H-Net Reviews

Ranae Lenor Hanson. *Watershed: Attending to Body and Earth in Distress.* Minneapolis: University of Minnesota Press, 2021. 200 pp. \$19.95, paper, ISBN 978-1-5179-1097-6.

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According to the ancient Greek Hippocratic text Airs, Waters, Places, a physician diagnosing a patient must consider how the patient's body exists in its environment, including the flow of waters and winds, the seasons, and meteorological and astrological events. In Watershed, Ranae Lenor Hanson melds this ancient methodology with metaphor as she explores the impacts of and connections between the human body and the environment it inhabits, especially in this era of human-caused climate crisis. Her paper-bound narrative meanders through her life and experiences with climate change and diabetes like a river moving through a terrestrial landscape, adding an environmentally focused story to the broad genre of the medical memoir. Although Watershed is not always easy to follow thematically, it uses metaphor and self-reflection to help readers understand their responses to climate change as a kind of chronic illness, and asks them why and how we can address an ailing Earth the way we address an ailing body.

Each section of the book examines a different facet of disability and chronic illness: before diagnosis, the emergence of the illness, the diagnosis itself, coping with and adapting to it, and finding peace with it. Hanson begins with her childhood in rural Minnesota, explaining how the "natural" landscape shaped her growth into adulthood and the conservation and environmentally centered values it instilled in her. To continue her undergraduate and then graduate education, she had to move to urban landscapes, where she encountered mental and emotional conflicts that influenced her daily life. Although some of these conflicts emerged from the demands of her teaching and writing career, she centers many of them on the world's altering environment and how it manifested in Minnesota over the decades-the winters grew warmer, familiar animals began to disappear, and industries invaded and exploited her home's rural landscape, particularly the rivers and lakes she loved. Throughout this first half of the book. Hanson weaves her international students' perspectives into her own reflections to demonstrate how the changes impacting Minnesotans' lives are connected to changes happening elsewhere and impacting the lives of millions more.

The second half of the book takes us into Hanson's chronic illness and the heart of her analysis. As she reached the height of her teaching career, she began to notice physical changes in her own body that made it increasingly difficult to live a normal life. After visiting the doctor for suspected constipation, she was diagnosed with Type 1 diabetes. Type 1 radically changed her daily life: it compelled her to focus on how each action she took required a treatment of some kind, whether a glucose shot, a certain number of carbohydrates eaten, or just a moment to stop and take a deep breath. In other words, she had to learn how to live with the sudden onset of a medically intensive disability. "I had to become at home in my body," she writes, "I had to learn about the denizens of my gut, the rhythms of my stomach and bowels" (p. 103). Ultimately, Hanson used her personal experiences and struggles with diabetes to come to terms with climate change, viewing it as Earth's own chronic illness. As with a diabetic's high and low blood sugar episodes, Earth has begun cycling through extremes (p. 107). And, as with a diabetic and their body, we need to be aware of how best to accept and adapt to those extremes in order for both us and Earth to survive.

Hanson ends her narrative with a return to her rural Minnesota childhood home and the death of her father, revisiting a landscape scarred by climate change and industrial exploitation yet still surviving through natural adaptation and human care. This thread of hope is perhaps one of the book's more powerful themes. It gives us a way to think about living in a rapidly shifting global environment without despairing about how little we as individuals can do: before we lose heart over an enormous issue that we have to collectively fix, we need to stop, breathe, accept the situation for where and what it is, and adapt to mitigate its effects. Just like human bodies, Earth has become a kind of disabled being, saddled with a chronic illness not of its own making. When we think about Earth's health, we need to consider how to work with it as it is rather than forcing it to revert to some earlier, nondisabled state. Similarly, we need to work with whatever disabilities our bodies take on and not despair over them. We should not force disabled or chronically ill persons to adapt to nondisabled ways, so why not adapt to meet them where they are at instead?

Hanson additionally reminds us that technology is not the be-all, end-all solution to human health problems or climate change. That is not to say technology is inherently *bad*. Hanson continually reminds us that the invention of insulin saves thousands of lives each day, and that we do not have to do without electricity or motor transportation to save the planet. We just need to find better ways of creating, distributing, and implementing technologies. As global health scholars constantly remind us, techno-fixes are not saviors alone but rather helpers in the broader spectrum of care, in this case of humans and Earth.

While I found the book beautifully written with encouraging and realistic calls to action, it also led me to ask questions about Hanson's methodology. As previously mentioned, she threaded her students' voices into the memoir, especially those from American Indigenous and "Global South" backgrounds. She states in her introduction that she received permission from Indigenous Women's Network leader Winona LaDuke to use LaDuke's "ethical principles" and words at the end of the book (p. xiv). However, she does not mention how she obtained permission from or changed the names of her students' stories, many of which are personal and heartrending. Furthermore, she only occasionally refers to her own position as a white woman writing about nonwhite, particularly Indigenous, lives and narratives, and even less to the influences of white-driven capitalism on those perspectives. Including brief reflections on these intertwined issues, and her position in them as a white woman, would have been helpful in framing her approach to disability and chronic illness as a metaphor for the climate crisis.

Ultimately, Hanson presents a nuanced, even hopeful, take on a catastrophic situation. Her disability story demonstrates how intertwined humanity is with its earthly environs; how we need to stop, breathe, and become aware of the relationship to survive the climate crisis; and what we can learn from using disability and chronic illness to understand environmental problems. Just as she does with her diabetes each day, we have to "accept the information and adjust" to what Earth is telling us about its illness: "cut back on carbon, care for water, take correction, change the course of the future" (p. 150). It's time to see Earth as a body in need of holistic care, with each person or entity listening and responding to our planet's cries for help and medical attention.

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