Toward decolonizing nursing: The colonization of nursing and strategies for increasing the counter-narrative
Outline of the paper

• Introduction
• Post colonial theory
• Nursing education
• Leadership
• Recommendations
• Conclusions
Introduction

- Colonialism perpetuated the dominance of western culture, language, health models and research methodologies increasingly displacing indigenous knowledge systems.
- Contesting and creating spaces for methods that will enhance Paradigm shifts in Epistemologies (ways of Knowing) that informs leadership, policies, nursing practice, research methods, education and training.
- Post colonial theory was used as a lens to critically analyse the current bio-medical approach to nursing education, ethics, leadership and practice to contribute to nursing knowledge about paths to work toward decolonizing the profession.
Post colonial theory

- Postcolonial theory most importantly provides a framework and vocabulary for understanding the burden of history and how this history shapes present-day experiences and new forms of injustice.

- Postcolonialism is concerned with ‘the unequal relations of power that are the legacy of a colonial past and neocolonial present, and the ways in which the cultures of dominant groups have redefined their local meanings, and dictated social structures, including health care delivery systems.’
Colonialism

• Colonialism, in particular, refers to that form of empire-building imperialism in which geographic regions outside of Europe were occupied by European countries and ‘settled’, a strategy that was justified through a racialized colonial discourse about the necessity of civilizing the world.

• Colonialism is a thing of the past, and because it happened a long time ago, we have nothing to do with it and it must be ‘over’.
Modes of colonization

**Genocide** - the deliberate killing of a large group of people, especially those of a particular nation or ethnic group.

**Ethnocentrism** - Ethnocentrism is the belief of superiority is one's personal ethnic group, but it can also develop from racial or religious differences.

**Assimilation** - Cultural assimilation is the process by which a person or a group’s language and/or culture come to resemble those of another group.

**Annihilation** - complete destruction or obliteration.

"the threat of global annihilation“

**Sexism**
Biomedical context

• medical colonialism,
• Nursing colonialism
• cultural genocide
• western dominant approach
• linear spectrum of illness and disease
The other

Rooted in colonialism

• Formed the basis of colonization, and also was necessary for the colonization of the way Indigenous people think about themselves; and for the taken for granted assumption of white as superior

• Deeply embedded in Western culture and in the socialization of nurses
Purpose

• To challenge the hegemony of power vested in the bio-medical model of research, nursing ethics, leadership and practice in order to:
  • Decolonize scholarship
  • Advocate for social justice
  • Revival of the indigenous epistemologies that informs health care
  • Move from linear to holistic models of care
Nursing Education as a site of Colonization

• Expose colonizing ideologies, values and structures embedded in:
  – Nursing curricula (content)
  – Teaching approaches/methodologies (process)
  – Professional development (context/culture)
Nursing Education as a site of Colonization

- White and class-based
- Contemporary understandings of Multiculturalism
- Eurocentric viewpoint
- Teachers as experts:
  - Teaching facts, but
  - Not aware of their own learned and internalized oppression
Implications for Nursing Education: Further Research and Praxis

- Adopt new frameworks (critical; post-colonial)
- Individual and interpersonal levels - Engage in Self-reflection (social location, assumptions, and values) and dialogue
- At group to societal levels, engage in political action
Nursing research as a site of Colonization

Research is based on a skill of matching the problem with an appropriate set of investigative methods.

Who defines the research problem?

Are we looking at investigating problems that concerns us as researchers?

What about problems experienced by communities themselves?

We approach communities with preconceived ideas.
Nursing research as a site of Colonization

- The researched are dubbed with names such as respondents, subjects and participants.
- The systems allow us to forget their names after the research has been completed.
- Although one would like to commend transcultural researchers for refraining from subjects, respondents to participants.
- The question is how is their participants viewed? From which level do they start participating? And how do they benefit from participating?
Benefit sharing in research

• Copy right-yet researchers collect information from the researched without accountability. In certain circumstances they are not even acknowledged.
• Is research benefiting or improving the status of communities or the researcher- Poverty alleviation.
• Do we find it necessary to go back to the community and give report back?
• What about benefit sharing between holders of knowledge and researchers?
Implications for nursing research

- Adopt Post modernism and critical lens in nursing research
- Post modernism approach cultural protocols, values and behaviours as an integral part of the methodology
- Respect the holders/contributors to knowledge
  - part of designing the study from initial phase
  - part of determining methods to be used
  - applying their mind on benefit-risk ratio
  - taking part in financial decisions
- Empowerment, training and education occur simultaneously
Transformative methods for research

Followers of critical theory believe that discourse plays an important role in attempting to understand social reality.

Their view is that researchers must not listen and accept what they see and hear at face value but rather engage with the subject matter at hand.

They accept that inequity is a reality in society and that the views of those that are powerful often become dominant and suppress voices of the powerless.

Critical theory scientists emphasise that researchers must be both critical and reflective in order to be actively engaged with the subject matter.

Objectivity is not a goal because researchers are morally committed to challenging inequalities and domination.

The critical theorists seek to explain and yield social change rather than pure knowledge generation.
Nursing practice as a site of decolonisation

- Nursing’s positivist, individualistic and Eurocentric foundations seriously hamper the growth of the profession and nurses’ professional capacity to collectively confront the root cause of health inequities.

- We argue that decolonization, viewed as a discrete and peripheral concern in mainstream nursing, is actually a path to urgently needed growth and transformation for the entire profession.
The nursing metaparadigm (human beings, environment, nursing, health) is an ethically inadequate mode of thinking about health and illness in the context of colonisation, globalization, pan-capitalism and environmental degradation.

Nursing knowledge is steeped in an ethos of treating everyone equally, a universalist assumption that dominant culture, experience and ways of knowing are true for all cultures. of power...we are all just human beings’.
Rights thinking’, which is based on the liberal notion that we are all individuals who contract with one another to live in a society where each of us may have the maximum in personal freedom. ‘Starting from this premise, there are no marginalized communities of people and no historical relations

A corollary belief is that Indigenous peoples ‘need to get over it because we are all more or less equal now’.
Nursing practice

Thompson (1992) critiqued the origins of nursing’s meta-paradigm, where privileged white nurse leaders in the 1970s and 1980s constructed representations of health, nursing, people and environment to secure their own location in a healthcare system dominated by business and medicine.

These underpinnings continue to drive nursing’s adoption of the discourses of management and market-driven healthcare reform based on the discipline of business, where profit is the ultimate goal.

Current Debates on universal health care and private health care system in our country.
Influence on policy

Emphasis is directed to the role of the economic organization of society in the production and distribution of disease and burden of illness, and the ways that disease and illness are framed and treated.

Nurses urgently require knowledge about processes of public policy planning, implementation and evaluation.

In their call for nurses to become active in aiming for universality in health-care in the United States, Ridenour and Trautman stated: ‘nurses can and should attend to the politics of change by using policy as a leveraging tool for widespread social change (360)’.
One of the main barriers to decolonizing nursing is that social justice and human rights are not at the forefront.

Examination of many nursing codes of ethics, professional practice guidelines, mission statements, curricular documents and local and national guiding documents reveals that the language of human rights and justice is sporadic thus undermining efforts to consistently tackle oppression in the form of colonization.
Social justice

Counter-narrative to continued colonization, with a focus on critical social justice, human rights and the structural determinants of health.

According to Kelly et al. (2008), social justice is awareness, knowledge and behavior based upon a commitment to the values of equity, access and justice; a dedication to civic involvement and environmental sustainability; and a respect for diversity, pluralism and freedom of expression.

Social justice in an idea that reminds us ‘that public health is indeed a public matter, that societal patterns of disease and death, or health and well-being, of bodily integrity and disintegration, intimately reflect the workings of society and politics – for good and for ill’.
SOCIAL DETERMINANTS OF HEALTH (SDH)

IDENTITY (race, gender, class...)

GEOGRAPHY

An intersectionality lens...

Recommendations

‘This colonization has actively undermined disciplinary education, research and policy development. More importantly, it has distracted scholars from focusing on representational, nursing-centered knowledge development relevant to practice. Nurses must not only recognize that it is within their power to challenge disciplinary colonization, they have an obligation to actively engage in decolonizing actions in order to begin reversing these effects’.

The need to engage in critical self-reflection to come to terms with the impact of the many forms of colonization on nursing. Introspection, in combination with dialogue and action, is needed to re-examine preconceived ideas about nursing and to recognize white privilege and Western and personal worldviews as major influences in nursing.

Academic leaders in particular have an ethical responsibility to influence current and future nurses and their learning and practice environments.
Conclusion

Cultures who are marginalised cannot just be bystanders and wait for their indigenous norms and values to be extinct”.

Indigenous knowledge can (and should) be used to inform postcolonial theories. Indigenous epistemologies represents different intellectual endeavours. It must resist imposition and appropriation.

Ubuntu philosophy
Thank you

Professor FM Mulaudzi
University of Pretoria
mavis.mulaudzi@up.ac.za