

Racism and Colonialism in Global Health

Dr Damilola Omodara

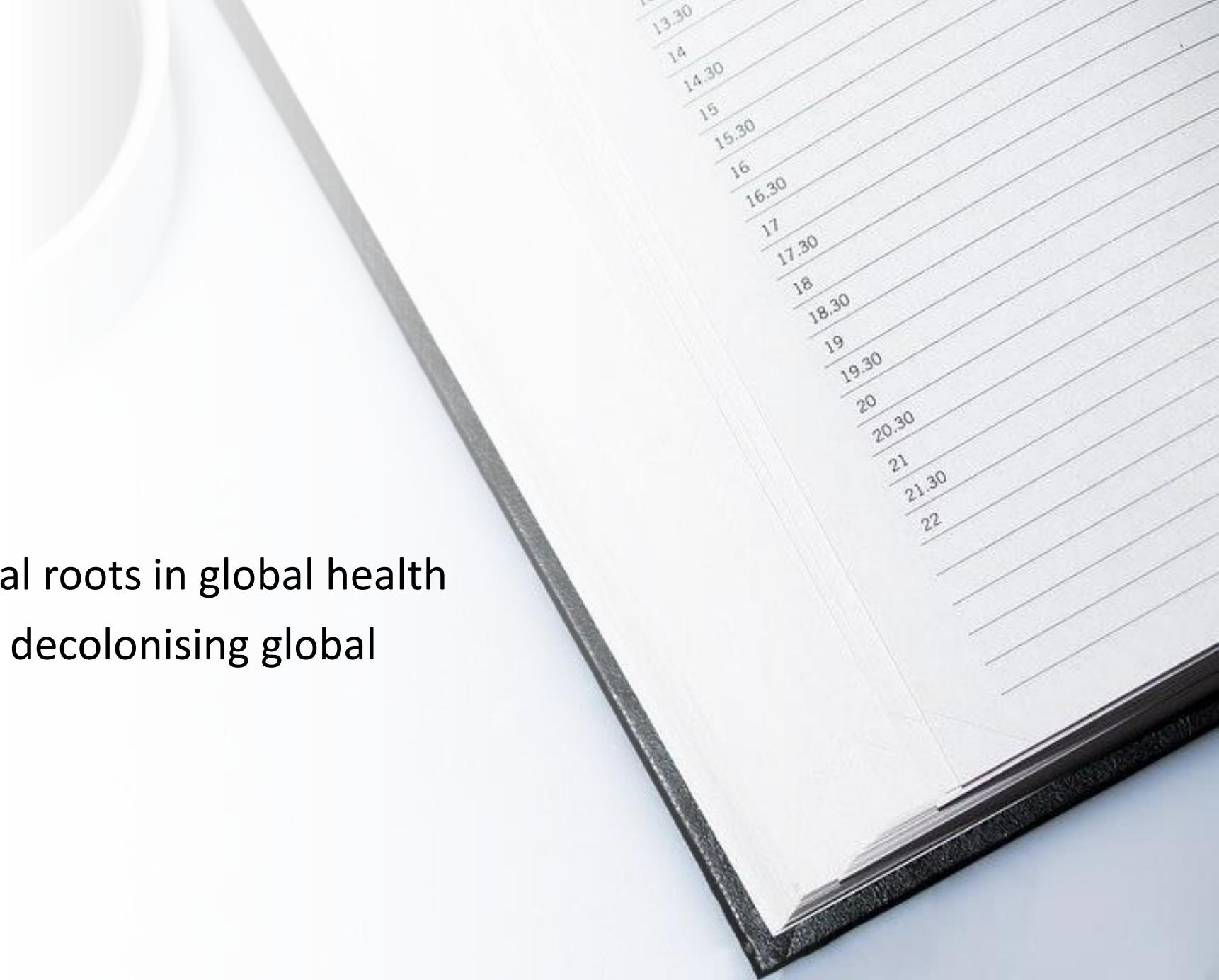


DEFEAT OF THE ASHANTEES.
BY THE BRITISH FORCES UNDER THE COMMAND OF COL. SUTHERLAND, JULY 25TH 1824.



Outline

- What is racism?
- What is colonialism?
- Understanding the Colonial roots in global health
- Why are we talking about decolonising global health



What is racism?

- **Race** is the classification of people into groups based on physical traits, ancestry, and social relations, or the relationships between them
- ***Social construction***
 - Mechanism of social division and stratification
- **Racism** is a system of structuring opportunity and assigning value based on the social interpretation of race.



Historical definitions of race shaped by medicine



Over time, many definitions and categorizations of race have emerged, some influenced by science and medicine. Each of these categorizations has served to perpetuate oppression, exploitation, and social inequality.

“Race is not a biological category that naturally produces these health disparities because of genetic difference. Race is a social category that has staggering biological consequences but because of the impact of social inequality on people’s health.”

--Dorothy Roberts

Roberts D. The problem with race-based medicine. TEDMED.

https://www.ted.com/talks/dorothy_roberts_the_problem_with_race_based_medicine.

The 4 levels of racism

Personal

(Private beliefs, implicit bias, prejudices, & ideas as an individual)

Interpersonal

(Expression of racism between individuals)

Institutional

(Discriminatory treatment, policies, practices and procedures within organisations)

Structural

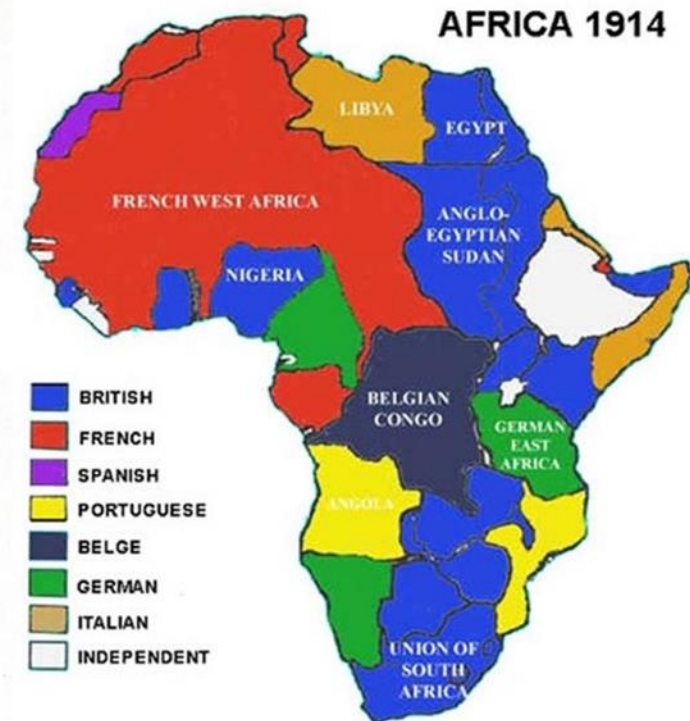
(System in which policies, practices and other norms perpetuate racial inequalities)

Understanding Colonialism and decolonisation

The force of Colonialism - Prominent anti-colonial thinkers have shown that far from purely a system of governance, the enduring power of ideas rooted in the management of empire affect social hierarchies and racial categories, state formation, the production of rights, as well as the roots of liberal democracy and the civil sphere today.

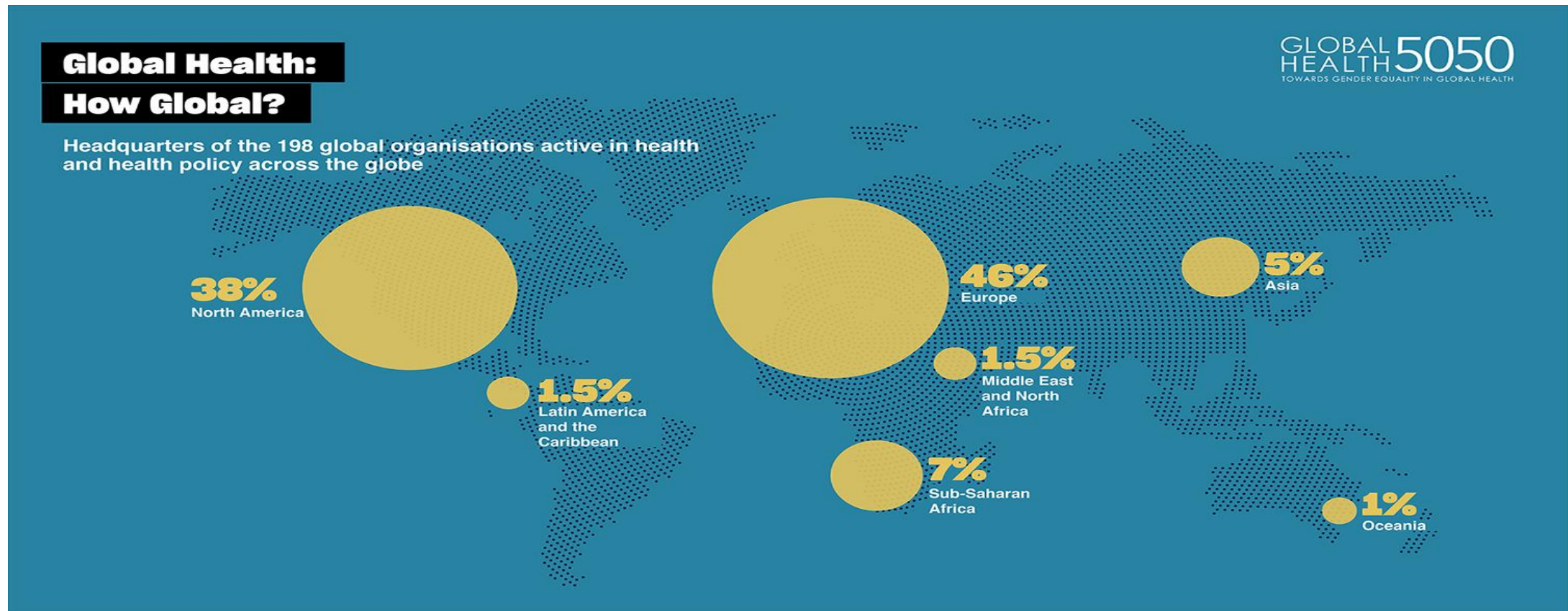
Re-thinking and deconstructing Eurocentric/western ideologies and practices that uphold coloniality as the power over people, lands, and knowledge is thus the main point of decolonization

The Treaty of Berlin in the 1880's "divided" Africa among European powers.



Global Health needs to be Global, Diverse and Equitable

How global is global health? GLOBAL HEALTH 50/50, 'THE GLOBAL HEALTH 50/50 REPORT 2020: POWER, PRIVILEGE AND PRIORITIES', LONDON, UK, 2020.



<https://globalhealth5050.org/2020report/>

Power and privilege in Global Health – GH5050

Profiles of power and privilege in global health

A closer look at the axes of power—including financial, normative, regional and for-profit—provides a more fine-tuned look at the profiles of the most influential actors in the global health ecosystem.



Colonial-era institutions: still set the agenda



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What happens when the voices of the marginalised is left unheard?





What are we seeking to decolonise?

- “If we keep erasing history we will always be lost, and not know what reparative actions are required to make the world a more equitable place,” Paul Farmer



Why does this all matter?

- If addressing inequities, especially in LMICs, is one of the central goals of global health, should we continue to entrust older, educated men from elite HIC institutions to lead us towards that goal? Do they truly represent the people being served? Are they close enough to the problem? Are they close enough to the solution?
- Unpacking leadership in global health through an intersectionality lens shows us who is in power.



What needs to change?

- “We need more honest reflection and politically-informed action moving forwards for equitable outcomes,” said Kent Buse, co-director of Global Health 50/50 and chief of strategic policy directions at UNAIDS.
- Those in the field of global health needs to ask the tough questions that are being asked in the broader arena of global economics and development (e.g. books such as *Winners Take All* and *The Divide*). If 22 of the world’s richest men have more wealth than all women in Africa, then the power imbalance in global health merely reflects deeper imbalance in the world at large
- Focusing our efforts on changing policies and culture among funding agencies.

What is next?

- When we think about racism and decolonising global health, we should not only think about the economic, political or institutional power at work but also the knowledge and perspectives they represent
- We must also question the fundamental assumption of the global health interventions when it comes to assigning and ascribing geographical or racial differences to the world
- Learn, and teach others
- Mitigate unconscious bias

What we say vs. what we do in global health



Equality



Equity



Decolonialisation

Let's talk about this!