

New 'racism-conscious' approach to shaping public policies that advance health equity

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Health inequities are extremely common for racial and ethnic minorities in the U.S., impacting everything from chronic-disease rates, infant mortality and overall lifespan. Although the health gaps are driven by

multiple social and political variables, it is increasingly clear to public health researchers that racism is a key factor.

In order to address disparities, policy makers have sought to adopt policies that fit in one of two policy approaches: race-neutral, or "color blind" policies, which attempt to improve outcomes for everyone but do not consider the potential role of [racism](#), and race-based policies, which are focused on improving outcomes for one or more racial or ethnic groups, but are seen by some as politically and socially divisive.

A new paper published in [Health Affairs](#) from the University of Minnesota School of Public Health (SPH) analyzes the shortcomings of these policy frameworks and, in what they term "the way forward," researchers highlight a third approach—racism-conscious policies.

Racism-conscious policies can address racism by responding to the structural barriers that impede health equity. And because they focus on [health outcomes](#), racism-conscious policies are potentially more politically feasible than other approaches. As an example of a racism-conscious policy, the researchers cite the recent attempt at student loan forgiveness.

"A race-neutral loan forgiveness policy would forgive the same amount for everyone, and a race-based policy might provide it only for Black people," explained Shekinah Fashaw-Walters, an assistant professor at SPH and lead author of the paper. "But the policy proposal that would have provided \$10,000 to everyone and another \$10,000 to those who received a Pell grant is racism-conscious because it recognizes that a disproportionate number of minoritized groups qualify for Pell grants."

The racism-conscious health policy framework developed by SPH researchers includes five steps:

- Examine current inequities to identify [health issues](#) that can be mitigated through effective policies. Gather real-world evidence of inequities that result in poorer access, quality of care, and outcomes among racial and ethnic groups.
- Identify inequity-related policies. Understanding existing policies and their impact on [health inequities](#) will help policy makers understand the scope and impact of previous policy choices.
- Assess the mechanisms and consequences of existing policies. Once a policy is identified, conduct a thorough review of its mechanisms—such as incentives or penalties—and its consequences to fully understand how a given policy may foster or address inequities.
- Clarify the impact of racism. In this step, racism-conscious health [policy makers](#) should research, explore, and name racism as a cause of inequities in order to craft policy that can dismantle the effects of racism.
- Create new policies that consider implementation strategies. The final step is to use the information gathered in previous steps to craft new racism-conscious health policies that include targeted implementation strategies.

"How policies are implemented is as important, if not more important, than how policies are written," saidys Fashaw-Walters. "Writing racism-conscious health policies in collaboration with [community members](#) will ensure that their voice is uplifted in the policy. But without an effective implementation strategy, those policies may not reach the people they're designed to help."

The paper was co-authored by Cydney McGuire, a recent SPH graduate now at Indiana University School of Public and Environmental Affairs.

The researchers note that this framework is theoretical, and future work will consider the capacity needed to implement a racism-conscious

health policy framework and explore the real-world implications of its implementation.

More information: Shekinah A. Fashaw-Walters et al, Proposing A Racism-Conscious Approach To Policy Making And Health Care Practices, *Health Affairs* (2023). [DOI: 10.1377/hlthaff.2023.00482](https://doi.org/10.1377/hlthaff.2023.00482)

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