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Deconstructing hegemonic epistemologies: an urgent call for anti-racist scholarship for health promotion and Black lives

J. Hope Corbin  
*Western Washington University*, hope.corbin@wwu.edu

Oliver Mweemba

Fungisai Gwanzura Ottemöller

Ann Pederson

Stephanie Leitch

*See next page for additional authors*

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Authors
J. Hope Corbin, Oliver Mweemba, Fungisai Gwanzura Ottemöller, Ann Pederson, Stephanie Leitch, Nikita Boston-Fisher, Tulani Francis L. Matenga, Peter Delobelle, Christa Ayele, and Josette Wicker

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Deconstructing hegemonic epistemologies: an urgent call for anti-racist scholarship for health promotion and Black lives

The year 2020, with its global pandemic, economic hardship, social isolation and violence has brought profound suffering, overdue learning and important opportunities. One such opportunity is the chance for the field of health promotion to unflinchingly commit to building and sustaining efforts to address the inequities so vividly illuminated by the COVID-19 pandemic—specifically, inequities experienced by Black communities.

COVID-19 is taking a disproportionate toll on Black communities the world over. Cities, countries and regions tracking such data are reporting drastically higher rates of infection, complications and deaths. Black people’s experiences of higher prevalence and more severe outcomes due to COVID-19 are not unlike the overrepresentation, earlier onset and increased mortality rates experienced by Black people for a plethora of conditions (including diabetes, hypertension, HIV/AIDS and respiratory diseases). These health inequities are not new and, indeed, reflect patterns of social, economic and political oppression that represent a continuing legacy from slavery and colonialism to the present day, impacting Africans, the African diaspora and their descendants in diverse global contexts. This pre-existing inequity is merely exacerbated in the face of the pandemic (for a much more detailed treatment of the impact of COVID-19 on the Black community, see Leitch et al., Forthcoming).

In addition to the horrors wreaked by COVID-19, Black communities worldwide have also confronted new examples of police brutality—the murder of George Floyd at the hands of Minneapolis police and then the subsequent police violence that ensued in response to protests (Amnesty International, 2020). These US events prompted a swelling of other protests and social unrest (and police retaliation) worldwide. Institutionalized violence toward Black people (it is also important to acknowledge the intersectional experience of oppression and how people who hold various gender, economic, able-bodied and other identities are multiplicatively impacted along these axes (Crenshaw, 1991)), like health inequity, is not a new phenomenon—indeed, these two are connected through a centuries-long historical legacy of slavery and colonialism. While many groups are marginalized and experience institutional violence (e.g. Indigenous peoples, LGBTQ+ communities and religious minorities), Black people experience a unique form of anti-Black racism and have been impacted by complex systems of intergenerational economic deprivation and social control. In the USA, for example, policies criminalizing Black people from slave patrols to Jim Crow to contemporary drug laws and mass incarceration continue in an unbroken timeline (Alexander, 2010).

What is new, however, is the sustained attention Black Lives Matter uprisings are commanding, especially of groups and institutions that have historically turned a blind eye. At the time of this writing in late August, Black Lives Matter protests have been ongoing in thousands of locations for over 3 months. The New York Times reported back in early July, that at that time, it was believed to be the largest social movement in US history (Buchanan et al., 2020). The current protests are also unique in the racial makeup of the protesters. The presence of large numbers of white protesters is indicative of a blossoming recognition that self-reflection and accountability is vital for social change.

This current moment challenges the field of health promotion to (re)commit itself to being on the frontlines of this fight. Through the upsurge of resources, action, and leadership of Black people, we can harness our scholarly efforts to find synergies for making a real difference in reducing the inequities experienced by Black people globally.
Health Promotion International, as the thought journal of the international health promotion movement, seeks ‘theoretical, methodological and activist advances to the field... the journal provides a unique focal point for articles of high quality that describe not only theories and concepts, research projects and policy formulation, but also planned and spontaneous activities, organizational change, as well as social and environmental development’. There are many areas of health promotion scholarship that we could apply to more adequately re-dress the inequities faced in Black communities, and even more areas we can develop.

As a field, we have worked consistently over 34 years to advance our understanding of and effectiveness in addressing inequity more broadly. But what existing theories, approaches and strategies can support the social change that Black communities have been articulating in response to racist hegemony? How can we use our privilege to meaningfully contribute to the health promotion antiracist canon to guide and shape the efforts of those working in the trenches? How can we apply theoretical frames such as Salutogenesis to better understand the intergenerational resilience of Black communities? What can we learn about successful organizing techniques and the mass mobilization of community members? How can we elevate and amplify the voices of Black scholars and leaders in our field?

We have a lot to learn about how our field can do better. For example, how are we complicit in reproducing the inequities experienced by Black communities in our methods and practices? How can we infuse our work with anti-racist sensibilities? We desperately need research on addressing anti-Black racism across sectors—education, employment, government, health, the media, industry, religious institutions, environmental agencies and community networks—and how doing so can impact health outcomes. We need critical theoretical frames which help health promoters reflect on the importance of decentering whiteness, the need to commit to Indigenous knowledge systems and ways of working that promote multiple epistemologies and liberating pedagogies. We also need to foster environments and create opportunities for nurturing Black students and health promoters in our institutions as we think of building and mentoring the future cadre of our profession. Their presence is critical for this work.

Fighting pandemics, human rights violations and promoting health equity and social justice are anti-racist projects that are fundamentally aligned with the core tenets of health promotion. Health Promotion International is committed to supporting justice movements with quality scholarship, so please submit yours today!

J. Hope Corbin
Deputy Editor-in-Chief, Health Promotion International, Western Washington University, USA

Oliver Mweemba
Editorial Board, Health Promotion International, University of Zambia, Lusaka, Zambia

Fungisai Gwanzura Ottemöller
Editorial Board, Health Promotion International, University of Bergen, Norway

Ann Pederson
Editorial Board, Health Promotion International, University of British Columbia and Simon Fraser University, Vancouver, Canada

Stephanie Leitch
IUHPE-NARO, University of the West Indies, Trinidad and Tobago

Nikita Boston-Fisher
IUHPE’s Student and Early Career Network and IUHPE-NARO, McGill University, Montreal, Canada

Tulani Francis L. Matenga
IUHPE-AFRO, University of Zambia, Lusaka, Zambia

Peter Delobelle
IUHPE-AFRO, University of Cape Town and University of the Western Cape, South Africa; Vrije Universiteit Brussel, Belgium

Christa Ayle
IUHPE’s Student and Early Career Network, Philadelphia, PA, USA

Josette Wicker
IUHPE’s Student and Early Career Network, Seattle, WA, USA

REFERENCES