

# A PRAXIS FOR HEALTH JUSTICE

In this chapter we're going to cover how existing knowledge infrastructures exacerbate health inequities and explore a justice-led pathway to developing multiple, symbiotic, and culturally competent knowledge infrastructures.

*“So they got to work. The first step was to develop epistemic authority. To achieve this, they built a new room, one that put Flint residents and activists in active collaboration with scientists who had the laboratories to run the relevant tests and prove MDEQ’s report was fraudulent. Flint residents’ outcry about the poisonings helped recruit scientists to their cause. The new roommates ran a citizen science campaign, further rating the alarm about the water quality and distributing sample kits to neighbors so that they could submit their water for testing. The alliance of residents and scientists won. And the poisoning of the children of Flint emerged as a national scandal.”*

*- Olúfémi O Táiwò, Elite Capture (2022)<sup>20</sup>*



Olúfémi O Táiwò  
Photo: © Elliott Jerome Brown Jr.

Health is the quantifiable metric by which we can see the outcomes of societal decision making. It offers a lens by which we can investigate how political, commercial, and social decisions become structural determinants of health. It offers us a chance to view injustice and inequity through the lens of individual biological markers as well as collective discourse.

Political determinants of health are characterised by governmental policies, political systems, and the distribution of power within society. The epistemological framings of those in power shape the prioritisation of and attitudes towards solving public health issues, influencing the allocation of public resources determining the focus and level of investment in different health concerns.

Take for example the current (2023) Conservative government’s actions towards obesity. The now exiled Boris Johnson proclaimed an, unfulfilled, agenda to create a restriction on the advertising of foods high in fat, salt or sugar (HFSS) on television before the 9pm watershed; limiting use of buy-one-get-one-free styled price promotions; and controlling where HFSS foods could be displayed in stores. This followed a recent National Health Service (NHS) advertisement, showing a racialised Black woman eating a salad as a solution for obesity. This negates the complexity of the disease which is a dysregulation of various biological systems

with links to childhood trauma, exposure to air pollution, malnutrition, and even light pollution. Framing obesity only as a set of behavioural choices is not only inaccurate, it prevents people from accessing a comprehensive healing strategy, fuelling further health problems and inequities <sup>21</sup>.



Photo © NHS

The biopsychosocial model of health was built upon by new ecological models of health, that emphasised the complex relationships between wider ecological factors (e.g. biodiversity, pollutant exposure, socio-economic issues) and the individuals lived experience in contributing to health and disease. Ecological models of health, similar to Indigenous models, situates health as a balanced interplay between Nature and individual with emphasis on human health acting reciprocally with planetary health.

- Health as Ecological, Urban Health Council (2022)

Researchers for the Urban Health Council detail the history of this framing in the report 'Health as a Ecological':

Health was severed from its metaphysical and spiritual aspects and instead, focus was placed on bodily biological factors. This came to be known as the 'biomedical model of health', which emphasised a 'bottom-up' reductionist and mechanistic view of health, where health was seen merely as the absence of disease <sup>22,23</sup>.

The reductionist approach of the biomedical model of health, whilst having utility in the medical domain, provided a scientific basis for discourse of so-called 'degeneracy', the idea that differences in health and societal outcomes across a population could be solely attributed and explained by biologically-based inheritable mechanisms. This spurred obscene solutions of racial and societal cleansing, made popular for example by the Eugenics movement in Britain and the Nazi regime <sup>24</sup>.

Today, parts of this framing are still evident, we only have to look at how racialised Black communities were seen as inherently being more vulnerable to Covid-19 due to genetics rather than the consequences of their racialisation <sup>25</sup>.

The biomedical model of health failed to adequately account for wider causal psychological, and environmental factors and so there were calls to expand upon the biomedical model of health by acknowledging 'top-down' factors that also contribute to health and disease.

The end result of institutions such as governments holding epistemic authority over matters influenced by histories built on racism, heteropatriarchy, class hierarchy, ableism and supremacy are inaccurate framings of what makes us healthy, what makes us human.

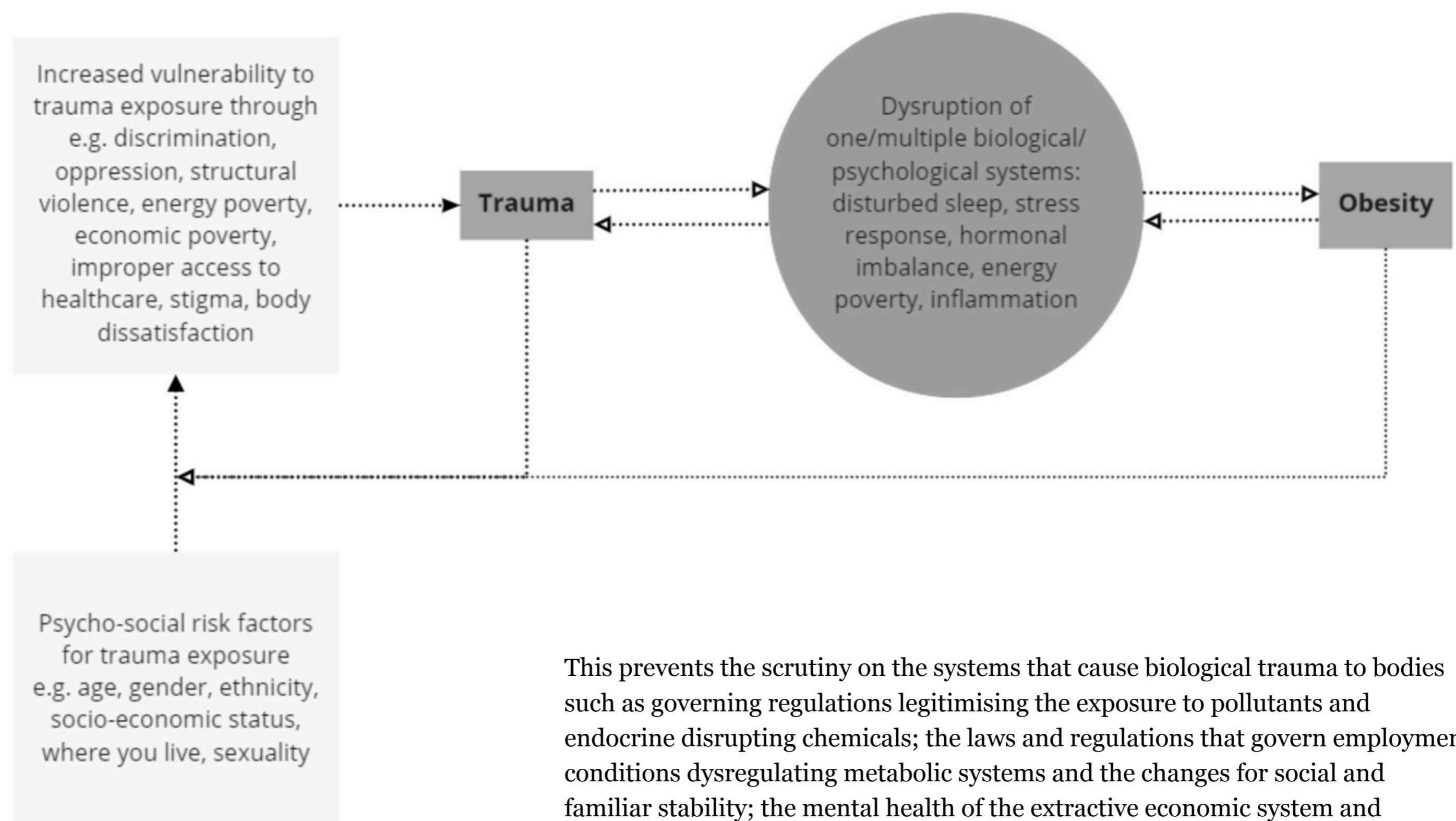
It leads them, directly and indirectly, to develop strategies based on these prejudices and convey that chosen strategies are scientifically based. As any scientist will tell you, science is political and like anything else frameworks can be created to suit agendas.

When observing a political decision to tackle obesity from an individual basis it creates an illegitimate narrative.

- Firstly, due to having an observable phenotype, it is often labelled and defined as a weight problem.
- Secondly, this definition leads institutions and healthcare organisations to only concentrate on food and exercise rather than other systemic ecological factors such as exposure to pollutants and trauma.
- Finally, this gross simplification leads to a cultural framing of obesity as a personal lifestyle choice, which in turn creates a culture of stigma rather than healing <sup>26</sup>.

When one narrative is dominant it has the capacity to perpetuate existing inequities. This leads to a socialised gaslighting where people internalise their outcomes purely through their own decisions whilst being withheld information that helps explain some root causes, and those responsible for them.

This is an act of dominance, where a political narrative (or determinant of health) sets forth a route whereby an outcome is seen and treated in a socialised manner: people's lifestyle habits; access to nature; levels of employment offering routes towards exercise through financial opportunities.



Trauma/obesity relationship and feedback loop (including structural violence determinants) © Centric Lab

This prevents the scrutiny on the systems that cause biological trauma to bodies such as governing regulations legitimising the exposure to pollutants and endocrine disrupting chemicals; the laws and regulations that govern employment conditions dysregulating metabolic systems and the changes for social and familiar stability; the mental health of the extractive economic system and gendered capitalism creating illusionary goals of social worth.

To move away from dominant narratives such as these it is important to move beyond asking for equity within a system that wasn't designed for us and was designed to serve others, and towards imagining one created through a praxis for justice.

To diversify the knowledge ecosystems involves establishing an infrastructure that supports epistemic justice. Health justice and epistemic justice go hand in hand, because the process and methodology by which you enable all knowledges to exist, are in themselves restorative to the communities that have been so deeply harmed by Western-dominant science.

Epistemic justice in action encompasses various initiatives and practices such as:

- **Community-Based Research** involves collaborative partnerships between researchers and community members. It seeks to address local concerns and priorities, involving community members in active leadership roles in the research process. Centric Lab has developed 9 principles for the ethical delivery of community based research:
  - **Collectivity:** equitable working as a group to a shared goal;
  - **Self-Awareness:** being aware of yourself and your role in the collective; it means being aware of what you know, what you don't know, and what you can't know;
  - **Honesty:** Being honest and vocal about initial intentions, expertise, and limitations to that expertise also helps the 'outsider' to go one step further from being self-aware and honest to being willing to listen and to learn;
  - **Flexibility:** to be open to modifications of your original idea and willing to make compromises;
  - **Reciprocity & Mutualism:** the community should benefit equally, if not more, from the relationship than 'outsiders';
  - **Longevity:** the longevity of any project or work that involves members of the community is carefully considered and guaranteed from the very start of the project;
  - **Community Sovereignty:** the power of the community to control their own governance over their community;
  - **Informed Consent:** the community has to be well informed, this may include providing information in various languages, various mediums (digital, written, spoken), it should also be translated in a cultural context;
  - **Trust:** the ability to rely on the character, ability, outcomes, or truth of the ecosystem and its various components<sup>29</sup>.



I remember being at Pan-African Saturday school and one of the earliest things that stuck with me was learning about all these amazing scientists and inventors from the late 19th and early 20th century...

- Akala

This approach recognises the expertise and knowledges that exist within communities and promotes epistemic justice by valuing and incorporating community perspectives and experiences. The learnings and frameworks co-developed during these processes should be turned into educational materials, training programs, and initiatives for other communities with those that developed them at the forefront of their application.

- **Decolonising Knowledge** is an effort to challenge the dominance of Western-centric perspectives and knowledge systems. It involves recognising and valuing diverse indigenous and non-Western ways of knowing, including Indigenous knowledge systems, oral traditions, and other marginalised knowledge traditions.
- **Feminist & Queer Epistemologies** challenge the patriarchal biases present in traditional knowledge systems. It critiques the ways in which knowledge has been constructed and validated based on male-centred perspectives on how the world is organised and known.
- **Open Access and Knowledge Sharing** initiatives promoting open access to knowledge, such as open-access journals, online repositories, and open educational resources, contribute to epistemic justice. They challenge the barriers to access and dissemination of knowledge, making information more widely available and reducing inequalities in knowledge access. Publicly funded knowledge is currently gate-kept behind expensive paywalls, reducing people's access to information. Aaron Schwartz's life was taken from him for exposing this hypocrisy and trying to change access to information<sup>27</sup>.
- **Alternative Education Movements** exhibited by organisations such as the Zapatista Movement, the Black Panther Party, and the National Association of Black Supplementary [Saturday] Schools<sup>28</sup> in the UK produce

- [continued]....community-led schools, homeschooling networks, and critical pedagogy approaches to prioritise epistemic justice. These movements challenge mainstream educational systems, centring diverse experiences, perspectives, and knowledge traditions in the learning process. They aim to empower individuals and communities by providing spaces for knowledge co-construction and critical thinking.
- **Divesting Power and Resources** from incumbent institutions. Traditional education institutions receive disproportionately higher levels of funding to produce research *about* people and movements. Those funds should be diverted so there is at least parity for non-mainstream movements to be able to work with the same levels of freedom and enable the aforementioned strategies.

## FRAMEWORK IN ACTION

At Centric Lab we have endeavoured to put this framework into practice through the Urban Health Council.

We define ‘urban health’ as a term used to investigate the intersectional lived experiences of urban dwellers. It focuses on the unique influence urbanisation has on our biological systems through exposure to environmental and psychosocial stressors. The word “council” has its etymological roots in the Latin word “concalare”; “con” meaning *together* and “calare” meaning *summon*. The word council is akin to that of the early 20th century soviets in Russia; self-organised worker groups opposing top-down representation and centralisation, and that of the Zapatista *caracoles* in Chiapas, Mexico; a confederalist system of organising where power is not thought of through political representation in the form of proletarian dictatorship but of “democratising the power relations of everyday life”.

The word council has a long history of being a structure for bottom up organising. Its flexibility allows for autonomy to flourish, meaning that communities can enact their version and vision of an urban health council - one that works for their health needs.

This Urban Health Council’s role is to summon together people under an autonomous method of governance and practice whereby peer-led programmes determine the direction of production of works that support health justice movements, led by the People for the People, meeting them where they are with what they need.



Each programme is supported through a scientific, technical and financial ecosystem where all works produced are made open-access in a [Living Encyclopaedia](#); community led and scientifically rooted reportings that are in constant progression as injustice is an evolving phenomena.

The Urban Health Council set up by Centric Lab must not be the only one, there needs to be an ecosystem of councils embodying the principles as outlined previously.

Away from top down power, we can have a *politics* of health recognising inclusion, empathy, and healing and the emancipation of people marginalised, brutalised, shamed, and made worse by prejudicial health systems and knowledges rooted in colonial framings of humanity.

When many sites of self-governance emerge investigating, strategising, producing together we will have an infrastructure for healing and health justice. As this report has stated, this architecture for epistemic justice needs a resourced radical knowledge infrastructure to allow its development to occur organically, for the emergence of a Zapatismo pluriverse: “a world in which many worlds fit”.

This architecture for epistemic justice needs an infrastructure to allow its development to occur organically.

When a radical knowledge infrastructure is resourced appropriately it allows for the emergence of the Zapatisa pluriverse, “a world in which many worlds fit”. Arora and Sterling provide a simple yet powerful summary of the pluriverse based on Marisol de la Cadena and Mario Blaser’s 2018 Proposals for a *World of Many Worlds*<sup>30</sup>:

Each of these worlds has its own ways of relating between different beings, human and nonhuman. Each world produces its own languages and techniques mediating relations between humans and with nonhumans. Through these relations, diverse knowledges and practices are produced to connect and communicate across categorical divides between nature and culture. Each world is thus composed by specific ways of living-knowing<sup>31</sup>.

As Grace Carson will show us in her interview, the emergence of a pluriverse not only prevents cultural appropriation of epistemologies and practices but it allows for culturally and contextually relevant knowledges to be developed and exist in their own rights.



Un mundo donde quepan todos los mundos  
(A world in which many worlds can fit) Zapatista view of the pluriverse.  
"Entrevista a Beatriz Aurora", from Rufián Revista, 2014. (<http://rufianrevista.org/?portfolio=entrevista-a-beatriz-aurora>). CC BY 4.0.

# INTERVIEW WITH GRACE CARSON



Grace Carson serves as a Skadden Fellow for the Tribal Healing and Wellness Courts Project. Her Skadden Fellowship project is focused on developing a restorative justice program for tribal communities that channels harm-doers away from incarceration and fines, and towards rehabilitation, community involvement, and healing.



We held space with Grace Carson on the topic of restorative justice. It is a perfect illustration of the conditions required from a well resourced radical knowledge infrastructure; the emergence of a *pluriverse* that not only prevents cultural appropriation of epistemologies and practices but it allows for culturally and contextually relevant knowledges to be developed and exist in their own rights.



**WE ASKED GRACE FOUR QUESTIONS AND SELECTED SOME KEY QUOTES, THE FULL INTERVIEW CAN BE READ IN THE APPENDIX.**

01 \_\_\_\_\_

What is restorative justice and Grace’s work in this space?

02 \_\_\_\_\_

How does Grace see the relationship between radical knowledge production and legacy institutions who hold deep power and restorative justice?

03 \_\_\_\_\_

Are there cases where social movements have led restorative justice processes that have resulted in social, economic, cultural, or political policy change?

04 \_\_\_\_\_

Who does Grace see as crucial in supporting social movements in enabling restorative justice, funders, researchers, politicians, etc, and what's the short term win and the long term goal?



# INTERVIEW

**THE WAY THAT RESTORATIVE JUSTICE LOOKS DOESN'T JUST DEPEND ON THE COMMUNITY, BUT ON THE HARM THAT RESTORATIVE JUSTICE SEEKS TO REPAIR, AS WELL AS THE PEOPLE WHO ARE INVOLVED IN THE HARM.**

**RESTORATIVE JUSTICE PRACTISED BY WESTERN INSTITUTIONS IS NOT THE SAME RESTORATIVE JUSTICE THAT WAS PRACTISED—AND THAT CONTINUES TO BE PRACTISED—IN INDIGENOUS COMMUNITIES, WHICH OFTEN MAKES THE WESTERN VERSION OF RESTORATIVE JUSTICE LESS EFFECTIVE, IF NOT ACTIVELY HARMFUL.**

**RETRIBUTIVE PRACTICES ARE FOCUSED ON THE PUNISHMENT OF A PERSON WHO HAS CAUSED HARM, WHILE RESTORATIVE PRACTICES FOCUS ON REPAIRING THE HARM THAT WAS DONE, RESTORING BOTH THE PERSON WHO WAS HARMED AND THE PERSON WHO COMMITTED THE HARM, AS WELL AS THE ENTIRE COMMUNITY IN WHICH THE HARM TOOK PLACE.**

**THIS INDIGENOUS KNOWLEDGE, BOTH EPISTEMOLOGICAL AND ONTOLOGICAL, IS GROUNDED IN A WAY OF KNOWING THAT INTERCONNECTS THOUGHT AND SPEECH, EXPERIENCE, AND LAND.**

# CARIBOON

# INTERVIEW

**THE APPROPRIATION OF RESTORATIVE PRACTICES WITHOUT AN UPHEAVAL OF THE ROOTED WESTERN VALUES—VALUES AND INSTITUTIONS SUCH AS WHITE SUPREMACY, HIERARCHY, INDIVIDUALISM, ETC.—THAT DIRECTLY COUNTER INDIGENOUS RESTORATIVE THOUGHT CAN NULLIFY AND DELEGITIMISE IT, AND IN MANY CASES, CAUSE HARM TO THOSE THESE WESTERNISED RESTORATIVE JUSTICE SYSTEMS AIM TO HELP.**

**AS AN ABOLITIONIST, I WOULD VERY MUCH LOVE TO LIVE IN A WORLD IN WHICH RESTORATIVE JUSTICE IS THE ONLY FORM OF JUSTICE THAT WE PRACTISE.**

**HISTORICALLY, ERADICATING TRIBAL RESTORATIVE JUSTICE WAS A MEANS OF LIMITING TRIBAL SOVEREIGNTY IN THE UNITED STATES. AS SUCH, I ARGUE THAT RESTORATIVE JUSTICE CANNOT BE FULLY ACHIEVED WITHOUT TRIBAL SOVEREIGNTY, AS TRIBES MUST BE ABLE TO FREELY PRACTISE THE FORM OF JUSTICE IN WHICH WESTERN INSTITUTIONS SEEK TO BORROW FROM.**

**CURRENT RESTORATIVE JUSTICE SYSTEMS IN THE UNITED STATES ARE ONLY ABLE TO OPERATE WITHIN THE CONFINES OF COLONIALISM/THE CRIMINAL LEGAL SYSTEM/LIMITED JURISDICTION/ETC., WHICH IS WHY A PART OF HOW WE CAN INCREASE RESTORATIVE JUSTICE IS BY INSTILLING TRIBAL SOVEREIGNTY AND SELF-DETERMINATION.**

# ABOLITION

# INTERVIEW

**SINCE RESTORATIVE JUSTICE THOUGHT IS A PART OF INDIGENOUS EPISTEMOLOGY AND DIRECTLY COUNTERS WESTERN EPISTEMOLOGY, THERE WOULD NEED TO BE DECOLONISATION OF WESTERN INSTITUTIONS, WHICH WOULD MEAN THE ABOLITION OF THEIR VERY EXISTENCE (NO PRISONS, NO POLICE, NO WHITE SUPREMACY, LAND BACK), AND THAT CHANGE DOESN'T BENEFIT THOSE WHO ARE IN POWER.**

**OF COURSE, ACADEMIA APPROPRIATES AND HOARDS ALL TYPES OF RADICAL KNOWLEDGE EXTRACTED FROM MOVEMENTS, COMMUNITIES OF COLOUR, AND OTHER NON-ACADEMIC SPACES, BUT WE CAN SEE THIS HAPPENING WITH RESTORATIVE JUSTICE, TOO.**

**PAULINA WHITEHAT (DINÉ) SAID, "SOMETIMES THE WESTERN WAYS DON'T WORK FOR US, SO WE CAN GO BACK TO RECLAIMING OUR ANCESTRAL KNOWLEDGE, AND THIS HAS WORKED FOR US. WE COME FROM GREAT PEOPLE AND WE KNEW WHAT WORKED, AND WE CAME FROM GREAT HEALERS. WE CAME FROM PEOPLE WHO, BEFORE COLONISATION, DID NOT HAVE PRISONS OR JAILS. WE EXISTED THIS WAY FOR A LONG TIME. WE NEED TO RETURN TO THESE PRACTICES IN ORDER TO HEAL."**

# GRAND

# CANYON

**I'M SCEPTICAL WHEN APPROACHING QUESTIONS ABOUT "LONG-TERM GOALS" FOR SEVERAL REASONS, BUT I BELIEVE EVE TUCK (UNANGAĀ), PROFESSOR OF CRITICAL RACE AND INDIGENOUS STUDIES UNIVERSITY OF TORONTO'S ONTARIO INSTITUTE FOR STUDIES IN EDUCATION, MOST ACCURATELY DESCRIBES MY HESITANCY FROM THE BOOK 'INDIGENOUS AND DECOLONIZING STUDIES IN EDUCATION: MAPPING THE LONG VIEW':**

***"INDIGENOUS AND DECOLONIAL THEORIES ARE UNFAIRLY, INAPPROPRIATELY EXPECTED TO ANSWER TO WHITENESS AND TO SETTLER RELATIONSHIPS TO LAND IN THE FUTURE....DECOLONISATION IS NOT ACCOUNTABLE TO SETTLERS, OR SETTLER FUTURITY. DECOLONISATION IS ACCOUNTABLE TO INDIGENOUS SOVEREIGNTY AND FUTURITY.***

**THAT'S WHY I LIVE IN RESTORATIVE JUSTICE WORK, I FIND IT WORTHWHILE TO INVEST IN CREATING RESTORATIVE JUSTICE PROCESSES AND SYSTEMS AS ALTERNATIVES TO INCARCERATION AND POLICING WHEREVER WE CAN...WHEN PEOPLE ASK ME WHERE THEY CAN START WITH RESTORATIVE JUSTICE, I ALWAYS ENCOURAGE PEOPLE TO START WITHIN THEIR FAMILIES. THERE IS SO MUCH HEALING TO BE DONE WITHIN OUR FAMILY SYSTEMS.**