



REVIEW

EPIDEMIC ILLUSIONS ABOUT PUBLIC HEALTH

A reflection on Eugene Richardson's new book, *Epidemic Illusions*, which offers far more questions than answers. Too often influenced by trends and ready-made models, public health risks losing its true meaning and – as has so often been the case – leaving behind the most vulnerable.

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Critical to the point of mockery, grating in tone and unsettling in its logic, *Epidemic Illusions: On the Coloniality of Global Public Health* is a difficult book to read, accept and “file away”¹. Its author, Eugene Richardson, is a wanderer impassioned about global health and social justice, a man constantly on the move who studies biology, anthropology, public health, Eastern religions and Western philosophy while at the same time working in Sierra Leone, the Peruvian Andes, South Sudan and Congo. His focus is on public health, social research and epidemics including HIV, cholera, Ebola and COVID-19, and while he roams the world he stays in touch with Harvard Medical School, where he teaches global health and social medicine.

The book offers up a harsh thesis: that current public health practices – especially new epidemiological tools such as mathematical and computational modeling, the use of Big Data and causal inference – are permeated with concepts, considerations and logic shaped by a colonialist and patriarchal system. In short, beneath the sophisticated, apparently neutral scientific apparatus that presents itself as the only interpretative truth vis-à-vis the causes and mechanisms of infectious disease transmission, lies a racist, inequitable power system that perpetuates itself and is powerfully propagated by Western universities and the medical journals industry.

To back his arguments, Richardson adopts an ironic, “carnavalesque” literary style full of imaginative takes and semantic curiosities, using caustic prose to dismantle and demystify the aura of scientificity and intellectual rigor that circulates around those working in global public health. But his writing is also grounded on and features connections and concrete references to political thinkers, critics of colonialism and anthropologists including Mikhail Bakhtin, Bertolt Brecht, Antonio Gramsci, Richard Rorty, Edward Said and Franz Fanon.

Of the eight short stories, or “redescriptions”, that make up the core of the book, the sixth and seventh are the least ironic and get straight to the point. Regarding the 2014-15 Ebola epidemic in Sierra Leone, Richardson contends that the prevailing application of epidemiological studies based on causal inference fostered a univocal interpretation focused exclusively on downstream bio-

logical/medical causes (for example, individual risk factors, funeral practices, etc.). The exclusion of upstream causes from analyses did not permit the structural racism, network of political interests, unequal distribution of resources and lack of accountability of local and international institutions that manifested prior to, during and after the epidemic to be clearly identified and called out.

One need only do a search on the PubMed platform to prove his point. No results are generated if one inserts words like “colonialism” or “racism” alongside the keywords “Ebola”, “disease”, “death” and “mathematical models”. Richardson condemns this short-sighted vision of epidemiology as a form of hermeneutic, interpretative injustice that, even though developed by staunch advocates of global health, actually helps spread a hegemonic ideological model – the North’s – based on still unassailable power relationships.

In the eighth story, the author makes use of an empirical study published after the book itself to link in epidemiological terms the yet-to-be-paid political, monetary and social reparations to the descendants of American slaves with the transmission of SARS-CoV-2, with the potential generation of beneficial effects both for the health of black communities in the U.S. (those hit hardest by the epidemic) and for society as a whole².

The book concludes with an appeal to contemplate with eyes wide open the epidemiological phenomena behind which a hidden but powerful and still unredressed legacy of historical inequalities, inveterate racism and social injustices persists. But, Richardson adds, awareness is not enough; it is critical that we move beyond that, exploring new dimensions and applying new lexicons, making space for a new heuristic, for creative forms of investigation and research that eschew easy answers to complex problems. As was to be expected, his book has been both praised and criticized. But once the reader finishes it, setting aside some of the author’s stylistic eccentricities and personal contradictions (by his own admission, he himself is a white epidemiologist and scholar from the rich North!), s/he is left with a powerful and shareworthy proposition that we avoid warping global public health according to the models and fads of the moment.

NOTES

¹ Eugene T. Richardson. *Epidemic Illusions: On the Coloniality of Global Public Health*. Cambridge, Mass.: MIT Press, 2020. 224 pp.

² Richardson et al., “Reparations for American Descendants of Persons Enslaved in the US and Their Potential Impact on SARS-CoV-2 Transmission”, *Social Science & Medicine* (Feb. 2021): 113741