

A grayscale photograph of a person from behind, wearing a white baseball cap and a dark jacket. They are holding a large cardboard box high above their head with both hands. The background is a blurred crowd of people.

The Black Identity Category Nexus & The Need for Data Disaggregation

A literature review

About the authors

Paul Addae (BA, MA) is a graduate of The School of Oriental and African Studies. He has conducted research over the last 15 years in some of the most challenging and volatile environments.

He has co-produced research with professors from Georgetown University, Exeter University and St Andrews University. He has also worked on EU projects around effective solutions to some social phenomena. Paul is also a fluent classical Arabic speaker and has translated many works into English.

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Introduction

Underdeveloped and scant data impacts the planning and provision of appropriate services. This is a concern as a scarcity of data when it comes to black mental health results in a myriad of issues. An increase in knowledge, via collecting and understanding the data, can help the formulation of “culturally relevant strategies to promote mental wellness aimed at educating the black community, local service providers and national policymakers” (2020: 258).

According to Benedict Anderson in his famous text, ethnic groups are ‘imagined communities’, self-defined social identities. In America, the white European groups became merged into ‘white’. Hence, Jewish-Americans, Irish Americans, Italian Americans, and Polish-Americans eventually merged and became part of the broader ‘white category’ which was largely the preserve of White Anglo-Saxon Protestants. This is sometimes regarded as the ‘twilight of European identity’.

Young black people are overrepresented in the criminal justice system, exclusion from school, social services, and mental health. Yet detailed nuances and intersections of identity are often missed as black communities are all included under the same broad category. This is further complicated by the fact that first generation black migrants consider their ethnicity as that of their countries of origin. But then by the second generation this often shifts to a ‘black British’ with a shared black identity regardless of their parents’ homelands (Heath et al., 2013: 16).

In this way a pan-ethnic black identity develops wherein a wider shared black identity emerges. This can be seen with second generation Jamaica, Grenadian, Barbadian, Nigerian, Ghanaian and Somali communities. However, the problem for institutions is that sample sizes are not large enough to allow for finer distinctions along the lines of sub-sets or disaggregated categories.

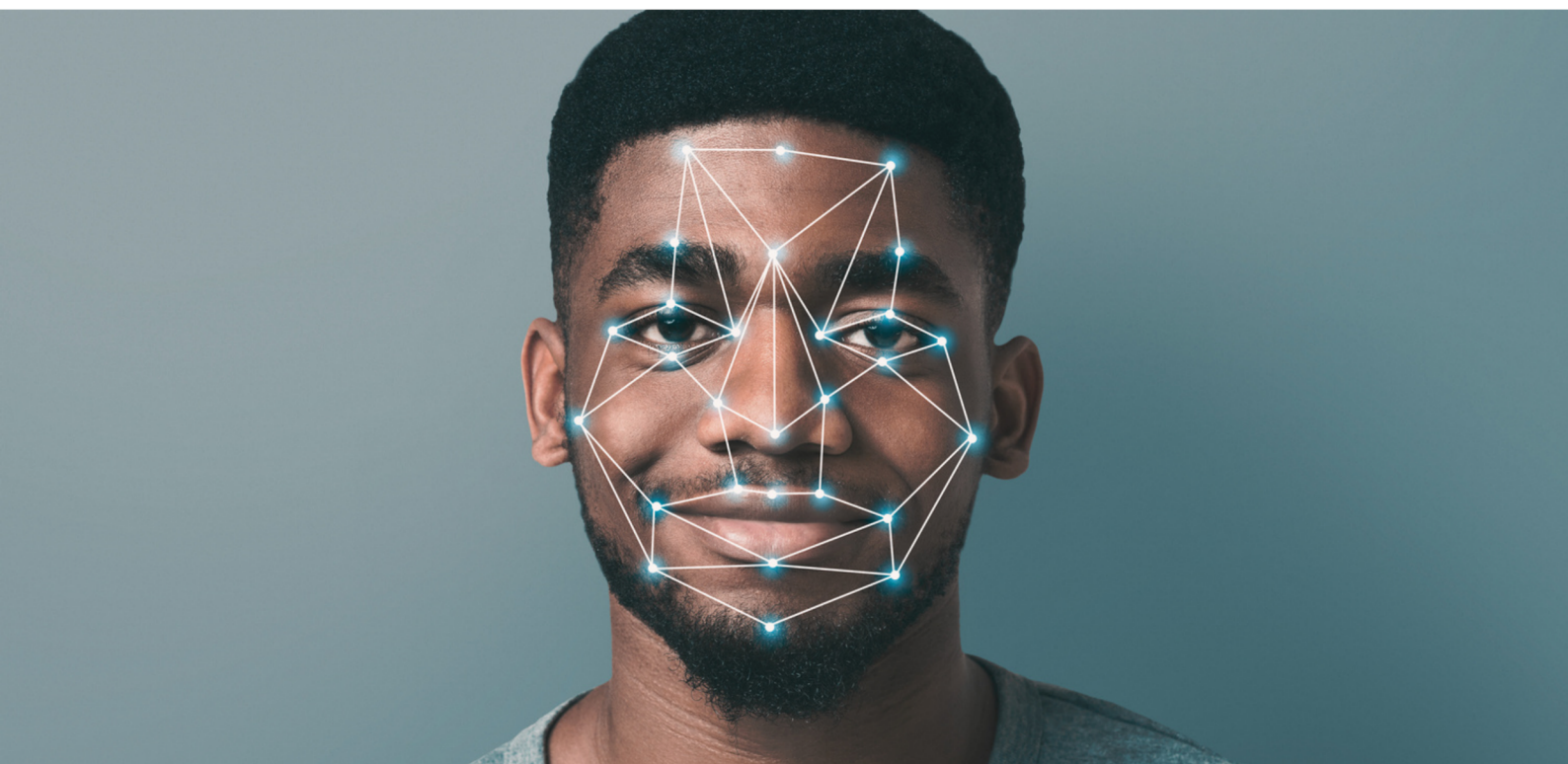


Ethnic Identities in Flux, Historical Perspectives on the Black Identity/Category Nexus

Early sociological work had already indicated the limitation and inaccuracies of regarding blacks as a homogenous group. W.E.B. Dubois in his book Philadelphia Negro spoke of the distinctions between urban black Americans.

Racine (2003) emphasises a “cultural hybridist” approach by which she means acknowledgement of peoples’ multiple subjectivities or positional ties through processes of negotiation about cultural meanings. Coleman and Drinkwater (1978: 11) argued that ethnicity spices up an otherwise drab post-industrial existence, yet is important as it gives a sense of heritage and roots. In this way, Waters (1990: 7) suggests that ethnic identity can be merely discarded when its psychological and social purpose is fulfilled.

McGill in her book Constructing Black Selves: Caribbean American Narratives and the Second-Generation notes that it has been useful when some social scientists began to consider some of the subtle yet distinct differences between race and ethnicity for black immigrants to the Americas (2005, 12). We opine that the same can be said in 2023 in the UK. In post-1965 America there were debates as to whether new black immigrants would face the same challenges as American-born blacks or if they would be able to better create new opportunities. Social scientists then began to have more critical reflections on whether race or ethnicity was more important when it came to the capacity for foreign-born blacks and their children to settle and establish themselves into the new society.



Some early studies from the 1990s suggested that ethnicity and race was the defining factor for understand African-Caribbean adjustment to the United States. Hence, Vickerman (1999) posits that African-Caribbeans often removed themselves from the notion of 'black' associated with African Americans via referring to Caribbean ethnicity to denote 'class' and avoid any associations with American blacks. In this way, transnational identities allowed black immigrants to the US to eschew the racialised politics of the United States and carve out a transnational identity that gave them cultural capital which was not provided by an African American identity (Basch et al, 1994). Kasinitz (1992) put forward that Caribbeans created a pan-ethnic identity in the US that allowed them to supersede participation in African American politics. This provided the freedom to explore ethnic rather than racial allegiances in the post-1965 era. According to this research, Caribbeans chose to see themselves as distinct from the African American population. This was reflective of the discussion around blackness among blacks from the French-speaking, Spanish-speaking and English-speaking islands.

McGill suggests (2005: 13) that in the Americas:

Caribbean immigrants may live in ethnic enclaves and participate in culturally defined activities on a day-to-day basis; yet, they constantly, if only subconsciously, negotiate their relationship with blackness as defined in the American milieu. In short, they are in ever-changing, always active discourse with African American culture and cultural expression. This reality is particularly true for the second generation.

Yet Waters (1994, 1996) suggests that teenage children of Caribbean immigrants to the US tend to choose a pan-ethnic label, i.e. 'black' or 'Black American'.



The Identity-Category Nexus, Repercussions for Health Outcomes, Mental and Physical

Rogers (1990) found that psychiatrists were more likely than police to consider black Caribbeans detained in emergency as dangerous.

Naroo and Iley (2011: 89) note that stereotypes of black people inform the behaviour of many healthcare workers and therefore make them more likely to diagnose black people as psychotic. They also note that studies examining diagnostic practice and robust studies using vignettes suggest that black people are more likely than white to be diagnosed as schizophrenic and to be seen as dangerous. Fernando (2010: 11): "racist stereotyping of black people as dangerous was a major factor in police involvement in the admission of black people..."

Rogers and Pilgrim (2014: 56) note black adolescents are over-represented in mental health services especially if they were born outside of the UK and had refugee status.

This again indicates the importance of understanding the identity-category nexus as earlier studies had indicated "British-born black youth", while more recent data indicates the impact of migration and the particular stressors involved in this such as displacement, trauma, conflict etc. on top of all of the other factors involved in arriving to a new and different country.

This is relevant to black communities who have recently settled in the UK for instance from war zones in Africa such as Congo and Somalia.

McFarland (2009: 59) in his study in Sheffield found that a greater proportion of patients of African Caribbean origin were more likely to receive a primary diagnosis of schizophrenia than white British patients. Furthermore, they were more likely to be single and unemployed, hence McFarland surmises that living with a spouse may have a social buffering effect (2009: 70). McFarland also stated that lengths of stay within were highest among people of both African Caribbean and Somali origin (2009: 69). He also found in his sample that those of Somali origin had the highest rates of detention under the Mental Health Act (McFarland, 2009: 68).

The incidence of schizophrenia among BME groups, McFarland points out, was higher even though they comprise a smaller proportion of the local population (McFarland, 2009: 71).

Alluding to the black identity/category nexus and the need for appropriate data disaggregation, McFarland states (2009: 71):

These findings support the view that the diversity of ethnic groups and limitations of ethnic group classifications need to be fully appreciated in research, especially when evaluating service provision for the multicultural population within the UK. The results suggest that broad census categories may account for some of the variation found between studies utilising these categories. Within the present sample distinct differences were found between Somali, African and African Caribbean patients. Although it is possible that this may be an isolated example within a specific population, it is likely that encompassing all African and Caribbean countries into one group as many studies have tended to do, does not reflect the heterogeneity of such groups.

Data Disaggregation

Disaggregating data by race and ethnic sub-groups can provide a more nuanced picture. This is particularly relevant for healthcare as analysing data in this way, and taking it into consideration, improves the effectiveness of interventions; informs more equitable health initiatives; informs policy and promotes a more holistic approach when engaging various ethnic groups.

Disaggregating data is important when wishing to understand more complex information, dynamics and social issues especially when both qualitative and quantitative data together from multiple sources can help provide more informed results. Secondly, social scientific theory can coalesce with community wisdom which even disaggregated data cannot provide this detail, which is useful when seeking to interpret the data, make meaning and formulate appropriate recommendations. Therefore, disaggregation itself we would suggest does not pick up all nuances and hence referral to historical context and an individual's perception of their own multiple identities.

Platt and Nandi (2018) note that the "recognition of between-group and within-group diversity and change across generations" can challenge simplistic group assumptions and "linear accounts and generalisations". Which has also been discussed by Portes and Rumbaut, 2001. Platt and Nandi also note that qualitative literature has been able to elaborate on the complexities of inclusion and exclusion for ethnic minorities and migrants in ways which quantitative research and analyses simply cannot capture.



Rumbaut states (2008: 4):

Ethnic identification begins with the application of a label to oneself in a cognitive process of self-categorization, involving not only a claim to membership in a group or category, but also a contrast of one's group or category with other groups or categories. Such self-definitions also carry affective meaning, implying a psychological bond with others that tends to serve psychologically protective functions. Ethnic self-awareness is heightened or blurred, respectively, depending on the degree of dissonance or consonance of the social contexts which are basic to identity formation.



Conclusion

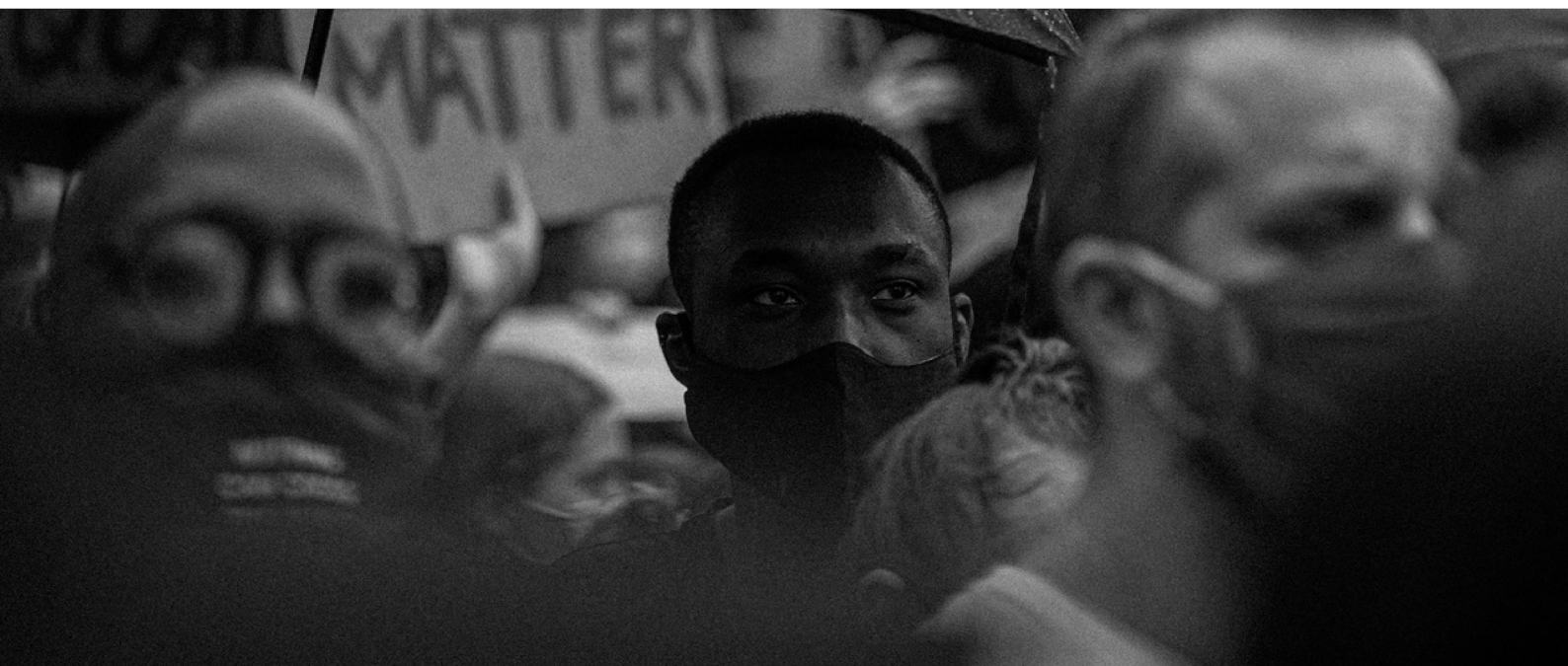
Collecting and utilising disaggregated data is not without risks, and hence it must be ensured that data is collected responsibly so that problematic stereotypes and biases are not reinforced. The process of collecting disaggregated demographic data involves unpacking the impact of racism and societal injustice.

Why all of this is significant is to ensure not repeating the mistakes of the past when collecting disaggregated data. Mistakes such as race-based collection and unethical data collection which focused on particular minorities and the extraction of their experiences with illness, disease, epidemics and pandemics as we had first-hand experiences of ourselves at the onset of the COVID-19 pandemic when we were asked by the NHS to find “fifty black people with COVID”.

Disaggregation can alleviate homogenisation of populations, which is a contributing factor to poor treatment of individuals and communities, and thereby provide focus for intervention initiatives and policies that are better designed to serve a diverse and complex population such as ‘blacks’. It can also help to understand the specific issues and challenges sub-groups experience. The lack of disaggregated data has maintained broad generalisations, stereotypes and confusion as sub-groups are not analysed against other demographic variables.

When data is unavailable for a marginalised racial/ethnic group, their needs are effectively rendered invisible when policies are made, resources allocated, and programs designed. Therefore, understanding these nuances via the prism of the black identity/category nexus which also centres data disaggregation helps to:

- **Develop culturally specific initiatives.**
- **Plan better targeted interventions.**
- **Harness cultural nuances to facilitate better health outcomes.**
- **Centre seldom-heard voices.**
- **Bring to the fore the concerns of marginalised communities, previously below the radar.**
- **Develop innovative approaches and fresh solutions.**



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