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## I HAVE LITTLE TIME AND LOTS TO SAY

So let me give it to you right away

Little time. A couple of minutes only, with limited word count. Immediately at the start, the narrative of scarcity comes up. Scarcity has been a long-installed narrative, creating our view on natural environment, economy, intimacy and culture. We learn that there is too little food, land, lacking intelligence, agency, too little love and beauty. Hence, we have to restrain our desires, demands and needs. Instead of focusing on the potential of equal distribution, inequality is portrayed as a natural phenomenon.

Soulcare teams with abundance, not scarcity. Soulcare is not about improvement, progression or completion. Soulcare isn't like *bildung*. *Bildung*, as we know it in the literary tradition, in which a character is built, rounded, complicated. Page after page, details are added, the writer controls grand developments. *Bildung* fits a humanist tradition, and soulcare is not exclusionary human. More-than-human animals, plants, animate and supposed inanimate life have soul too, and can be cared for. I explicitly say: have soul, not a soul. Not a singular entity, something to point to. Having soul is multiple and does not have to be identified; it can be experienced – by many and in different forms.

Soulcare, then, is anti-capitalist. Soulcare isn't enacted to enforce manifestation. Soulcare breaks the equation of care for extraction, care for growth, care to create a profitable surplus.

Care is not linear.

Care is not cure and it should not be cure. Disability Justice activists critically question the medical and political focus on cure. Millions are invested in scientific research, aiming to find a future cure, a resolving medicine or technology. Incited by the pharmaceutical industry, a belief in cure establishes a single idea of what a “healthy” human being should be. Obsessive investments in future cure project that disability will be eradicated. Medical, eugenic and technological change is supported to secure a single future, while change for the sake of justice is deemed impossible.

Societally, we have treated disability as a future problem of the past.  
How did we expect to live OK in a Covid affected present?

While millions are spent on discovering future cures, most cultural events I attend do not have budget reserved for sign language interpretation. We seek for water on the moon to learn if life is possible, while not knowing how to formulate livable life on earth ↯ – one third of the current world population lacks access to clean drinking water. This is not natural scarcity. This is distribution. A violent understanding of value.

Those who propose to live life with disability ↯ – to not only accommodate or adapt people's ability to participate in the norm, but change the norm's rigid frame ↯ – are ignored. If disability was an appreciated point of view, streets, buildings and night clubs would be designed for a multitude of bodies; different forms of access would be centralized, and crip time could rule, meaning that different bodies and minds need different temporalities, speeds, and schedules.

Care is not similar to cure.

Care can happen if there is no cure in sight.

Care is figured out, intramurally and in community designed, even if there is no political concern for the lives most affected.

This is what a collective like "What Would an HIV Doula Do?" proposes; they assign the kind of care that is mostly associated with birth, to living with a virus that aims to survive. Care is never a waste of time. If tomorrow, your heartbreak isn't better, the care of a friend was not wasted today. If your illness progresses, the value of care is not reduced.

I started this short reflection with scarcity. We have to reject the narrative in which scarcity increases value. Budgets for nursing staff, general practitioners, home care-takers, Thuiszorg have been cut and squeezed. Elderly care and doctors can spend a maximum few minutes on a person, patient. Caretakers receive applause and not a bonus. Paradoxically, scarcity here, is used to make us value care even more.

In order to care for care, the growing valuation for that which is scarce, has to be refused. Imagine care in abundance.

Imagine abundantly caring. Caring for, being cared for.

That, I'd say, is soulcare.

Inspired by Malcom Ferdinand's work on decolonial ecology, I'd like to end with a song by soul musician Gil-Scott Heron: "Whitey on the Moon."

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