“The noblest study in nature is man, and the most interesting study of man is his mental and moral attributes” (Greenlees, 1882, p. 35)

This article examines imperial rhetoric around race and eugenics through a case study of colonial psychiatrist Dr Duncan T Greenlees. Using the lens of colonial psychiatry, the article explores how the legacy of imperialism lives on in British state institutions, such as in the education sector. It argues that educators need to be aware of imperial ideologies around class and race. Only through a firm historical grasp of these imperial myths can educators begin to challenge their own curricula and pedagogies, which are set against powerful global interests with roots in imperialism and colonialism. As Spring (1998, p. 11) points out:

“Education and language are important to civilising projects of Westerners. Prior to the late 20th century, Westerners imposed their forms of education as part of a conscious attempt to impose Western culture and languages… That English became the language of the global economy symbolises the powerful effect of colonial education and trade.”

Greenlees was the medical superintendent of Grahamstown Asylum in the Cape Colony from 1890 to 1907, regarded by his peers as an authority on race and eugenics (T. Duncan Greenless M.D., 1930). However, Greenlees and the legacy of colonial psychiatry have been largely overlooked by modern scholars, even with the new focus in Britain on the origins of racism. In contrast, this article maintains that Greenlees’ position as a central figure in African colonial psychiatry means his doctrines on race and eugenics maintain resonance in the modern world.

Despite Greenlees’ significance and the wealth of evidence he left, few scholars have devoted attention to his work. For example, Jock McCulloch (2015), a renowned scholar in this discipline, does not mention Greenlees’ importance to the development of colonial psychiatry even while noting the historiographical
difficulty that few colonial psychiatrists published their own material about native patients. However, alongside others such as J.C. Carothers, Antoine Porot, Wulf Sachs and Frantz Fanon, Greenlees authored much revealing material. His views on the native mind were not unique among colonialists but, as one of the first to propagate such theories through colonial psychiatry, he was a pioneer. Although J.F. Ritchie and J.C. Carothers were celebrated names in African colonial psychiatry and Greenlees less so, Greenlees was prominent between 1882 and 1929 while Ritchie and Carothers did not become authorities until the mid-Twentieth Century (McCulloch, 2015). It is thus likely that their theories were inspired by Greenlees and his peers. Psychiatrist Sally Swartz (1995), who has immersed herself in colonial psychiatry in South Africa, touches on the work of Greenlees. But she and Harriet Deacon are examples of only a few scholars who have done so. Unlike existing scholars of colonial psychiatry in Africa, this article analyses Greenlees’ own written material to explore imperial views on race and eugenics. It attempts to illuminate the origins of colonial myths that live on in current systemic racism and classism within the education sector.

Greenlees’ centrality within African colonial psychiatry notwithstanding, the limits of his reach are noteworthy. Although psychiatry in Nineteenth Century Britain was attracting new resources, colonial psychiatry received little attention. It was not considered an important aspect of colonial rule (Saha, 2013). Despite the efforts of some to popularise the field, the medicalisation of psychiatry did not earn the respect enjoyed by other areas of medicine – a battle, incidentally, that rages on (Marks, 2007). However, it is apparent from Greenlees’ accolades that his views of natives as inferior and incapable of self-governance held weight. The fact that scholars argue colonial psychiatry was more important as a method of control within South Africa than in other British colonies suggests Greenlees played an important role in constructing these damaging myths, implemented to justify British paternalism in its colonies. Swartz (1995) notes that it was during Greenlees’ tenure at Grahamstown Asylum that scientific racism became truly embedded in colonial psychiatry in South Africa. Further evidence of Greenlees’ potency is his campaign for racial segregation in asylums. This was realised in 1908 when Grahamstown Asylum became white-only (Swartz, 1999) just a year after his tenure ceased, suggesting that it may have been implemented in his honour. Colonial psychiatry was not solely responsible for the development of transcultural psychiatry and racial segregation policies. However, it was an important branch of subjugation and played its part in the ‘collaborationist’ mechanism of colonial control employed by the British (Robinson, 2001).

Born into a medical family, Greenlees studied medicine at the University of Edinburgh and graduated with a Bachelor of Medicine, Master of Surgery
(M.B. and C.M) in 1882. He was interested in the medicalisation of insanity and worked at asylums in Britain as an assistant attendant (Du Plessis, 2015) before being promoted to medical superintendent of Grahamstown Asylum in 1890. Relocating to colonial asylums was often the best way to gain prestige in the undervalued field of psychiatry (Scull, 1976). Greenlees became a prolific commentator on theories of insanity; his obituary in the British Medical Journal (BMJ, 1929) made clear that he was considered an authority, highlighting his prominence in the British Medical Association and his position in the Association of South Africa. As a celebrated physician, Greenlees authored considerable literature on racial sciences and eugenics for established medical journals. He advised government bodies and delivered lectures to asylum staff in Britain and the Cape Colony (Greenlees, 1882).

**Greenlees’ Theories on the Native Mind**

“These persons [South-African natives] at their best, have not the mental development of white people, whose minds have been undergoing an evolutionary education for ages past, while they have remained in the darkness of ignorance and uncivilization. Their wants are simple and their habits primitive; they are for the most part willing servants, and naturally look up to white people as far above them in knowledge” (Greenlees, 1882)

As a former public schoolboy (BMJ, 1929), Greenlees’ education aimed to generate imperial leaders and justify British rule by underpinning the values of the empire. This led to the emergence of muscular Christianity – the belief that a focus on sport, athleticism and competition at school would develop an understanding and passion for the Christian civilising mission across the British Empire, as well as making young men patriotic and capable of imperial and military governance (White, 2021). These principles are apparent throughout Greenlees’ work.

Like colonial psychiatrists since, Greenlees combined somatic and psychic understandings of the pathology of mental illness. He attributed two main factors to the psychology of the native mind, and maintained that biological and cultural differences between Africans and Europeans explained native mindsets. He attributed native insanity to the exposure of ‘savage’ minds to Western civilisation (Swartz, 1995). The myth of primitive and incompetent natives (Swartz, 1999) was key to the justification of British paternalism in the colonies as well as the confinement of natives who refused to conform to their prescribed roles in colonial society (Summers, 2010). As evidence, Greenlees analysed Grahamstown Asylum data on mania and melancholia – 19th century terms
referring to hyperactive and depressive symptoms of mental illness respectively. He claimed that:

“...examples of melancholia are rare among natives... I have never found this condition so acute as is found among white patients’ (Greenlees, 1895, p. 71) and ‘while mania is considered a disease of undeveloped brains, melancholia may be regarded as one of developed brains” (Greenlees 1902, p. 12).

These ‘discoveries’ aligned with existing colonial myths about Africa as the ‘dark continent’ (Brantlinger, 1985, p. 168) were constructed in order to justify the Christian civilising mission in British colonies. Imperial rhetoric held that, unlike Europeans, Africans were childlike, susceptible to criminality and unable to cope with the intellectual stresses of civilisation (Brantlinger, 1985). To this day, black people in Britain are disproportionately arrested and imprisoned compared with their white-counterparts (Gov.UK, 2022). The falsity that non-whites were incapable of melancholia was supported by later colonial psychiatrists and is still echoed in practice today (Rosenberg, 2019).

Interestingly, Greenlees (1902, p. 13) also said that ‘Melancholia... is only found in educated natives’, further positing that educated natives were unnatural and that those who had entered the sphere of ‘civilisation’ were unable to cope because of their ‘primitive’ brains, thus driving them to insanity. In the Nineteenth Century, transcultural psychiatry came to the forefront of colonial doctor’s pursuits, including Greenlees’. Assuming that non-Whites were inherently different, they set about trying to prove this. Although there were regionally specific ‘clinical’ opinions on the nature of the native mind, generally accepted tenets served to instil ideas of the inferiority of non-whites. It is argued that these theories were influential in the development of mental health policies of the World Health Organisation (WHO) and that western approaches to refugees, particularly non-Europeans, were inspired by transcultural psychiatry in the 1990s and potentially beyond (Delille and Crozier, 2018), showcasing how widely accepted such racial myths were at the height of empire and beyond.

Despite Greenlees’ confidence in the theories he sought to prove, they had highly questionable origins. Documentation of native insanity was usually by white males employed to maintain the empire. There were significant barriers to the diagnosis of native patients, particularly language. It was uncommon for natives to be employed within asylums, thus limiting possible learning about the culture and illnesses of native patients (Swartz, 1999; Swartz, 1995). Greenlees (1905, p. 8) admitted,

“...little is yet known of the neuroses as they specifically affect the savage.”
Thus, approaches to treatments for natives were not adapted to their needs and conflicting theories were frequently applied by colonialists in asylums. On the one hand, an assumption was made that natives were inherently different from Europeans. On the other hand, universal methods of diagnosis and treatment were used (Swartz, 1995). Exhibiting the continuation of imperial rhetoric in modern institutions, psychiatrists often apply universal treatment to people from other cultural backgrounds to this day (Falissard, 2020). Rather than finding out about indigenous customs, Greenlees carried out post-mortem examinations of former Grahamstown patients, working to prove existing colonial stereotypes through science. In *A Statistical Contribution to the Pathology of Insanity* (1902), Greenlees declared that post-mortem findings showed phthisis pulmonalis (tuberculosis) incited by the native’s supposed inability to civilise as a leading cause of native death. He argued,

“…[if] brought under the artificial influences of civilisation and compelled to clothe himself [the native] …is particularly liable to chest troubles.”

He also used reports of high levels of abdominal disorders to appeal to the common myth of the unhygienic native, stating they are ‘extremely filthy in habits’ (Greenlees, 1902. p. 17). This stereotype was commonly used to underpin dehumanising imperial rhetoric and support segregationist policies within asylums and the wider world. Summers (2010) notes a continuation in the rhetoric used to segregate asylums within the Cape Colony and at Saint Elizabeth’s asylum in the United States. There is a clear symbiosis between imperial African and American policies around African natives.

Whilst unfair to say that all Greenlees’ findings were inaccurate, it is clear his medical opinions were founded on existing imperial narratives, emphasised by Greenlees via the trappings of the scientific method. However, he consistently fails to consider inconvenient facts, such as that his post-mortem results could just as easily have been attributed to the negative impact of imperial conquest. The influence on Greenlees of Victorian hegemony, such as Darwin’s theory of natural selection, is discernible. Darwin’s theory was commonly misapplied by imperialists to claim racial superiority and, under the guise of Social Darwinism, to justify imperial actions (Dafler, 2005). In *Insanity Among the Natives of South Africa* (Greenlees, 1895, p. 75), uses language reminiscent of that used in 1930s Germany, warning that

‘The time will soon come when civilisation will overshadow [native tribes] with its baneful pall, bringing innumerable diseases in its train and ultimately exterminating all races that oppose its progress.’
Greenlees’ views are historically revealing, and their typicality is worth discussing. Whilst Greenlees was a tool of empire, there is evidence to suggest that his views were more extreme than some contemporaries. While many colonialists used the ‘civilising mission’ to subjugate and justify colonial rule, Greenlees appears to find the idea of natives and civilisation mutually exclusive, as evidenced in a disagreement between Greenlees and William Dodds, the first asylum inspector of the Cape Colony (Plug, 2020). It is not clear whether Greenlees and Dodds had a relationship before their careers in the Cape Colony, but their similar backgrounds and education at the University of Edinburgh suggest they would have been acquaintances. Existing literature shows they held each other in high professional esteem, and it is probable that Dodds employed Greenlees as medical superintendent of Grahamstown Asylum. Both were passionate about aligning South African asylums with European institutions, making their dispute all the more telling. Dodds was far from racially egalitarian, and he campaigned for racial segregation in asylums (Swartz, 1996), but an aspect of Greenlees’ practice shocked him. In 1894, Dodds inspected Grahamstown Asylum and found ‘unacceptable’ conditions for native patients, far below the standard in other Cape Colony asylums (Swartz, 1995). Greenlees (1894, cited in Swartz, 1995, p. 400) put forward his consistent view of natives as oppositional to civilisation, arguing that they ‘will not and cannot sleep on bed steads’.

Greenlees (1895, p. 71) argued that:

‘...in no other country has the influence of the white man been more apparent, and the devastating effects of modern civilisation been more felt’.

In a paper read at the South African Medical Congress, Greenlees (1887, p. 3) attributes this devastation to native peoples remaining in the ‘darkness of ignorance and uncivilization’ while also proffering that civilisation is impossible for natives as ‘the native brain has its analogue in the European child’s cerebrum’ (Greenlees, 1895, p. 75). Greenlees’ views appear to put native peoples in an impossible situation.

The quandary around the funding of colonial asylums might account for this disparity. Colonial doctors needed to highlight the negative impact of civilisation on natives to justify government funding for colonial asylums (Summers, 2010), thus negating the rationale of the civilising mission. However, any funding then achieved supported the image of the British as a philanthropic, superior state. In some ways, Greenlees’ role as a colonialist and colonial doctor was at odds. Greenlees was both a mouthpiece of the empire and a renegade. In many ways, Greenlees’ views were typical of imperial discourse, but this aspect is worth keeping in focus.
Greenlees’ Principles of Eugenics

“We are certainly all agreed that ‘Love is Blind’: only it is sad to think how much suffering might be avoided if the bandages were occasionally removed from Cupid’s eyes, and men were allowed to exercise the same care in the selection of their mates as they do when breeding their cattle” (Greenlees, 1892, p. 302).

The historical context of Greenlees’ principles of eugenics is also worth considering when exploring the impact of colonialism on modern systemic prejudices regarding imperial attitudes towards race, class and mental health. During the Nineteenth Century, both non-Europeans and white-working class British people were dehumanised and infantalised by the British state in an attempt to justify exploitation. Notably, the white working classes were as integral to imperial rule as native peoples across the empire. The working classes in Britain were generally the people powering the industrial revolution through cheap labour and terrible working conditions, which then funded imperial conquest. These attitudes were integral in the foundations of British state institutions in the eighteenth and nineteenth centuries, and in the twenty-first century, their legacy is still discernible in our state institutions.

Greenlees was a passionate colonialist working in the Cape Colony after the emancipation of Transatlantic slaves and during the Second Boer War (Facing History and Ourselves, 2018). British colonial prowess was being challenged by abolitionist ideologies and threats from other European powers. It was also believed that many South African whites, particularly those of Afrikaan descent, were becoming less civilised and more unruly, mirroring British stereotypes of native peoples (Klausen, 1997). For Greenlees and others involved in the maintenance of the British Empire, it was paramount that the white race maintained an air of civilisation and supremacy (Burdett, 2014). So Greenlees (1905, p. 12) turned to eugenics, asserting that:

“A neurotic parent may readily beget a mentally enfeebled child, and the drunken father is the most frequent cause of imbecility in his progeny.”

This suggests that for Greenlees the breeding of ‘lunatics’, ‘imbeciles’ and ‘drunks’, might constitute a grave threat to imperial rule (Klausen, 1997). In a discourse reminiscent of the Third Reich, Greenlees (1902, p. 302) added, ‘by careful selection, it might be possible to ultimately and entirely eliminate the neurotic diathesis.’ The legacy of Greenlees’ approach can still be seen in the negative perception of people from lower socio-economic backgrounds in the media.
today, with tabloid newspapers readily referring to these people as CHAVs (Council Housed And Violent). An article in The Daily Mail (2017) newspaper proves this, stating that ‘a chav is a chav, no matter how rich they are.’

Greenlees echoed other colonialists in fearing that if any white man was portrayed as insane, this would damage their paternal reputation, aligning them with the ‘primitive’ natives and refuting the rhetoric of the civilising mission (Swartz, 1995). In a conscious effort to ensure the superiority of Caucasian races by ‘nation building,’ Greenlees attempted to halt the consequences of the ‘degeneracy theory’ (Klausen, 1997, p. 28). In Greenlees’ (1892, p. 71) view of ‘coloured’ (mixed-race) people there is a merging of his ideas about race and eugenics; his fears regarding race and degeneracy are expressed clearly in his theories regarding ‘coloured’ people, whom he refers to as ‘the bastard,’ opining that ‘a mixture of white and black blood… seems to present the worst characteristics of both races.’

Greenlees was anxious about perceptions of Europeans in the colonies and for him, mixed-race communities were the epitome of the degeneracy that he believed to be a threat to British dominance (Kolsky, 2013). This rhetoric around miscegenation (interracial marriage), was mirrored by segregationists in the southern states of America around the same time. Alabama’s highest court stated in 1882 (cited in Stevenson, 2015, p. 28),

‘The evil tendency of the crime [of adultery or fornication] is greater when committed between persons of the two races… producing a mongrel population and a degraded civilisation’

These theories also underpinned the Afrikaan Apartheid theory of ‘bloedvermenging;’ the belief that the mixing of races would threaten white-purity (Falkof, 2016). It would be wrong to suggest that Greenlees alone influenced segregation policies, but his work on the medicalisation of racial theory supported these policies (Facing History and Ourselves, 2019).

Primarily, Greenlees was concerned with limiting miscegenation in the Cape Colony, but he also feared the disunifying effect of what he deemed unsuitable whites. Greenlees (1905) suggested that a ‘degenerate’ population would lead to the decline of Britain’s global power and believed that the best way to maintain the perceived superiority of the white race was through nation-building. He advocated for people to make genetically ‘wise’ choices over their marriage partners and emphatically proclaimed that it is:

‘...utterly absurd to my mind that we should devote more care and consideration to the mating of our horses and pigs than we do that of our sons and daughters’ (Greenlees, 1903, p. 11).
Greenlees’ approach to other people’s marriages was cold, and it is clear that he is not referring to white elites, but to the poor whites in South Africa, in particular Afrikaans, who were themselves marginalised by the British. Greenlees indeed claimed that they “lead isolated lives... marry and inter-marry to retain possession of their property... their children are neglected and uneducated” (Greenlees, 1894, p. 6).

This was common Boer War rhetoric and underscored the role played by colonial psychiatry in subjugating those of Dutch descent as well as African natives (Dubow, 1992). Greenlees maintained that white people should consider their genetic makeup before marrying and procreating as it would lead to the inheritance of imbecility, insanity and intemperance (alcoholism), among other traits (Greenlees, 1905). He posited that preventable disease and suffering could be avoided if the Natural Law of Selection were adopted. Greenlees also attempted to justify his concern with negative eugenics by suggesting it would advance the education and civilisation agenda of the time (Greenlees, 1903).

Summers (2010) stresses that it is important not to see the ‘insane’ natives as simply the victims nor Greenlees as purely a villain. Greenlees’ complexity needs to be considered. For example, Greenlees did a huge amount of work on promoting mental healthcare provision and raising the status of psychiatry, which was a much undervalued medical practice. He was a passionate doctor of psychiatry, and he was not afraid to speak against the grain of empire in favour of asylum progression. His significance is evident and is underpinned by a rich bank of sources, some of which this article has utilised. His tireless but misguided work on the medicalisation of race seems to have played a notable role in further cementing these views into colonial society, as noted by Swartz (1995). The time of his prominence along with his status within the British Medical Association also suggests that his views inspired colonial psychiatrists who came after him. There are certainly many similarities between the ideas of Greenlees and Ritchie and Carothers. Such colonial psychiatric views are believed to have influenced WHO policies, which would have undoubtedly paved the way for more modern schools of psychiatric thought (Delille and Crozier, 2018).

It seems clear that Greenlees’ race theories were used to justify later segregation policies. There are no direct links between Greenlees and later policies of segregation, and he was not the only person to propagate these ideas, but there is a distinct correlation. Greenlees retains particular importance due to the region he worked in and the pivotal time of his career.

Regardless of whether Greenlees’ impact was direct or indirect, it is abundantly clear that he and others like him have a lot to answer for; both in respect of the development of current ideologies associated with racism and classism and in their impact on institutions of the British state into the Twenty-First Century.
While Greenlees’ opinions on the native mind and eugenics would make most modern people squirm with discomfort, the vast impact that colonialism continues to have on state institutions is often ignored. However, as educators become more versed in the impact of imperial rhetoric, education can become an opponent of outdated race and class-based myths, rather than the unintentional mouthpieces of the long-gone British Empire.

The Impact of Colonial Rhetoric around race and class on the Current Education System

‘Destructing, decolonising and detoxifying the education regime are a sine qua non for… academics, especially those who are cognisant of the true meaning of education.’

(Nkwazi Nkuzi Mhango, 2018)

The sources produced by Greenlees demonstrate the damaging potential of the rhetoric that underpinned the British Empire. Although the discussion is far wider than the theories of one man, this article uses him as a lens through which to view colonial ideologies, as he was influential at the time, and his theories on race and class impacted on his peers in the medical community and on those who came after him. Saliently, Greenlees’ theories were generally indicative of the hegemonic views at the time so there is much to be gleaned about the continuing impact of the British Empire on education from his writings.

Although throughout the Twentieth Century and into the Twenty-First Century, systemic prejudices went largely unchallenged, decolonisation of the education system has become a priority for many educators in the past few years, with activist organisations such as Black Lives Matter bringing the issue to the fore. The hope is that articles such as this one will provide greater knowledge of the imperial myths about race, class and mental health that were used to justify British paternalism and colonialism. This in turn will further educators’ understanding of the direct impact of imperialism on modern prejudices, inspiring a real passion for decolonisation and increasing the chances that the education sector will become truly diverse and representative. Elhinnawy (2022) maintains that a diverse book collection does not suffice and that an integral part of the decolonisation process is for educators to honestly explore their own internal prejudices and their origins. Bentrovato (2018), indeed, contends that not only does colonialism continue to impact on modern institutions to this day, it is in fact a ‘hallmark of modern world history’ whose legacies survive because of modern institutions such as education,
economy and culture. Even so, the origins of prejudice continue to be little explored. Without an historical grounding, it may be difficult for educators to grasp the urgent need for decolonisation and the enormity of colonialism’s hold to this day. The National Education Union (NEU, 2019) echoes this sentiment, arguing for the importance of educators across all stages of learning, actively seeking to challenge their own pedagogy and curriculum so that education becomes a combatant of, rather than an unintentional ally of damaging colonial rhetoric.

However, the argument for decolonisation has been a controversial one, with a range of academics and politicians weighing in. The governmental Department for Education (2022), seemingly concerned by decolonisation, introduced a guidance on impartiality in schools in 2022 on the back of the growing call to decolonise education. Whilst some educators feel that this guidance rendered decolonisation in education impossible, it is salient that the guidance does not include any additional statutory requirements, and for schools who choose to follow the guidance to the letter, there is still room to decolonise as long as a range of historical sources and interpretations are engaged with and the views of political movements and activists are not taught as objective fact. The dichotomy between a government and its institutions can cause friction. Leading governmental leadership posts continue to be filled by a disproportionate number of privately educated people (predominantly white and male) who attended Oxbridge colleges; In 2019, 57% of the government’s cabinet and 36% of those who work in the media had attended an Oxbridge university (The Sutton Trust, 2019). Private schools and Oxbridge universities were avid mouthpieces for colonial rhetoric in the nineteenth century, so it should not go unmentioned that it is from these educational settings that a large proportion of our politicians and media tycoons originate. Having said that, many redbrick universities are going through a process of decolonisation at the moment, but controversially Oriel College, part of Oxford University, still displays a statue of colonialist and Oxford alumni Cecil Rhodes. Rhodes was responsible for the massacre of 20,000 Africans, leading to the conquest of the British colonies of Northern and Southern Rhodesia (modern day Zimbabwe) (Biggar, 2021). Despite Rhodes’ atrocious history, Conservative Culture Secretary, Nadine Dorries, made the statue a Grade II listed structure despite Historic England declaring that it ‘lacked the richness in detail’, required for the status and leaving some academics criticising the government for its ‘inept culture war project’ (Hall, 2021). Acknowledging the conflict between traditionalist and progressive ideology that rages on in prestigious educational settings, Oxford University made the contentious decision to keep the statue but have got rid of the plaque commemorating Rhodes and have replaced it with educational information about imperialism and Rhodes’ actions in Africa. They have also publicly stated
that Rhodes’ actions are ‘in absolute contrast to the values of a modern university, not least diversity and inclusion’ (Biggar, 2021). If it is a truism that the *raison d’etre* of Victorian independent schools was to instil values of empire, it is very likely that the most traditional and elite of British independent schools and universities will continue somewhat to inculcate imperial views upon their students; thus, decolonisation may seem a scary prospect to some of our country’s leaders. Conflicting ideologies between educators and politicians can certainly prove to be a barrier to decolonising education, but that does not mean we should stop campaigning for the diversification and decolonisation of schools.

Despite the controversy over decolonisation, for educators who have dedicated themselves to improving the lives and chances of young people, it is a no-brainer. As diversity in Britain increases, the need to decolonise becomes more urgent – students need to feel represented in order to be fulfilled and engaged, with 43% of young Black people saying that,

“A lack of curriculum diversity was one of the biggest barriers to young Black people achieving in schools” (Anna Freud, 2021).

Yet many schools still pursue whitewashed curricula and old-fashioned pedagogies. Critics of decolonisation have argued against it on the basis that we should not eradicate history, but true decolonisation does not entail deleting history. Instead, it encourages adding to existing narratives and amplifying marginalised voices who have been historically silenced. Another criticism is that decolonisation only considers marginalised black voices, but that is too literal an understanding of the term. Decolonisation is not only about amplifying black history but also other marginalised voices such as the white working classes who too were downtrodden and exploited at the expense of imperial prowess. One compelling reason for ensuring decolonisation is that the amplification of many marginalised voices and the celebration of shared histories may also lead to the building of bridges between marginalised communities that have often been pitted against each other in the past.

Diverse History UK (DHUK) worked on this aspect of decolonisation with Springfield Academy in 2022. Springfield Academy is a primary school and part of the progressive Djanogly Learning Trust (DLT) in Nottinghamshire whose staff are working hard at decolonising. Springfield approached DHUK with an existing history curriculum, wanting to make it more representative of their diverse student population. DHUK introduced a scheme of work exploring the area’s mining history. This included both a detailed look into the impact on the white working class community and also an exploration of migrant miners who had moved to the ‘motherland’, from then British colonies. The main focus of this
enquiry was to highlight the positive relationships and experiences shared by both black and white miners, in order to dispel the myth that these communities had no positive shared histories, leading to heightened racial tensions in the present. Nottinghamshire, in particular has experienced tumultuous race relations in the Twentieth Century. In 1958, St Ann's, a predominantly working-class area of Nottingham experienced race riots, allegedly triggered by an interracial marriage (Emily Cousins, 2010). The riot was between white-working class people, the police (who too racially discriminated) and Caribbean migrants. Although the marriage is widely considered the tipping point, white-working classes and migrants from across the empire had been pitted against each other by the elite-run British media for decades preceding this. The white-working classes were brought into the city to work in the factories during the industrial revolution, with the promise of a better life, just as the migrants were brought into British cities under the guise of a better life. Understanding the potential discord created by their failed promises, the government and the media ensured that the anger of the white and black-working classes was directed at each other and not the elite, and so the relationship was one born out of conflict. This is a strategy that is commonly seen in the right-wing media to this day (Cooper, Blummell and Bunce, 2020), further highlighting the importance and complexity of the duty that educators have, at undoing media injustices.

When educational settings begin to consider decolonisation, they also need to look at the demographic of their staff. Marginalised voices need to be heard from within the staff as well as amplified through the curriculum. How can educational institutions be truly representative if the staff only reflect a small proportion of society? A recent UCL study found that despite non-Brits making up a third of the student population in England, 46% of schools do not have a non-British teacher at their school (Tereshchenko, Mills and Bradbury, 2020). The impact of colonial myths about race can also directly be seen in the exclusion rates of black students as opposed to their white counterparts, with Black-Caribbean children over six times more likely to be excluded from schools in some local authorities (Swiszczowski, 2022). This statistic is very illuminating as it highlights the importance of a decolonised curriculum and diverse workforce. Without it, more generations of young people will inadvertently learn prejudices that only served the white elite, and as adults, these may become prejudices which go on to fuel unconscious discrimination such as disproportionately excluding or imprisoning people of colour.

This article has only been able to scratch the surface of the damaging colonial myths around race and class, which pervade to this day and has scarcely begun to consider the myriad of reasons why educators should feel passionate about decolonisation. However, the words of Greenlees provide a significant insight into
the ideologies that propped up the British Empire, and should serve as a shocking reminder of the philosophies on which modern Britain has been founded. Decolonisation is no small task, but the rewards are vast. If educators work together to build a fairer and more representative education for our students, then we are playing a part in creating a kinder, less judgemental and more compassionate society for our students and our children.

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AN EXPLORATION OF THE PERSISTING LEGACY OF IMPERIAL RHETORIC IN MODERN EDUCATION


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Rosa Legeno-Bell is the Co-founder and Director of Diverse History UK, an LGBTQ+ and family-run educational consultancy that helps schools diversify their curriculum. Prior to this, Rosa worked in the education sector for over a decade, mainly in inner-city London comprehensives, as a history teacher, Head of History and an Associate Assistant Principal.