Shedding the light on Race and Racism in the Field of Global Public Health by examining Health Research Data on Ethnicity, Race and their proxies

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INTRODUCTION

Racial health disparities have long been established and research on this area has increased since 2018.

These health disparities were also observed during Covid-19 pandemic, with an increased body of international research showing that **racially minoritised groups have been disproportionately affected** both by the disease and the measures taken to contain or mitigate the pandemic.

To address these new, existing and exacerbated disparities, **evidence-based decision-making and action** on key structural and racial/social determinants of disparities are needed.

RATIONALE

Research on racially minoritised groups is **not** appropriately, adequately or sufficiently carried out

WHY?

Lack of national data systems based on race/ethnic data

Limited statistical evidence on racial health disparities

Disinclination among certain researchers to carry out any research linked to race and/or ethnicity.

Race data can

- be seen as contentious
- fuel stigmatisation
- be misused or instrumentalised

When race data exists, it does not necessarily lead to anti-racist interventions, advocacy, or policy change and real-life impact.

CONSEQUENCES

- Adoption and implementation of policies that **intend to be race-neutral**
- **A colourblind paradigm** that reproduces "**methodological whiteness**"
- Create or exacerbate racial health inequities and inequalities

We must look at
- how research on racially minoritised groups is done
- how it could and should be improved.

RECoRD

TOWARDS RACE-CONSCIOUS RESEARCH and DATA

METHODS

Systematic search and review using 4 databases (PubMed, Scopus, Web of Science, Cochrane Library) / **3 countries**: Belgique, France, the Netherlands / 2018-2022

Data management and data extraction using Covidence / Final selection : **706 articles**

OBJECTIVES

- Analyse the ways race, ethnicity and related euphemisms and proxies are conceptualised, operationalised and used in health research
- Examine how data on racially minoritised groups is used (= conceived, collected, analysed, interpreted, reported)
- Examine the ways in which these data are used to address racial health disparities and to promote racial health equity
- Develop guidance on how to appropriately use and deploy data on racially minoritised groups, and how to undertake race-conscious research

DEFINITIONS

Race-based approach: Based on a biologically essentialist conception of race according to which all members of a racial category are believed to have defined shared physical or genetic characteristics, or a specific biological essence. This assumption allows the members of the group to be seen, both by themselves and by others, as prototypes of the collective with identical traits and characteristics.

→ Can lead to essentialisation and stereotyping

Race-conscious approach: Focuses on racial discrimination and racism as central issues. As a reference point, Cerdeña, Plaisime and Tsai (2020) introduce "race-conscious medicine as an alternative approach that emphasises racism, rather than race, as a key determinant of illness and health, encouraging providers to focus only on the most relevant data to mitigate health inequities".

→ Emphasises racism rather than race

RESULTS

Uses of specific race/ethnic-related terms – some tendencies

'Migration' as a **substitute theme**
Use of **proxies and euphemisms** (people with a migration background)
Very little use of the term '**racism**' or 'racial/ethnic discrimination'

Poor conceptualisation of racial/ethnic variables
- Use of **existing terms** : rarely defined, no source, lack of justification
- Use of **improvised terms** : rarely defined, lack of justification, poor conceptualisation
- Use of **self-identifying terms**: almost non-existent

Non-systematic
Ethnicity
Can refer to origin of grandparents / migration background / ancestry / identity / cultural background

Confusing (can mean different meanings)
The same term in the same article refers to the person's place of birth or nationality, or the place of birth of their parent

Problematic (when the context is missing)
'people with a migration background'
'non-Caucasian ethnicity'
'newcomers'
'vulnerable populations', etc.

CONSEQUENCES

- **Substandard** research
- **Comprehension difficulties** for readers
- **Limited attention** to researcher's **positionality**
- **Simplistic associations** of race/ethnicity/proxies with health disparities
- **Over- and under-representation** of certain groups & issues
- **Limited attention to racism and racial discrimination** in health disparities, and to racism as a **structural issue**
- **Limited utility and effectiveness** for decision/policy-making
- **Limited potential to use** these data/studies to address racial health disparities

⚠ **(Re)production of** stereotypes towards **racially minoritised groups**

- burden
- taking advantage of the health system
- health threat
- carriers of disease
- hard-to-reach
- lack knowledge
- unhealthy behaviours
- cultural/linguistic barriers

FUTURE PLANS

Finalisation of the **guidance** for researchers/reviewers

Expansion of the scope of the research, to include other European countries or other determinants of health (class, gender, capacity, sexuality, etc.)

Promoting anti-racist public health research

STAY IN TOUCH!

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SCAN ME

ACKNOWLEDGMENTS

Tine Verdonck, Charles Ddungu, Lidvine Ngonseu Harpi, Enata Mushimiyimana, Saleh Aljadeeah, Marianne van der Sande, Soledad Colombe, and Sarah Demart.

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