

## **Wanted: antibodies for the virus in the mind**

What is vital now is for high quality social analysts to combine with activists and show how a new world becomes possible and what it looks like: one where every life really does matter. The basis of racism is different levels of value placed on different lives by society.

"Viruses of the Mind" was a term coined by Richard Dawkins. It opened up a new science of the meme. Now it takes on a terrifying, new significance as so many are saying that there is a virus of racism that was in people's minds. If that is so, antibodies are needed. Here's how.

A new significance? Hardly that when racism has been around for as long as people dominated and enslaved each other. Pervasive concentrations of power seep through the very language we use about ethnicity, gender, age or intact bodies. White privilege and exceptionalism shapes standards and debates about what tone to use and what is correct (I'm looking at a challenging new book on that, Layla Saad's *'Me and White Supremacy: How to Recognise Your Privilege, Combat Racism and Change the World'* (Quercus 2020).

This last week we have seen the spectre of America burning. The London and similar protests have been vibrant with a sense of that simmering sense of injustice boiling over with the revolting death of George Floyd. I remember well the sheer sense of rage that engulfed the American street after the assassination of one of Martin Luther King in April 1968. Current events have strong resonance with that – except now we have Smart camera phones to record and transmit images faster than Covid.

Inequality matters because it gets under the skin. It digs into the role that our sense of value or its absence plays in human action generating psycho-social effects as well as lack of cash and poverty of power. But racism doesn't just get UNDER the skin though it does that to be sure. Racism is an attitude of mind that shapes both perpetrator and victim. Steve Biko, the black South African leader who died under Apartheid-era brutality diagnosed a submissive state of mind and lack of self-respect as illness. We collude with the definition of ourselves that others impose upon us. <sup>i</sup> Racism is inscribed ON the skin

It is a curiosity of history that white people in the time of Queen Elizabeth 1 used to prize their skin colour so much they would rub whiteness into it. Now a sun tan is a mark of health and vitality. It is though a tragic curiosity that so much misery has been played out on

the surface of human beings. A casual observer looks at this central phenomenon of history with complete astonishment. If the configuration of genitals and gender has evoked so much historical agitation, how come that, in addition it has been the colour of skin, and not just the colour of money that has so sharply divided the human consciousness? Who was responsible for this? If the answer is, 'we did it', then who are the 'we' who subjected our fellow men and women to such unimaginable cruelty and abuse? Why would we do it?

And who determined that skin should witness such mortal combat? Who set the pattern that the darker the skin the greater the inferior status? Racism has been so deadly because it combines the sharp divides of history into lethal challenge. This is all the more surprising since 'race' is a largely artificial construct as is 'religion' with which it is closely intertwined. Do either actually exist as the basis for pernicious cultural inequalities? Not really.

So why do we have a Report this week on which groups of people had a higher risk of dying from COVID-19 finding that people from ethnic minority backgrounds were "disproportionately" more likely to die from the disease? In the UK, Public Health England showed that people of Bangladeshi ethnicity had around twice the risk of death than people with a white British background. People of Chinese, Indian, Pakistani, other Asian, Caribbean and other black ethnicity had between 10% and 50% higher risk of death. Matt Hancock, England's Secretary of State for Health and Social Care, acknowledged that people were "*understandably angry about injustices*" and that the pandemic had "*exposed huge disparities in the health of our nation*". He said it was a situation he was "determined to understand in full, and take action to address". It could be that long-term conditions are associated with COVID-19 fatalities, such as high blood pressure and diabetes. Occupational exposure may partially explain disproportionate deaths for some BAME groups. Doctors and nurses are at higher risk of infection through the jobs they do. There does seem more to the statistics than just demographics. Issues of racism, fairness, trust, discrimination and stigma are certainly there and need to be addressed on both sides of the pond when this is all over.

Martin Luther King's sad adage has been much quoted in recent days – 'in the final analysis, violence is the language of the unheard'. The sad reality is that though overt racism and violence towards ethnic minorities is rare thankfully, different treatments and attitudes

remain. Our minds have been infected. We didn't know we were carrying a virus. It is called implicit bias. But then again, so can antibodies become ingrained: part of the body politic.

My new book 'what will Spring be like?' engages with this new time replete with antibodies.

I speak as a Christian leader and writer when I say that the lens the evangelical Right uses is utterly smudged. All such people at present see are anarchists threatening our moral order. Where is the lens that can see more deeply and more wisely to understand the outrage and the demand for justice? How are so many so blind? Just like Islamic radicalism requires theological de-construction, so does this – urgently! Implicit bias needs calling out- NOW.

Education has to be the great antidote to inequality everywhere. Wanted: an early warning system about devaluation of human life; especially of those who are different. Antibodies need to build up. A psycho-social lens is critical to any kind of understanding how difference generates such horror that disfigures our humanity so profoundly. We need to grasp how the virus takes hold and how different levels of value are placed on people's lives. Imagine an early-warning system of moral education as a 5-point scale with descending levels:

- Denigration (inter-personal put downs)
- De-personalisation (cloaking people with invisibility so they becomes objects)
- Desecration (acts of violence that degrade and assault the dignity of lives)
- Dehumanisation (acts and practices by the authorities that brutalise and kill people)
- Demonisation (genocide that treats ethnic groups like vermin or as sub-human)

Once a way of speaking and practice becomes thinkable, the mind is prepared to go down to the next level that can be acceptable. The descent into darkness is a series of steps. But the racism we have seen wearing such an ugly face doesn't just arrive from a clear blue sky. It is firmly lodged in social transmission sites of cultural narratives and then gets reproduced.

It is time to expose the virus and how it is lodged in attitudes that can be transmitted that de-personalise and then de-humanise coloured people as being ripe for violence.

Although a powerful place to come from, white privilege is a lamentable attitude from the past. Many are more pink than anything. Time's up for all this. Needed: antibodies of hope.

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<sup>i</sup> Biko, S. (1986) *I Write What I Like*. San Francisco: Harper & Row