

Racism and COVID-19

Delan Devakumar discusses this in correspondence in the Lancet. He argues that there is nothing new, extraordinary or unprecedented about racism, xenophobia and discrimination. Even when we are facing a global pandemic, a climate catastrophe, an imminent recession, and possibly a depression. The health of the most vulnerable and all of humanity may be at stake.

The killing of Mr George Floyd and other black Americans at the hands of the police combined with the two to four times increased mortality risk from COVID-19 for minority ethnic groups has brought to light social and structural injustices that have existed for centuries and are derived from the same intersecting systems of oppression. The single act of violence captured and amplified on social media has brought police brutality into the consciousness of people across the world. It has elicited a visceral response and humanity has joined together in condemning racism.

The COVID-19 pandemic has uncovered a crisis in our social and political fabric extending beyond the outbreak itself. The transnational health challenges and national politics have exacerbated the uncomfortable propensity towards racism, xenophobia and intolerance. Politically, xenophobia has been weaponised to enforce border controls against particular nationalities and undermine migrant rights.

In the United Kingdom, minority ethnic groups are more likely to contract SARS-CoV-2 infection and subsequently face a higher risk of severe form of illness.

Why is this?

Delan Devakumar argues that people from minoritised ethnic groups are more likely to work as key workers in frontline jobs that expose them to SARS-CoV-2. They are also more likely to live in overcrowded accommodation meaning that social distancing is not an option. They are more likely to have barriers to accessing health services and as such presenting late, in a worse condition and with a higher probability of underlying illnesses which puts them at a greater risk of death.

In some cases, the existence of these comorbidities has lowered the chances for intubation and ventilation and therefore this results in the double burden of these minorities being more prone to being severely unwell and less likely to receive intensive care.

Devakumar argues that beyond the obvious causes of ill health within these groups lies racism and a structural form of discrimination. He continues that marginalised groups are disadvantaged in all social determinants of health.

He suggests that racism is more than this. It is a fundamental cause of ill health. He argues that at all socioeconomic levels, people of colour have poorer health outcomes. He suggests that racism cumulates over the lifetime, leading to an activation of stress responses and hormonal adaptations, which increase the risk of non-communicable diseases and biological ageing. He feels that this response is also transmitted between generations and affects the offspring of those initially affected through this complex biopsychosocial pathway. The root of this so-called biological cause is racism, not race itself.

He argues that scientists and doctors themselves by remaining technocratic and apolitical are



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complicit in perpetuating discrimination. He suggests that we as a health community should do more than simply describing inequities and suggest that we should dismantle systems that perpetuate multiple intersecting and compounding systems of oppression, which give rise to the inequities and injustices.

To this end, he is producing a series of academic papers, which look at the complex challenges of racism and xenophobia within the health environment. He is working with a diverse team of academics and activists globally to highlight the injustices, identify solutions and hopefully enact change. His vision through his Race & Health

Movement is to provide a catalyst, which will tackle the adverse health effects of racism, xenophobia and discrimination. He suggests that as a health community emerging from the pandemic even in ordinary times we should exact extraordinary measures.

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