



AFRICAN PERSPECTIVES ON SOLIDARITY: INSIGHTS AND APPLICATION FOR GLOBAL HEALTH



Summary of the African Anglophone Regional Workshop: Accra 20-21 November 2023

Background

The aim of the *Global Health Solidarity* project is to shift understandings and practice of solidarity in global health so that solidarity can play an even more active role in increasing equity and justice. The African regional workshop held in Accra was the first of five regional workshops to be held, in different languages and different parts of the world, to reflect on what may be learned from community practices that share some of the features of solidarity, although they may not be described as such.

The workshop took the form of an opening 'tour de table' enabling all attendees to share their own experiences and concepts of solidarity, and then a series of themed presentations and discussions.

This summary highlights key messages and emerging themes from the Accra workshop; a more detailed [workshop report](#) is available on the project website. All five workshops will inform the development of a set of core goals that the practice of solidarity in global health entails.

Key messages

Common practices of solidarity described took the form of:



Support for other community members at times of need: from short-term practical help, such as the loan of cattle to a newly married couple (*Ukusisa*), to potentially life-long financial support from wealthier individuals to poorer members of their extended family ('Black tax')



Shared responsibilities, for example for children within the community, with a focus on relationships over rights



Empowerment and collective action, including mutual support in collective political struggles or labour disputes, collective loan arrangements, facilitating access to capital to start a business, or providing support without expectation of return

Core features of solidarity identified from African philosophical thought included:



Its formation **in and of relations:** between humans, between humans and non-humans, across past, present, and future



Requiring **concrete action**, beyond the expression of sympathy



Being normative as well as descriptive: **setting a moral standard** while also describing ways of being

Questions and challenges to explore further included:

- 1. Recognising how practices of solidarity by their nature are **exclusionary**, and can be experienced as negative – solidarity practices should not be romanticised
- 2. Whether the exercise of solidarity necessarily requires **sacrifice, costs or burdens**
- 3. The need to be alert to **whose interests are being served** by actions described as solidaristic, and the role of **shared values** in avoiding the experience of oppression or a division into 'givers' and 'receivers'
- 4. Whether solidarity requires **reciprocity** – or whether it can be a 'seed people plant' that in turn may lead to solidaristic action towards others in the future
- 5. The importance of the **political and economic context** in which solidarity is being enacted
- 6. The relationship between solidarity practices and **survival practices**, and whether these can be distinguished
- 7. The challenges of **translating** concepts and practices between languages and cultures

Applications for global health

Attendees emphasised the **role of national governments** in global health: the need by citizens to hold their governments accountable (recognising that global health is enacted locally), while also recognising limitations if they do not have 'seats at the table' where global health decisions are being made.

Challenges faced by national governments and international bodies in enacting solidarity were identified:

- 1. The need to ensure that solidarity is envisioned in the global health space in a way that is **equitable**: not divided into 'givers' and 'receivers'
- 2. The challenges **involved in invoking a sense of shared interests** across the globe
- 3. Inclusive approaches to **expertise**: challenging the presumption that some people know more and some less, and requiring those within global health forums to be **reflective of their own power**
- 4. The need to **recreate systems that people are able to trust**: discrimination in access to COVID vaccines, for example, has done much to damage trust in the institutions of global health
- 5. The difficulties inherent in **translating concepts and relationships**, that have often been called upon in emancipatory political activism and mobilisation **into permanent social policy and institutions** without losing what is at their heart.

In conclusion, it was noted that thinking about **what solidarity is not** can be helpful in moving forward. Solidarity should not be oppressive; and nor should it be accompanied by conditions or expectations.



Reference:

Exploring and de-silencing African conceptualisations and praxis of solidarity in global health. Workshop report. November 2023, Accra, Ghana.



Moving Beyond
Solidarity Rhetoric
in Global Health

CONTACT US:

Email: globalhealthsolidarity@ug.edu.gh

Website: www.globalhealthsolidarity.org



Global Health Solidarity Network



Global Health Solidarity Network



@officialghsn



@official_ghsn



Funded by
Wellcome Trust