

# Racism & Health Equity

Gilbert C. Gee

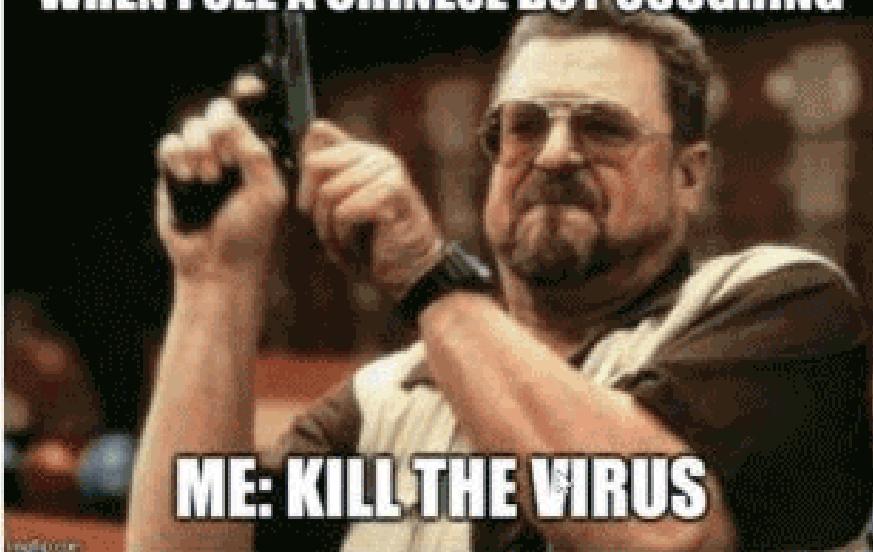
Professor & Chair

Department of Community Health Sciences, UCLA

June 2024

Problem solver Original Poster

## WHEN I SEE A CHINESE BOY COUGHING



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Remember - everyone who looks Chinese is suspect from now on. If they cough anywhere in public, act visibly distraught. Make them feel like they're a plague victim in the height of the Black Death. If they confront you about it, act like you're scared for your life, and if you're armed, consider protecting your life at their expense. If you kill someone whom you believe to be an immediate danger to you, you have a good chance to be acquitted, especially if you don't talk to the cops and get a lawyer.

Escalation is acceleration.

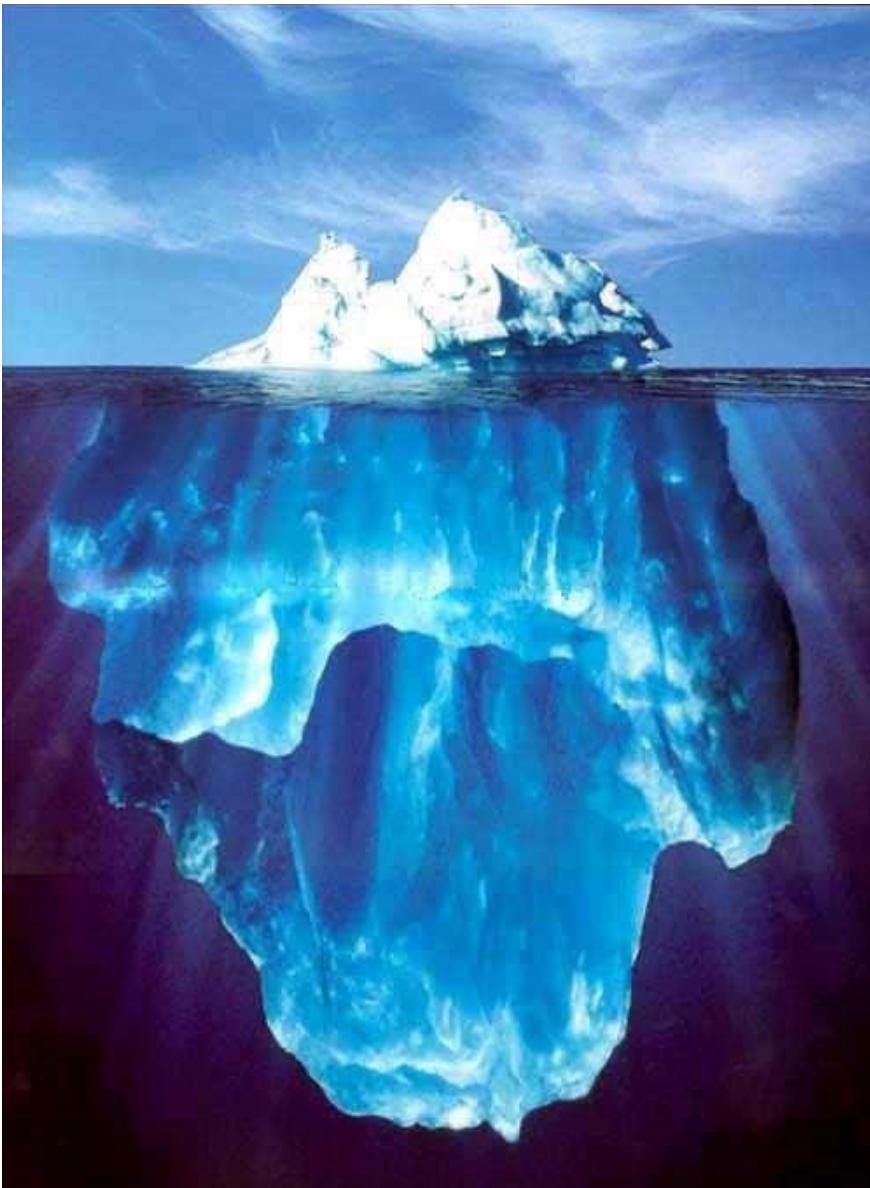
1763 · 6:13 AM

# Sustained Scientific Interest

- **U.S. Surgeon General**
  - Mental Health, Culture, Race & Ethnicity, 2001
- **World Health Organization**
  - Mental Health: New Understanding, New Hope, 2001
- **National Research Council**
  - Measuring Racial Discrimination, 2004
  - Measuring Housing Discrimination, 2002
- **American Medical Association**
  - Pledge to Confront Racism, 2020
- **NIH**
  - Science of Research on Discrimination and Health, 2011
  - UNITE
- **Institute of Medicine / National Academy of Medicine**
  - Unequal Treatment, 2003
  - Structural Racism & Rigorous Models of Inequality Workshop, 2022



Easy to observe  
Overt  
Interpersonal



Easy to observe  
Overt  
Interpersonal

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Hard to observe  
Covert  
Structural

Gee, et al., 2009. Epidemiologic  
Reviews. 31(1):130-151

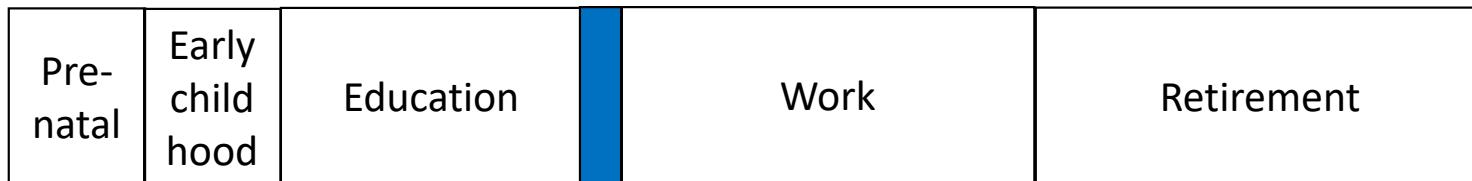
## **Figure 1. Conceptual Model of How Racism May Shape Time Over the Life Course**

### **Panel A. General life course trajectory**

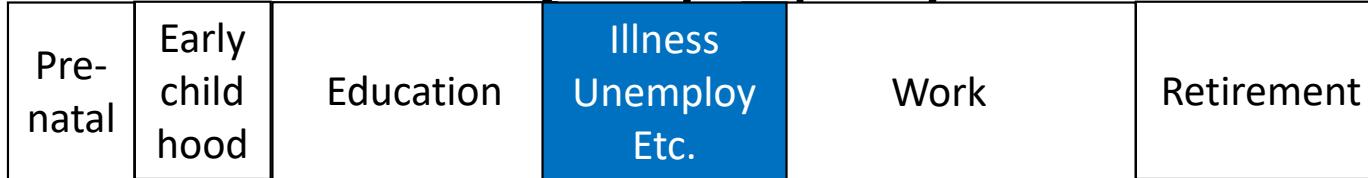


## **Figure 1. Conceptual Model of How Racism May Shape Time Over the Life Course**

### **Panel A. General life course trajectory**



### **Panel B. Life course trajectory shaped by racism**



Inequity  
in Life expectancy

Gee, et al. (2012). AJPH. 102(5):967-974.

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# Health Equity

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ORIGINAL RESEARCH

Open Access

## “Hang Ups, Let Downs, Bad Breaks, Setbacks”: Impact of Structural Socioeconomic Racism and Resilience on Cognitive Change Over Time for Persons Racialized as Black

Paris B. Adkins-Jackson,<sup>1,2,\*</sup> Boeun Kim,<sup>3</sup> César Higgins Tejera,<sup>4</sup> Tiffany N. Ford,<sup>5,6</sup> Ariana N. Gobaud,<sup>1</sup> Kyler J. Sherman-Wilkins,<sup>7</sup> Indira C. Turney,<sup>8</sup> Justina F. Avila-Rieger,<sup>8</sup> Kendra D. Sims,<sup>9</sup> Safiyyah M. Okoye,<sup>10,11</sup> Daniel W. Belsky,<sup>1,12</sup> Tanisha G. Hill-Jarrett,<sup>13</sup> Laura Samuel,<sup>3</sup> Gabriella Solomon,<sup>1</sup> Jack H. Cleeve,<sup>1</sup> Gilbert Gee,<sup>14</sup> Roland J. Thorpe, Jr.,<sup>15</sup> Deidra C. Crews,<sup>16</sup> Rachel R. Hardeman,<sup>17</sup> Zinzi D. Bailey,<sup>18,19</sup> Sarah L. Szanton,<sup>3</sup> and Jennifer J. Manly<sup>8</sup>

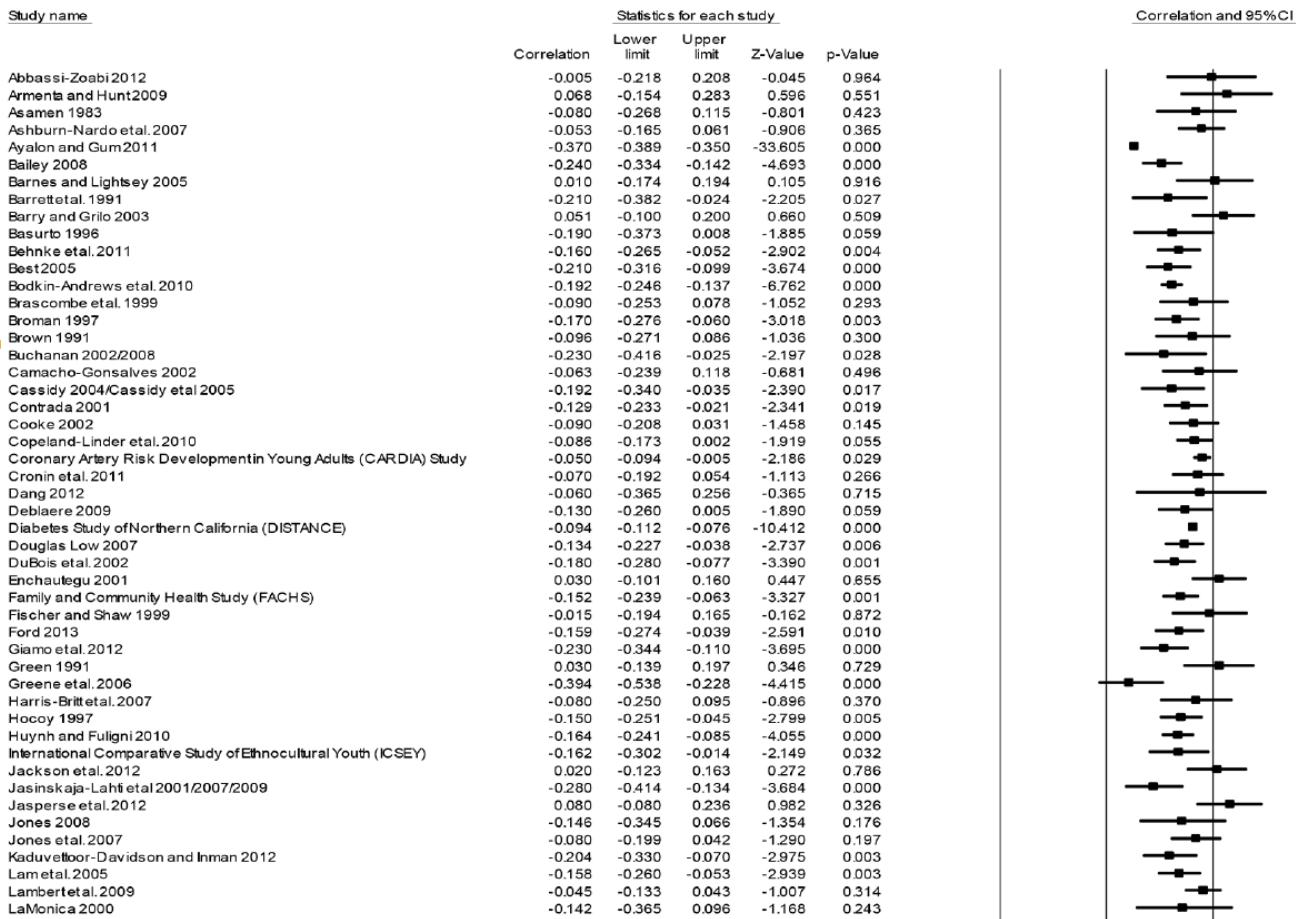
**Life course structural socioeconomic racism by critical period, year, and historic event for  
Mid-Baby Boomers racialized as Black born 1954-59**

CRITICAL PERIOD	STUDY VARIABLES				
	Residential Segregation	Income & Poverty	Black-White Disparity	Home Ownership	Poverty
Midlife					2010 Residential Segregation, Income & Poverty Black-White Disparity
					2000 Residential & Occupational Segregation, Home Ownership & Poverty Black-White Disparity
					1990 Residential & Occupational Segregation, Home Ownership & Poverty Black-White Disparity
Adulthood					1980 Residential & Occupational Segregation, Poverty Black-White Disparity
Adolescence					1970 Residential & Occupational Segregation, Poverty Black-White Disparity
Birth					1960 Occupational Segregation
					1950 Residential & Occupational Segregation, Farm Black-White Disparity
Before Birth					1940 Residential & Occupational Segregation, Farm & Unemployed Black-White Disparity
					1930 Residential & Occupational Segregation, Farm Black-White Disparity
	Redlining	Brown v. Board of Education	Fair Housing Act	Social Security Act	HRS baseline
YEAR	1930-45	1954	1968	1984	2010
					HISTORIC EVENT

## RESEARCH ARTICLE

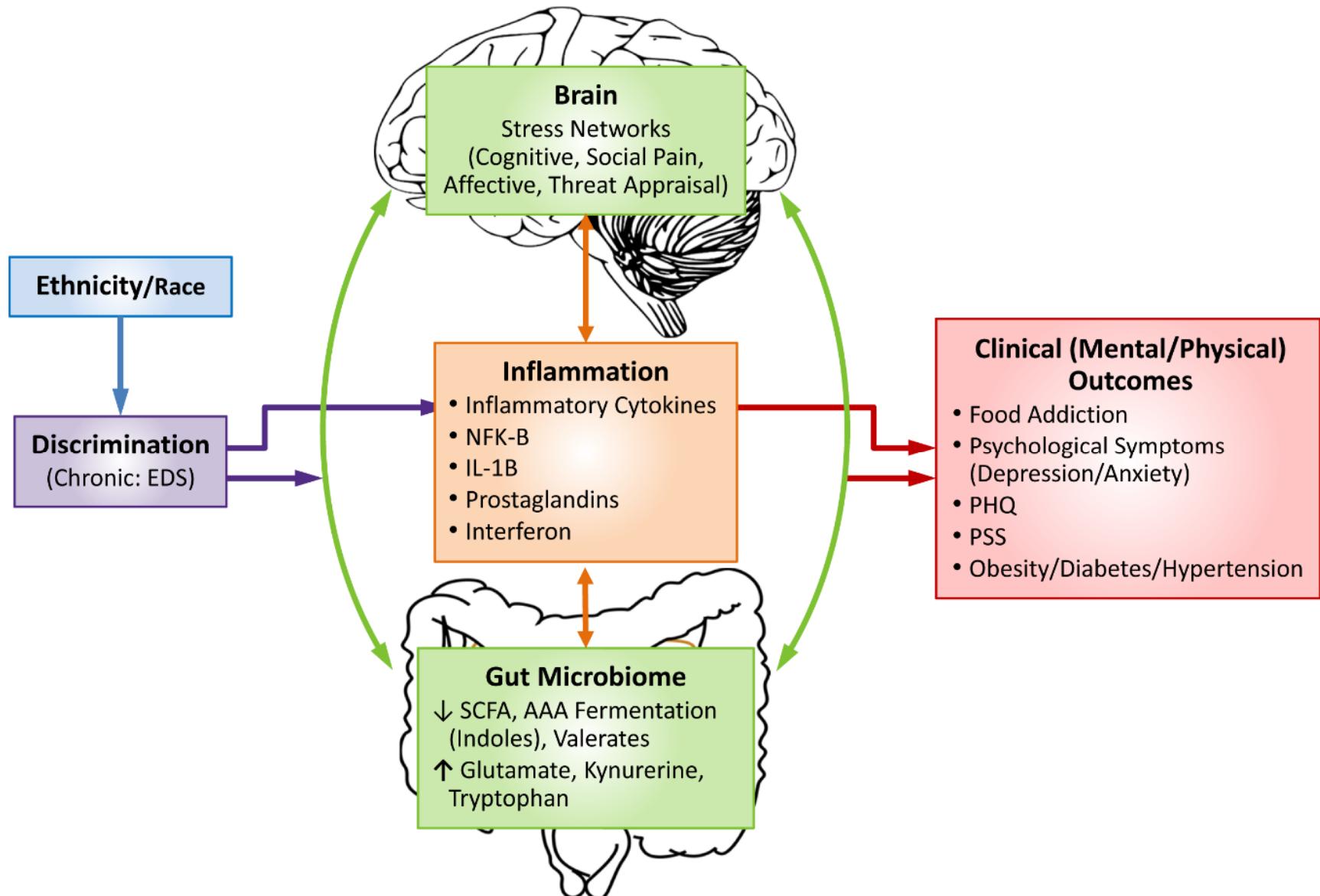
## Racism as a Determinant of Health: A Systematic Review and Meta-Analysis

Yin Paradies<sup>1\*</sup>, Jehonathan Ben<sup>1</sup>, Nida Denson<sup>2</sup>, Amanuel Elias<sup>1</sup>, Naomi Priest<sup>3</sup>, Alex Pieterse<sup>4</sup>, Arpana Gupta<sup>5</sup>, Margaret Kelaher<sup>6</sup>, Gilbert Gee<sup>7</sup>



“I think something that keeps coming up to mind is if I want to bring a child into the world that’s going to experience systematic oppression. ...I know that these stressors that I’ve experienced the last 5, 10 years are stressors that more than likely will continue and will affect not only my physical well-being and mental well-being, but also my child’s wellbeing... Latina

Nguyen, et al., 2023 J Racial & Ethnic Health Disparities 10:30078-3017



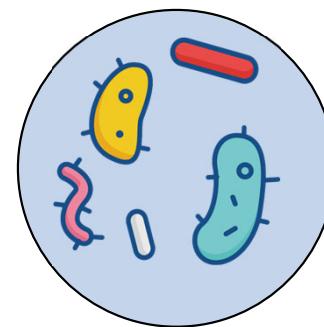
# Participants

- Healthy volunteers in Los Angeles clinics & community
- n=154 adults
- Excluded
  - Antibiotics/probiotics w/in 3 months
  - Used medications affecting CNS
  - Over 400 lbs
  - Left handed
  - Peri/post menopausal

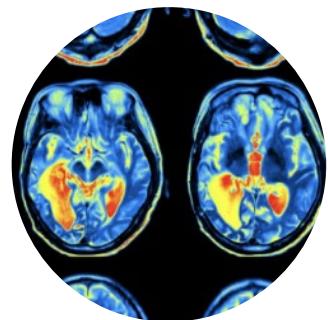
# Study Procedures



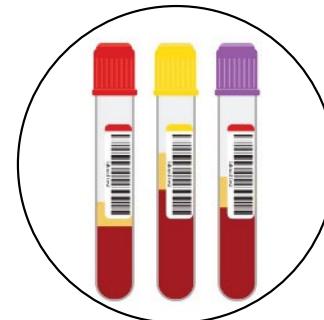
Survey



16S rRNA/  
Metabolites



fMRI



PBMC

## Experiences of Discrimination Vary by Race/Ethnicity

Reason for Discrimination	Black
Ancestry	20.0%
<b>Gender</b>	60.0%
<b>Race</b>	75.0%
Age	35.0%
Religion	0.0%
Height	15.0%
Weight	25.0%
Physical Appearance	15.0%
Sexual Orientation	0.0%
Education or Income	5.0%
Physical Disability	0.0%
Skin Color	55.0%
Other	0.0%
Total number of reasons (mean)	3 (2.1)

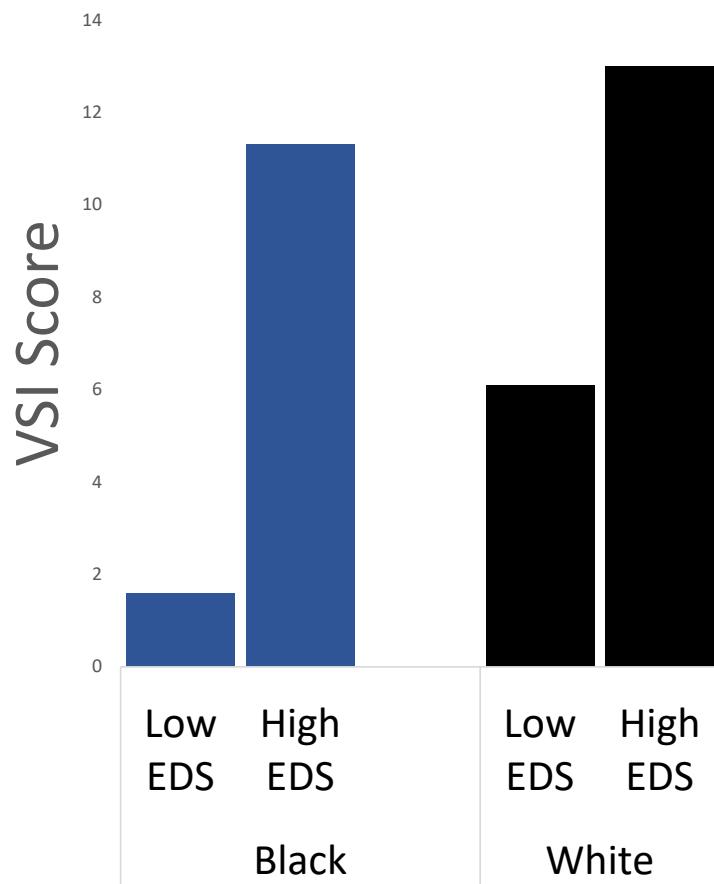
## Experiences of Discrimination Vary by Race/Ethnicity

Reason for Discrimination	Black	Hispanic	Asian	White	p-value
Ancestry	20.0%	27.4%	12.9%	7.5%	0.065
Gender	60.0%	38.7%	29.0%	32.5%	0.138
Race	75.0%	45.2%	38.7%	15.0%	<0.001
Age	35.0%	30.6%	19.4%	22.5%	0.502
Religion	0.0%	4.8%	9.7%	5.0%	0.601
Height	15.0%	8.1%	6.5%	12.5%	0.674
Weight	25.0%	30.6%	12.9%	15.0%	0.154
Physical Appearance	15.0%	22.6%	22.6%	17.5%	0.877
Sexual Orientation	0.0%	11.3%	0.0%	2.5%	0.065
Education or Income	5.0%	19.4%	3.2%	10.0%	0.109
Physical Disability	0.0%	0.0%	3.2%	0.0%	0.333
Skin Color	55.0%	21.0%	12.9%	12.5%	0.002
Other	0.0%	9.7%	12.9%	12.5%	0.403
Total number of reasons (mean)	3 (2.1)	2.55 (2.37)	1.53 (1.45)	1.53 (1.45)	0.02

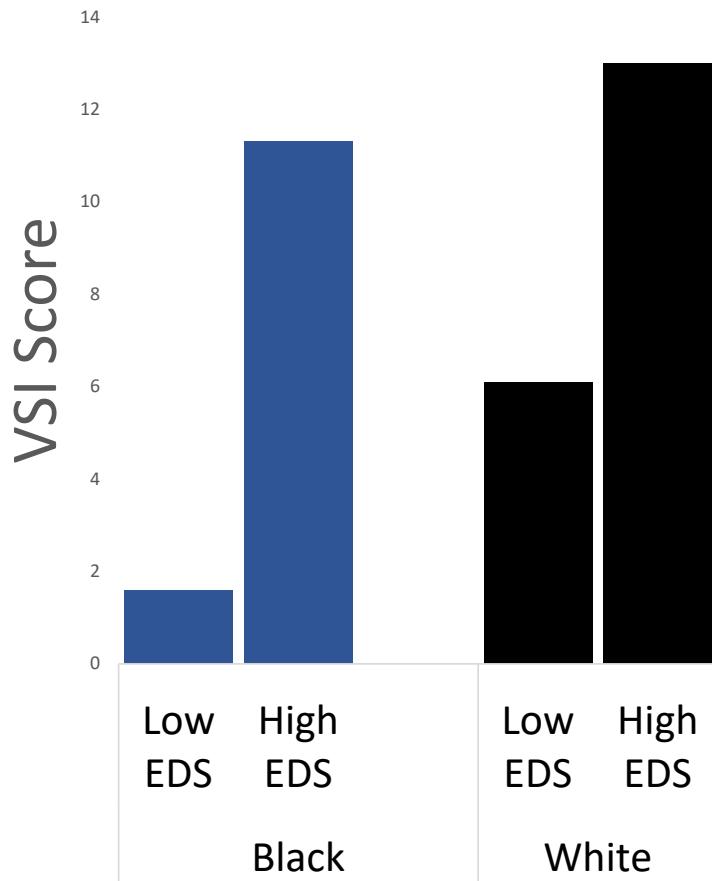
## Survey Responses by Discrimination (n=154)

	Low EDS	High EDS	Sig.
Early Trauma Inventory	3.6 (4.3)	5.5 (4.4)	***
Perceived Stress Scale	10.8 (5.7)	14.8 (6.4)	***
IPIP Neuroticism	20.1 (6.3)	23.1 (7.6)	**
IPIP Extraversion	36.1 (7.0)	34.3 (7.1)	
Subjective Social Status	6.3 (1.4)	5.8 (1.5)	+
PHQ-9 Score	4.5 (3.8)	5.9 (4.2)	*
State-Trait Anxiety Inventory	30.9 (7.5)	35.6 (10.7)	***
HADS Anxiety	4.2 (3.6)	5.9 (3.7)	***
HADS Depression	1.8 (1.8)	2.9 (2.9)	***
Visceral Sensitivity Index	7.2 (10.1)	15.4 (17.7)	***
SF-12 Physical Score	54.2 (3.1)	52.4 (5.6)	*
SF-12 Mental Score	53.1 (6.3)	49.7 (9.4)	**
Resilience (CDRISC)	80.5 (12.0)	76.9 (13.3)	+

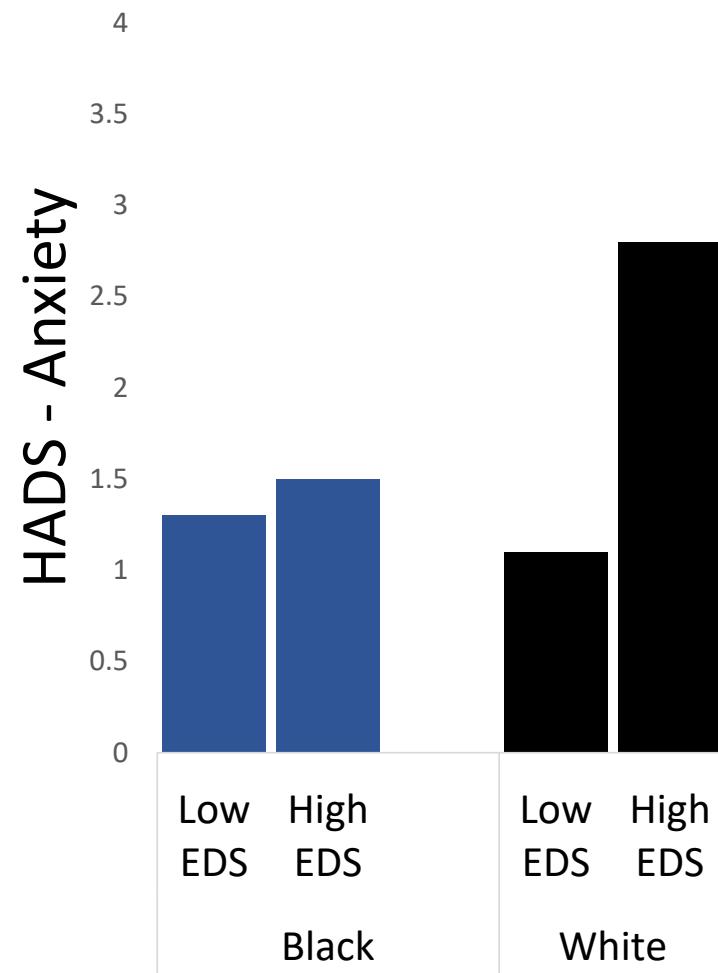
# Visceral Sensitivity by Race and Discrimination



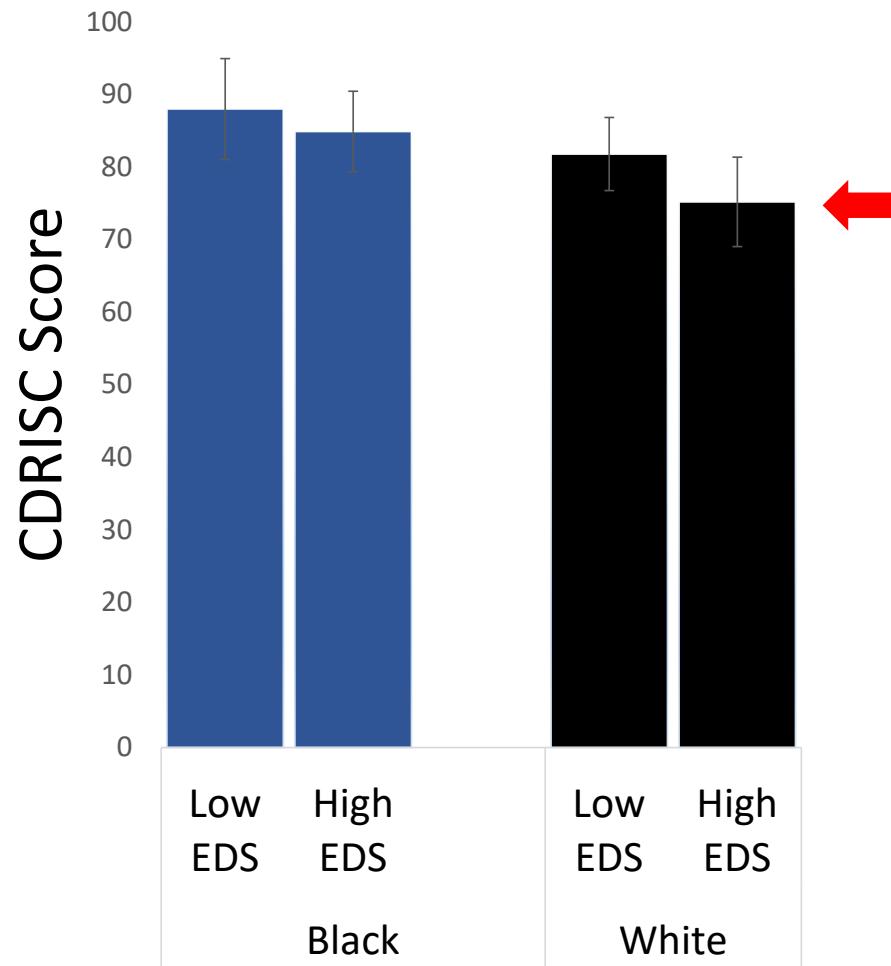
## Visceral Sensitivity by Race and Discrimination



## Anxiety by Race and Discrimination

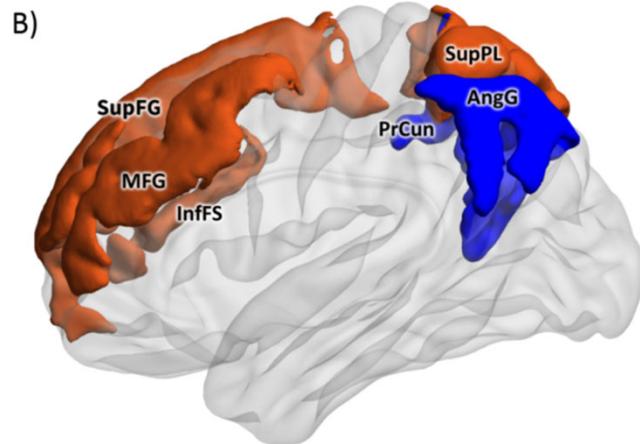


## Resilience by Race and Discrimination



# Brain Regions Associated with Discrimination by Race

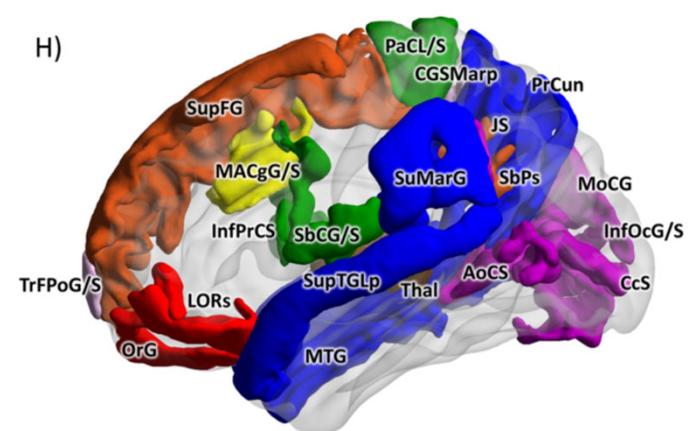
African American



DMN and CEN

Self-recollection  
Emotional regulation  
Inhibitory control during stress

White



DMN, CEN, ERN, RN, SMN, SAL, CAN, and OCC

Heightened sensitivity  
Difficulty coping

Central Autonomic Network (CAN)

Central Executive Network (CEN)

Default Mode Network (DMN)

Emotional Regulation Network (ERN)

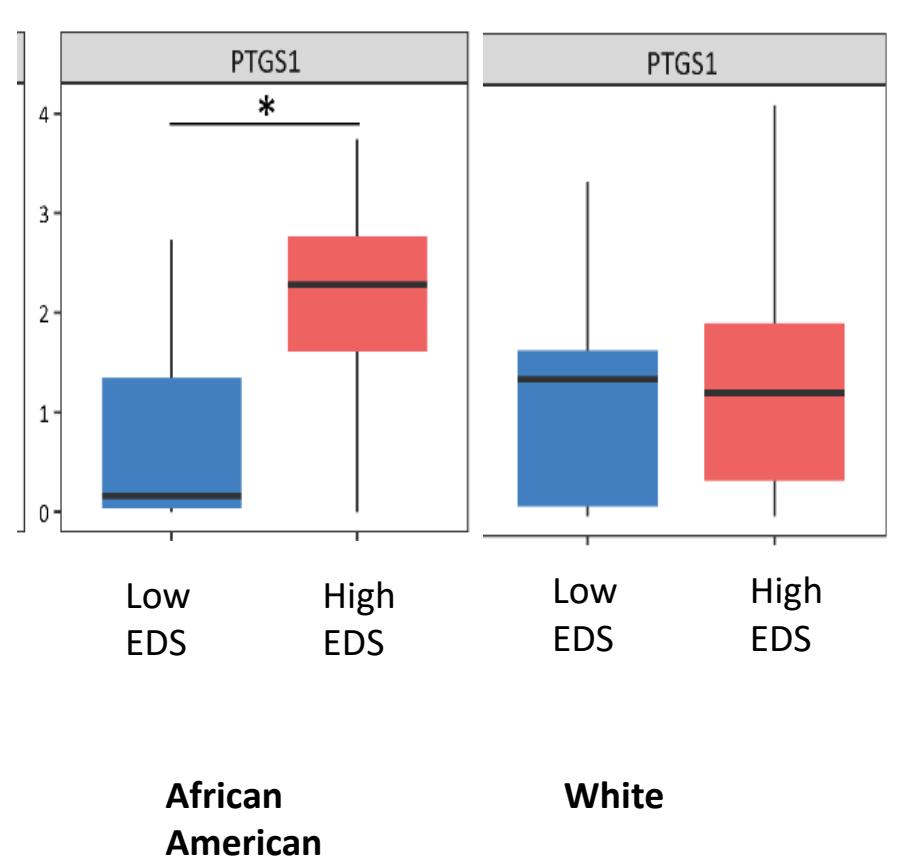
Occipital Network (OCC)

Reward Network (RN)

Salience Network (SAL)

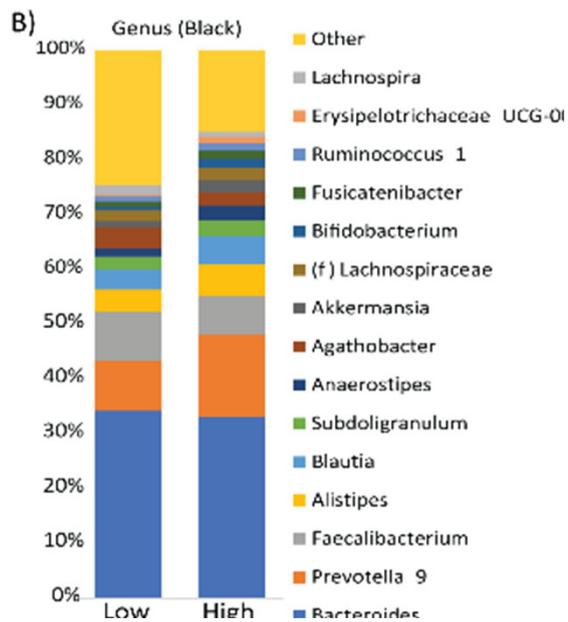
Sensorimotor Network (SMN)

# Evidence of Inflammatory Response to Discrimination



## Fecal Microbiome/Metabolite

African American



↑ *Prevotella copri*, s.1, 9s.1

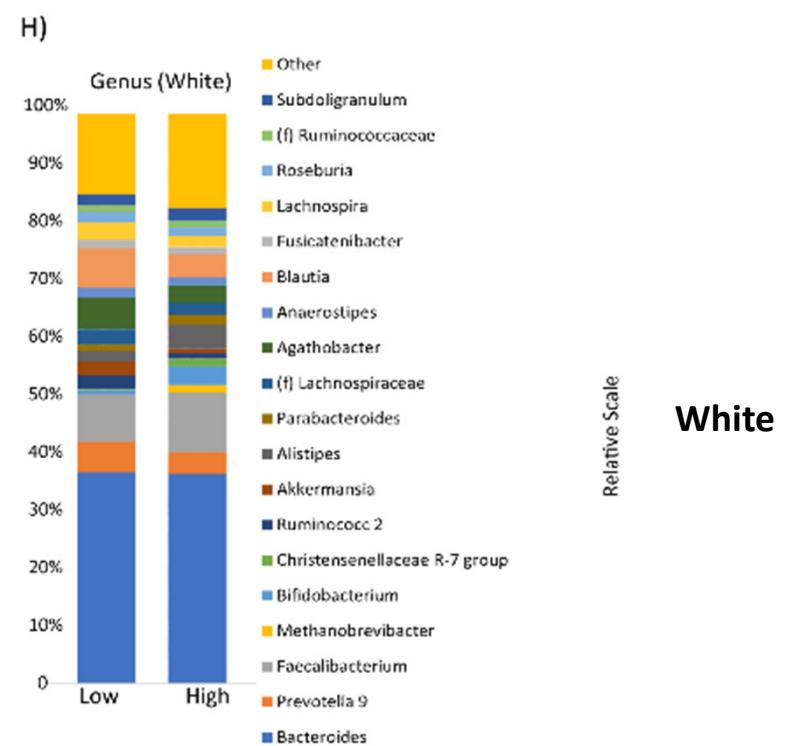
↑ *Coproccus* s.1

↑ *Tyzzerella*

↓ *Bacteroides massiliensis*, *salyersiae*

↓ *Parabacteriods*

↓ *Ruminococcaceae*



White

↑ *Catenibacterium mitsuokai*

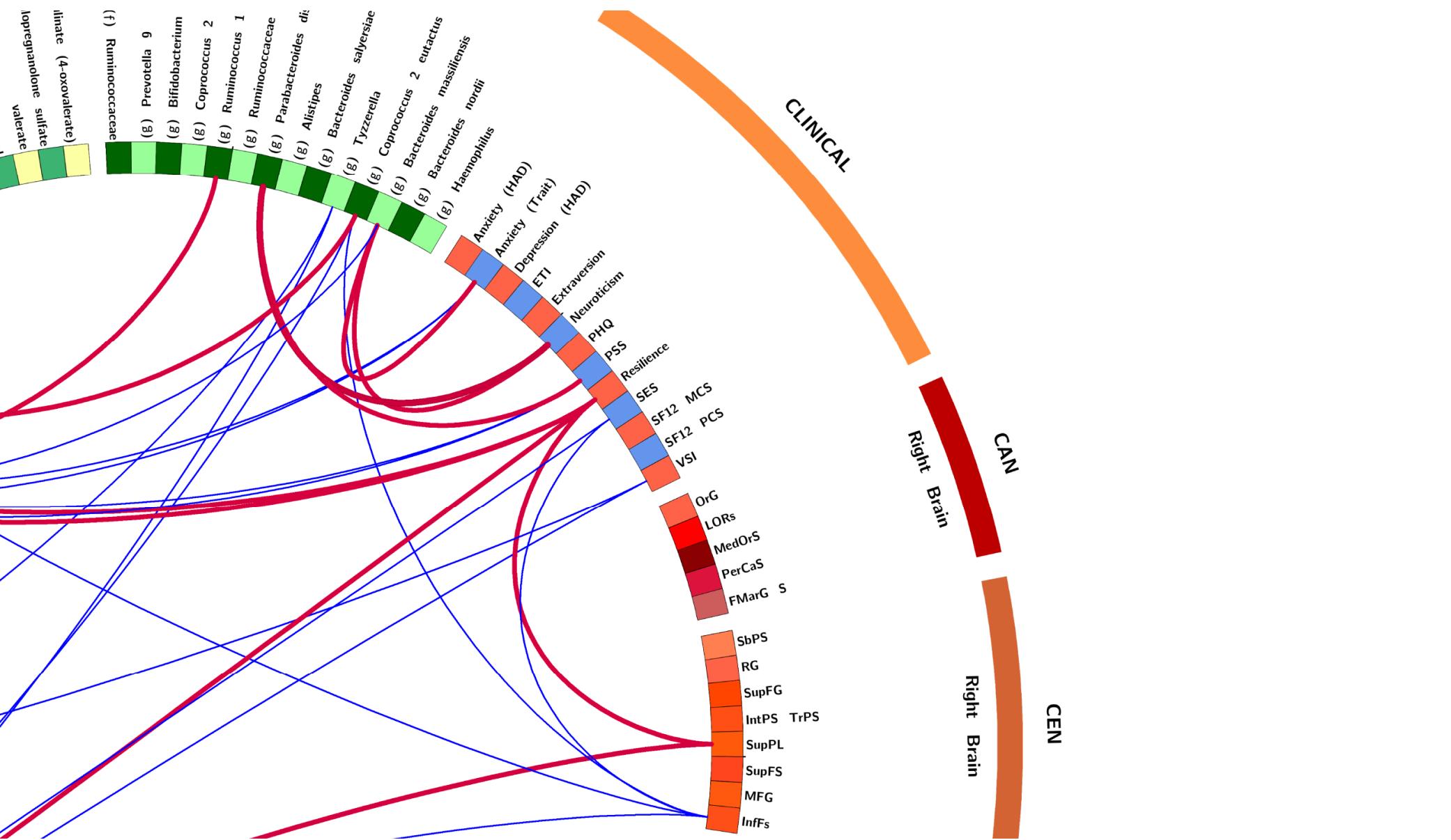
↓ *Prevotella copri*

↓ *Bacteroides salyersiae*

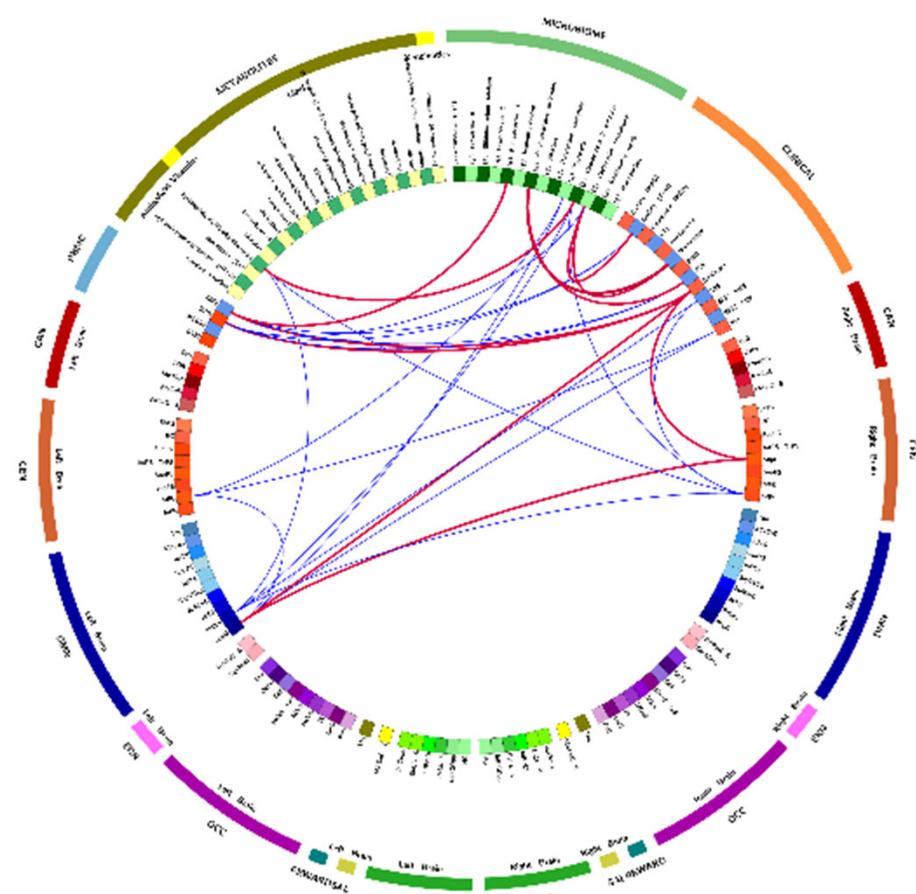
↓ *Blautia stercosis*

↓ *Faecalibacterium prausnitzii*

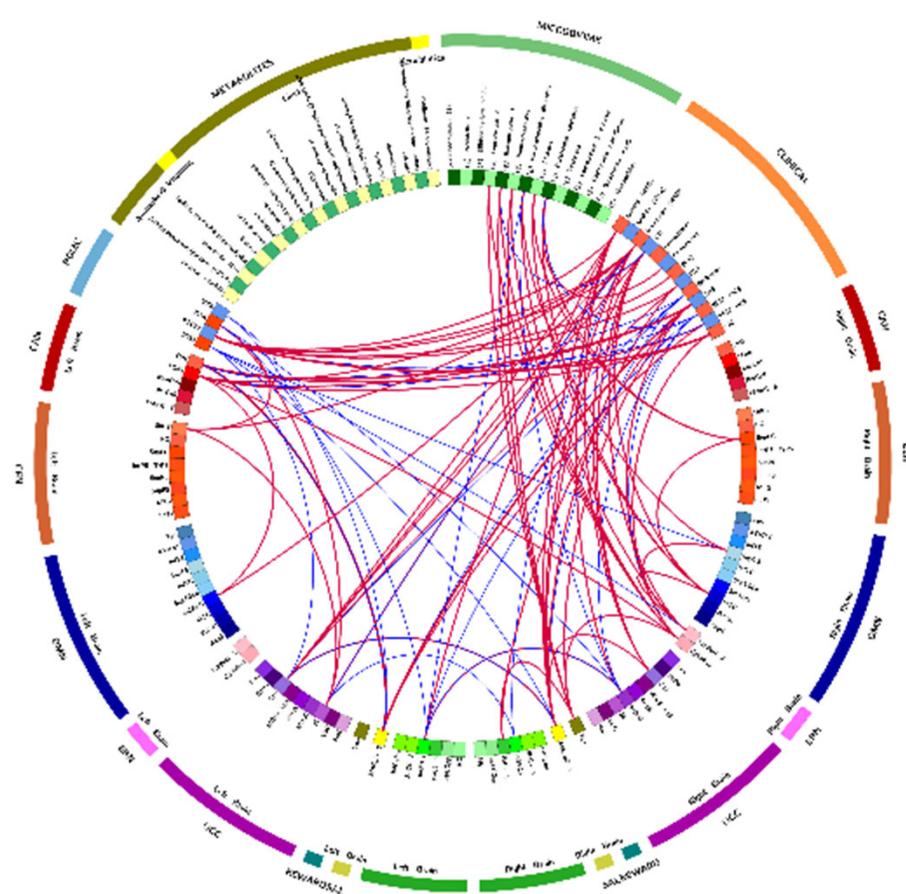
↓ *Ruminococcaceae*



# Black

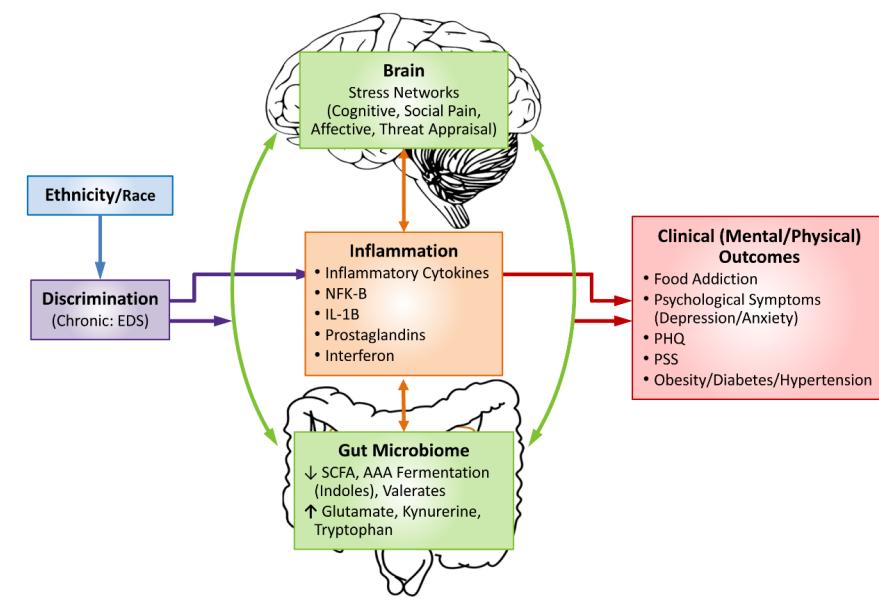


# White



# Takeaways

- Experiences of discrimination appear to have a more pronounced inflammatory response among African American than White persons
- Evidence from surveys & fMRI results suggest that African American persons show enhanced coping with discrimination
- Brain-gut interactions. Perhaps some truth to the saying “racism makes me stick to my stomach”



## Acknowledgements

- Arpana Gupta
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- Bruce Naliboff
- Steve Cole
- Xiaobei Zhang
- Emeran A. Mayer

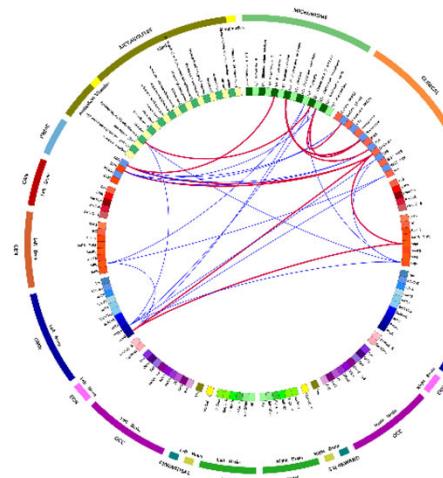
NIH/National Institute of Minority  
Health and Health Disparities.  
(R01MD015904)

# Closing thoughts

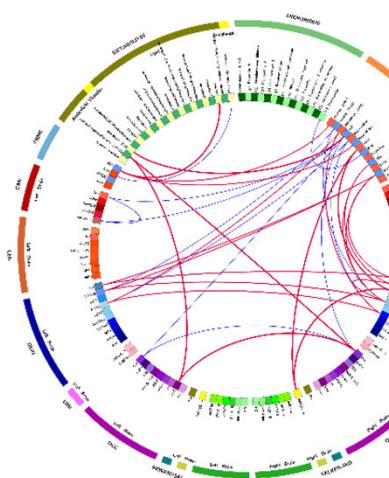
- We need to focus on racism at multiple levels
- We need to also focus on resilience and resistance

Thank you!

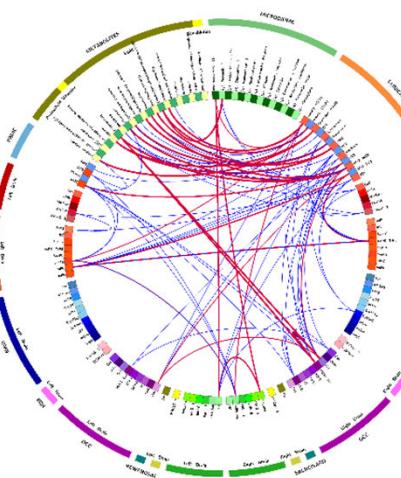
**Black**



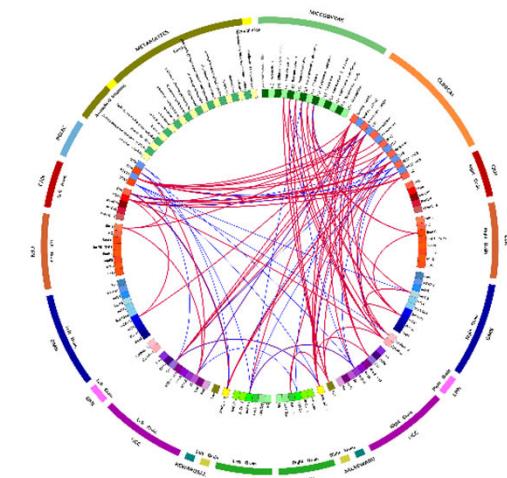
**Hispanic**



**Asian**



**White**



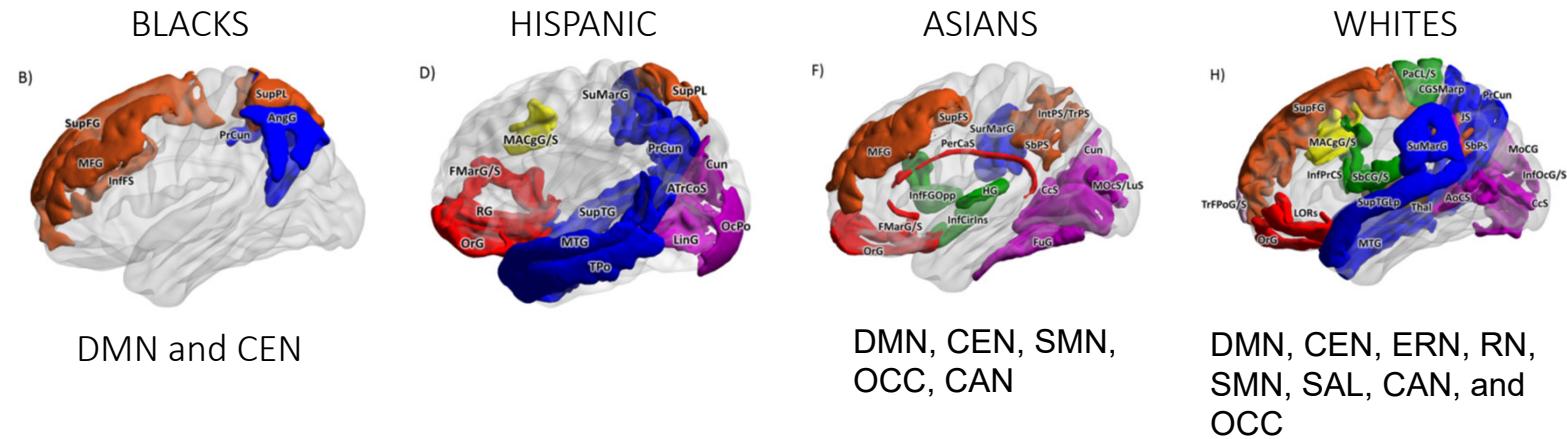
■ Central Autonomic Network (CAN)  
■ Central Executive Network (CEN)

■ Default Mode Network (DMN)  
■ Emotional Regulation Network (ERN)

■ Occipital Network (OCC)  
■ Reward Network (RN)

■ Salience Network (SAL)  
■ Sensorimotor Network (SMN)

# Brain Regions Associated with Discrimination by Race



- Central Autonomic Network (CAN)
- Central Executive Network (CEN)
- Default Mode Network (DMN)
- Emotional Regulation Network (ERN)
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