

Racism and Racialized Health Disparities

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ABOUT BLKHLTH

BLKHLTH is a nonprofit 501(c)(3) organization that aims to dismantle racism to improve health outcomes for Black people. We work to disrupt the pathways through which structural racism causes poor health by facilitating antiracism workshops, creating engaging and educational social media content, and hosting powerful community-focused events to share knowledge and resources.

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MPH in Health Policy and Management,
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BA in Global Health and Environment,
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Learning Objectives

- Understand the levels of racism (institutionalized, personally mediated, and internalized)
- Connect racialized health disparities to their social, historical, and political causes
- Strategize on applying Critical Race Theory (CRT) and antiracism principles in our work to reduce health disparities

What is Racism?

Racism is a **system** of structuring opportunity and assigning value based on phenotype (“race”), that:

- unfairly disadvantages some individuals and communities
- unfairly advantages other individuals and communities (i.e., white privilege)
- undermines realization of the full potential of the whole society through the waste of human resources

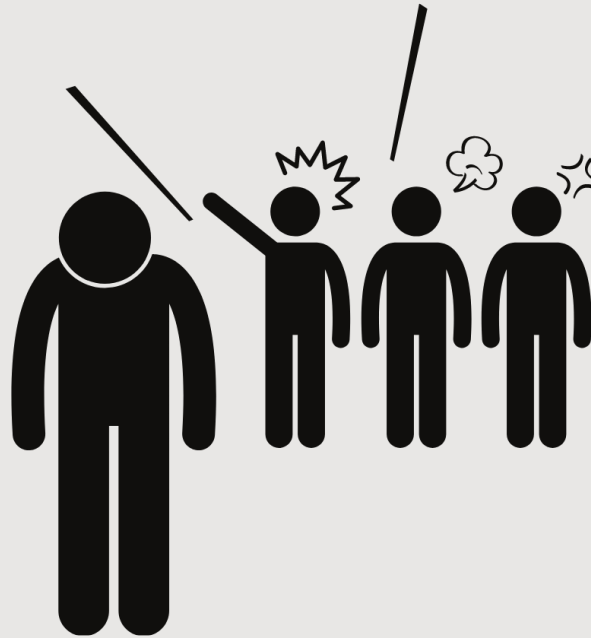
Black Americans die of COVID-19 at a rate more than twice that of white Americans, and greater than that of Latino-Americans, Asian-Americans, and Indigenous Americans.

APM Research Lab, June 2020

The 3 Levels of Racism



Internalized



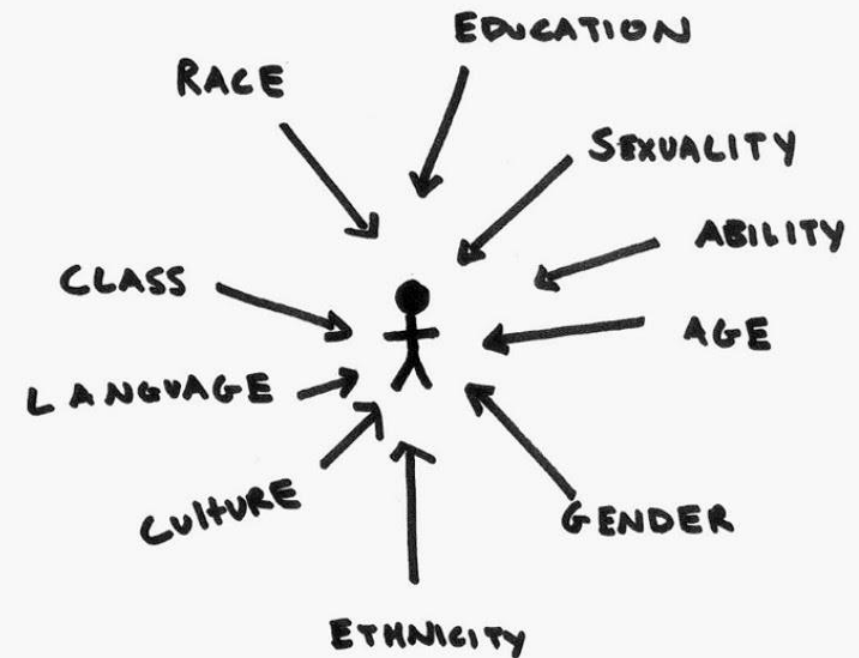
Personally-mediated



Institutionalized

Systems of power interlock and intersect

Intersectionality is a theoretical framework for understanding how aspects of a person's social and political identities might combine to create unique modes of discrimination and privilege.



How Racism Causes Health Disparities

Social Determinants of Health

Social determinants of health are the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life. These forces and systems include economic policies and systems, development agendas, social norms, social policies, and political systems.

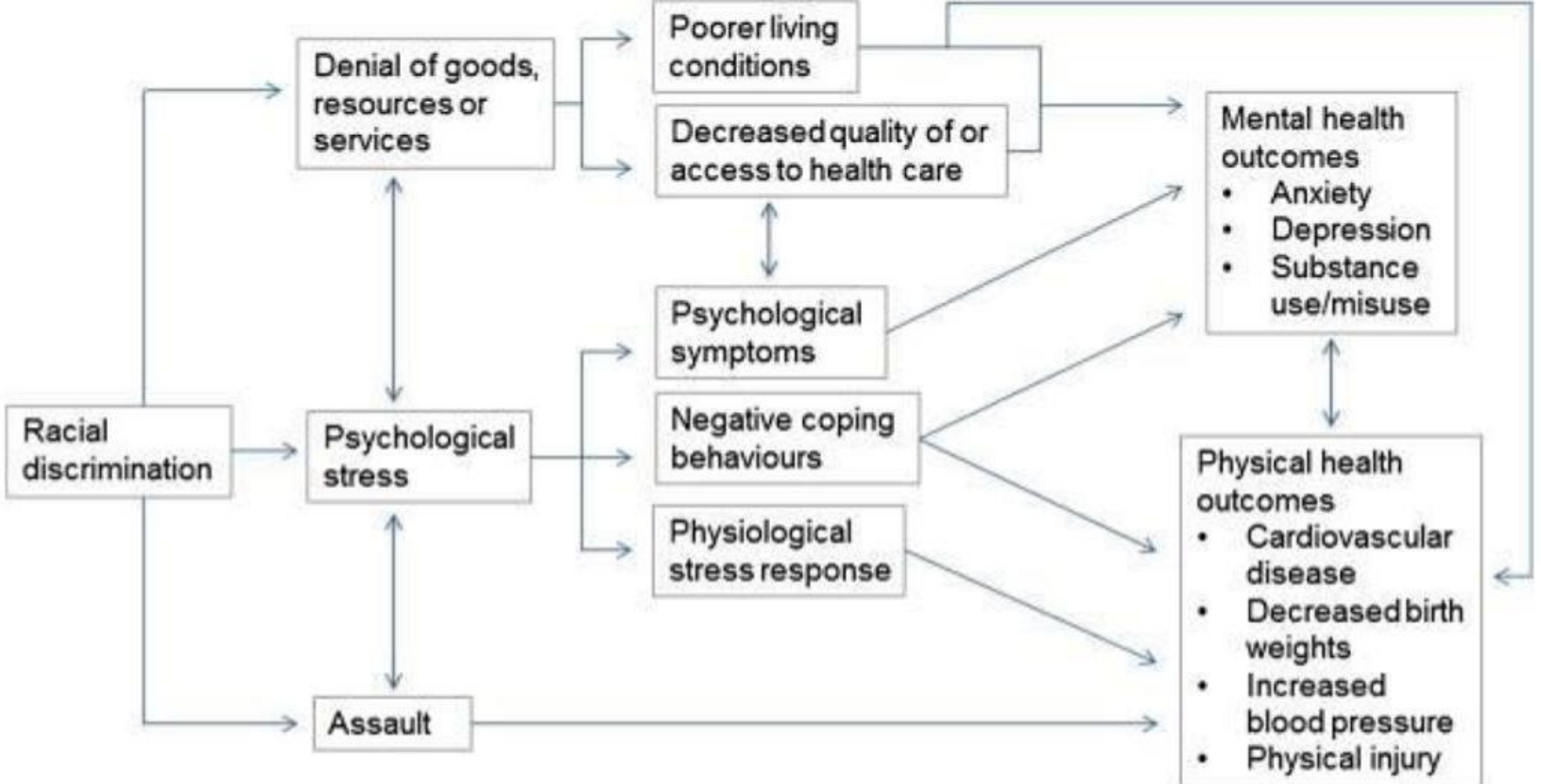


Health Disparities

Health disparities are differences in the health status of different groups of people. Some groups of people have higher rates of various diseases and chronic illnesses, and more deaths and poorer health outcomes compared to other groups.

Racialized health disparities describe the increased presence and severity of certain diseases, poorer health outcomes, and greater difficulty in obtaining healthcare services for disadvantaged races and ethnicities.

Conceptual Model Linking Racism and Health Outcomes



Paradies et al.: Racism as a determinant of health: a protocol for conducting a systematic review and meta-analysis. Systematic Reviews 2013 2:85

A wicked problem

Racism is a “wicked” public health problem that fuels systemic health inequities.

It is complex, highly resistant to solutions, there is much disagreement about its nature and causes, and it endures and adapts over time.



“Redlining” and residential segregation

- For decades, the federal government worked with real estate agents and banks to create maps with red outlines around the parts of US cities that were considered at high risk for defaulting on mortgages
- “Riskier” neighborhoods were predominantly Black and Latinx in many of the nation’s largest cities, including Detroit, Chicago, and Atlanta
- As a result, banks and other lenders systematically rejected loans for creditworthy borrowers based strictly on their race or where they lived, and deemed those neighborhoods as **less desirable for investment**



Grocery and fresh food stores
Quality education
Quality health care
Green space



Proximity to polluted water, soil, and air
Concentrated poverty
Neighborhood violence

Mass Incarceration

- Although the Civil War marked the end of slavery in the US, through the 13th Amendment to the US Constitution (which permits forced labor in prison) and various other legal practices, **the current prison system is an institution of forced labor**
- Racial inequality is evident in every stage of the criminal justice system
- Black Americans are continually subjugated by way of racist policies and stereotypes that brand them as “problematic” citizens

Facilities are ill-equipped to provide for the medically underserved

Environmental factors like violence and overcrowding

Critical Race Theory and Antiracism

Antiracism

Because racism is the foundation upon which our society and institutions stand, choosing to interact with these institutions in a neutral way allows them to thrive.

Antiracism is the **active process** of identifying and eliminating racism by changing systems, organizational structures, policies and practices and attitudes, so that power is redistributed and shared equitably.

What is Critical Race Theory (CRT)?

An **antiracist intellectual movement** that identifies root causes of racial hierarchies and investigates the possibility of transforming the existing racist structuring of society.



Selected Principles of CRT

Race as a social construct

Social construction of knowledge

Structural determinism

Disciplinary self-critique

Knowledge Check

The **one-drop rule** in the United States and the **pencil test** in South Africa are most relevant to which principle of CRT?



One-drop rule

Race as a social construct

Social construction of knowledge



Pencil test

Structural determinism

Disciplinary self-critique

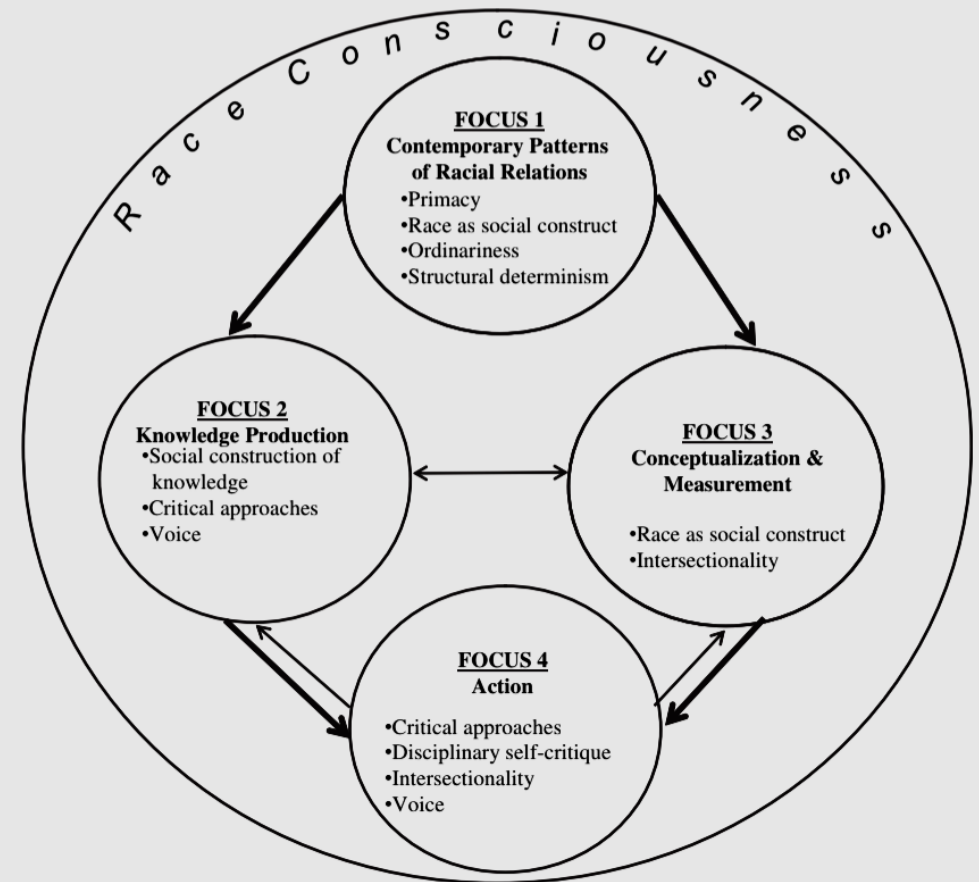
Applying CRT and Antiracism Strategies to Improve Health

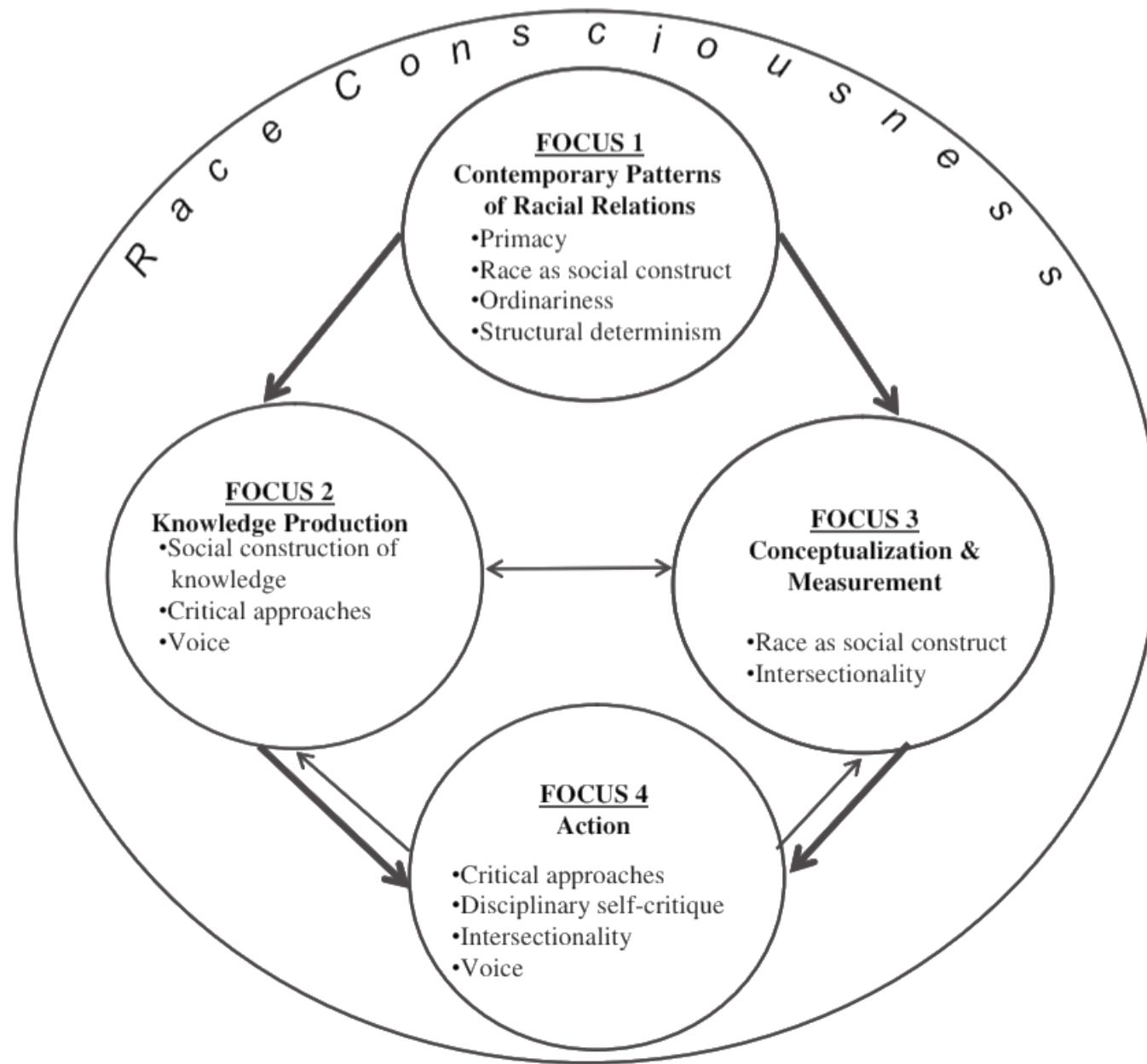
Public Health Critical Race Praxis

Public health critical race praxis (PHCRP) is a process for conducting research in a way that focuses on racial equity.

PHCRP combines theory, knowledge, science and action to actively fight against health inequities.

Source: Ford and Airhihenbuwa (2010)





1: Contemporary Racialization

To study racism's effect on health, we must understand how racism operates in the time period and place of interest to the study.

Related principles:

- Race as social construct
- Structural determinism

2: Knowledge Production

Understand how racialization may shape the knowledge on a topic, or how the project may reinforce existing beliefs about racial groups.

Related principles:

- Social construction of knowledge
- Voice

3: Conceptualization & Measurement

Define a study's race-related constructs, the relations between constructs, and the social contexts in which the constructs and relationships exist.

Related principle:

- Intersectionality

4: Action

The PHCRP process comes full circle when researchers use the knowledge obtained through their studies to disrupt causes of inequities.

Related principles:

- Critical approaches
- Disciplinary self-critique

Principle	Affiliated Focus(es)	Definition	Conventional Approach	PHCR Approach
1. Race consciousness	All	Deep awareness of one's racial position; awareness of racial stratification processes operating in colorblind contexts	Colorblindness-belief in the irrelevance of racism characterized by the tendency to attribute racial inequities to non-racial factors (e.g., SES)	A researcher clarifies her racial biases before beginning research within a diverse community
2. Primacy of racialization	Contemporary Racialization	The fundamental contribution of racial stratification to societal problems; the central focus of CRT scholarship on explaining racial phenomena	Tendency to attribute effects to race rather than to racialization or racism	A study on neighborhood characteristics includes factors hypothesized to reflect structural racism
3. Race as social construct	Contemporary Racialization Conceptualization & Measurement	Significance that derives from social, political and historical forces	Biological determinism – the belief that race is meaningful because it provides insights about one's biology and propensities	A study assesses race not as a risk factor but to identify a population at risk for specific racism exposures
4. Ordinarity of racism	Contemporary Racialization	Racism is embedded in the social fabric of society	Racial exceptionalism-defines racism as rare, discrete and overtly egregious incidents	A study on racism and health operationalizes racism as routine exposures (e.g., being followed while shopping)
5. Structural determinism	Contemporary Racialization	The fundamental role of macro-level forces in driving and sustaining inequities across time and contexts; the tendency of dominant group members and institutions to make decisions or take actions that preserve existing power hierarchies	Emphasizing individual or interpersonal factors	A multilevel study considers policy factors that may promote residential segregation
6. Social construction of knowledge	Knowledge Production	The claim that established knowledge within a discipline can be re-evaluated using antiracism modes of analysis	The belief that empirical research carried out properly is impermeable to social influences	A disparities-related literature review compares articles published in minority vs. majority journals
7. Critical approaches	Knowledge Production Action	To dig beneath the surface; to develop a comprehensive understanding of one's biases	To accept phenomena or explanations at face value	A researcher considers alternative explanations for findings than those previously posited
8. Intersectionality	Conceptualization & Measurement Action	The interlocking nature of co-occurring social categories (e.g., race and gender) and the forms of social stratification that maintain them	Additive model of co-occurring social categories (e.g., race and gender)	Efforts to reduce HIV risk behaviors among diverse men who have sex with men address racial stereotypes
9. Disciplinary self-critique	Action	The systematic examination by members of a discipline of its conventions and impacts on the broader society	Limited critical examination of how a discipline's norms might influence the knowledge on a topic	Researchers examine implications for research of using 'health inequities' vs. 'health disparities' vs. 'health inequalities'
10. Voice	Knowledge Production Action	Prioritizing the perspectives of marginalized persons; Privileging the experiential knowledge of outsiders within	Routine privileging of majority perspectives	Responses of skepticism or anger when outsiders within speak truth to power

Five Key Elements of Antiracism Praxis

Wicked problems require us to utilize both the science and art of relationship building, reviewing evidence, planning, implementing, and evaluating.

Reflexive
relational
practice

Socio-political
education

Structural
power
analysis

Systems
change

Monitoring
and
evaluation

Source: Came and Griffith (2018)

Thank you!

Questions?

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