Before and After Scenarios

Barak Water with Sofia Lior

Before and After Scenarios

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Before and After Scenarios

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How Daily Life Changes Through the Transition

Draft v0.1 — Barak Water with Sofia Lior

This document presents side-by-side scenarios showing what changes between the current world and a Transitioned one. Every NOW path is the actual sequence a real person navigates; every AFTER path is the sequence that becomes possible when specific structural conditions are met.

Most people cannot reason about *capitalism versus post-capitalism* in the abstract. Almost everyone can reason about *what happens when their child needs surgery*, or *what happens when a talented young person wants to become a doctor*.

Short Before-and-After Scenarios

1. The aspiring doctor individual

Now

A talented young person with the intelligence, drive, and care to become a doctor cannot afford medical school. Takes loans; the average indebted graduate owes over $225,000 for medical school alone. Graduates with crushing debt. Specialty choice constrained by ability to service debt; primary care underserved because it pays less. The vocation is distorted by the economics from the first day of training.

After

The same young person takes entrance exams, passes, completes training without financial barrier. Chooses specialty based on aptitude and demonstrated need. Begins practicing immediately as a contribution to society rather than as debt-servicing labor. The vocation matches the calling.

2. The family with a sick child family

Now

A child develops a serious illness. Insurance denies coverage for the specialized treatment doctors recommend. The family launches a GoFundMe. They go into bankruptcy. One parent leaves work to provide caregiving; the family loses their insurance with the job loss. The child receives some treatment, sometimes the wrong kind, sometimes none. The family is destroyed by a combination of grief and financial ruin that was never necessary.

After

The same illness. The family takes the child to the hospital. Diagnosis. Treatment. The family stays whole. Recovery, or — if recovery is not possible — the family is held together to grieve, rather than torn apart while trying to grieve.

3. The community that needs a hospital community

Now

A region needs a hospital. Materials, land, qualified personnel, and plans all exist. No level of government will allocate the funds; no private investor will build because operating margins are unattractive. The hospital is not built. People drive ninety minutes for emergency care. Some die en route. Births happen in cars.

After

The same region. Materials, land, qualified personnel, plans. The hospital gets built because building hospitals where people need them is what we do. Doors open. People receive care.

4. The aspiring artist individual

Now

A talented young artist cannot afford training. Works service jobs to fund creative work. Art-making is constrained to evenings and weekends. Most don't make it. The few who succeed often do so through luck, family wealth, or extreme self-exploitation. Most art that gets made is the art that is commercially defensible — a narrow slice of what humans can actually create.

After

The same young artist takes entrance exams to the school appropriate to their craft. Trains under masters. Develops their voice. Their work circulates because circulation isn't gated by marketability. Society receives the full breadth of art human creativity actually produces.

5. The pandemic response national/international

Now

A virus emerges. Public health response is delayed by political contestation. Patent-protected manufacturing limits supply. Wealthy countries hoard vaccines; poor countries wait. Lockdowns destroy small businesses while large corporations consolidate. Trust in public-health institutions is damaged for a generation. Excess deaths run into the millions — an estimated 14.9 million in 2020 and 2021 alone.

After

The same virus. Public-health response activates immediately. Vaccine development and distribution proceed in parallel; manufacturing capacity is treated as a public good. Vaccines reach poor countries faster than rich ones, because the goal is global suppression. Lockdowns where needed are accompanied by community coordination — essential services continue, families are sustained. Trust is strengthened.

6. Climate-adaptation infrastructure national

Now

A coastal city needs seawalls, drainage upgrades, heat-resilient housing. Funds aren't available because climate adaptation has no profit center. Piecemeal work happens after each crisis. Lives are lost. Insurance markets collapse.

After

Adaptation infrastructure is built proactively as public works. The work happens once, properly, before the crises. Prevention requires a fraction of the resources that crisis response demands. Lives are saved.

7. The refugee crisis international

Now

War or climate disaster creates millions of displaced people. Receiving countries treat refugees as economic burden. Camps fill. People wait in indefinite limbo. Children grow up undocumented. Far-right movements harvest the fear.

After

The same displacement. A receiving cooperation-network activates: housing capacity identified, language support pre-positioned, refugees matched to communities where their skills are needed. Integration happens at human pace. Refugees become contributors. Far-right scapegoating loses its raw material.

8. The local development decision community

Now

A development proposal arrives. The developer has lobbyists, lawyers, and political contributions. Local residents have a few hours after work to read the planning documents. The decision is made by the people with the capacity to engage. Residents discover what happened after the fact.

After

A deliberative process activates: a representative sample of residents is convened, freed from their regular responsibilities, provided with technical support and access to experts of their own choosing. The decision is made by the community, with informed input.

9. The end-of-life passage family/individual

Now

A loved one is diagnosed with a terminal illness. Treatment options exist but insurance authorization is uncertain. Family members take on caregiving, often leaving jobs and losing their own healthcare. Medical bankruptcies accumulate. The final months are dominated by financial fear as much as by grief.

After

The same diagnosis. Treatment options available; the doctors and the family decide based on medical and human considerations. Caregiving is supported. Hospice is universally accessible. The final time is dominated by what it should be: presence, love, the work of saying goodbye.

10. The talented hardworking person in any field individual, general form

Now

A talented hardworking person has everything needed to learn and master a profession — except the money. The training is gated by financial barrier. The vocation is delayed or abandoned. The contribution is never made. Society loses it. The person carries the unlived vocation through their life.

After

The same person takes entrance exams, passes, gets the training, makes the contribution. The vocation matches the life. Society receives what only that person could give.

11. Manufactured scarcity systemic, worldwide

Now

Food is destroyed to maintain prices while people go hungry. Medicine that could cure is withheld because curing isn't a sustainable business model. Oil production is throttled while energy poverty affects billions. Abundance is treated as a threat — because when revenue depends on scarcity, it is.

After

Production responds to need. Surplus food is distributed, not destroyed. Medicine is developed and delivered as rapidly as safety allows. The structural incentive to manufacture scarcity does not exist, because no one's survival depends on maintaining it.

Read the detailed evidence →

12. Suppressed science and corrupted research systemic, worldwide

Now

Industries discover their products cause harm — then spend decades funding doubt. Exxon's own scientists accurately projected global warming from the late 1970s onward; the company then spent millions promoting denial. Tobacco, sugar, lead, and chemical industries all followed the same template: suppress the science, discredit the scientists, delay the regulation.

After

Research is conducted to discover what is true. When a substance is found to be harmful, the response is to stop producing it — not to fund competing studies designed to manufacture doubt. No institution's survival depends on a particular scientific conclusion.

Read the detailed evidence →

13. Superior products defeated by marketing and business practices systemic, worldwide

Now

Better products are routinely eliminated — not by competition, but by sabotage. Operating systems were destroyed by embedded code designed to frighten users. Electric vehicles were recalled and crushed. Battery patents were acquired and shelved. Safety innovations were delayed for decades. The competition is not between products — it is between business strategies.

After

Technologies are adopted based on what they do — their functionality, safety, and fitness for the task. No institution has the structural means or motive to sabotage a superior alternative, shelve a patent, or lock out a competitor. Innovation is adopted at the speed the technology allows.

Read the detailed evidence →

14. Designed to fail, illegal to fix systemic, worldwide

Now

Products are engineered to break. Phones are deliberately slowed by software updates. Washing machine lifespans in Norwegian households have declined 45%. Printer ink can run as high as roughly $12,000 per gallon. Tractors are software-

locked against owner repair. Durability is a threat to the business model — so it is engineered out.

After

You have a phone designed to be opened, repaired, and upgraded. A washing machine is engineered for the longest practical lifespan. Clothing survives years of use. Engineers design for maximum durability, not minimum. The 62 million tonnes of annual electronic waste disappear when the incentive to create them does.
Read the detailed evidence →

15. The impossibility of informed choice systemic, worldwide

Now

You search for a vitamin supplement and face tens of thousands of products, each claiming to be "clinically proven." DNA testing of store-brand herbal supplements found that 79% of tests detected none of the labeled plant or found contamination. When doctors prescribe an advertised drug a patient asked for, they report that other drugs would have been equally effective 48% of the time. Over $1 trillion per year is spent globally on advertising; a fraction of that on accuracy.

After

You look up what you need and find the scientific consensus — presented clearly, without competing commercial claims. Information systems serve the people looking for answers. The trillion-dollar persuasion industry is simply no longer needed.

Read the detailed evidence →

16. Advertising as sensory and environmental pollution systemic, worldwide

Now

An average retail-dense New York City block carries 53 product images. Children encounter 554 brand marketing messages per waking day. Average attention on a screen has collapsed from 2.5 minutes to 47 seconds. Advertising cultivates materialism, which is significantly associated with reduced wellbeing. More than 800 million people use ad-blockers — a revealed preference, at scale, for an experience the system does not offer by default.

After

Cities are visible. Devices serve their users, not advertisers. Children encounter the world without processing 554 commercial messages per day. The 47-second attention span is not a fact about human neurology — it is an artifact of the current environment. When that environment changes, the capacity it suppressed re-emerges.

Read the detailed evidence →

17. Financial stress and the destruction of relationships Interpersonal & Societal

Now

Financial disagreements are the strongest predictor of divorce among the disagreement topics studied — stronger than disagreements about any other common topic. Economic pressure produces emotional distress, produces hostility, degrades relationships. The domestic violence rate more than triples among financially strained couples. The effects transmit across three generations. Natural experiments consistently show that reducing financial pressure causally improves relationships.

After

Partners still disagree — about children, priorities, how to live. What is absent is the grinding financial stress that research identifies as the most divorce-predictive source of conflict. The relationships that would have survived without financial pressure actually survive. The artificially imposed difficulty is gone.
Read the detailed evidence →

18. The cost of care across a lifetime Interpersonal & Societal

Now

Having a baby generates about $32,000 in charges under commercial insurance in the US; about $60 in Finland. Childcare exceeds public college tuition in 38 states. Raising a child to 17 costs over $310,000. Private-pay nursing home residents spend down to Medicaid eligibility in an average of 6.1 months. 59 million Americans provide unpaid care at devastating personal cost. The system sustains itself through impoverishment and unpaid labor.

After

The essentials — healthcare, childcare, housing, education, eldercare — are provided through shared infrastructure. The work of care is recognized and supported. Every country that has universalized any part of this care shows improved outcomes. The question is not whether universal care works. The question is whether the current alternative is acceptable.

Read the detailed evidence →

19. No money, no taxes: how shared work gets done Personal, Interpersonal & Societal

Now

In currency-based economies, governments use taxes — alongside borrowing, public revenue and, in some systems, monetary issuance — to obtain and direct resources toward roads, schools, emergency services and other public purposes. Taxes support essential services and can reduce inequality, but they are compulsory, politically contested and enormously complicated: Americans spend an estimated 6.9 billion hours a year on federal tax compliance, and people across the political spectrum are frustrated — they disagree about who should pay, how much, and whose needs come first. The same monetary conflict runs through daily life: wages are an employer's expense, rent paid by one household becomes another party's income (a record 22.7 million US renter households are cost-burdened), and interest received by a lender is an outflow for the borrower. Currency turns many relationships into contests over competing financial claims — even when none of the people involved intends harm.

After

In a mature post-currency society, monetary taxation ends because there is no income, price, profit or money to tax. Public works are provisioned directly: communities identify needs, measure actual capacity, and coordinate skilled work, equipment and materials through transparent democratic institutions. No authority takes part of anyone's income or presents anyone with a tax bill; homes, personal belongings and personal-use property remain protected. Many gains no longer require a corresponding monetary loss for someone else.

This does not eliminate physical limits or difficult choices. Labour, land, materials, energy and ecological capacity remain finite and must be allocated openly, fairly and at the appropriate local or federated level. Where capacity is insufficient, a project is redesigned, delayed, reduced in scale, automated where possible, or undertaken after more people and resources become available. During the transition, existing taxes remain legally due; they diminish only as dependable non-market systems become capable of carrying the functions taxes currently support.

Read the detailed evidence →

20. When machines do the work: automation and AI, threat or liberation Personal, Interpersonal & Societal

Now

When income depends on a job, a machine that can do the job threatens survival. In US labour markets, each additional robot per 1,000 workers reduced employment and wages; the auto industry, the largest robot user, needs far fewer people on the line. An IMF study finds almost 40% of jobs worldwide, and about 60% in advanced economies, exposed to AI. Automation's benefits are real, but they flow mainly through ownership: the owner gets the gain, the displaced worker gets the risk.

After

When livelihood no longer depends on a job, automation and AI become liberation rather than threat. Machines take on the repetitive, dangerous, and exhausting work first, and productivity gains show up as shorter hours for everyone, returning time to care, craft, learning, and community. AI stays a tool under transparent, democratic rules, never a decision-maker. Energy and ecological limits still apply, and people whose roles change get counselling, connection, and education open to all at no cost.

Read the detailed evidence →

21. One home, one car, one of everything: how households came apart Personal, Interpersonal & Societal

Now

Humans evolved as cooperative breeders, yet the average US household has shrunk from nearly six people in 1790 to 2.5 today, and almost three in ten households are one person. Every extra household means another rent, another set of appliances, often another car — more sales. About 81% of residential land allows only single-family homes, and benefit rules can cut support when relatives move in. The partial return of shared living is driven largely by financial pressure, not chosen community.

After

Where you live, and with whom, becomes a choice made for its own sake. Multigenerational homes, cohousing, chosen families and living alone are all equally legitimate, and none is penalised. Tool libraries, workshops and shared vehicles replace one-of-everything. Privacy and personal agency stay protected; shared living still needs good norms for the conflicts it brings.

Read the detailed evidence →

Detailed Flowchart: Healthcare

The NOW path requires ~20 operational steps — roughly half are not medical. The AFTER path requires 9 steps — none of the eliminated steps are medical.

What Changes: The Enabling Conditions

- **Medical training universally accessible** — no barriers to entry beyond demonstrated aptitude and commitment
- **Healthcare provision direct** — no authorization layer between doctor and patient
- **Hospital construction undertaken as public infrastructure** — like roads, fire departments, libraries
- **All professions recognized and respected as contributions to the community**
- **No extractive entity in the care-delivery chain** — care exists to serve patients, not to generate returns

Follow the Resources

NOW: Administration consumes an estimated 34% of US health expenditure (versus 17% in Canada), and roughly 25% of US hospital spending. For a hospital with $500M annual revenue, that's on the order of $125M per year that doesn't reach care. Physicians in ambulatory practice spend 49% of their office day on electronic records and desk work — nearly two hours for every hour of direct patient care.

AFTER: Approximately 85-90% of human effort and material resources flow to direct care. The bureaucratic overhead of billing, authorization, and financial administration — which currently consumes roughly half of clinical workers' time — simply ceases to exist. The people and resources freed up are more than sufficient to provide universal care.

Real-World Precedents

- **Cuba** — 8.4 doctors per 1,000 population (the highest in World Bank data), publicly funded training
- **United Kingdom (NHS)** — outcomes comparable to or better than the US at less than half the per-capita expenditure
- **France** — among the best outcomes in the world at ~12% of GDP (vs US ~17%)
- **Veterans Health Administration (USA)** — an existence-proof inside the US that the AFTER path can operate; its care performs as well as or better than non-VA care on most quality measures
- **Costa Rica** — life expectancy higher than the US at a fraction of per-capita spending, built on community-based primary care teams

Honest Caveats

- The AFTER does not eliminate all healthcare problems. Wait times for non-urgent care can be longer in single-payer systems.
- The cultural shift is real but lags structural shift — adjusts over a generation.
- Innovation requires explicit attention: medical research needs deliberately allocated people, laboratories, equipment, and materials rather than whatever is left over once daily care is covered.
- Transition disruption is real: an estimated 1.8 million US insurance and billing-administration jobs would disappear. In the transitioned society, nobody's housing, food, healthcare, or quality of life depends on holding a job, and the project's research projects that the median work week will settle at roughly 15–17 hours — well under 20 — once production is matched to real need. That does not make the change painless: losing a job can mean losing an identity, a daily routine, standing among peers, a sense of purpose — and, for many people, most of their daily social contact. Counselling, mentoring, and peer support must be available to everyone affected, so that nobody has to adjust alone. That support should help people build new forms of social engagement and community, discover their passions, interests, and aptitudes, and find roles that fit them. Education and training are open to everyone, at no cost and with no pressure or deadline.

Eight Additional Domains

Education

Now

1. Person identifies a vocation
2. Learns cost: $30,000-$400,000+ depending on field
3. Takes loans (if financially feasible)
4. Attends, accrues debt, often works simultaneously
5. Graduates, enters job market constrained by debt
6. Career choices distorted by debt-service
7. Services debt for 10-30 years

In everyday terms: a 22-year-old nurse graduates owing $80,000. She takes the highest-paying shift work she can find rather than the community clinic she trained for. A would-be teacher looks at the numbers, does something else. A talented mechanic never trains as an engineer. The gate is financial, not intellectual — and the people locked out are disproportionately the people whose communities most need them back.

After

1. Person identifies a vocation
2. Prepares for entrance exams or portfolio review
3. Passes threshold of demonstrated readiness
4. Attends, with living support — meaning housing, food, and materials are provided as they are for everyone, so studying is the job
5. Trains, mentored by experienced practitioners
6. Enters the field as a contributor
7. The contribution unfolds across the working life

In everyday terms: you want to be a doctor, a welder, an architect, a chef? You demonstrate aptitude and commitment, and you train. No loans. No second job. No one picks a specialty they don't want because it pays more — nothing "pays," because money plays no role. You start your working life doing the work you trained for, not servicing the debt you took on to train for it.

What Changes: The Enabling Conditions

- **Training is a shared commitment, not a personal purchase** — the community that needs teachers, doctors, and engineers dedicates instructors, facilities, and materials to training them
- **Living support during training** — students don't work side jobs; studying is the contribution
- **Admissions based on aptitude and commitment** — not family wealth, not legacy status, not who your family knows
- **Vocational and academic paths equally respected** — a skilled carpenter and a research chemist both contribute; neither path carries social stigma
- **Lifelong retraining available** — a 45-year-old who wants to change fields can do so without risking their home, food, or security

Follow the Resources

NOW: Total US student loan debt: roughly $1.86 trillion across about 42.6 million federal borrowers. The average federal borrower carries roughly $40,000 in debt. The student loan servicing industry — collectors, processors, administrators — exists to do work that produces no education. Because interest accrues first, a large share of early repayments goes to interest rather than principal — meaning a significant portion of graduates' income flows to financial institutions rather than into the communities where they live and work.

AFTER: The people, buildings, and working hours currently absorbed by the loan industry, debt servicing, and financial administration are redirected into training capacity: more instructors, better facilities, broader access. Today's tuition-free systems already point the way: Germany, Norway, and Finland spend less per student than the US (US postsecondary spending per student is roughly double the OECD average) while achieving comparable or better outcomes — evidence that much of the US figure goes to something other than teaching. The real question is not one of money but of capacity: how many skilled instructors, classrooms, workshops, and teaching materials are needed to train everyone ready to learn, and that is a question the redirected labour can answer.

Real-World Precedents

- **Germany** — eliminated university tuition in 2014; the Ausbildung dual system combines classroom education with paid apprenticeships in over 320 recognized occupations; youth unemployment is among the lowest in Europe
- **Nordic countries** — free education through doctoral level, plus living stipends (e.g., Denmark's SU program pays students living away from home about DKK 7,400 — roughly $1,100 — per month before tax); consistently rank among top education outcomes globally
- **Cuba** — free education through doctoral level despite severe resource constraints; has more doctors per capita than any other country in World Bank data
- **The US's own GI Bill (1944)** — provided education and training benefits to 7.8 million veterans; a 1988 congressional Joint Economic Committee analysis estimated it returned roughly $7 for every $1 invested through increased tax revenue and economic output; widely regarded as one of the most successful public investments in American history
- **Brazil's ProUni program** — has funded university study for some 3.5 million low-income students since 2005

Honest Caveats

- Open access does not automatically mean excellent quality. The quality of instruction, facilities, and mentorship requires a sustained commitment of skilled people, time, and materials — removing the financial barrier is necessary but not sufficient.
- Entrance-exam systems can reproduce existing inequalities if exam design, preparation access, and selection criteria aren't carefully managed. Germany's early tracking system (Gymnasium vs. Realschule at age 10) has been criticized for sorting along class lines. Admissions processes need ongoing scrutiny.
- Without market pricing to signal demand, matching the number of trainees to actual needs requires deliberate coordination — training 10,000 lawyers and 200 plumbers when the community needs the reverse is a real risk that planned systems must address.
- Academic freedom and faculty self-governance need explicit structural protection. Publicly organized systems can face political pressure to shape curricula — academic independence must be constitutionally guarded, not assumed.
- Transition disruption is real: the US student loan servicing industry, private university administrations, and test-preparation companies employ hundreds of thousands of people whose livelihoods currently depend on this model. Once the transition is complete, their survival will not hinge on keeping those jobs, and the projected work week of roughly 15–17 hours leaves room to retrain without pressure. But a career that ends still leaves a gap in identity, routine, purpose, and the daily company of colleagues; retraining, mentoring, counselling, and peer support — including help finding new communities and discovering what each person is drawn to — should be ready before the jobs disappear, not after.

Housing

Now

30-60% of income goes to housing. Annual rent increases, eviction threats, gentrification. Homeownership gated by multigenerational wealth gaps. Housing instability is a major predictor of many adverse outcomes, from health and schooling to employment. Homelessness exists alongside vacant investment properties.

In everyday terms: you work full-time and still worry every month about whether you can afford to stay where you live. Your landlord raises the rent and you have 30 days to find somewhere else. Your children change schools again. You drive past empty apartments held by investors waiting for prices to rise. You can't save, because housing takes everything. And if you lose your job — if anything breaks in the fragile chain — you know exactly how fast you could end up on the street, because you've seen it happen to people around you.

After

Your home is yours because you live in it — not because you made 360 mortgage payments to a bank. Housing is built and maintained as shared infrastructure, the way roads and water systems are. You can live in a public apartment with the same quality and dignity as any other housing. You can live in a cooperative where residents collectively maintain the building. You can live in your own house. What you cannot do is hold ten houses and make other people pay to live in them.

In everyday terms: you never worry about eviction. There is no rent to go up. If you need to move — for work, for family, for a change — there is housing available where you're going, because housing was built for the people who live there, not for the people who invest in it from elsewhere. Your children grow up in a stable home. That stability changes everything that follows.

What Changes: The Enabling Conditions

- **Housing built for residents, not investors** — construction decisions driven by where people need homes, not by where returns are highest
- **Rent extraction eliminated** — your personal residence is yours; controlling other people's access to shelter is not a livelihood
- **Quality public housing as default, not last resort** — designed by architects, maintained by residents and professionals, indistinguishable from any other housing
- **Cooperative and community land trust models** — residents govern their own buildings and neighborhoods
- **Homelessness treated as an emergency to be resolved** — not managed, not studied, not debated while people sleep outside

Follow the Resources

NOW: Americans spend over $2.9 trillion a year on housing (rent paid plus the equivalent rental value of owner-occupied homes). The real estate industry alone — lessors, brokers, agents, and related services — employs roughly 1.9 million people, before counting mortgage lenders and title companies, much of it work that doesn't build or improve a single home. Roughly 15 million housing units in the US sit vacant at any given time, while over 770,000 people were counted as homeless on a single night in 2024 — the highest ever recorded. In several major metros, investors account for 24-32% of home purchases (18% nationally), driving prices beyond what residents can afford.

AFTER: The labour, office space, and working hours currently absorbed by mortgage servicing, real estate transactions, property speculation, and homelessness-related emergency services are redirected into construction, maintenance, and quality: builders, materials, architects, and the care that keeps buildings sound. Within today's economy, Vienna already shows what sustained commitment to housing produces — it invests roughly €600 million a year in housing construction and renovation and has built one of the most livable cities in the world. The administrative work of rent collection, eviction proceedings, and housing courts — which currently employs thousands — simply ceases to exist.

Real-World Precedents

- **Vienna, Austria** — about 60 percent of residents live in municipal or city-subsidized housing; quality is high (pools, gardens, community spaces); rents are moderate compared to other European capitals; the system has operated continuously since the 1920s
- **Singapore HDB** — roughly 77% of the resident population lives in government-built housing; apartments are well-maintained and socially integrated by deliberate ethnic-mix policies; home ownership rates exceed 90%
- **Finland's Housing First** — roughly halved homelessness and cut long-term homelessness by about 70% between 2008 and 2023 by providing unconditional permanent housing before addressing other challenges; for over a decade it was the only EU country with steadily declining homelessness (numbers rose in 2024 for the first time in eleven years)
- **Community land trusts** — nearly 300 in the US alone, over 350 in England and Wales, and more elsewhere, CLTs hold land in trust permanently, keeping housing affordable across generations without public subsidy in perpetuity

Honest Caveats

- Public housing has a deeply mixed record. The US experience with high-rise public housing projects (Cabrini-Green, Pruitt-Igoe) concentrated poverty and accelerated social breakdown. The difference between Vienna's success and Chicago's failure was design, investment, and integration — not the concept itself. Getting this right requires learning from both.
- Construction at scale takes years. Even with full commitment, building enough quality housing for everyone is a physical process that cannot happen overnight — materials, labor, and infrastructure have real lead times.
- Homeowners who built equity over decades have real financial security tied to property values. Because currency is phased out gradually rather than abruptly, the transition must honor that security throughout — not by preserving speculative markets, but by ensuring that people who depend on their home's value have equivalent security in the new system.
- People resist density and development near them regardless of the economic system. Community governance of housing decisions can slow construction — participatory processes need to balance resident input with the urgency of housing people who need homes now.
- Maintenance requires sustained skilled labour, materials, and engaged governance. Publicly owned housing that isn't maintained deteriorates — the commitment doesn't end at construction.
- Roughly 1.8 million people in US real estate — agents, brokers, leasing and property-management staff — plus mortgage and eviction-court workers would see their roles end. Their homes and daily needs will no longer ride on a commission or a paycheck, and many have skills (negotiation, local knowledge, building management) that carry over. Still, losing a profession is a loss of identity, routine, and social connection as much as income; counselling, retraining, and peer support need to be in place so no one faces that alone, along with help finding new circles of people and new roles that match each person’s interests and aptitudes.

Food Production and Distribution

Now

Industrial monoculture, fossil-fuel dependent, fragile. Subsidies to large agribusiness. Rural economies hollow out. Paradoxical hunger amid surplus, food deserts in cities. Diet-related disease is epidemic. 30-40% of food wasted. Climate consequences accumulate.

In everyday terms: you live in a neighborhood where the nearest fresh produce is a 40-minute bus ride away, but there are three fast-food outlets within walking distance. The food that is cheap and available is engineered to be addictive and nutritionally hollow. You develop diabetes at 45 — the same disease that is rare in populations whose traditional diets centre on minimally processed food. Meanwhile, farms within a hundred miles of you are plowing under vegetables because the price dropped below what it costs to harvest them. The food exists. It doesn't reach you.

After

Food is grown regionally wherever possible, using methods that rebuild soil rather than deplete it. Distribution is organized around getting food to people, not around maximizing margin. What's in season is what's abundant. Community kitchens, shared gardens, and neighborhood distribution points replace food deserts. Food that isn't claimed is redistributed or preserved — not destroyed.

In everyday terms: you walk to a neighborhood distribution point and pick up what your family needs for the week — most of it grown within a day's drive. The food is fresh, it's varied, money plays no part in getting it, and nobody asks you to prove that you deserve it. Your children grow up eating real food. The diet-related diseases that consumed the previous generation become rare.

What Changes: The Enabling Conditions

- **Food production responds to nutritional needs, not market prices** — what gets grown is determined by what people need to eat, not by which crops yield the highest return
- **Regional food systems reduce transport dependency** — shorter supply chains mean fresher food, less energy consumed, and less vulnerability to disruption
- **Regenerative agriculture replaces extractive monoculture** — farming practices that rebuild soil health, increase biodiversity, and sequester carbon
- **Distribution infrastructure built for access, not profit** — food deserts disappear because distribution points go where people live, not where margins are highest
- **Surplus is redistributed, not destroyed** — the structural incentive to destroy food to maintain prices no longer exists

Follow the Resources

NOW: The US spends over $2.5 trillion annually on food. Roughly 30-40% of the US food supply is wasted — USDA's estimate is approximately 133 billion pounds per year — and unsold or uneaten food was valued at $382 billion in 2023. Simultaneously, 47.4 million Americans lived in food-insecure households in 2023. Part of the paradox is structural: food is destroyed or discarded at every stage of the supply chain, often because distributing it would lower the prices that producers, processors, and retailers depend on. Diet-related disease (diabetes, heart disease, diet-linked cancers) costs the US an estimated $1.1 trillion annually in health care spending and lost productivity.

AFTER: The land, water, labour, transport, and packaging currently consumed by food waste; the creative, media, and logistics work absorbed by advertising (today roughly $14 billion/year in the US on food, beverage, and restaurant advertising alone); and the clinical capacity tied up treating diet-related disease are redirected into production quality, distribution access, and soil regeneration. The logistics of feeding a population are real and complex, and much waste also comes from spoilage, forecasting errors, fragmented distribution, and household behaviour. But the current system already moves enough food to feed everyone — and it frequently permits or incentivises waste to protect margins.

Real-World Precedents

- **Cuba's organoponicos** — when Soviet support collapsed in 1991, Cuba built a nationwide urban agriculture system; by 2013 thousands of urban farms and hundreds of thousands of small gardens produced nearly 1.2 million tonnes of vegetables and herbs a year — over half of urban consumption — through community-managed, largely organic agriculture with minimal imported inputs
- **Brazil's Zero Hunger (Fome Zero)** — combined school meals, family farming support, cash transfers, and food banks; the number of undernourished people fell by 82% between 2002 and 2014, and in 2014 Brazil left the UN Hunger Map for the first time
- **France's anti-waste law (2016)** — requires large supermarkets to donate unsold edible food rather than destroy it; donations rose roughly 30% in the first year and the law inspired similar legislation across the EU
- **Detroit's urban agriculture** — over 2,500 urban farms and gardens in a city where large areas were abandoned by industrial capital; residents built their own food system when the market failed them
- **Kerala, India** — before India shifted to targeted rationing in 1997, Kerala's public distribution system covered around 95% of households, with a fair-price shop within two kilometres of every cardholder, supplying roughly half of residents' cereal needs; near-universal food access despite modest per-capita income

Honest Caveats

- Regional food systems cannot supply everything everywhere. Coffee, chocolate, spices, and tropical fruit in cold climates require long-distance trade — the question is how that trade is organized, not whether it exists. Complete food localism is neither possible nor desirable.
- Regenerative agriculture typically produces lower yields per acre during the transition period (roughly 10-20% less in the first 3-5 years). Yields recover and often exceed conventional agriculture after soils rebuild, but the transition

requires patience and support for farmers during the dip.
- Food preferences are deeply personal and cultural. Centralized coordination of food production risks homogenization. The system must accommodate diversity of diet without imposing uniformity — people should eat what they choose from what the region can sustainably grow.
- Seasonal eating means accepting that not everything is available year-round without energy-intensive greenhouse production or long-distance shipping. Some convenience is genuinely traded for sustainability.
- Industrial agriculture, processing, and food marketing employ millions of people worldwide. The transition to regional, regenerative food systems creates different work — farming, distribution, food preparation — and after the transition no one's meals or home depend on keeping a particular job, with the projected work week at roughly 15–17 hours. Even so, a food-marketing executive or a plant-line supervisor whose role ends loses more than a task: routine, status, the people they saw every day, and a sense of who they are. Counselling, mentoring, peer support, and open-ended learning must be offered deliberately rather than left to chance — helping people find new communities, explore their interests, and take up roles they choose, at their own pace.

Transportation

Now

Car dependency designed into infrastructure: suburban sprawl, highway-centric planning, and zoning laws that separate where people live from where they work, shop, and learn. The average American household spends over $13,000 per year on transportation — the second-largest expense after housing. Traffic crashes kill roughly 40,000 people per year in the US and 1.19 million worldwide. Public transit is chronically underfunded, unreliable in most US cities, and often stigmatized as a service for people who can't afford cars. Low-income communities reliably have the worst transit access and the longest commutes.

In everyday terms: you spend two hours a day in a car you're still paying off, burning fuel you can barely afford, on roads that are crumbling because the maintenance budget was cut. Your commute costs you time with your family, money you don't have, and health you're losing to stress and inactivity. If your car breaks down, you might lose your job — because there's no other way to get there.

After

Communities designed so that most daily needs — work, food, school, healthcare, recreation — are within walking, cycling, or short transit distance. Reliable, frequent public transit connects neighborhoods and cities. High-speed rail links regions. Shared fleets become the practical default wherever they give better access with fewer vehicles. Personal-use vehicles remain available where geography, disability, work, safety, frequency of use, or individual circumstances make them reasonable. Freight moves by rail and electric vehicle, optimized for efficiency rather than speed-at-any-cost.

In everyday terms: you walk your children to school. You take a ten-minute train to work. Your groceries are a short walk away. When you need to visit family in another city, you take a train that arrives in a couple of hours. You no longer need a car of your own — for the occasional trip that needs one, a shared vehicle is nearby — and you don't miss the payments, the insurance, the repairs, or the parking. (Your neighbour, who lives with a disability and drives every day, keeps her own.) The two hours a day you used to spend commuting are yours again.

What Changes: The Enabling Conditions

- **Community design prioritizes proximity** — homes, workplaces, schools, and services located near each other instead of separated by zoning and sprawl
- **Public transit as core infrastructure** — staffed and maintained like water or electricity, with labour and materials committed as a priority, not treated as the first thing to cut
- **Walking and cycling infrastructure built into every community** — protected lanes, safe crossings, accessible paths, not afterthoughts squeezed between car lanes

- **Shared vehicle fleets as the practical default for trips that need cars** — with personal-use vehicles still available where geography, disability, work, safety, or frequency of use make them reasonable; nothing to finance or insure individually, no 20,000 individual cars sitting idle 95% of the time in a community that needs 2,000 at any given moment
- **Freight logistics optimized for efficiency and environmental impact** — not for the fastest delivery at the lowest visible price with the costs externalized onto communities and climate

Follow the Resources

NOW: Americans spend over $1.5 trillion annually on household transportation. The average car sits parked roughly 95% of the time. An estimated 800 million parking spaces exist in the US — roughly three for every car, consuming on the order of 8,000 square miles of land, about the size of New Jersey. Traffic congestion cost the US more than $74 billion in lost time in 2024. Vehicle crashes cost roughly $340 billion a year in medical expenses, lost productivity, and property damage. The auto insurance industry alone collects over $340 billion in private passenger premiums per year.

AFTER: Most of that burden disappears. Shared fleets require a fraction of the vehicles — and of the steel, batteries, and factory hours to build them; parking lots become housing, parks, and food gardens; transit infrastructure, once built, uses far less energy, material, and land per person-trip than individual car ownership. The labour and materials currently absorbed by car lending and insurance administration, fuel, parking construction, and crash response are redirected into transit systems, walkable infrastructure, and the reclaimed time of millions of people who no longer commute two hours a day.

Real-World Precedents

- **The Netherlands** — rebuilt its cities around cycling and transit after a citizen movement in the 1970s protesting child traffic deaths; roughly 27% of all trips are by bicycle; Dutch cities consistently rank among the world's most livable
- **Japan's rail network** — carries over 22 billion passenger-trips per year with legendary punctuality; the Shinkansen has operated since 1964 with zero passenger fatalities from derailment or collision; rail is the backbone of intercity travel
- **Curitiba, Brazil** — pioneered bus rapid transit in 1974; the integrated network has carried roughly 2 million trips per day at a fraction of the cost of subway construction; bus rapid transit now operates in nearly 200 cities worldwide
- **Swiss rail** — rail lines and connecting postbuses reach virtually every community in the country, including small mountain villages; the system operates with clockwork coordination, and the Swiss travel about 2,500 km a year by rail per person — the European record, roughly 1,000 km more than the next-ranked countries
- **Superblocks, Barcelona** — reorganized city blocks to prioritize pedestrians and cyclists, reducing traffic, noise, and air pollution while increasing public space; evaluations found a 25% drop in nitrogen dioxide in the Sant Antoni superblock and increased community activity

Honest Caveats

- Infrastructure transformation takes decades physically. You cannot rebuild car-dependent suburbs into walkable communities overnight — the built environment is the most durable artifact of any civilization, and changing it requires sustained commitment across generations.
- Rural and remote communities will still need personal vehicles. Public transit serves density; for low-density areas, shared electric vehicles and on-demand services are necessary complements, not substitutes for transit that physically cannot be justified for three houses on a country road.
- Cultural attachment to the private automobile is strong, particularly in the US, Australia, and parts of the developing world where car ownership signals achievement. This attachment will shift as alternatives become reliable and convenient — but it shifts at the speed of culture, not policy.

- High-speed rail and transit infrastructure require enormous upfront commitments of labour, materials, energy, and construction time. The benefits arrive over decades, not quarters — which is precisely why today's market-based systems underinvest in it.
- The automotive industry — manufacturing, sales, repair, insurance, fuel — employs millions of people worldwide. The transition creates different work (transit operation, infrastructure maintenance, cycling infrastructure), and once it is complete, a car salesperson's or claims adjuster's survival no longer hinges on that role; the work week is projected to settle around 15–17 hours. But whole towns built around a plant or a refinery will feel the loss of shared identity and rhythm. The shift must be managed deliberately, with counselling, retraining, and community-level support — including new places and forums for people to gather, since a workplace is often a town's social centre — so that no one is left to absorb it alone.

Conflict Resolution and Justice

Now

Adversarial system. Plea bargains produce roughly 95-98% of criminal convictions, with asymmetric bargaining power. Civil cases favor those with resources. Incarceration rates high. Recidivism rates high. Communities further damaged by loss of members.

In everyday terms: you can't afford a lawyer. The public defender has 400 other cases. The prosecutor offers a plea deal — plead guilty to a lesser charge and get two years, or go to trial and risk twenty. You take the deal. You didn't do what they said you did, but you couldn't afford to prove it. You serve your time, come out with a record that locks you out of housing and employment, and the cycle tightens. Your family survived without you, barely. The system calls this justice.

After

Response appropriate to the harm: restorative process for interpersonal conflict, mental health response for crisis, community mediation for disputes, trained intervention for genuine danger. The person who was harmed is centered — their needs, their recovery, their voice. The person who caused harm is held accountable with restoration as the goal: understanding the impact, repairing what can be repaired, demonstrating change. Incarceration exists for people who are genuinely dangerous to others — and the conditions are humane, because the purpose is containment and rehabilitation, not punishment and warehousing.

In everyday terms: your neighbor stole from you. Instead of a court process that takes eighteen months and satisfies no one, you sit in a room with a trained mediator. Your neighbor hears what the theft cost you — not just the things that were taken, but the trust, the anxiety, the lock you now check three times. They return or replace what they took. They do community service. You get an apology that means something because it was earned through the process, not coerced by a plea deal. If they do it again, the response escalates. But most people, given this path, don't do it again.

What Changes: The Enabling Conditions

- **Response matched to the situation** — not every problem requires police; mental health crises, addiction, homelessness, and neighbor disputes each get the response appropriate to them
- **Restorative processes centered on the harmed party** — the question is "what do you need to be made whole?" not "what punishment does the law prescribe?"
- **Root causes addressed** — poverty, addiction, untreated trauma, and housing instability contribute to many offences and recurring cycles of harm; addressing them reliably prevents more harm than punishment does (people living with mental illness are more often victims of violence than perpetrators)
- **Due process structurally protected** — community-based justice without procedural safeguards becomes mob justice; the system must guarantee rights, representation, and appeal
- **Incarceration as last resort, with humane conditions** — for people who are genuinely dangerous, containment is necessary; degradation is not

Follow the Resources

NOW: The US spends over $300 billion annually on criminal justice — policing, courts, and incarceration. It incarcerates nearly 2 million people, more than any other country. Among people released from state prisons, 43% are rearrested within the first year and 77% within five years. The US has about 4% of the world's population and nearly 20% of its prisoners. The two largest private prison and detention companies took in nearly $1.2 billion in combined revenue in a single quarter of 2025 — an industry whose profit depends on keeping beds full. State spending on public defense runs at roughly one-third the level of prosecutors' budgets.

AFTER: The vast majority of current criminal justice effort is consumed by responses to poverty-driven offenses, drug offenses, and cycles of reincarceration that the system itself perpetuates. In today's systems, restorative justice programs typically cost a fraction of incarceration per case while producing lower reoffending rates — a sign of how many fewer guards, cells, and court hours they require. The people, buildings, and working hours currently absorbed by mass incarceration are redirected into prevention, treatment, community safety, and the lives of the millions of people currently locked up for offenses that restorative systems handle better.

Real-World Precedents

- **Norway** — maximum prison sentence of 21 years for most offenses (with extensions only for continued danger); prisons emphasize rehabilitation, education, and preparation for reentry; two-year reconviction rates of roughly 16-20%, compared to 77% of released US prisoners rearrested within five years (the measures differ, but the gap is vast)
- **New Zealand** — Māori-informed restorative practices, including family group conferences, incorporated into the formal justice system, particularly for youth offenders; offenders who went through restorative justice conferences had a 12% lower reoffending rate and committed 23% fewer offences than comparable offenders
- **Portugal** — decriminalized personal drug use in 2001; drug use did not rise significantly, while problematic use, drug-related harms, and prison overcrowding fell, including sharp declines in HIV infections among people who use drugs; police resources redirected to trafficking
- **CAHOOTS, Eugene, Oregon** — from 1989 to 2025, a mobile crisis intervention team (medic + crisis worker, no police) responded to mental health calls; it handled roughly 17% of the Eugene police call volume, requesting police backup in about 1% of cases; the Eugene service shut down in 2025 after chronic underfunding — a reminder that proven alternatives still depend on sustained public commitment
- **Rwanda's Gacaca courts** — community-based courts processed nearly 2 million genocide-related cases in a decade, a caseload far beyond the capacity of conventional courts; imperfect, with documented fair-trial shortcomings, but enabled a society to function again

Honest Caveats

- Restorative justice works well for property crime, interpersonal conflict, and many violent offenses where the person who caused harm is willing to engage. Violent predatory behavior raises harder questions — some people are genuinely dangerous, and community-based processes must not pressure victims to "reconcile" with people who terrorized them.
- Community-based justice can reproduce local power dynamics. A restorative process facilitated by people who share the perpetrator's biases can fail the victim worse than a formal court. Procedural safeguards, trained facilitators, and appeal mechanisms are essential, not optional.
- Cultural expectations about punishment are deeply ingrained. Many people — including many victims — feel that serious harm deserves punitive consequences. Shifting from retribution to restoration is a generational cultural change, not a policy switch.
- The prison system employs roughly 530,000 people in the US (corrections officers, administrators, private prison staff), and most of those jobs disappear in a system that incarcerates far fewer people. Their families' housing, food, and care won't depend on those paychecks once the transition is complete, and the shorter projected work week leaves time to retrain. But many corrections officers carry occupational trauma, and many come from towns where

the prison is the main employer and a source of identity. Trauma-informed counselling, retraining, and peer support from people who made the same shift are essential, along with help rebuilding the social ties that a shared workplace provided and finding roles that draw on each person's strengths and interests.
- Abolishing cash bail, reducing incarceration, and implementing restorative justice are all demonstrably effective — but they require communities to accept risk. Some people who are released will reoffend. The question is whether the overall harm is less than the current system produces. The evidence says it is, but the individual case always looms larger than the statistical pattern.

Civic Decision-Making

Now

Decision-making favors parties with resources: lobbyists, lawyers, communications professionals. Most citizens learn what was decided after the fact. Trust erodes. Polarization increases as shared deliberation becomes rare.

In everyday terms: a company wants to build a chemical plant near your neighborhood. They've hired lobbyists, lawyers, and PR firms. You have evenings and weekends to read a 400-page environmental impact statement — if you can find it. By the time you organize a response, the permits are approved. The decision was made by people you never met, in a process you never knew about, using rules that were written to favor the applicant. You find out when the construction trucks arrive.

After

A representative sample of residents is convened — randomly selected, like jury duty, but with dedicated time, full release from their usual responsibilities, and access to independent experts of their own choosing. They hear from the community, from technical specialists, from people who've lived near similar facilities. They deliberate. They decide. The decision is binding — within firm limits: no local assembly may override fundamental rights, disregard established safety requirements, or impose harms and externalities on neighbouring communities, and binding decisions remain reviewable for those limited purposes. The process takes weeks, not years — and when it's done, the community knows why the decision was made, because the people who made it are their neighbors.

In everyday terms: you might be selected to serve on a citizens' assembly this year. If you are, you're freed from your regular responsibilities for the duration. You're given real information — not campaign ads, not lobbyist talking points — and time to think about it with other people who live where you live. Your decision matters. And because you were randomly selected rather than elected, no campaign put you in your seat, and no backer can threaten to take it away.

What Changes: The Enabling Conditions

- **Sortition (random selection) replaces election for many deliberative functions** — the same principle as jury duty, extended to policy questions: representative samples instead of self-selected candidates
- **Dedicated time and support for deliberation** — participants are freed from their regular responsibilities, given expert briefings, and fully supported for the duration; deliberation is treated as civic contribution, not volunteer burden
- **Lobbying eliminated as a structural feature** — when decisions are made by randomly selected citizens rather than elected officials dependent on donors, the influence pipeline breaks
- **Transparency as default** — deliberations are recorded, reasoning is published, and the connection between evidence and decision is visible
- **Subsidiarity** — decisions are made at the most local level that makes sense; your block decides about your block, your region about your region; no decision is made at a higher level than necessary

Follow the Resources

NOW: US federal lobbying alone reached a record $4.4 billion in 2024. Federal elections alone cost about $15 billion in 2020 and a projected $15.9 billion in 2024, before counting state and local races. Political advertising consumed over $8 billion in the 2020 cycle. These resources don't produce better decisions — they produce decisions that favor the parties with the most resources to spend. The revolving door between government and industry means that the people writing regulations often move to the companies those regulations govern, and vice versa.

AFTER: The labour, media capacity, and public attention consumed by lobbying, campaign fundraising, political advertising, and the revolving door between government and industry return to the communities that produced them. Even within today's economies, citizens' assemblies require a fraction of what elections consume — Ireland's 2016-2018 Citizens' Assembly, which took up abortion along with four other topics, cost about €2.4 million in total and resolved a constitutional question that had paralyzed elected politics for decades.

Real-World Precedents

- **Ireland's Citizens' Assembly (2016-2018)** — 99 randomly selected citizens deliberated on abortion, aging, climate, and parliamentary reform; their recommendations on abortion led to a constitutional referendum that passed with 66% support; a question that had paralyzed elected politics for 35 years was resolved in 18 months
- **France's Citizens' Convention on Climate (2019-2020)** — 150 randomly selected citizens produced 149 proposals for reducing greenhouse gas emissions; around 20% were enacted in full and around 40% in modified form, mostly through the 2021 Climate and Resilience Law; demonstrated that ordinary people, given time and expertise, produce sophisticated policy — and that elected institutions can still blunt it
- **Iceland's constitutional reform (2010-2013)** — after the financial crisis, a 25-member constitutional council was drawn from the top vote-getters among 522 citizen candidates (sitting ministers and members of parliament were ineligible); they drafted a new constitution through an open, participatory process; two-thirds of voters endorsed it in a 2012 advisory referendum, but parliament never ratified it
- **British Columbia's Citizens' Assembly on Electoral Reform (2004)** — 160 randomly selected citizens studied electoral systems for a year and recommended a specific reform; the process demonstrated that non-experts can engage complex institutional design at high levels of sophistication
- **Porto Alegre, Brazil — participatory budgeting (since 1989)** — residents directly decide how a portion of the municipal budget is spent; over 11,000 participatory budgeting processes now operate in 71 countries

Honest Caveats

- Citizens' assemblies are deliberately slow. Urgent decisions — emergency response, time-sensitive international negotiations — cannot wait for a deliberative process. Some form of executive authority for genuine emergencies is necessary, with clear boundaries and accountability.
- Participation fatigue is real. Not everyone wants to deliberate on every issue. Assembly service should be a rotation, like jury duty — a periodic civic contribution, not a permanent second job. Most people engage seriously when called; most also appreciate when their term ends.
- Expert knowledge matters. Some decisions — infrastructure engineering, medical regulation, environmental chemistry — require technical understanding. Assemblies need access to independent expertise, and the process must distinguish between "what should we do?" (a values question citizens can answer) and "how do we do it safely?" (a technical question experts should answer).
- Local governance can be captured by local elites just as national governance can be captured by national ones. Sortition helps, but community dynamics — who speaks confidently, who defers, whose voice carries weight — don't disappear with random selection. Skilled facilitation is essential.
- Scaling from local assemblies to national and international coordination is the hardest unsolved problem. The precedents are promising at the national level (Ireland, France) but the model for global coordination — climate, migration, trade — is still emerging.

Science and Research

Now

Over 40% of research time on grant-writing and administration. Publish-or-perish drives quantity over depth. Research locked behind paywalls. Replication studies underfunded. Negative results unpublished. Commercial pressures shape what gets studied.

In everyday terms: a cancer researcher spends half her time writing grant proposals instead of running experiments. The experiments she does run are shaped by what funding agencies will approve — safe, incremental work with predictable outcomes. She publishes in a journal that charges $40 per article to read, meaning the public whose taxes funded the research can't access it. When her experiment fails to produce the expected result, the failure — which is genuinely useful scientific information — goes unpublished because no journal wants it. She knows that a more promising line of inquiry exists, but it's too speculative for the current grant cycle. She writes the safe proposal instead.

After

Researchers receive stable support — enough to pursue their work without competing for survival every grant cycle. What they study is guided by curiosity, demonstrated need, and peer assessment of what matters — not by which questions have commercial applications or fit a funder's priorities. All findings — including negative results and replications — are published openly. A promising line of inquiry doesn't die because no one will commit the people, time, and equipment to it.

In everyday terms: the same researcher spends her time doing research. She follows the promising lead. When the experiment produces a null result, she publishes it — because knowing what doesn't work is as important as knowing what does, and the system recognizes that. Her papers are freely accessible to anyone on earth with an internet connection. She collaborates with researchers in other countries without navigating intellectual property restrictions. The work goes where the questions lead.

What Changes: The Enabling Conditions

- **Stable, long-term research support** — researchers given lab space, equipment, materials, and assistants on multi-year cycles based on track record and peer-assessed promise, not annual competitions for narrow project grants
- **Open access as default** — all publicly supported research published freely; paywalls eliminated; knowledge treated as a commons
- **Negative results and replications valued** — journals and institutions reward all rigorous work, not just novel positive findings
- **Commercial pressure removed from research direction** — what gets studied is determined by scientific importance and human need, not by potential return on investment
- **International collaboration unencumbered** — researchers share data, methods, and findings without intellectual property restrictions or national-security gatekeeping (beyond genuine safety concerns)

Follow the Resources

NOW: US federal R&D funding totals roughly $190 billion per year. Researchers on federally funded projects report spending an average of 44% of their research time on grant administration and compliance rather than research. The academic publishing industry generates over £19 billion annually — much of it paid by the same institutions that produced the research, to read the work their own employees wrote. Elsevier, the largest publisher, reported a 36% profit margin on its scientific publishing in 2010 — higher than Apple, Google, or Amazon that year. The "replication crisis" — the discovery that a large proportion of published results cannot be reproduced — has undermined public confidence in science. In a Nature survey, more than 70% of researchers reported having tried and failed to reproduce another scientist's experiments.

AFTER: The more than 40% of research time currently consumed by grant-writing and administration flows directly into research. Today's multibillion-dollar publishing industry is replaced by open-access infrastructure that needs a fraction of

the servers, staff, and administrative labour. Stable support allows researchers to pursue longer-term, riskier, and more fundamental questions — the kind that produce breakthroughs, which by definition cannot be predicted or scheduled on a grant timeline.

Real-World Precedents

- **Howard Hughes Medical Institute** — funds investigators, not projects; researchers receive seven-year terms, renewable indefinitely after review, to follow their best scientific judgment; more than 30 current or emeritus investigators have won Nobel Prizes, and a controlled comparison found HHMI investigators produce high-impact papers at a much higher rate than similarly accomplished NIH-funded peers
- **Germany's Max Planck Society** — 85 institutes and research facilities, stable long-term funding, director-led research programs; more than 20 Nobel laureates since its founding in 1948; demonstrates that investigator-driven research at scale produces transformative science
- **Bell Labs (1925-1990s heyday)** — stable corporate funding without short-term commercial pressure produced the transistor, information theory, the laser, Unix, C programming language, and 10 Nobel Prizes; collapsed when AT&T's breakup imposed market discipline on research
- **Open-access movement** — PLOS, arXiv, bioRxiv, and Plan S (European funders' mandate for open access) demonstrate that high-quality peer-reviewed science can operate without paywall-funded publishing
- **CERN** — international particle physics laboratory run by 25 member states; operates as a scientific commons; invented the World Wide Web as a side effect of solving a data-sharing problem; demonstrates that publicly funded international collaboration produces infrastructure that benefits all of humanity

Honest Caveats

- Stable support without accountability can reduce urgency. Some researchers produce more under deadline pressure; some important work happens because a grant cycle forced a decision. The HHMI model addresses this through rigorous periodic review — support is long-term but not unconditional.
- Basic research produces unpredictable returns. Some supported work will produce nothing that anyone can use, and that is inherent to the enterprise. The public must understand and accept this — but researchers must also be honest about what their work has and hasn't accomplished.
- Peer review has known problems regardless of how research is supported: conservatism (reviewers favor conventional ideas), old-boy networks, disciplinary insularity, and bias against researchers from less prestigious institutions. Changing how research is supported doesn't fix peer review — that requires its own reform.
- Applied research — engineering, clinical medicine, agriculture — genuinely benefits from practical pressure. Removing all connection between research and real-world application risks academic insularity. The balance between curiosity-driven and need-driven research requires ongoing attention.
- Some research (weapons, surveillance, gain-of-function pathogen research) raises genuine safety and ethical questions that don't disappear when commercial pressure does. Governance of dangerous research remains necessary and difficult.

End-of-Life Care

Now

Terminal diagnosis. Navigate insurance, treatment options, and financial implications simultaneously. Family members leave employment, lose healthcare. Medical bankruptcies accumulate. Final months dominated by financial fear. The bereaved deal with financial aftermath atop grief.

In everyday terms: your mother is dying. You want to be with her. But if you leave work, you lose your income — and possibly your own health insurance. You call the insurance company to find out what's covered; they put you on hold for forty-five minutes. The hospice your mother's doctor recommended is out of network. The one that's in network has a six-

week waitlist. You do the math on your savings and realize you can't afford more than three months of this. Your mother notices you checking your phone. She knows what you're looking at. She tells you she doesn't want to be a burden. She means it. That sentence — "I don't want to be a burden" — is spoken by millions of dying people every year. Very often, it is not only an emotional or medical statement. It is also a financial one.

After

The same diagnosis. The doctors explain the options — treatment, palliative care, hospice — based on medical and human considerations, without financial overlay. You take time from your responsibilities to be with your mother; your standing and your community role are unaffected. Professional caregivers support you both at home if that's where she wants to be. Hospice is available without a waitlist, without a network, without a coverage question. The final time is what it should be: presence, love, the work of saying goodbye.

In everyday terms: your mother says "I'm glad you're here." Not "I don't want to be a burden." That's the difference.

What Changes: The Enabling Conditions

- **Palliative and hospice care universally available** — every person has access to comfort-focused care at the end of life, at home or in a facility, with no financial barrier because money plays no role
- **Caregiving recognized and supported** — family members who provide care do so without losing their livelihood, their housing, or their own healthcare
- **Medical decisions made on medical and human grounds** — no insurance authorization, no network restrictions, no financial calculus between treatment options
- **Death treated as a human passage, not an administrative event** — the bureaucracy of billing, claims, and estate-related debt collection ceases to exist alongside the dying process
- **Community support structures for grief** — bereavement support, practical help for survivors, and time to grieve without economic punishment

Follow the Resources

NOW: End-of-life care in the US cost an estimated $205 billion in 2011 — roughly 13% of personal health care spending, concentrated in the final year of life. Of that, a significant portion goes to aggressive interventions that neither extend life meaningfully nor improve its quality, driven partly by the incentive structure of fee-for-service medicine. Traditional Medicare spent an average of $34,529 per senior who died in 2014 — almost four times the cost for survivors; roughly a quarter of its spending goes to the last year of life. Meanwhile, only about half of Medicare decedents receive hospice care, and many are referred too late (median hospice stay is just 18 days). Family caregivers provide an estimated $600 billion per year in unpaid care — disproportionately women, disproportionately at cost to their own health and financial security.

AFTER: Clinical staff, equipment, and hospital beds shift from aggressive end-of-life interventions toward palliative care, hospice, and family support. Even in today's economies, countries with universal hospice access (UK, Australia, most of Western Europe) receive top expert ratings for quality of dying while spending far less per capita on health care than the US. The immense amount of family caregiving that today goes unrecognized (valued at roughly $600 billion a year in the US) is recognized and supported with respite, professional help at home, and time — not as a favor to caregivers, but because the alternative (institutional care for everyone) demands more staff and facilities and produces worse outcomes. The dying process asks far less of everyone when it is allowed to be a human process rather than a medical billing event.

Real-World Precedents

- **United Kingdom** — the modern hospice movement began here with Cicely Saunders's St Christopher's Hospice (1967); the NHS provides universal access to palliative care; the UK ranked first among 81 countries in a 2021 expert assessment of end-of-life care quality

- **Japan** — combination of universal healthcare, strong cultural emphasis on family caregiving, and formal Long-Term Care Insurance (introduced 2000) that provides professional in-home support; family caregivers are supplemented, not replaced
- **Costa Rica** — universal healthcare provides end-of-life care as part of the public system; the only non-high-income country to receive an A grade for end-of-life care in the 2021 cross-country assessment; life expectancy exceeds that of the US at a fraction of per-capita spending; community-based care is culturally embedded
- **Kerala, India** — the Neighborhood Network in Palliative Care (NNPC) trains community volunteers to provide home-based palliative care; by 2007 its more than 60 units covered over 12 million people — probably the largest community-owned palliative care network in the world; demonstrates that quality end-of-life care is possible even at modest resource levels
- **Australia** — Medicare-funded palliative care available nationally; government-funded research program on quality of dying; among the six countries graded A for end-of-life care quality in 2021

Honest Caveats

- Universal palliative care requires trained personnel — palliative medicine specialists, hospice nurses, social workers — who cannot be produced quickly. Most countries, including wealthy ones, face shortages in palliative care workforce. Building capacity takes years of training and institutional development.
- Cultural attitudes toward death vary enormously. Some communities prefer home deaths; others prefer hospital deaths. Some cultures discuss death openly; others consider it taboo. One model of "good dying" cannot be imposed — the system must be flexible enough to honor diverse practices.
- End-of-life medical ethics involve genuinely difficult choices — about withdrawal of treatment, about assisted dying, about the boundary between palliative care and euthanasia — that no system eliminates. These are human questions that require human deliberation, and different communities will reach different answers.
- Caregiver burnout exists in every system, including systems with strong professional support. Caring for a dying person is emotionally exhausting regardless of material or institutional support. Community support helps but cannot eliminate the fundamental difficulty of the experience.
- The transition from fee-for-service medicine (which financially incentivizes treatment) to comfort-focused care (which sometimes means stopping treatment) requires physicians, families, and institutions to change deeply embedded habits. The shift is cultural and generational, not just structural.