer at about the same rate, around one-third of the population.[88,89] While volunteering is not exactly the same as membership of a community group, this suggests the equal balance among the community members in this project is likely similar to that in voluntary community groups more generally.

Women in Australia are more likely than men to do 'caring work', as normally defined (that is, caring for people) both paid and unpaid.[81] In this study, however, in which 'caring work' involved caring for ecosystems as well as people, men were extremely under-represented as paid workers but equally likely to participate as voluntary members of community groups. It appears therefore that it is not only gender that affected participation, but the interaction of work (the type of work and whether paid or unpaid), organisation (community group or health and community organisation) and gender.

There were two main types of work structure in the study, organisational hierarchies, and community groups. In hierarchical, pyramid-type structures, typical of health and community agencies in this study, at each level 'up', people have more decision-making power and are paid more. The organisations normally have a Board, or an elected Council in local government. Boards usually include some members elected from a larger group of voluntary organisational members or subscribers. The staff of the organisation is accountable to the Board or Council through senior managers. Therefore, the organisations express some democratic principles but organisationally are hierarchical and unequal.

Voluntary community groups generally work on 'flatter' democratic models where office bearers are elected and do not receive pay (so there is no income inequality). One community group represented in this study specifically states that it is "nonhierarchical".[90]

While these structures are often taken for granted, it is important to make them explicit. It was evident that participants aimed to work in a way that was inclusive and egalitarian but were doing so in a society that normalises hierarchical inequality. However, while in the first stage of the project inequality was questioned by both staff members and community members, in stage two, staff members did not seem to question work hierarchy. Senior managers were sometimes seen as helpful, and sometimes as challenges, but staff members did not explicitly critique the existence of work hierarchies. Some comments by community members, however, came close to a critique of hierarchy, for example, comments from Luke (community member) about managers in a local council:

> … *there's all that political power control game and if someone wants to benefit their career and can save 'x' amount of money* … [if reducing expenditure helps them to succeed in the organisational hierarchy, this will be more important to them than objectively evaluating the worth of projects].

Participants discussed whether this reflected a political shift to the 'right' in the specific council but concluded there had been a general neoliberal shift in recent years. They offered a critique of organisational culture as representing a neoliberal ideology that is about market principles rather than community development principles and suggested this trend had been evident for some time, regardless of political party.

This critique was reinforced by several staff members in the final reflective stage, looking at recent developments in services such as aged and community care.[91] Within the community members' discussion, however, there was also an implied criticism of the work hierarchy as such.

The findings suggest participants were caught between the two discourses: on the one hand, they were trying to promote a society that was more equal and cooperative, which used fewer resources and shared them more fairly; on the other, they were living and working in a society where the dominant discourse normalises hierarchical inequality and privileges market-based economics, competition and growth. Participants suggested this is because "we live in a capitalist society" (Bron, community member) or that it reflects existing neoliberalism.

The findings do, at least to some degree, seem to exemplify Marxist theories about class and power, and also the insight of theories of practice that structure only exists as far as it is enacted in practice.[50,92] Staff members who wish to be paid, have little choice but to accept work hierarchies. Moreover, some managers who were criticised for not having community development values were female.

It is relevant to note here that the movement of women, and work traditionally done by women, into the paid sphere has had complex results. Neoliberalism and increasing casualisation of work resulted in a division, in which some women moved into career positions in the 'core' workforce, while many others, particularly if they had limited education or were women of colour, worked in low-paid casual positions where they were in danger of further exploitation because of traditional expectations of women as carers.[93] In this study, which is not looking at direct care but at health promotion and community development, most staff members were not in managerial positions, but in professional positions that potentially could have led to managerial positions. The managers they reported to were also often women.

On the face of it, the apparent acceptance of hierarchy by staff members, and the fact that female managers were part of the hierarchy, could suggest that 'gender-blind' theories can explain this situation: that people's attitudes towards hierarchy simply reflect their class position or their location within, or outside, a hierarchical work culture. These theories do not, however, explain why nearly all staff members participating in the project were female. Nor do they explain the evidence from other sources that regardless of people's attitudes towards organisational hierarchies, men are more likely than women to 'succeed' in them,[79] and that when (paid) work is done by men, it tends to be valued more highly than the same work done by women.[40-42] In other words, women are present within the hierarchies of paid work, but overall still largely as a subordinate class, concentrated within 'caring' work that is also seen as subordinate, presumably because it is mainly done by women. Gender-blind theories cannot explain this situation.

For example, Marx, in *Capital*, was interested in the value that "men" [sic] added by their labour to that which was provided by "nature",[94(p31)] but only in the production of goods for trade, not the value added by unpaid domestic and caring work.[95] Similarly, while Marx acknowledged that 'nature' provided raw materials, he did not analyse the contribution of nature, but took it as a given. When speaking of "material wealth, of use values", Marx made the following statement:

> As William Petty puts it, labour is its father and the earth its mother.[94(p31)]

This exemplifies Merchant's[31] later ecofeminist analysis that 'men of science' saw both nature and women as belonging to the sphere which men 'improved'.

Marxist feminists later proposed a schema of 'production and reproduction', which recognised that labour had to be 'reproduced'. This was intended to include women's unpaid work of caring and procreation in Marxist analysis.[96(p70)] This schema is unsatisfactory, however, because it still positions the adult worker as the normative person and locates caring work as subordinate, rather than valuing caring in its own right.[97] Thus, while Marxist theory is useful in understanding inequality and exploitation, it does not provide a sufficient basis for an ethical position that values care and ecosystems ('nature') in their own right rather than as resources for 'the economy'.

The way that unpaid domestic work was understood as 'reproduction' of workers in Marxist analysis is similar to the way 'left neoliberal' ALP policy saw health promotion at the time when this research began. 'Left neoliberals', such as Steve Bracks (Victorian ALP Premier 1999–2007), argued that health promotion could support the National Reform agenda, by increasing the health of the workforce ('human capital') and supporting a stronger economy.[98] This approach contributed to increased federal funding for health promotion during the subsequent period of federal ALP government (2007–2013), although the Federal LNC Government in 2014 drastically reduced this. Pragmatically, this approach may work, at least sometimes, and has been adopted by some health promoters,[99] but it still positions caring and non-market-oriented work such as health promotion as subordinate to an assumed, more important, 'real' economy.

This illustrates again the discursive fluidity of economistic discourse. Here it assumes there is a more central workforce that health promotion is serving, thus casting health promotion within the traditional subordinate sphere of caring work done by women for others, even though it is paid work and part of GDP.

Ecofeminist historical analysis

Ecofeminist scholars provide a more comprehensive explanation of the development of hierarchy, the normalisation of inequality, and the subordination of caring and nature than gender-blind theory can provide. Ecofeminist scholars such as Lerner,[100] Eisler[101] and Gimbutas[102] analysed the development of patriarchal, hierarchical societies from about 5,000 years ago, and the earlier, more egalitarian societies that were displaced. They explored the implications of the rise of hierarchical patriarchal societies, in that the work of caring came to be seen as the sphere of women and slaves, a sphere that was subordinate and to be used by men. Historians such as Merchant and Folbre[31,32] show how subsequently, following the Enlightenment in Britain and Europe, both caring work and 'nature' came to be seen as passive, to be controlled and used by educated or ruling class men, utilising patriarchal capitalism and the discourse of scientific rationality. This formed a basis for orthodox 'economistic' discourse.[19,30]

Contemporary economistic discourse concerns trade and exchange between individuals, rather than 'men', but is still based on patriarchal understandings that do not acknowledge the work of caring and subsistence that is not done for trade. The economistic discourse is extended to services, including caring, when they are provided on a paid basis. However, this is an uneasy

fit. Caring work does not fit well with the theory of the market. In particular, caring work – such as health promotion – done for public or common good rather than for specific individuals, does not fit well with the theory of markets and is thus especially vulnerable under economistic discourse. Health promotion funding is sometimes treated as a 'feel-good' story, lending itself to positive announcements for local MPs, but is often short-term and at risk of being cut, as it drastically was in the Federal LNC Budget of 2014.[103]

The work of caring, whether it be caring for humans, other species or the environment, is not in any real sense inferior to the sphere of trade, competition and hierarchy, even though it is generally remunerated poorly. Since human life could not continue without the ecosystem and the creation and nurture of human beings, the work of caring can be seen as of primary importance. As Robinson argues in her work on the ethics of care, "[h]uman life as we know it would be inconceivable without relations of care".[104(p2)] This has been starkly revealed by the centrality of caring work during the COVID-19 pandemic.

In Australia, First Nations, who saw people as having a responsibility to care for each other and the earth,[105,106] were in historical terms recently overthrown by a society that was hierarchical, patriarchal and capitalist, following the British invasion. This colonial society saw white men as having an inherent right to own and control land because they could 'improve' it and profit from it (even though in practice their use was environmentally destructive).[107-110] They also were seen as having associated rights to be 'heads of households' and control the governance of society.[111,112] This ideology has now been partially – though not entirely – dismantled. We no longer have a census that treats men automatically as head of the household or laws that give men authority over women and children, precedence in getting jobs or higher pay for the same work, even though such things still routinely happen. The 'White Australia' policy and view of First Nations and non-white people as essentially inferior have officially been abandoned,[113] although there is no doubt many people still hold these views. Waring,[30] however, has shown that patriarchal and white supremacist/colonial assumptions are still highly influential in the orthodox

understanding of work and economy, even though now expressed in gender-neutral language.

This has relevance for the health promotion work considered in this study. Many goals of this work are about sharing resources and encouraging activities such as growing and sharing food locally, walking or cycling instead of using cars, reducing energy use, caring for local environments and respecting First Nations' knowledge. This is not readily valued within an economistic discourse that privileges competition and the market and relies on the idea of continual GDP growth. Ecofeminist historical analysis explains how this has come about, how the ecosystem and the work and perspectives of women, First Nations and people of colour have been taken for granted or excluded from public debate.[34,114]

Within the time limits of the study, it was not possible to explore the ecofeminist analysis fully with research participants, although a summary report was provided in stage three. Nevertheless, a socioecological discourse based on an 'ethic of care' or 'care-sensitive ethic'[55] seems to fit the discursive position of participants. In two final consultations, the researcher presented this as a hypothetical proposition that 'societies where people care for each other and share resources equitably would be more likely to use the earth's resources sustainably than those based on competition'. This proposition appeared acceptable to participants, with several strongly endorsing it, although it was not possible to explore the degree of support in depth due to time constraints.

In the final stage, one participant commented:

> *Many of the questions posed* [by this study] *are really fundamental societal ones. Ultimately what future do we want for our world?*

This comment reflects the question of transition. How do we create societies that are fairer and more ecologically sustainable? Participants in this research gave considerable thought to this and tried within the constraints of their local situation to find ways to do so. At present, however, there does not appear to be a mainstream political discourse in Australia that represents their socioecological discourse of care, even though the ALP provides some support for their work when in power.

Discussion

The questions posed by this study are fundamental ones and may seem idealistic in a society where the LNC won the 2019 election, drawing on economistic discourse. At an everyday level, 'the economy', in terms of income and jobs, is important to people. However, for public health practitioners facing increasing inequality and environmental destruction, it is also important to consider how we can make the transition to fairer and more sustainable societies. A discourse that assumes continuous 'economic growth', and ever-increasing financial wealth is problematic, including on empirical grounds. Research suggests that above a modest average income level, health is more closely associated with equality than with increasing financial wealth.[5] Focusing on a fairer distribution of income and wealth, and sustainable use of natural resources, seems better for the health of people and ecosystem than the pursuit of never-ending economic growth, especially since the 'ecological footprint' of wealthy countries like Australia already exceeds the earth's estimated capacity.[115]

The possibility of more egalitarian, gender-balanced, socioecological approaches is evident in historical evidence, including growing evidence from First Nations.[116] There are still some cooperative work structures in contemporary society, in both paid[117] and unpaid work, and there is a growing body of socioecological measures of wellbeing.[30,118,119] The ALP has cautiously dipped a toe into this discursive approach,[25(p15)] and the Australian Greens hint at problems with the current discourse in their economic premises,[120] but much more could be done.

Conclusion and implications for public health

Public health has sometimes responded to the orthodox economistic discourse by attempting to measure the value of health in monetary terms.[121] We suggest a socioecological discourse of care, using measures of human and ecosystem wellbeing, may be better founded. New Zealand has recently introduced measures of social and environmental wellbeing into their budgetary process.[122] Some countries are addressing similar issues in plans for 'Green Recovery' from the COVID-19 pandemic.[123]

There is a growing body of research on sustainable economies.[6,8] Public health practitioners can draw on this theory and evidence to advocate for a political discourse that fits better with a transition to fairer and more ecologically sustainable societies.

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