

Racism Makes People Sick

Maggie Grant

**Faculty of Medicine, Health & Molecular Sciences
James Cook University**

The question?

Does racism *actually* make people sick?

Review of evidence about racism & worse health outcomes

Most health professionals are appalled by it – but not all have deep understanding

What can health professionals do about racism in health?

Racism & ethnocentrism cause death & sickness

- **Violence against minorities**
 - **Organised political oppression**
 - **'Casual' inter-personal violence**
 - **Displacement**
- **Through human history & remains common globally**
- **Part of Australia's history**
 - **On our shores – First Nations peoples + others**
 - **People who came here after oppression**
- **Associated with trans-generational trauma**
 - **The actual acts of violence**
 - **The memories of it**
 - **The denial of its extent and impact**

Racism as purposeful, planned harm, - if not direct violence

- **Policy**
- **Organised social action**
 - **Denial of human rights**
 - **Denial of access to social goods**
 - **With colonisation - denial & removal of pre-existing rights**
- **Encouraging / ignoring violence & oppression of a racial group by others**
- **Building belief in inferiority / *wickedness***

***Objective* social determinants**

Well established link between *objective* social determinants & health

- wealth- education- housing- employment

These social resources unequally distributed partly based on race & ethnicity

**→ Linking race/ethnicity & poorer health
(Marmot & Wilkinson)**

***Subjective* social determinants**

More recent understanding of importance

- **autonomy & control**
- **relative wealth & social status**
- **social support**
- **belongingness**
- **marginalisation (Marmot & Wilkinson)**

Unequally distributed based on race

Another way of racism → poorer health

But not really clear how

The patho-physiological pathway linking racism → poorer health

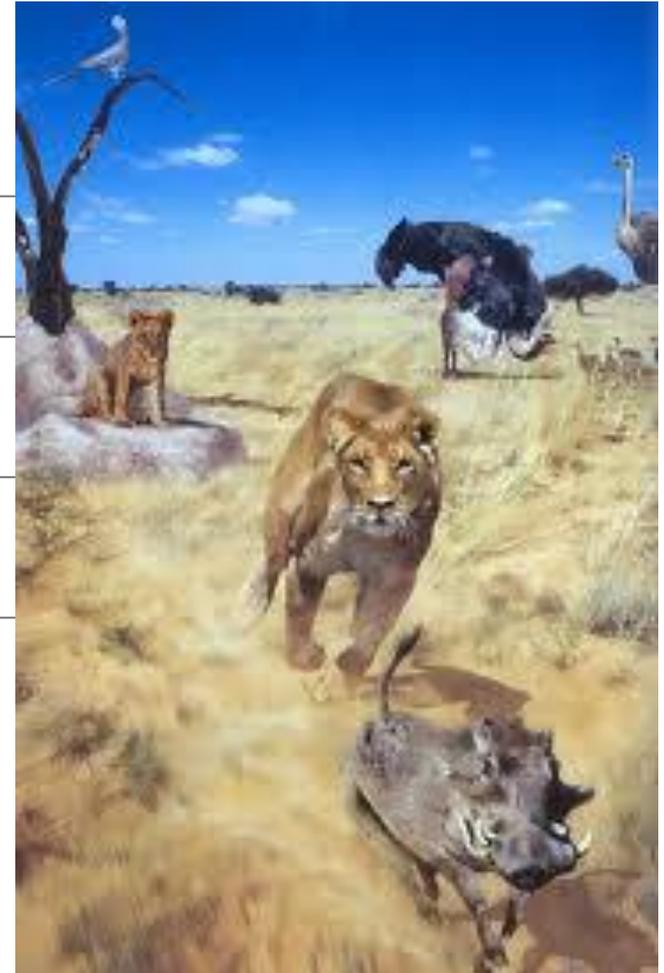
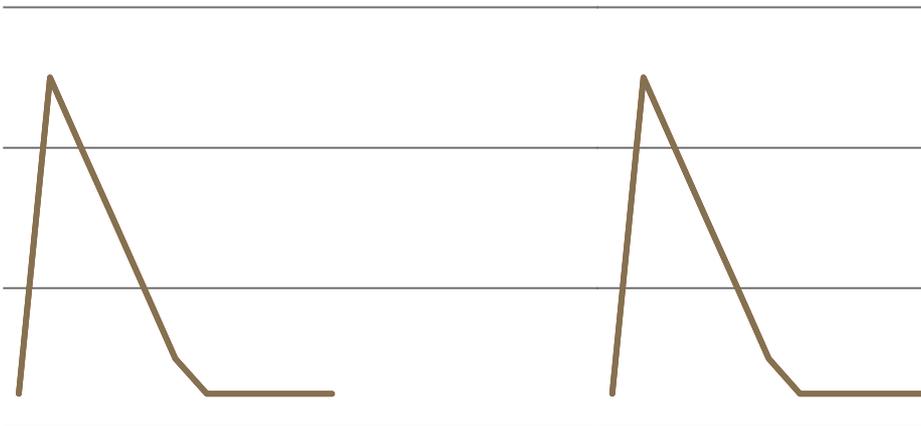
Now have expanded understanding of this process

Partly explained by 'stress' hormones – adrenaline & cortisol

These are designed so we can deal with acute stress

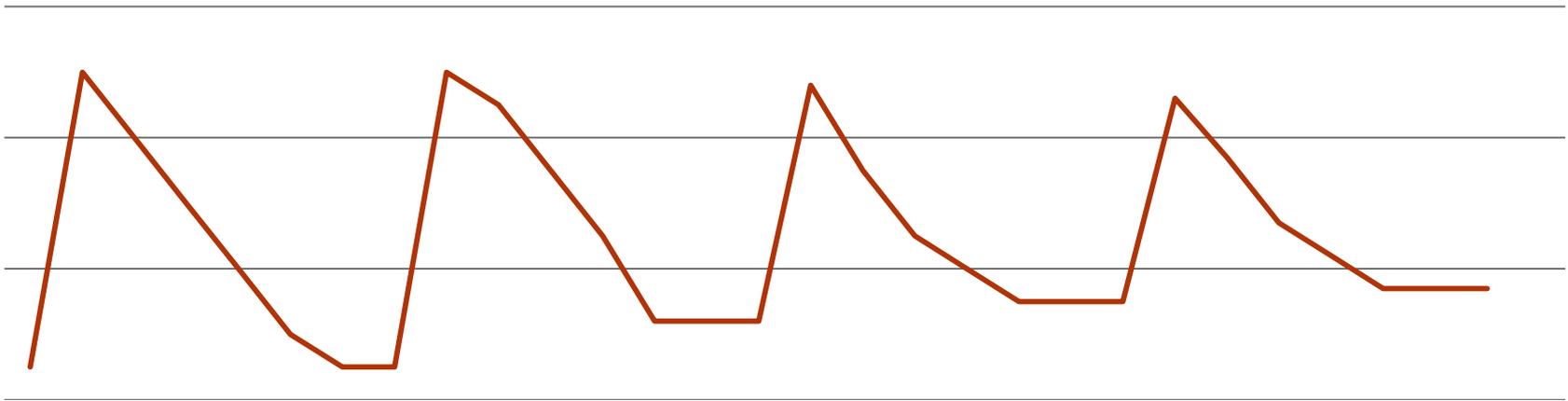
- run faster - think quicker - fight better

Acute stress is adaptive



Chronic stress is maladaptive

- **Repeated stimulation**
- **Lowering peaks**
- **Slower recovery**
- **Chronic higher baseline levels**



The patho-physiological pathway linking racism & poorer health

When subjected to chronic stress →

Maladaptive:-

- e.g. blood pressure gradually increases
→ hypertension / metabolic syndrome**
- Effective response to stress declines
→ Increase mental health problems**

Racism makes people sick – and now we understand the mechanism of this more

Is there enough racism around to adversely affect health?

Inter-personal racism & ethnocentrism are significant additional stressors

Aboriginal & Torres Strait Islander Australians experience:-

- repeated episodes of discrimination
(Paredies & Anderson)**
- on top of socially determined factors**
- higher levels stress (Zubrick)**

Racism makes us sick – euphemistically speaking

**Anecdotal evidence that explicit racism
appalls the vast majority of health
students & staff**

Though many will not:

- **recognise more covert racism**
- **appreciate how damaging it is**

(Grant, Felton-Busch et al)

So why is racism tolerated in health?

Smoking not tolerated in study places and health care. Why is racism?

- **A culture in which racism is the norm**
- **Not recognising racism when it occurs**
- **Not appreciating the harm it does**
- **Being afraid of speaking up:-**
 - **Perpetrators might be senior**
 - **Racists are often belligerent generally**
 - **Worried not having skills to handle well**
- **Not knowing how to deal with it**

Taking on racism in health

- **Make ‘taking on’ racism a routine, professional norm**
→ *standard precaution against racism*
- **Teach anti-racism skills**
- **Upside to repetitive & (racism no)evidence-base**
→ **opportunity to learn smart responses**
- **Show support to targets of racism**

Taking on racism in health

- **Not simply question of ‘beating’ racist**
- **Often belligerent anyway**
 - **Difficult to deal with**
 - **Almost impossible to ‘convert’**
 - **Isolate and don’t give limelight and And**
- **Put effort into people who can be won over**
- **And how to support to targets of racism**
- **Avoid stress to witnesses**

Racism makes health worse for everyone

- **Undermines trusting relationship that can be built between staff and patients**
- **Racism makes study & workplaces hostile for targets of racism *and* those who witness it.**
- **Targets of racism are often those who most need health care – and more scared off by it**

Taking on racism is ultimately institutional and social responsibility

- **Dealing with racism not the ultimate responsibility of individuals – especially Indigenous health staff**
- **Some will have the moral courage to stick head up – but most of us wont.**
- **That's why creating anti-racist culture critical**
- **But also need to be able to use anti-discrimination policy & law when needed**

The STAR Project

Stand Together Against Racism in health

The STAR Symbol



The gold star symbolises hope



Stethoscope a universal health tool



Each point stands for one word



It is a classy, little (20 mm) badge

A little, gold STAR will not get rid of racism in health

- **Racism is much deeper than the cruel, everyday racism that health students and staff witness or experience.**
- **But activities like STAR can help bring focus to racism.**
- **IAHA can do its own thing.**
- **But we must all say ‘enough’ to racism in health.**

We need an anti-racism strategy for health

- **We applaud the Australian Human Rights Commission new anti-racism strategy**
- **There is an anti-racism strategy for sport...**
- **But there is none for health!**
- **STAR Is a way to show our support for an anti-racism strategy for health.**

RACISM IN HEALTH: IT STOPS WITH ME!

Thanks to

- **The STAR Team**
- **Prof Zoltan Sarnyai**
- **IAHA**



The STAR Pledge

STAND TOGETHER AGAINST RACISM IN HEALTH

I vow to protect the rights of patients, staff & students.

I will practise in patients' best interests & do them no harm.

I value the bond, based on mutual trust & respect, that can develop between students, staff, patients & communities.

I believe that study places & health care should be places in which people are safe from discrimination.

I know discrimination causes harm & is illegal in Australia.

I pledge to do what I can, even if it is only in little ways, to rid places of health study & health care of racism.