

The Rwanda Bill's denial of the truth is not a mistake:...

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Kemi Badenoch is the Business Secretary.

She is also the minister for inequality.

And she is desperate to be the leader of the Tory party.

To prove herself fit for the last role, she is promoting her ability to ignore facts, and demand that otherwise do likewise. [As the Guardian notes this morning:](#)

A new front has emerged in the culture war as Kemi Badenoch, the equalities minister, condemned an academic study an MP described as “woke archaeology” that examined whether ethnicity was a risk factor with medieval plague.

The background, as they explain, is:

The paper, published [in the journal Bioarchaeology International](#), examined the remains of 145 people buried at London plague cemeteries, 49 of whom died from the plague.

By examining five features of the skulls and comparing these with a forensic databank covering modern and historical global populations, it estimated the likely heritage of people who died and found that those of African heritage were disproportionately more likely to have died from plague than people of European or Asian ancestry, compared with non-plague deaths.

The work found that those of “African heritage were disproportionately more likely to have died from plague than people of European or Asian ancestry, compared with non-plague deaths.” It also noted that the sample size was small.

In response, Badenoch has said that “the idea of structural racism being a factor in health outcomes, which she has previously rejected, could be damaging even 700 years later.”

Three things stand out. The first is that ethnicity is a factor in health care. For example, I [note this from a publication by Parliament](#) on black maternal health (their title):

The UK has one of the lowest maternal mortality ratios in the world. There are, however, glaring and persistent disparities in outcomes for women depending on their ethnicity. Maternal mortality for Black women is currently almost four times higher than for White women. Significant disparities also exist for women of Asian and mixed ethnicity. These disparities have existed and been documented for at least 20 years, but only received mainstream attention and Government action since around 2018. Considerable credit for putting the issue on the political and public health agenda goes to campaigners, such as Five X More and Birthrights, who have worked to publicise the issue.

As a matter of fact, ethnicity is a factor in UK healthcare, and it looks very likely that structural racism has a significant role to play in that fact, based on the evidence.

Second, you cannot avoid that fact by denying the existence of structural racism, as Badenoch does, persistently.

Third, you cannot prevent people coming to the conclusion that structural racism has a role, based on the evidence, by telling them that this is not the case and that they must not make that claim, as Badenoch has done in this case by writing to the employer of the lead researcher to make a complaint.

Why note this?

Firstly, because Badenoch is in denial of the truth.

Secondly, because this is the logic of the Rwanda Bill being played out elsewhere. It is clear that the Tories are now going to say that problems that are very obviously real do not exist and keep repeating that until they get traction with the denial.

Third, this is a fascist propaganda methodology in action. Tell a lie. Repeat it often. Never waiver. Then, win acceptance of the untruth and make a basis for action.

All of which is profoundly worrying.