

Racism in the Valuation of Disease and the Distribution of Lifesaving Treatments

Author : Ruqaiijah Yearby

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Matiangai Sirleaf, [Racial Valuation of Diseases](#), 67 **UCLA L. Rev.** 1820 (2021).

The [genomic age](#) showed that race is not genetic; it is only a social construct. More specifically, the genome between humans is 99.5%-99.9% identical; the 0.1%-0.5% variation between any two unrelated individuals is greatest between individuals in the same local population; and there are no identifiable continental or racial genomic clusters. Thus, the connection of [disease and race](#) is not about science; rather it is a way to support a system of racial hierarchy that devalues the lives of racial and ethnic minority individuals.

The racialization of disease to support a racial hierarchy is not new, as Professor Matiangai Sirleaf discusses in her article, [Racial Valuation of Diseases](#), and does not happen in a vacuum. The United States government and colonial forces have long used laws to limit the rights of racial and ethnic minority individuals based on the racialization of disease. As one example, Professor Sirleaf cites the 1882 Chinese Exclusion Act, which “prevented [Chinese laborers](#) from immigrating to the United States in part based on biases and stereotypes that they were more likely to carry cholera and smallpox.” Similarly, [Haitian](#) people seeking refuge in the United States were linked to having HIV/AIDS and denied access in 2021.

In this article, Professor Sirleaf uses the Covid-19 pandemic to develop a theoretical framework for racial valuation, building on sociological literature, Critical Race Theory, and Third World Approaches to International Law. The article is significant because it develops the theoretical framework of racial valuation, distinguishing it from the “racial empathy gap” and racism (i.e. illegal racial discrimination). Furthermore, it discusses how this problem is not simply an American problem, but a global problem.

According to sociological [literature](#), “racial valuation” is the value placed on individuals or groups “based on cognitive biases and stereotypes that relate directly to their racial status and position within social hierarchy that this status implies.” In this article, Professor Sirleaf submits that racial valuation is about “the relative worth, utility, or importance assigned to race in social systems,” and “violates justice at the most fundamental level because it demonstrates that institutions, individuals, and societies have a ‘morally inappropriate disposition’ toward the worth of people of color.”

Within Professor Sirleaf’s theoretical framework, racial valuation goes beyond the “[racial empathy gap](#)” that occurs when people show an ingroup bias in empathy that restricts its application to those in the outgroup, because racial valuation determines who deserves empathy, care, and concern. The theory of racial valuation also expands the [current notions of racism](#) because it notes that racism is embedded into society. In the United States, Black-owned real estate is often [valued less](#) than White-owned real estate. Under the law this is linked to the actions of individual bad actors, instead of connecting it to the social systems and structures that devalue racial and ethnic minority individuals. “By drawing attention to societal structures,” Professor Sirleaf highlights, “racial valuation does not require the explicit or overt deployment of norms” required by racism.

Racial valuation also incorporates the theory of [racial capitalism](#) and the global impact of the

devaluation of racial and ethnic minority individuals. According to Professor Sirleaf, “the current historical and social construction of racial valuation emerged because of European capitalists’ practice of differentiating and exaggerating ‘regional, subcultural, and dialectical difference amongst peoples into ‘racial’ ones’” as a means to dominate and exploit Black, Indigenous, and other people of color to make money. Under American capitalism, Black people have been treated as property during slavery and the Jim Crow era.

Scientific racism that characterizes racial and ethnic minorities as inferior has been used to support racial valuation. Research has shown that many [medical students](#) still believe that “Black people’s nerve endings are less sensitive, and that Black skin is thicker than White skin.” This is further illustrated by the Covid-19 pandemic. Three years ago, the Covid-19 virus was [racialized](#) by former President Trump, who labeled it as a “Chinese” disease. As a result, those of Asian descent have been subject to physical attacks from London to New York and individuals that present as Asian are being racially profiled and discriminated against.

Furthermore, during the pandemic, governmental officials have [blamed](#) racial and ethnic minority individuals for their higher rates of infection and death, while limiting their equal access to vaccines and treatment. For example, [Senate Republicans](#) in Michigan submitted a plan that would have barred the state from using a resident’s race and socioeconomic status to guide the distribution of the Covid-19 vaccine in February 2021, *one day* after the state released data that White Michigan residents were twice as likely to receive the vaccine compared to Black Michigan residents. Thus, even though White residents were already disproportionately receiving vaccine doses, the government officials wanted to make sure to limit the poor and racial and ethnic minority individual’s access to the vaccine. This is best explained by Professor Sirleaf’s theoretical framework of racial valuation. Because the lives of racial and ethnic minority individuals are not valued, anything that would provide them with access to vaccines or treatment violates the social hierarchy where White individuals are superior and deserve unfettered access to all lifesaving resources.

Professor Sirleaf’s theoretical framework of racial valuation also explains the global failure to provide countries that are disproportionately filled with racial and ethnic minority individuals with equal access to Covid-19 vaccines. [Johnson & Johnson](#) sent vaccine doses produced in South Africa to high income countries, like Spain and Germany, while African countries were still waiting to receive their doses of the vaccine. This was compounded by Moderna’s unwillingness to share its technology with African scientists to manufacture its mRNA Covid-19 vaccine, even as mutant strains of Covid-19 spread in large part due to Africa’s lack of equal access to vaccines. [Moderna](#) and [other companies](#) have made [billions of dollars](#) in profit from the vaccine as racial and ethnic minority individuals have lacked access to the vaccine. This article, which includes Professor Sirleaf’s theoretical framework of racial valuation, explains why companies and governments continue to devalue the lives of racial and ethnic minority individuals, which has resulted in the unnecessary loss of life for racial and ethnic minority individuals.

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