Katarzyna Gajewska
k.gajewska_comm[at]zoho.com

Future of work in basic income and post-employment system: scenario of peer production of the public health\(^2\) and a happier society


Citation from Erich Fromm:

“(…) mental health cannot be defined in terms of the “adjustment” of the individual to his society, but, on the contrary, that it must be defined in terms of the adjustment of society to the needs of man,[sic] of its role in furthering and hindering the development of mental health. Whether or not the individual is healthy, is primarily not an individual matter, but depends on the structure of his society. A healthy society furthers man's capacity to love his fellow men, to work creatively, to develop reason and objectivity, to have a sense of self which is based on the experience of his own productive powers. (...) Society can have both functions; it can further man's healthy development, and it can hinder it; in fact most societies do both, and the question is only to what degree and in what directions their positive and negative influence is exercised.”\(^3\)

\(^1\) Bio: Katarzyna Gajewska, PhD, is an independent scholar and futurist writer (Facebook: Katarzyna Gajewska - Independent Scholar). She has been publishing on alternative economy, non-digital peer production, food and health in the political and economic context, universal basic income, and collective autonomy since 2013 and is mainly interested in psychological and emotional aspects of transition to a postcapitalist society. If you would like to support her independent research and analysis, please, make a donation: [https://donorbox.org/8eb3bef5-46b7-47b2-85c2-f42af7c4df3c](https://donorbox.org/8eb3bef5-46b7-47b2-85c2-f42af7c4df3c) She is available for consulting and research collaboration.


Abstract

This paper will argue that a basic income (the version of a UBI that allows a decent living) should be accompanied by additional health measures and services to complement the existing ones. The scenario will provide a vision of UBI society coherent with degrowth paradigm and inspired by writings of André Gorz, Ivan Illich, and Erich Fromm.

I will explore health (care) outside of the institutionalized domain of state or private medical services or professional alternative and complementary medicine. I will not deal with any reforms in these sectors or propose to replace them. Instead, I will propose additional measures, namely peer production of nonprofessional services outside of state or market provision. UBI can free energy to engage in preventive approach to health and thus a better use of resources. I identify three realms of everyday life that result in poor health outcomes: food, perinatal and infant care, and loneliness. The paper will be an invitation to imagine new organizational structures to promote health.

The major part of this paper will focus on the reasons to introduce additional platforms to produce health. The rest will imagine some examples of such nonprofessional services and outline a research agenda to advance this scenario.

Introduction: UBI as a transformation of society

UBI in various versions is supported by a very wide ideological spectrum, therefore the debate on this reform needs to be buttressed by more detailed visions of each version and predictions on the consequences for the citizens (a scenario). A UBI should be considered as a reform package because depending on the vision underlying this reform a compatible with this vision restructuring or creating of state institutions or other legal changes is required. A UBI enabling a decent living standard needs a compatible organization of society to sustain the liberation from being employed. It is crucial to define the organization of services of public interest to have a fuller picture.

The public debate on UBI is an occasion to consider what enables people to live their full potential. According to the above citation by Erich Fromm, the society should consider how to adapt to this goal. Scott Santens gathers evidence from physiology, addiction and stress research to argue for UBI as a health-inducing measure. Study of brain functioning reveals that living in poverty changes brain structure. There is a high potential for improvement just with the simple measure of money redistribution. However, one can think of additional measures accompanying a UBI to foster this effect. While a UBI addresses the basic need of security, it does not automatically meet other human needs relevant to good health and happiness. In the article on UBI and substance addiction I elaborate on a broader vision needed to prevent addictions. In public consultation on UBI in Ontario, other actions beyond money allocation have been proposed. To assess the benefits of a UBI experiment, participants of the consultation proposed to measure (among others) health care wait times, mental health, rates of addiction, visits to hospital and doctors’ offices.

---


Bergman argues that, in comparison to a UBI, Scandinavian type of welfare state better responds to the needs of the poorest population. However, the dilemma between means-tested and specific aids or basic income may be a false dilemma. A comprehensive analysis of UBI should take into account potential savings generated by improved governance thanks to citizen involvement and possible innovations in producing wellbeing.

Health in the structural context

With or without a UBI, developed countries will face several challenges in the realm of public health:

1) Increasing proportion of elderly and low expectation of remaining in good health. Environmental degradation and lifestyles inducing isolation are additional sources of health deterioration.

2) The automation of work may produce a situation of higher demand for public services than it is possible to cover from the exchange relationship with working population. This trend echoes the observation that there is a relationship between the state provision and the demand for labour. I elaborate on this argument in other academic articles.

3) Even now the inefficiencies of the current health system call for rethinking public health. UBI reform by freeing people from employment may create shortages in the execution of less attractive tasks. Despite automation in production, there are still tasks related to care that are human-intensive. Either working conditions in health care need to be improved or other ways of addressing health problems developed.

Technological unemployment generates divides within developed societies. The position in the society defines the accessibility to health services. At least five groups can be distinguished:

1) capital-owning elites, who have access to advanced technologies engineering health.

2) technological elites, who can pay high-end services from the service class.

3) wellbeing service providers supplying both groups with specialized services, which require high investment in personal development. Part of this market focuses on developing these skills.

4) people living mainly from a UBI by choice: they have high level of social capital and capacity for self-organization. They decide for voluntary asceticism and de-commodified strategies to meet their needs. They may have a world view coherent with peer to peer movement ideology that would make them want include the marginalized by chance. They supplement their UBI with precarious jobs.

---

6 The official website of the Ontario Government (no date): Basic Income consultations: What we heard, URL: [https://www.ontario.ca/page/basic-income-consultations-what-we-heard](https://www.ontario.ca/page/basic-income-consultations-what-we-heard)


10 Compare with Guy Standing’s classification of precariat.
5) people living from a UBI by chance/necessity: they have low level of social capital and may not have skills valued by the labour market or their calculation may lead them to the conclusion that they are better off prosuming for themselves.

The rest of the paper will focus on both latter groups of consumers (prosumers) of health-inducing measures: those living on a UBI by choice or by chance.

**Why we need a new approach to health? The limits of current system**

Current system of meeting human needs in the area of subsistence and health care has at least three disadvantages:

1) Wrong incentives and negative externalities: Divide between producers and consumers produces waste in market system because producers are motivated to increase consumption and lower quality and some consumers cannot pay the prices. This situation leads to externalizing the costs. Increasing demand, for example in the domain of pharmacology, can be a way of extracting value from the society. Gajewska elaborated how, despite introducing a UBI, capitalist class domination would continue in the domain of the services of general interest and housing if other elements of the system were preserved. Consequently, the municipalization of core infrastructure, owning shares in cooperatives producing general interest services, or commoning of some services should be part of this reform. The term commonfare describes this approach.

2) The lack of connection through professionalization: Market and bureaucratic logic in organization of care services misses connection as part of care provision. Jean Liedloff refers to the experience of Loeb Center for Nursing and Rehabilitation in Montefiore Hospital in New York where meeting patients' emotional needs was part of the medical intervention, which led to shorter recovery periods. In this case, the need to talk and be in the center of attention was provided by the professionals in the Center. However, one can imagine that this function could be fulfilled by nonprofessional peers. Social cooperatives in Emilia Romagna (of which capital is the city Bologna), which are managed by their stakeholders, use volunteers in care. In this way, savings and a new quality are produced.

3) De-responsibilisation and the lack of transparency in professional health care: Ivan Illich elaborated on the consequences of putting too much trust into the health care system instead of empowering people for self-care that used to be

---

11 UBI is not only a way to liberate citizens from the necessity to be employed but it is also a response to the underemployment and automation of work. While in employment society the protection of subsistence is executed by workers through their potential withdrawal of work and stopping production, a UBI society needs a different form of protection. Gajewska elaborates this argument in other publications. Neoliberalism operates through the extraction of money by commodifying basic needs instead of using employment as a form of value extraction. Wealth extraction comes from property rights, real estates, rent, access to natural resources, urban infrastructure, land grabbing.


13 Gajewska, Katarzyna (May 2014) : UBI, Power Relations, and Housing Problem, http://basicincome.org.uk/2014/05/housing-power-land/

14 Gajewska, Katarzyna (11 February 2017) UBI needs peers to control services of general interest (part one), http://basicincome.org/news/2017/02/ubi-needs-peers-control-services-general-interest-part-one/


16 Jean Liedloff (1975) : The Continuum Concept: In Search of Happiness Lost. Addison-Wesley
part of community or family practice before the rise of professional medicine. Furthermore, he pointed to side effects of modern medical system. Across the wellbeing spectrum, there is a huge space between feeling good and fitting to medical diagnosis of being unable to work. Traumatic experiences can trigger symptoms that are unpredictable, temporary and do not fit a simple classification. Stigmatizing people by diagnosing them as unable to work may actually further aggravate the condition (think of vosebo effect – the opposite of placebo). All these difficult to classify states may result in addiction, isolation, exclusion. There is so much complexity in the dynamics of somatisation and emotionally induced diseases and we know more and more how food can influence mental states.

Such difficult to handle human conditions can be better addressed by an economic model and mode of production that consists of spaces for producing commons to include and through inclusion heal this part of population. A system of preventive health care and nutrition as peer-produced services can be part of the design of organizational structures to sustain the UBI society project. In this way, redistributing public money among citizens as a UBI allowance will help utilizing otherwise underutilized human resources and save medical expenses. Certainly, to prove this point an empirical research project with action research component is called for.

Proposal for a SCENARIO: PEER-PRODUCED COMPLEMENTARY FOOD AND PREVENTIVE HEALTH SYSTEM IN UBI SOCIETY

Imagine a world where people are paid a flat rate, basic income, which enables them to improve the functioning of governance of public services and produce services that would be difficult to organize as employment. Some tasks are better fulfilled in an alternative way than the one that can be provided by market and state system. The following part will elaborate on a new system of basic needs' provision, in contrast to market and state system.

Medicine beyond emergency and acute care: four approaches to health

I propose to distinguish between four types of health and happiness inducing measures:

- **Allophatic medicine** – usually somehow subsidized by the state, focused on emergency and acute care and mainly using surgeon and pharmacology interventions;

- **Alternative and complementary medicine** – professional non-invasive intervention including psychotherapy;

---

17 Carlo Borzaga from European Institute of Cooperative and Social Enterprises examined cost savings thanks to these arrangements. You can read about social cooperatives in Italy in John Restakis (2010) : Humanizing the Economy: Co-operatives in the Age of Capital. New Society Publishers.


20 A case study qualitative account can be found in Gabor Maté’s book : « When the Body Says No », which focuses mainly on auto-immune diseases. Other symptoms may be dreams, psychosomatic illness, and insomnia, which may express underlying unhappiness despite consciously thinking that one is happy, Erich Fromm (1956/1959) : The Sane Society. p. 296.

21 Mental Health Foundation Feeding Minds : The Impact of Food on Mental Health,
Peer support – Anonymous Alcoholics is the most known example; breastfeeding support (Liga Leche). Program called “Time Heals Network”22 in Helsinki time bank supports people with mental health problems related to isolation;

Peer-produced preventive health focused on basic needs - Pensioneers’ cooperatives in Germany23 use time bank system. Time banking is also present in food and health provision. (Ruby van der Wekken24 mentions use of time-banking in food provision in Germany, France, and Helsinki.) Amanda Divito Wilson25 gives an example of co-produced agriculture where customers can contribute with their work instead of paying for food. Park Slope Food Coop in Brooklyn is a consumer cooperative consisting of sixteen thousands members who make healthy food more affordable to themselves in exchange for three-hour monthly work commitment.

Each type of intervention is an important component of health production. However, the advantage of the latter is that it does not require being diagnosed or arriving at the state of needing help. This type of measures addresses the structure and functioning of the society, which potentially can be more effective than measures requiring individual responsibility. The conditions for thriving are created rather than symptoms addressed. Certainly, joining such initiatives requires individual discipline but having an organization in place makes it easier to contribute a little part. For example, in Park Slope Food Coop, each of 16,000 members needs to contribute 3 hours per month.

Governance efficiency thanks to a peer involvement

Democratizing services of general interest can induce a more rational use of resources. The example of kibbutz movement shows that the communalization of agricultural production: overcoming the separation between the producers and consumers has resulted in an optimal use of resources.26 One can envision several advantages for the quality and resource use if services were organized in a different way. Being a member of consumer cooperative concerned about the quality of one's food liberates energy and motivation because of the direct stake in quality that is not present in market or state bureaucracy. One can imagine similar effects if there would be more citizen involvement in the management of public spending. Furthermore, some services are difficult to organize in a professional manner or administrative organization of paying and supervising would be costly.

Preventive approach requires a more decentralized involvement. Some people may be available for contribution despite not being able to fit strict employment system. For example, low quality food produces the need for health care services paid by the public sector. Before healing or waiting until disease manifests itself, nutriment-rich food and the absorption of micronutriments needs to be assured. Before dealing with depression or other diseases related to loneliness, which generates

---

22 [http://www.aikaparantaa.net/english.html](http://www.aikaparantaa.net/english.html), Time heals
26 Example mentioned in Las Indias’ Manifesto.
costs for public health system\textsuperscript{27}, authorities should think of means to facilitate new encounters or developing skills related to sociability. Before treating the consequences of inadequate infant care and childhood trauma, it is better to address the needs of parents, infants, and children.

Governance system that allows citizen self-selected contribution requires a change in the organization of some services (mainly related to care), building new organizational structures to enable citizen contribution, and change the way public administration functions to enable citizens' spontaneous and self-selected contribution. The state needs to find creative ways of motivating citizens by structuring work in such a way that it is a source of fulfillment.

\textbf{Replacing coerced or rewarded participation with the paradigm of joy}

A UBI accompanied by commoning opportunities can become a new model of exchange and solidarity in an economic system. Certainly, some form of contribution by citizens living solely on basic income will be needed so that the working population (which may still have voting majority) wants to sustain the reform. Demonstrating how citizens who are not employed contribute (for example through media coverage of the aggregated output) is particularly relevant in countries where immigrants or ethnic minorities constitute high proportion of the population but face discrimination in the labor market. Support for populist and radical right movements may undermine the entire project of a UBI society. Therefore, the UBI introduction should be accompanied by a design of organizations that integrate the marginalized population in different forms of self-selected citizen involvement.

Resources that are now wasted by means-testing administration could be allocated for creating spaces where commons are produced. Instead of rewarding contributors with money would require a control system, a work experience in such spaces can be a source of fulfillment, rewarding and attractive in itself. Citizen control in public services as well as peer-produced goods and services that are not covered by the current system of public service may generate savings and prevention in health care and other public services. General access to such services, also by working population, and the positive resonance that such services may create would be an argument to sustain the UBI because of generalized exchange.\textsuperscript{28}

\textbf{Potential health benefits of engagement in peer production and nonprofessional services}

Physical health depends much on human relations and meaning. Bruce Anderson's theory based on “Rat Park” experiment conceptualizes that conditions of living can prevent addictions. In his view, human connection is an important preventive factor.\textsuperscript{29} So far peer-produced health services have concentrated on problems instead of their causes. For example, Finish researchers describe peer information exchange and peer support for addicted individuals.\textsuperscript{30} This helps to manage

\textsuperscript{27} George Monbiot summarizes some of the findings indicating the health costs: Monbiot, George (12 October 2016): Neoliberalism is creating loneliness. That’s what’s wrenching society apart, The Guardian, \url{https://www.theguardian.com/commentisfree/2016/oct/12/neoliberalism-creating-loneliness-wrenching-society-apart}


\textsuperscript{29} Icelandic experience of preventing alcohol and drug use among teenagers confirms these findings.

\textsuperscript{30} Tuukka Tammi, Tiia Ruokosalo, and Henna Vuorento (2012): From margin to margin: Peer-based public services in the addiction treatment field. In : Botero, Andrea (ed.) ; Paterson, Andrew (ed.) ; Saad-
addiction but does not address the roots of it. Furthermore, one needs to acknowledge being addicted to become a user of such services. One can imagine peer-produced services that work as prevention instead of managing symptoms.

State and market have liberated people from the need to have strong social ties and group solidarity\textsuperscript{31} but this leads to loneliness and alienation. The needs for meaning and community cannot be addressed by market or state. Festivals or personal development workshops can address the need to share and be part of a tribe at least periodically. However, the effect is temporal and they are usually accessible to individuals with a privileged social background.

Work for commons that generates positive feelings is a preventive health measure in itself.\textsuperscript{32} In an interview, I argue that a UBI combined with experimentations in work organization could heal the society from alienation and isolation that are roots of addictive consumption and other destructive behaviors.\textsuperscript{33} In an article on People’s Potato I elaborate on the potential health and wellbeing outcomes of organizing production as a self-selected contribution\textsuperscript{34} (see Appendix for case study). Helena Norberg-Hodge exemplifies in her book “Ancient Futures” how indigenous Ladakh society organized production in such a way that all people, including elderly, were included and could contribute at their pace and be part of a joyful community. She observed that, in this society, typical old-age diseases were rare and elders were well-integrated in this society, until death.\textsuperscript{35}

\textbf{A different quality of connection in nonprofessional approach}

The role of human connection has been proven to be crucial in healing or maintaining a good health.\textsuperscript{36} Hugging babies to prevent damages related to touch deprivation as is done by volunteers in US hospitals would not have the same quality if a hugger were paid by the hour and would be forced to come because of the necessity of making one's living or fulfilling community service to keep UBI. The more human-intensive a task is, the best it would be provided by self-selected individuals.

Carl R. Rogers initiated encounter groups in 1947 in the US. The aim was to provide a space of exploring oneself within a group. Although the groups were facilitated by a leader, this person integrated in the group and did not act as an expert. In the evaluation of this experiment of group therapy, Carl R. Rogers mentions that these groups addressed the need of “relationships which are close and real; in which feelings and emotions can be spontaneously expressed without first being carefully censored


\textsuperscript{32} See Gajewska’s post exploring personal benefits for participants in People’s Potato: Katarzyna Gajewska (9 June 2017): UBI needs peers (part three): Reconquering work – inspiration from People’s Potato. URL: \texttt{http://basicincome.org/news/2017/06/ubi-needs-peers-part-three-reconquering-work-inspiration-peoples-potato/}.

\textsuperscript{33} Gajewska, Katarzyna interviewed (January 2016) : Beyond temptation: Scholar discusses addiction and basic income - an interview: \texttt{http://www.basicincome.org/news/2016/01/beyond-temptation-scholar-discusses-addiction-and-basic-income/}

\textsuperscript{34} Katarzyna Gajewska (9 June 2017): UBI needs peers (part three): Reconquering work – inspiration from People’s Potato. URL: \texttt{http://basicincome.org/news/2017/06/ubi-needs-peers-part-three-reconquering-work-inspiration-peoples-potato/}.


\textsuperscript{36} Just to mention some examples where connection plays a role: recovery from postpartum depression (of which about 10 percent of mothers suffer) and addictions.
or bottled up; where deep experiences – disappointments and joys – can be shared; where new ways of behaving can be risked and tried out (...)."37 His experience shows that "incredible potential for helping resides in the ordinary untrained person, if only he feels the freedom to use it"38. His personal account summarizes the advantages of nonprofessional approach:

“If a very serious situation arises in a group, when an individual seems to be exhibiting psychotic behavior or is acting in a bizarre way, I learned to rely on the members of the group to be as therapeutic or more therapeutic than I am myself. Sometimes as a professional one gets caught up in labels (...). As a consequence, one tends to withdraw somewhat and deal with the person more as an object. The more naïve group member, however, continues to relate to the troubled person as a person [highlighted in original version], and this is in my experience far more therapeutic.”39

The example of group therapy shows that professional care has limits and nonprofessional settings can better serve healing and inclusion. One can imagine other situations where nonprofessional services would be more beneficial for the recipients. The fact that people are not paid directly for the services that they offer can produce better results.

Insiration from existing examples for a peer-produced healthier society

Currently operating peer to peer initiatives can help imagining a new system of peer-produced health focusing on prevention and basic needs. See the non-exhaustive list below. Meeting basic needs for contact and meaning happens as an altruistic help (cuddling babies40, Free Hugs initiative, volunteer services providing companionship for isolated people). Other experiences could inspire further ideas of peer-produced services. For example, Tamera (an intentional community of about 170 people in Portugal) develops a health care where talking in a group helps healing.41 Authorities in Portugal have developed an addiction recovery program that integrates patients into work collectives.42 A more decentralized health system in Cuba and Venezuela can be also an inspiration.43

Examples of innovation in services provision

40 Some US hospitals have volunteers hugging babies so that their basic need of touch and security is met if their mothers are not available for care.
41 https://www.tamera.org/fileadmin/PDF/Healing_Work_in_a_Healing_Biotope.pdf
Peer-prepared meals: Food Not Bombs groups all over the world. Aforementioned People’s Potato preparing free lunches is an example of a space that integrates people having difficulties in accessing social interactions and conviviality. In Lyon, there are neighborhood restaurants Les Petites Cantines.

- consumer purchase groups and platforms (p2p platform in Paris), participative cooperative supermarkets (NYC, Paris)
- Agriculture: Cuban urban agriculture and Incredible Edible initiative in Todmorden, UK, community garden in Berlin Tempelhof. Amanda Divito Wilson gives an example of co-produced agriculture.
- social cooperatives in Emilia Romagna
- elder care in Germany: Rentnergenossenschaften – pensioners' cooperatives functioning like a time bank46

- A group of Finish scholars describes peer public services such as peer information exchange and support for addicted individuals.

- time banking in food and health provision. Ruby van der Wekken mentions use of time-banking in food provision in Germany, France, and Helsinki. Program called “Time Heals Network” in Helsinki time bank supports people with mental health problems related to isolation.

- entire system initiatives: Catalan Integral Cooperative with preventive health care component and training for health facilitators, Toulouse Integral Cooperative (not sure at this point whether the initiative has advanced in organizing production)

**Imagining a new system of food provision to regain health: food coop model**

In the article “What would we eat if food and health were commons? – inspiration from indigenous populations,” I elaborate on modern society’s conundrum when it comes to food and health. Other authors show the impact of food on mental health. There are alternative ways of organizing around food distribution to help overcome the structural problems in the

---

44 Katarzyna Gajewska has conducted exploratory research on this cooking collective, which enables access to free lunches and creates a spontaneous and inclusive network for meaningful work contribution. Such collectives could be also a means for recovery of addicts. Authorities in Portugal have developed an addiction recovery program that integrates patients into work collectives to give them sense of belonging and purpose in life.


48 [http://www.aikaparantaa.net/english.html](http://www.aikaparantaa.net/english.html), Time heals coordinator Hanna Koppelomäki, aikaparantaa@aikaparantaa.net


The report can be found at www.mentalhealth.org.uk.
current system. For example, Brooklyn-based food cooperative, Park Slope Food Coop with about 16 thousands members-peers, ensures that members get lower prices in exchange for 3 hours per month work contribution.

Big-scale retail and the lack of communication between buyers and producers results in food waste at the stage of food distribution. Furthermore, retailers require producers to provide high quantity of supply to manage their logistics. This is a burden for small scale producers who can better apply biodiversity and complementaries between crops to increase productivity without being forced to use fertilizers and herbicides. In this way, the food distribution system shapes the agricultural production. The chemical substances used in big-scale agriculture are the source of pollution together with transportation involved in sourcing food outside of the vicinity.

Current system limits also accessibility of high quality food to low-income people because of high prices and the monetization of retail and distribution services. The transformation of labor market towards precarious employment or unemployment leaves many citizens with low financial resources. However, they may possess other resources such as skills and time to engage in peer production of retail services. By mobilizing other resources than money, this new food distribution system could help marginalized population to access high quality food despite a low income.

Such self-organization can also include education, creating own labels and standards, and even a research department testing food.

**Research questions to explore in-depth the scenario of UBI society with peer-produced health**

A scenario that would inspire democratic debate on UBI with peer-produced health needs to be enriched by primary and secondary (literature review) research. Scenario method helps to open the imagination for other ways of solving problems and prepares for possible problems related to the changes in the future. It is not about predicting the future but enriching analytical capacities.\(^{51}\) The creation of the images of the future can help to envision a desirable future and inspire change. Thanks to the scenario people may become more creative in the present actions.\(^{52}\) The scenarios may become relevant for organizations or planning authorities.\(^{53}\)

An empirical research on already existing initiatives can contribute more details to the scenario:

- What are the examples of citizen control over public infrastructures and infrastructures of general interest? What is the role of citizens and how are these participatory arrangements set up?
- How corporations that see commoning initiatives as a competition are dealt with?
- What are the experiences of commoning of services of general interest, mainly in the realm of food commons and preventive health, that can serve as examples of a complementary public services system in UBI society? How these structures


\(^{52}\) Slaughter RA. Futures beyond dystopia. Futures 1998; 30(10):993–1002.

are set up? What are the roles of different actors, such as public employees and consumers, in these initiatives? Which are the infrastructures involved and which problems are faced? How Partner State (see the concept by Michel Bauwens) will participate in this domain of provision of complementary services?

- How to organize work in such commoning initiatives so that citizens feel like participating without any additional rewards or coercion and the involvement is a source of joy and fulfillment? How to generate joy and commitment? In the context of this research question, the role of coordinators and possible training measures will be elaborated. The way joy-based work organization should look like is a crucial question in the debate on UBI. Research needs to describe kind of behaviors and ways of organizing work process so that work feels like an opposite to the employment.

The scenarios could help finding creative solutions by imagining how to organize services related to preventive nutrition and health (for example, producing nutriment rich soil, decentralized food monitoring, testing soil and mapping unused spaces). In this way, the expertise in agriculture, nutrition, physiology, positive psychology will be used to imagine peer production model in producing services that are not provided by state and market:

- What are the agriculture and food producing methods that best fit the peer-produced services model?
- What would a system of holistic peer-produced preventive health and well-being measures look like to reduce the public expenditures? Which preventive health measures do not require advanced knowledge or skills and can be executed in a decentralized way?

**While waiting for a UBI**

To be successful, a UBI reform needs to become a coherent vision buttressed by research and design of accompanying organizational structures. To prepare the grounds for its acceptance in the society, scenario-building and the images of this preferred future need to be worked out. UBI movement’s task is to demonstrate the advantages for the majority of the population who is not going to live on a UBI. The winning argument would not be about numbers but emotional well-being, happiness, good health. A preventive, deep approach to health and inclusion, of which a UBI would be a constitutive part, can benefit broader society not only the unemployable. As this paper and my other publications illustrate, examples of peer production and volunteering prove that work can be more inclusive than employment. UBI and peer production spaces can enrich the existing system of services of general interest by correcting and supplemeting the irrationalities and wrong incentives

---


55 Cp. Gajewska, Katarzyna (14 February 2017): What would we eat if food and health were commons? – inspiration from indigenous populations, P2P Foundation Blog, [https://blog.p2pfoundation.net/eat-food-health-commons-inspiration-indigenous-populations/2017/02/14](https://blog.p2pfoundation.net/eat-food-health-commons-inspiration-indigenous-populations/2017/02/14) In this post, she asks what are the cultural and structural obstacles to establishing a system of food and health commons in everyday life.
in the bureaucracy and market system. Dreaming, imagining, studying alternatives, experimenting, and thinking outside of the beaten path in the domain of work organization and basic needs organization is an important step towards a UBI society.

Susana Martín Belmonte proposes using alternative currencies to create exchange networks:

“We could start with expenses that governments never have the money to undertake, like preventive medicine. That would save conventional state money expenditures in health care, as well as saving the suffering of the people.”

She sees this as a way of providing basic subsistence similar to UBI concept:

“Basic income in complementary currency is being tested, for instance the social currency Moneda Demos, or the Universal Relative Dividend. I think this is definitely worth exploring. But where I think that complementary currencies could be of help the most is in providing a means of exchange for those new ways of production and consumption: for the self-provision of goods and services.” 56

The example of time banks that make services accessible shows that such service provision can emerge in the current system. The closest to this idea is a project of agriculture that allows time contribution as a form of payment for one's food described by Amanda Divito Wilson57 and cooperative supermarkets, such as Park Slope Food Coop in Brooklyn or La Louve in Paris.

APPENDIX: THE CASE OF PEOPLE'S POTATO – PEER-PRODUCED LUNCHES AND SOCIAL INTEGRATION

The following are excerpts from my article on People's Potato that has been published on basicincome.org58:

“Contributing work without barriers

Members-employees of the worker cooperative that manages People's Potato coordinate volunteers' work. Since economic survival does not depend on the volunteers, this removes the pressure typically found in commercial gastronomy or other traditional employment systems. Volunteers join the work process spontaneously and are assigned a task. It is possible to join or leave at any moment. Preparing food is organized in a modular way so that coordinators can easily find something to do for a volunteer. Inclusion is also fostered by the fact that each participant can decide their degree of involvement. For example, one can choose whether to contribute to governance decisions or not.

This very flexible way of organizing work at People's Potato generates more inclusion in work participation, opening it up to those who might not be able to work as an employee, nor find their place in worker cooperatives. Among volunteers, there are people with physical and mental handicaps. Part of People's Potato's anti-oppression policy is to create an environment of tolerance so that everyone can work at one's own pace. Many volunteers appreciated the flexibility that is possible in the involvement. For example, one volunteer – a busy student – enjoyed the fact

56 Susana Martín Belmonte (5 April 2017): Susana Martín Belmonte on de-commodification, abundance and capital for the commons. http://commonstransition.org/susana-martin-belmonte-on-de-commodification-abundance-and-capital-for-the-commons/


that the project can go on without her if she does not show up. She does not need to take on additional responsibility.

**Organizational framework for p2p production in the physical world**

Coordination is a crucial factor in sustaining spontaneous work. Cooking (and other services of general interest) requires time management, as well as obeying safety and hygiene regulations. In Montréal, past non-professional cooking collectives, which managed to peer produce food, were short-lived (see the article by Silvestro\(^5\)). However, some chapters of the international movement Food Not Bombs are quite successful. Certainly, these non-professional initiatives help advancing the practice and attitude of non-conditionality, both as a principle for redistribution and as a way to organize work contribution.

A worker cooperative runs people’s Potato. The cooperative takes care of administration, logistics, and financial tasks. Coordinators who are members of a worker cooperative provide a framework for spontaneous work contribution. They decide what meals to prepare and guide the process of food preparation. They are also responsible for volunteers’ training, information events, and celebration parties.

Fulfilling a coordinator’s job at People’s Potato requires a higher level of social skill than in traditional employment settings. One of the most important factors attracting volunteers is the kindness of coordinators and the perception that contributing at People’s Potato is different from traditional employment. This is reflected in the way volunteers are addressed. Staff always asks whether one “feels like doing” a certain task. Volunteer contribution is not taken for granted. However, one of the long-term volunteers that I interviewed said they felt unappreciated, and another one wished for more warmth. The former said that People’s Potato’s staff tends to forget that the volunteers are not paid for their contribution.

**Space and work process organization to accommodate volunteers**

Because of the flexibility of volunteer involvement, the number of volunteers fluctuates during the day. Just to illustrate with an observation of one Monday: at 11 am there were 8 volunteers in the kitchen, at the noon – 14, at 12:40 – 29, at 13:30 – 13, and at 14 – three volunteers were working. Altogether, the kitchen space can accommodate up to 40 volunteers.

The only perk for volunteers is the opportunity to eat in the kitchen rather than wait in the line outside. Many interviewees complained that there is not much space for the volunteers to eat lunch together. However, some contribute very little and eat in the kitchen. Coordinators must find a balance between disciplining and building an atmosphere that does not feel like a workplace. Too many rules may deter people from volunteering, and too little may frustrate committed volunteers.

Since volunteers associate People’s Potato with having fun and meeting people, some volunteers may forget that it is a space for work. One of the coordinators complained that people were kissing each other in the kitchen. The staff is also worried about too many people coming to the kitchen during lunch distribution. Working as a coordinator has distinct challenges, due to the number and fluctuation of people involved in cooking. They manage stress by rotating tasks between the kitchen and the office.
Anti-Oppression work at People’s Potato

People’s Potato defines itself as a hate-free space to bring people together without judgment or discrimination. For one interviewee who belongs to a racial and gender identification minority, this aspect of People’s Potato was crucial in choosing involvement. This person trusts that coordinators would react in cases of oppressive behavior in the kitchen. This person has experienced harassment in similar jobs as an employee in commercial gastronomy.

As I reported in another article, coordinators have a role to play in sustaining a positive atmosphere:

“The involvement of a high number of volunteers may be a challenge at times. There are situations when staff need to intervene because of an oppressive behavior among volunteers: instances of verbal aggression, offences, discriminatory comments, etc. Some volunteers, when asked to stop oppressive behaviour, may become frustrated or become quiet. Sometimes this results in volunteers getting upset and leaving the kitchen, though there is an attempt to establish the anti-oppressive politics without rejecting community members who don’t understand it fully.”

To read more on People’s Potato, see articles in World Future Review, P2P Foundation Blog, and basicincome.org