Naming Racism

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Dual Reality:
A Restaurant Saga
Levels of racism

• Institutionalized
• Personally-mediated
• Internalized
Institutionalized racism

- Differential access to the goods, services, and opportunities of society, by “race”
- Codified in societal structures, processes, and values
Characteristics

• Historical
• Legalized
• Persistent
• Normative
• Includes both acts of commission and acts of omission
Manifestations

- Material conditions
- Access to power
- White privilege
Material conditions

- Housing
- Education
- Employment
- Income and wealth
- Access to health care
- Toxic dump locations
- Neighborhood resources
Access to power

• Information
  – Health information, one’s own history

• Resources
  – Capital, organizational, political

• Voice
  – Voting rights, representation in government, media coverage
White privilege

- White as normal
- White as superior
- White as raceless
- Sense of entitlement
- Invisibility of others
- Hypervisibility of others
Measurement

- Distribution of resources
- Distribution of risks
- Absence of representation

- Examine current status as well as historical trends
Remedies

- Separation
- Integration
- Self-determination
  - Power to decide, power to act, control of resources
- Reparations
- 100% inheritance tax
Debates

• “Race” and racism in relation to class
Personally-mediated racism

- Differential assumptions about the abilities, motives, and intents of others, by “race”
- Differential actions toward others, by “race”
- Prejudice and discrimination
Characteristics

- Interpersonal
- Can be unintentional
- Ranges from subtle to blatant
- Often denied or attributed to other causes
- Constitutes “everyday racism”
- Includes both acts of commission and acts of omission
Manifestations

- Lack of respect
  - Poor or no service
  - Failure to communicate options

- Suspicion
  - Shopkeeper vigilance
  - Everyday avoidance (street crossing, purse clutching, empty seats)
Devaluation
- Surprise at competence
- Stifling of aspirations

Scapegoating
- Rosewood
- Charles Stuart
- Susan Smith
Manifestations (cont)

• Dehumanization
  – Police brutality
  – Sterilization abuses
  – Hate crimes
Measurement

- Patterns of behavior
  - Medical procedures
  - Hiring and promotion
  - Criminal sentencing
- Formal discrimination complaints
- Double applicant test cases
Remedies

- Acknowledge that racism is real
- Teach your children about racism
- Develop a support group
- Speak up on the spot

- Monitor outcomes by “race”
Debates

- Multiculturalism versus anti-racism
Internalized racism

- Acceptance by members of the stigmatized “races” of negative messages about our own abilities and intrinsic worth
Characteristics

• Not believing in others who look like us, and not believing in ourselves
• Accepting limitations to our own full humanity
  – Spectrum of dreams
  – Right to self-determination
  – Range of self-expression
Manifestations

• Embracing whiteness
  – Hair straighteners and bleaching creams
  – Skin tone stratification
  – “The white man’s ice is colder”

• Self-devaluation
  – Racial slurs as nicknames
  – Cultural rejection
  – Fratricide
Manifestations (cont)

- Resignation, helplessness, hopelessness
  - School drop-out
  - Voter non-participation
  - Risky health practices
Measurement

- Doll tests
- Self-efficacy scales
- Acculturation scales
- Voting history
- Hiring / purchasing history
- Club memberships by skin color
- Dating histories by skin color
Remedies

- Avoid the negative messages
  - Separate within the United States
  - Move from the United States
- Counteract the negative messages
  - Organize affinity groups
  - Provide a range of role models
  - Surround with positive images
  - Teach a more complete history
Remedies (cont)

• Dismantle the negative messages
  – Control the media
  – Control the schools
  – Control what is said in families
Debates

- Assimilation versus cultural nationalism
Levels of Racism:

A Gardener’s Tale
Institutionalized racism

- Initial historical insult
- Structural barriers
- Inaction in face of need
- Societal norms
- Biological determinism
- Unearned privilege
Personally-mediated racism

- Intentional
- Unintentional
- Acts of commission
- Acts of omission
- Maintains structural barriers
- Condoned by societal norms
Internalized racism

- Reflects systems of privilege
- Reflects societal values
- Erodes individual sense of value
- Undermines collective action
Who is the gardener?

Government
- Power to decide
- Power to act
- Control of resources

Dangerous when
- Allied with one group
- Not concerned with equity
Measures of Racism
Working Group

• Develop a conceptual framework for understanding the impacts of racism on health
• Review currently available measures of racism
• Propose currently available and new measures of racism for use on the BRFSS, NHIS, and NHANES
Earlier you told me your race.

Now I will ask you some questions about reactions to your race.
Question 1

How do other people usually classify you in this country?

Would you say White, Black or African American, Hispanic or Latino, Asian, Native Hawaiian or Other Pacific Islander, American Indian or Alaska Native, or some other group?
Question 2

How often do you think about your race?

Would you say never, once a year, once a month, once a week, once a day, once an hour, or constantly?
How often do you think about your race?

**Black women** (Black Women's Health Study, n = 49,709)

**White women** (Nurses' Health Study II, n = 88,188)

**Black women** (Nurses' Health Study II, n = 1,292)
How often do you think about your race?

Asian women (Nurses' Health Study II, \( n = 1,509 \))

Hispanic women (Nurses' Health Study II, \( n = 1,243 \))
New Zealand: How often do you think about your race?

Pakeha (n = 168)

Maori (n = 107)

Mixed Maori identity (n = 54)
Question 3

[For those who are employed for wages, self-employed, or out of work for less than one year]

Within the past 12 months at work, do you feel you were treated worse than, the same as, or better than people of other races?
Within the past 12 months when seeking health care, do you feel your experiences were worse than, the same as, or better than the experiences of people of other races?
Question 5

Within the past 30 days, have you felt emotionally upset, for example angry, sad, or frustrated, as a result of how you were treated based on your race?
Question 6

Within the past 30 days, have you experienced any physical symptoms, for example a headache, an upset stomach, tensing of your muscles, or a pounding heart, as a result of how you were treated based on your race?
Uses of the data

- Understand variability of racial climate and experiences of unfair treatment in the USA
- Raise questions about local processes that may be creating inequity
- Use “best practices” areas as models in terms of promoting equity
- Monitor progress toward equity
Racism measures needed

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American Public Health Association

Research and Intervention on Racism as a Fundamental Cause of Ethnic Disparities in Health

Interim Policy 00-LB-1

http://www.apha.org
Reaffirms previous American Public Health Association policies that have condemned racism and its impacts on health and health care;
APHA (2)

Commends the National League of Cities on their Undoing Racism agenda and their efforts to launch a National Campaign Against Racism;
Calls on the President and the Congress of the United States to endorse a National Campaign Against Racism;
Calls on the Congress of the United States to convene the Institute of Medicine to prepare a report that summarizes our current knowledge on the impacts of racism on health and identifies points of intervention;
Calls on the Department of Health and Human Services to explicitly address racism as a part of its national Initiative to Eliminate Racial and Ethnic Disparities in Health by the Year 2010;
Calls on the Centers for Disease Control and Prevention and the National Institutes of Health to place a high priority on research on the impacts of racism on the health and well-being of the nation;
Calls on the President and the Congress of the United States to appropriate funds for investigating the impacts of racism on the health and well being of the nation;
Calls on the President and the Congress of the United States to appropriate additional funds for developing evidence-based programs to eliminate ethnic health disparities; and
Calls on the President, the Congress, and the Judicial Branch of the United States to recognize and promote legal redress for discrimination in health and health care.
United Nations

World Conference Against Racism, Racial Discrimination, Xenophobia, and Related Intolerance

Durban, South Africa
August 31 - September 7, 2001

http://ngoworldconference.org
The Impacts of Racism on Health

Implications for practice
Vigorously investigate the basis of observed “race”-associated differences in health outcomes

Interpret all “race”-related findings

Propose follow-up studies

View “race”-associated differences as important clues to be mined
Acknowledge that “race” is a social construct, not a biologic determinant

Explicitly measure genes if there is a genetic hypothesis

Model “race” as a contextual variable in multilevel analysis
Acknowledge the diversity within “racial” groups

Explicitly measure culture if there is a cultural hypothesis

Collect information on ancestry, migration history, and language
Acknowledge the association between “race” and social class, an association perpetuated by institutionalized racism

Explicitly measure social class if there is a social class hypothesis

Include measures of wealth, neighborhood characteristics, changes over lifespan

Measure class on all federal and state data
Acknowledge the present-day existence and impacts of racism

Develop explicit measures of institutionalized, personally-mediated, and internalized racism

Examine the role of racism in “race”-associated differences and in diminished health for all
Continue to collect data by “race” as long as there are “race”-associated differences in health outcomes.

Specify why information is collected.

Describe how “race” is measured.

Collect other data, including measures of racism, social class, culture, and genes.
Train persons from stigmatized backgrounds as epidemiologists

These scientists will bring new perspectives to the questions we have already asked

They will also raise new questions
Partner with communities to raise questions, generate hypotheses, and share findings.

Recognize and respect the capacity within communities.

Return information to communities so they can advocate for change.
Initiate a national conversation on racism

Poor health of the stigmatized

Diminished health for all

Waste of human resources