

去殖民化的公共健康倫理：
邁向包容性的框架
Decolonizing
Public Health Ethics:
Towards an Inclusive
Framework

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摘要

本評論從知識論基礎、道德價值和承諾元素三個向度探討如何實現公共健康倫理的去殖民化。首先，本文批判性地回應了麥凱（MacKay）對當前以西方為中心的公共健康倫理方法的批評，

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指出現行框架根植於希臘哲學傳統和還原主義的生物醫學模式，忽視了多元文化知識體系和原住民健康實踐。其次，本文主張在道德價值層面，透過解構現有的霸權結構，融入德性倫理學和多元文化價值觀，並引入歷史上被邊緣化的專家，以實現更具包容性和公平性的倫理討論。最後，在承諾元素方面，強調持續推動去殖民化的長期努力，建立信任，建構文化回應性和永續的公共健康系統。透過這一三維度的討論，本文為重新構想和去殖民化公共健康倫理提供了一個清晰的架構。

In an era marked by unprecedented cultural diversity, the ethical foundations guiding public health practices are under increasing scrutiny. Traditional public health ethics have long been anchored in Western-centric epistemic frameworks, predominantly influenced by Greek philosophical traditions and the reductionist biomedical model. However, as MacKay critically observes, this approach often marginalizes non-Western perspectives, neglecting the rich tapestry of cultural knowledge and holistic health practices that are vital for equitable and effective public health interventions. This commentary delves into the epistemic foundations of public health ethics, advocating for a decolonization process that integrates Indigenous health values and fosters a community-centered approach. Furthermore, dismantling hegemonic structures within bioethics and incorporating diverse cultural insights are essential steps toward a more inclusive and balanced ethical framework. Commitment to this decolonizing effort is not merely a theoretical shift but a practical necessity for building trust and fostering sustainable, culturally responsive public health systems. This analysis underscores the imperative to restructure public health ethics through a lens that honors collective responsibility and integrates diverse knowledge systems into public health.

Epistemic foundation on public health ethics

MacKay criticizes the current public health ethics for utilizing a Western-centric epistemic approach, emphasizing the need to decolonize this framework. The Western-centric epistemic approach to health is rooted in Greek philosophical foundations, which have dominated public health ethics while neglecting the inclusion of cultural knowledge. The biomedical model's ethical foundation emphasizes material existence. Descartes metaphorically describes the health of the human body as a clock, with medical treatment involving

dissection and the piecemeal treatment of each organ (Epperly 1998). Such reductionism implies a diminishment of the spiritual concept of health and shifts public health to an evidence-based approach. This public health framework suppresses Indigenous health values and cultural practices. The holistic health approach incorporates health as a whole and harmony with nature. This health approach differs from the evidence-based research method, which MacKay suggests should be decolonized to include cultural values and health concepts beyond the Western public health system. Secondly, individualism in public health ethics also needs to be decolonized. The epistemic perspective on individualism in public health is rooted in the Liberal values of Western ideology. Liberal individualism overlooks the broader societal influences on health and primarily focuses on individual responsibility, which is insufficient for addressing public health challenges (Kaplan 1987). For example, practicing social distancing and quarantine during a pandemic outbreak of an airborne disease may limit individual freedoms but reduce the risk of disease transmission to the public. These approaches require public health interventions to set aside some freedom and align with the Indigenous health approach, which emphasizes family and community. When integrating Indigenous health approaches, public health interventions must carefully consider the extent to which individualism should be limited. As freedom and human rights are also important, policymakers must avoid replacing one dominant narrative with another. The new epistemic approach to public health ethics should embrace diverse cultural knowledge while maintaining a balance with the current framework. Therefore, decolonizing public health ethics necessitates a shift away from Western-centric epistemic frameworks and individualism, toward a more holistic, community-centered approach that values cultural knowledge and collective responsibility.

Moral values and hegemonic elements

Bioethics has been criticized for encompassing hegemonic elements in its approach to moral problems, often neglecting non-Western perspectives. This issue is particularly evident in the current metaphysical orientation of the public health model, which remains one-dimensional and predominantly shaped by Western ideals. As MacKay argued, the conceptualization of public health ethics is heavily influenced by Western views, leading to a narrow framework that excludes diverse cultural practices and knowledge systems. To address these limitations, the decolonization of public health ethics is essential to consolidate a wider range of health practices and

perspectives. Thus, dismantling Western hegemony in this field is a critical step toward a more inclusive and equitable public health system.

MacKay suggests that integrating virtue ethics into the moral foundation can broaden the scope of public health ethics. Although some value concepts are shared between Western and Indigenous traditions, it is critical to determine which values are worth expanding. What kind of methodologies should be used to determine the values that should be incorporated or diminished in bioethics? Public health institutions should engage historically marginalized experts who understand the cultural, spiritual, and religious knowledge of the research institution. This redistribution of power would provide a diverse understanding of public health. Adding historically marginalized experts would also help break the existing power structures within the institution. This would allow LMIC (Lower and Middle Income Country) researchers to lead in generating research questions, knowledge, and solutions that address local health challenges (Atuire and Bull 2020). As LMIC researchers participate in public health institutions, they are able to share their unique cultural knowledge, which reduces the risk of oversimplification of diverse values. Such institutional restructuring allows public health institutions to absorb diverse values into public health ethics.

Commitmental element toward public health decolonization

In addition to Mackay's insightful exploration of the epistemic and hegemonic aspects, the commitmental element also plays a crucial role in decolonization, particularly in providing a long-term dedication to decolonizing public health. A continuous effort is crucial for decolonizing public health practices, as building trust requires time. That commitment to decolonization emphasizes the importance of taking proactive responsibility and fostering mutually accountable relationships to address the lingering effects of colonialism and neo-colonialism, which have led to widespread apathy and distrust toward institutions (Atuire and Bull 2020). Thus, trust is vital when conducting public health research or conducting public health interventions in the local community. Building trust would require researchers to remain accountable and consistently present in the local environment to fully grasp the lived experiences of Indigenous people. Public health researchers who share similar cultural or environmental backgrounds can support the commitment process by easily communicating and comprehending potential challenges during interventions. This facilitates the rapid building of trust. Perhaps, a commitment to long term institutional partnership between local researchers and Western researchers to collaborate on public health decolonization would better

foster the decolonization process. Therefore, commitment effort in public health decolonization is essential in building an inclusive framework.

In summary, this commentary underscores the critical need to decolonize public health ethics by moving beyond the entrenched Western-centric frameworks that have long dominated the field. By embracing a more inclusive and community-centered perspective, public health ethics can better reflect the diverse values and collective responsibilities of various cultural groups. Integrating virtue ethics and incorporating insights from historically marginalized experts are pivotal steps toward dismantling the hegemonic structures that limit the scope of ethical discourse in public health. Such institutional restructuring not only enriches ethical discussions but also ensures that public health initiatives are culturally responsive and sustainable. Moreover, a long-term commitment and institutional partnership to decolonization is essential for building the trust necessary between public health institutions and the communities they serve. This ongoing dedication fosters mutually accountable relationships and addresses the lingering impacts of colonialism, ultimately leading to more resilient and inclusive public health systems. Public health decolonization is not merely theoretical but a practical imperative for ensuring inclusive public health practices that are truly responsive to the needs of all communities in our increasingly diverse world.

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