

Double discrimination impacts physical and mental health

March 26 2014, by Stephanie Stephens



Racial and sexual minorities, women, and obese people may face more health risks because of their disproportionate exposure to discrimination, according to a new report in the *Journal of Health and Social Behavior*.

"Discrimination is broadly understood as unfair treatment on the basis of one's social group membership," said study author Eric Anthony Grollman, Ph.D., assistant professor in the Department of Sociology and Anthropology at the University of Richmond in Virginia. "All of our important statuses collectively shape our experiences and our health."

Grollman analyzed data from the National Survey of Midlife Development in the United States (MIDUS), whose participants were

age 25 to 74, to investigate relationships among multiple disadvantaged statuses and forms of discrimination, along with both mental and [physical health](#).

To assess mental health, respondents were asked to report how often they felt psychological distress in the past month and whether they met the criteria for major depressive disorder in the past year. They were also asked to rate their physical health and about any physical limitations that interfered with everyday living. They were asked how often they experienced major lifetime discrimination in which their livelihood or life opportunities were threatened as well as less severe everyday discrimination and what primary status the discrimination was based on. Finally, they were asked how much such discrimination interfered with their lives.

A person belonging to multiple disadvantaged groups may encounter a "double disadvantage" when he or she is compared to both privileged and singly disadvantaged people, said Grollman. Adults who are members of more than one of the disadvantaged groups were more likely to report experiencing everyday and lifetime major discrimination and view these experiences as stressful. They were also more likely to report poor health than singly disadvantaged or privileged adults. The disparities in physical health are partially explained by the increased number of forms of discrimination multiply disadvantaged people face.

Grollman's work provides one of the first empirical studies to document the link between poor health and multiple forms of discrimination, commented Mathew D. Gayman, Ph.D., and assistant professor in Georgia State University's Department of Sociology. "Historically speaking, research on the [health](#) consequences of multiple forms of discrimination relied largely on marginalized social statuses as proxies for discrimination experiences—comparing the well-being of those in one versus two socially disadvantaged groups," said Gayman.

Studies that account for gender and race-ethnic minority statuses as reflecting experiences of discrimination will risk misclassifying people who experience discrimination based on other reasons, added Gayman. "Basing the number and forms of perceived discrimination on the respondents' accounts helps minimize the misclassification of individuals and potentially avoids underestimating the level of [discrimination](#) that people experience in everyday life."

More information: "Multiple Disadvantaged Statuses and Health: The Role of Multiple Forms of Discrimination," *Journal of Health and Social Behavior*, 2014, Vol. 55(1) 3–19, American Sociological Association 2014, [DOI: 10.1177/0022146514521215](https://doi.org/10.1177/0022146514521215)

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