



I Accept

Reject All

Show Purpose



Home ▶ All Journals ▶ Area Studies ▶ Review of African Political Economy ▶ List of Issues ▶ Volume 45, Issue 158 ▶ Indirect rule redux: the political econo

Review of African Political Economy > Volume 45, 2018 - Issue 158

1.257 16 Views CrossRef citations to date Altmetric

Indirect rule redux: the political economy of diamond mining and its relation to the Ebola outbreak in Kono District, Sierra Leone

Le retour de la « règle indirecte » : la politique économique de l'extraction de diamants et sa relation avec l'épidémie d'Ebola dans le district de Kono, au Sierra

Leone

🗷 🗈 Mara Kardas-Nelson, Adia Renton, Mohamed Raijor Barrie.

Yusuph Pages 522

66 Cite thi

We Care About Your Privacy

We and our 907 partners store and access personal data, like browsing data or unique identifiers, on your device. Selecting "I Accept" enables tracking technologies to support the purposes shown under "we and our partners process data to provide," whereas selecting "Reject All" or withdrawing your consent will disable them. If trackers are disabled, some content and ads you see may not be as relevant to you. You can resurface this menu to change your choices or withdraw consent at any time by clicking the ["privacy preferences"] link on the bottom of the webpage [or the floating icon on the bottom-left of the webpage, if applicable]. Your choices will have effect within our Website. For more details, refer to our Privacy Policy. Here

We and our partners process data to provide:

This arti political that fore

ABST

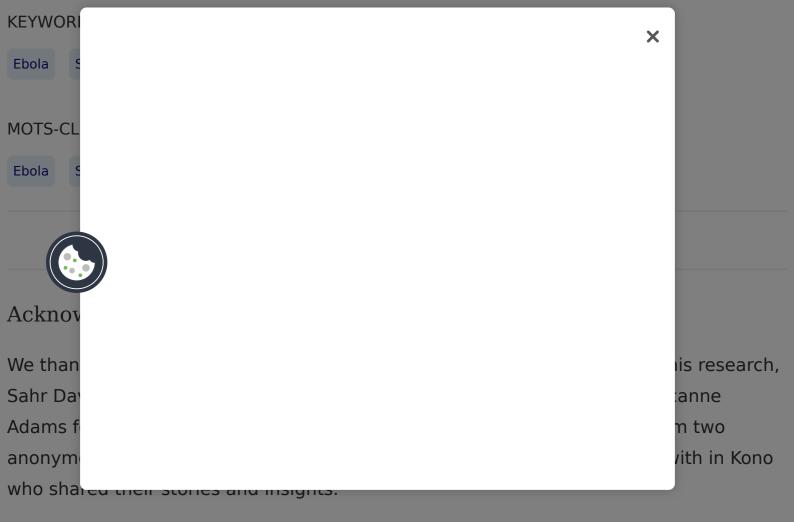
k and the hors argue

acilitate the

the outbreak and in its aftermath, they show how this 'indirect rule redux' undermines democratic governance and the development of revenue-generation institutions. Finally, they consider the linkages between indirect rule and the Ebola outbreak, vis-à-vis the consequences of the region's intentionally underdeveloped health care infrastructure and the scaffolding of outbreak containment onto the paramount chieftaincy system.

RÉSUMÉ

Cet article explore la relation entre l'épidémie d'Ebola de 2014-2016 et la politique économique de l'extraction de diamants dans le district de Kono, au Sierra Leone. Les auteurs avancent que des entreprises étrangères ont recyclé les stratégies coloniales de la « règle indirecte » afin de faciliter le flux de ressources hors du Sierra Leone. S'appuyant sur de la recherche de terrain conduite pendant l'épidémie et après, il est démontré comment ce retour de la « règle indirecte » sape la gouvernance démocratique et le développement d'institutions qui génèrent du revenu. Enfin, cet article s'intéresse aux liens entre la « règle indirecte » et l'épidémie d'Ebola, vis-à-vis des conséquences de l'infrastructure de soins de santé intentionnellement sous-développée dans la région et les tentatives de confinement de l'épidémie pour le système essentiel de chefferie.



Disclosure statement

No potential conflict of interest was reported by the authors.

Notes on contributors

Raphael Frankfurter, AB is currently an MD/PhD student in the University of California, San Francisco/University of California, Berkeley Joint Program in medicine and medical anthropology. He received his AB in Anthropology from Princeton University. From 2012 to 2016 he served as the Executive Director of Wellbody Alliance, a community health organisation in Kono District, and oversaw its response to the 2014–2016 Ebola outbreak, integration with Partners in Health, and design and implementation of community-based Ebola care programmes.

Mara Kardas-Nelson, BA is a joint Masters in Public Health/Masters in Journalism student at the University of California, Berkeley. She has worked for 10 years as a freelance journalist covering issues related to health, development and extractive industries across Africa, and worked from 2015 to 2018 with Partners in Health, Sierra Leone as

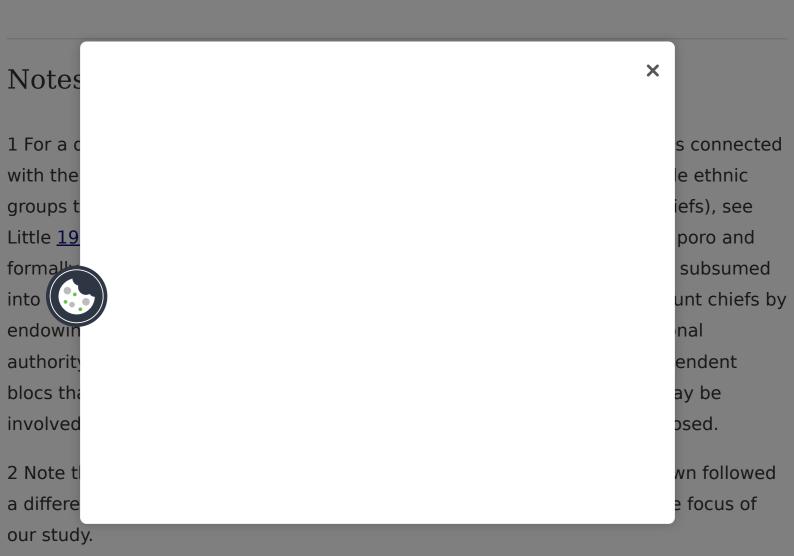
the Dire the Ministry X of Healt Adia Ber ern Universi sease in Sierra Le n political econom Moham nd in Global Partr Health 3 is medical Sierra degree t where he Leone, a was sup Paul Fari niversity, formerly f Social Medicine at Harvard Medical School, and an attending physician and Chief of the

Division of Global Health Equity at Brigham and Women's Hospital in Boston,
Massachusetts. He is co-founder and Chief Strategist of Partners in Health and the
recipient of numerous honours, including the Margaret Mead Award from the American
Anthropological Association, a John D. and Catherine T. MacArthur Foundation
Fellowship, and, with his PIH colleagues, the Hilton Humanitarian Prize. He is a member
of the Institute of Medicine of the National Academy of Sciences and of the American
Academy of Arts and Sciences.

Eugene T. Richardson, MD, PhD is Assistant Professor Global Health and Social Medicine at Harvard Medical School and an Attending Physician in the Division of Infectious Diseases at Brigham and Women's Hospital. An Infectious Disease specialist, he received his MD from Cornell University Medical College and his PhD in Anthropology at Stanford University. He has worked in Sierra Leone since 2014 and has published widely on the epidemiology, clinical features and political economy of Ebola and infectious disease outbreaks in Africa.

ORCID

Raphael Frankfurter http://orcid.org/0000-0003-3531-9508

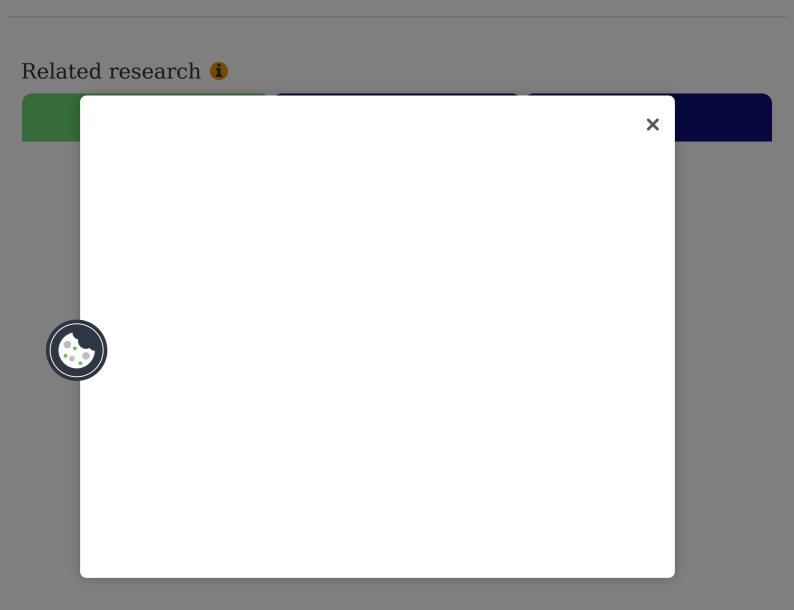


3 To estimate the cost of a fully functional health system, we multiplied the population of Sierra Leone by the recommended minimum government health expenditure of US\$86 per person (McIntyre and Meheus 2014).

Additional information

Funding

This work was conducted with the support of a KL2/Catalyst Medical Research Investigator Training award (an appointed KL2 award) from Harvard Catalyst | The Harvard Clinical and Translational Science Center (National Center for Advancing Translational Sciences, National Institutes of Health Award KL2 TR002542). The content is solely the responsibility of the authors and does not necessarily represent the official views of Harvard Catalyst, Harvard University and its affiliated academic healthcare centres, or the National Institutes of Health. This work was also supported by the National Institute of General Medical Sciences (NIGMS) Grant No. T32GM007618.



Information for Open access Authors Overview R&D professionals Open journals Editors **Open Select** Librarians **Dove Medical Press** Societies F1000Research Opportunities Help and information Reprints and e-prints Advertising solutions Newsroom Accelerated publication Corporate access solutions Books Keep up to date Register to receive personalised research and resources by email Sign me up X or & Francis Group Copyright