



Epistemic Justice in Climate and Health Research in Southeast Asia: Challenging Global North Dominance in Ethics and Equity

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Introduction

- Climate justice and health ethics and equity still a nascent and developing field in SEA.
- The ethical and equity frameworks guiding research and policy, and language used, are largely shaped by institutions and scholars from the Global North.
- This dominance undermines epistemic justice:
 - by marginalizing local knowledge systems, cultural values, and lived experiences critical to achieving just and context-specific climate-health solutions.
- This risks the continuation of a colonial model of research and knowledge dissemination:
 - knowledge is extracted from local communities in the Global South, interpreted through Global North frameworks, and circulated primarily for the benefit and recognition of Global North institutions.
- Without meaningful engagement, credit, or material benefit to the communities who generate and embody that knowledge.

Introduction

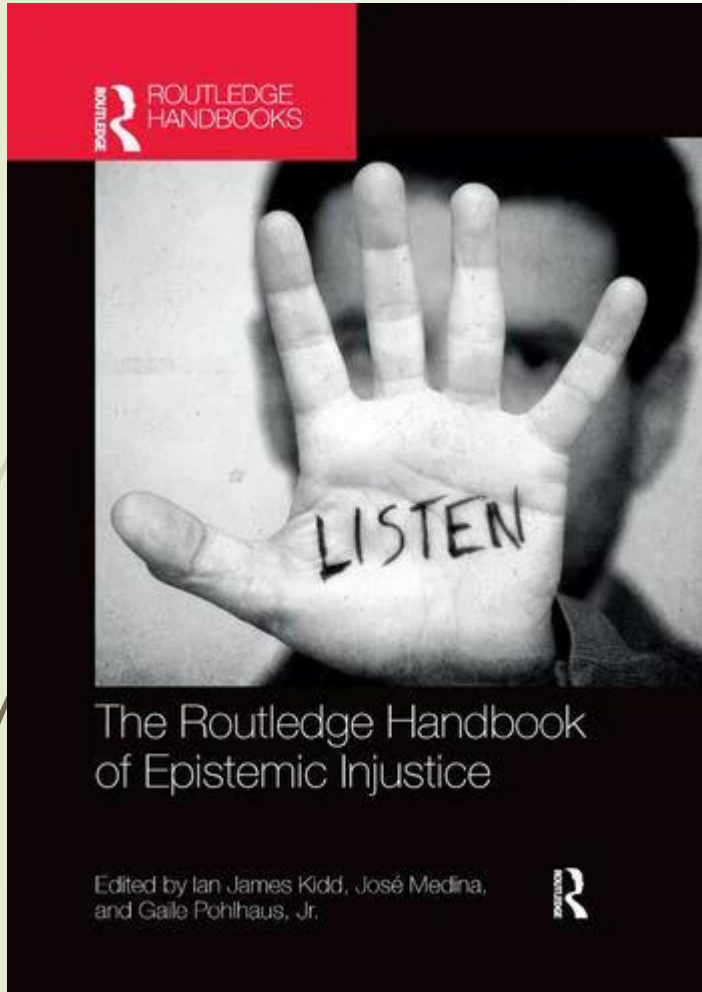
- Global South communities are facing the brunt of climate change impacts and associated health burdens disproportionately through rising heat, displacement, disease outbreaks, food insecurity, period poverty, and degraded health systems, not as future threats but as present lived realities.
- As such, ethics and equity must be grounded in the immediacy of these harms, prioritizing urgent, context-specific justice and fairness over abstract or long-term frameworks that risk deferring accountability and action.



Research Aims and Objectives

- To contribute to the development of a SEA-focused research agenda on climate change, health, and ethics that is grounded in the principles of epistemic justice.
- Critically examine whose knowledge, values, and priorities are represented or excluded in existing climate-health research in the region, and to analyse how ethical and equity considerations are currently framed.
- The study supports the United Nations University International Institute of Global Health's (UNU IIGH) initiative to operationalize epistemic justice by providing an evidence base for regional deliberations and the co-creation of a contextually relevant ethical framework for research and policy.
- There are three parts to this:
 - 1. Review focusing on the research landscape of epistemic justice in climate and health in SEA
 - 2. Actor-mapping in the SEA region of actors who play a prominent role in shaping research and policy agendas.
 - ASEAN-level consultations on the ethical principles derived from this review.

What is Epistemic Injustice?



- Definition from *The Routledge Handbook of Epistemic Injustice* (Kidd et al., 2017):

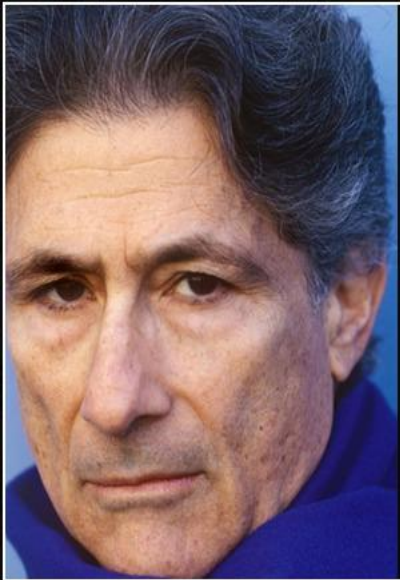
“...those forms of unfair treatment that relate to issues of knowledge, understanding, and participation in communicative practices. These issues include a wide range of topics concerning wrongful treatment and unjust structures in meaning-making and knowledge producing practices, such as the following: exclusion and silencing; invisibility and inaudibility (or distorted presence or representation); having one's meanings or contributions systematically distorted, misheard, or misrepresented; having diminished status or standing in communicative practices; unfair differentials in authority and/or epistemic agency; being unfairly distrusted; receiving no or minimal uptake; being co-opted or instrumentalized; being marginalized as a result of dysfunctional dynamics”.

Epistemic Injustice

Testimonial and Hermeneutical Justice

- According to Miranda Fricker, who originally coined the term, there are two types of epistemic injustice: testimonial injustice and hermeneutical injustice.
- Testimonial injustice occurs when there is unfairness related to trusting what someone has said or not believing someone's word/statement.
- An injustice of this kind can occur when the testimony of someone is ignored or not believed due to factors such as gender, sexuality, race, disability, and more broadly, because of the person's identity.
- These factors form the basis of pre-existing biases and prejudices that aid in the dismissal of what is being said and framed as unreliable.
- Hermeneutical injustice occurs when someone's experiences are not well understood by themselves or by others.
- This is because these experiences do not fit any concepts or frameworks known to the person (or known to others) due to the historic exclusion of some groups of people from activities such as research and scholarship that shapes the language and interpretative frameworks people use to make sense of their experiences.

Epistemic Injustice



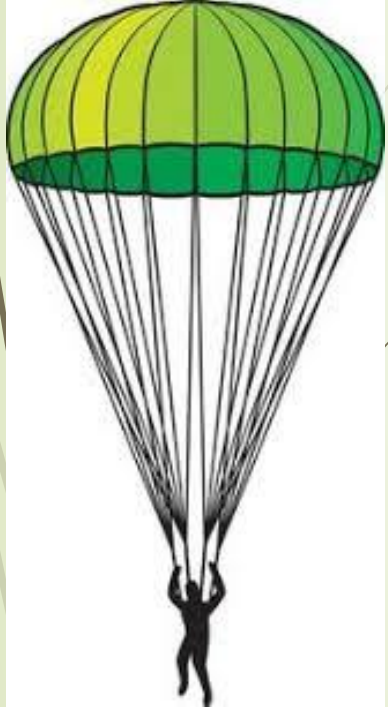
I emphasize in it [my Orientalism] accordingly that neither the term Orient nor the concept of the West has any ontological stability; each is made up of human effort, partly affirmation, partly identification of the Other.

— Edward Said —

AZ QUOTES

- Testimonial and hermeneutic injustice together give rise to epistemic violence by silencing voices and invalidating meanings that fall outside of hegemonic and dominant paradigms.
- This form of violence is not physical but deeply structural, reinforcing colonial hierarchies in knowledge production and denying the epistemic agency of those most affected by climate and health crises in the present moment.
- Thus, this is a power-based harm that occurs where dominant knowledge systems marginalize, silence, or misrepresent the knowledge(s) of those deemed as “Other”.

Decolonizing Knowledge Production: SEA



- In the global climate context, calls to shift from top-down scientific approaches and "parachute" science towards community-led, rights-based research, emphasize Indigenous-led methodologies and self-determination in climate displacement and health studies.
- However, while these efforts signal a step towards meaningful change, in many cases they remain limited or symbolic, ultimately still replicating colonial knowledge models:
 1. Framing local knowledge through a Western lens rather than granting it epistemic authority on its own terms.
 2. Indigenous and Southeast Asian voices continue to be included as annexes rather than co-authors in policy-making and adaptation research.
 3. The persistence of parasitic or "parachute" science, where Global North researchers extract data and publish without genuine local collaboration.

Climate and Health Nexus: A Broad Overview



- One of the most urgent and complex global challenges of the 21st century.
- Climate change affects human health:
 - Directly: extreme heat, air pollution, floods, wildfires, and storms.
 - Indirectly: disrupted food systems, forced (climate-induced) migration, water insecurity, mental health impacts, and changing patterns of infectious diseases.
- According to the WHO, climate change is already responsible for tens of thousands of deaths annually and is expected to contribute to an additional 250,000 deaths per year between 2030 and 2050, primarily from malnutrition, malaria, diarrhoea, and heat stress.

Climate and Health Nexus: A Broad Overview

- Climate change's health impacts are unequally distributed, with the Global South/Global Majority bearing the brunt of present and future harms.
- Africa, Latin America, the Caribbean, South Asia, and Southeast Asia—several of which are located in climate-sensitive zones—already experiencing higher rates of extreme weather events, ecosystem degradation, food and water shortages, and infectious disease outbreaks.
- These regions are often characterized by fragile health systems, underfunded public (health) infrastructure, high population densities, and greater socioeconomic inequality, all of which amplify their vulnerability.
- Moreover, a large proportion of the population in these regions depends on climate-sensitive livelihoods such as smallholder farming, fishing, and informal labour, which makes them particularly susceptible to climate-related impacts and shocks.

Research Landscape for Ethics and Equity in Climate and Health: Southeast Asia

- Southeast Asia widely recognized as one of the most climate-vulnerable regions in the world.
- Despite acute vulnerabilities, there is a striking absence of ethically explicit research on climate and health in Southeast Asia.
- The existing scholarship in the region mostly focuses on:
 - 1. scientific frameworks
 - 2. technical adaptation
 - 3. disaster preparedness
 - 4. infrastructure resilience
- Often driven by development agencies, risk management frameworks, and a biosecurity lens.
- While these studies contribute important empirical insights, they frequently lack engagement with normative ethical questions:
 - Who bears the greatest burden and why?
 - What principles should guide ethics in climate justice and health?
 - Whose knowledge and voices are considered legitimate in policy processes?
 - How do these concerns guide research/evidence that is produced?

Critical Gaps

➤ Gap 1: Language

Language and epistemology examines how linguistic dominance and knowledge hierarchies influence climate-health equity in Southeast Asia.

It considers whose knowledge is legitimized, how language mediates access to participation, and what this means for justice in both health outcomes and climate adaptation.

SEA linguistically diverse—English is not the main language.

- ➔ Ethical implications for the right to be informed.
- ➔ Questions of funding and donors become important as they influence language.
- ➔ Local languages may also carry important knowledge that is systematically excluded from national adaptation planning, including access to health systems.

Critical Gaps

- Gap 2: Indigenous Peoples and Territorial Justice
- When Indigenous knowledge, often transmitted in vernacular languages, is absent from policy and national-level (adaptation) planning, it reflects and reinforces marginalization rooted in land dispossession, political invisibility, and cultural erasure.
- This epistemic exclusion is inseparable from struggles over land, rights, and recognition.
- Indigenous leadership and knowledge, largely absent from ASEAN adaptation forums, are crucial for building meaningful resilience strategies, including health.
- ASEAN policies on environmental rights often ignore Indigenous Peoples' legal status and land claims.
- Globally: indigenous ethical traditions such as Buen Vivir (Constitutions of Ecuador and Bolivia) and Ubuntu have gained recognition.
- indigenous ethics in Southeast Asia, despite their rich, place-based philosophies, are less well-documented in climate-health discourse

Critical Gaps

- Gap 3: Gender and Structural Inequality
- The struggle for territorial justice among Indigenous communities in Southeast Asia is deeply entangled with gendered forms of exclusion and vulnerability:
- Contexts of poverty, labour exploitation, rural marginalization, and health system inaccessibility.
- Most climate-health strategies in the region remain gender-blind, failing to include women in decision-making or adequately respond to their distinct health needs.
- This omission constitutes not only a gap in research and policy, but a profound ethical failure.
- A similar trend is seen in the global literature review where ethics frameworks are routinely gender-blind.
- Ethically essential to recognize that LGBTQ+ communities also face distinct and often overlooked climate-related health risks.

Critical Gaps

- Gap 4: Meaning of Health

- It becomes crucial to rethink the very notion of what health means in the Southeast Asian context, given the previous gaps.
- Health is not a static biomedical endpoint: deeply relational, contextual, and culturally informed.
- As seen among Indigenous, rural, and marginalized communities, ethical climate-health policy must reckon with how people define wellness, and the difficult trade-offs made when livelihoods, environmental exposure, and survival intersect.

Critical Gaps

➤ Gap 5: Law

- The influence of law, legislation, climate litigation and legal mechanisms on climate-health ethics has not been mentioned previously.
- This becomes especially important to consider in light of the International Court of Justice's (ICJ) Advisory Opinion on Obligations of States in respect of Climate Change:
 - It now gives legal force to ethical principles and elevates climate-health considerations from ethical imperatives to legal obligations.
- The right to a healthy environment is now anchored in law, reinforcing all the calls for integrating health ethics into policy.
- The Advisory Opinion reinforces health-equity frameworks embedded in the scholarly work reviewed, offering a path to institutionalize them.