



# Racism: A Neglected Piece of the Work Disability Management Puzzle

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Racism refers to a system of oppression in which status, power, resources, and other societal goods are unequally distributed on the basis of race or ethnicity [1, 2]. Racism plays a key role in shaping labour market outcomes and is a fundamental driver of health inequalities in the working population [1–6]. Despite well-established links between race, work, and health, limited research has explicitly addressed the impact of racism on the labor market re-integration of workers who sustain an injury or illness, representing a critical evidence gap in the field of work disability management [7]. In this commentary, we highlight the importance of examining racism and racial inequities in research on return-to-work (RTW) and offer tangible strategies for better addressing these issues.

## What do we know about racial inequities in return to work?

Population health studies consistently find that persons of color experience a higher prevalence and severity of adverse health outcomes and report greater rates of disability relative to their White counterparts [4, 8–11]. A vast body of scientific evidence demonstrates that racial health inequities are rooted in underlying social and economic inequities, which are themselves a product of widespread structural, institutional, and interpersonal racism in society [5, 12–14].

Within the field of occupational health and safety (OHS), research has shown that workers of color are exposed to the

most unsafe and precarious working conditions, are more likely to experience fatal and non-fatal workplace injuries, and are less likely to have access to treatment when compared to their White counterparts [15–18]. These studies highlight racism as an important exposure in the work environment that is in turn driving disparate occupational health outcomes. Despite the ongoing significance and impact of racism in the workplace, previous research has largely neglected the role that race and racism play in shaping the RTW process and outcomes of workers who experience an injury or illness.

In a recently published systematic review in the Journal of Occupational Rehabilitation, our team at the Institute for Work & Health identified 19 studies published between 2000 and 2021 that examined racial or ethnic inequities in RTW [19]. Most of these studies were conducted in the United States and focused on work re-integration following a non-occupational injury. Among the limited research identified, we found that workers of color were less likely to re-enter employment following an injury or illness, and that Black workers may face particularly steep barriers to returning to work. Gaps identified in the literature included the inconsistent measurement of race-based data, limited insight into racial inequities across various phases of the RTW process, and a lack of studies examining racial inequities in RTW among workers who sustain an occupational (as opposed to non-occupational) injury.

## Advancing research on race and work disability management

There is a need to build on existing research to better understand and support racially diverse groups of workers in the management of work disability and more closely examine the impact of racism on RTW. To advance research, we recommend the following activities.

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## Education on racial inequity

There is a need for researchers and practitioners to increase their awareness of historical and present-day forms of racism that systematically disadvantage persons of color and restrict their access to social and economic resources, and to supports that are vital to successful RTW. Greater education will encourage researchers and practitioners in the field to better recognize racial inequities and place more explicit attention towards understanding and addressing racism within work disability management systems. What is more, greater awareness on the topic can help scholars understand the assumptions they bring to their research and how those assumptions may be inadvertently reinforcing structural racism (e.g., by neglecting or underestimating the importance of race and racism as determinants of RTW).

## Pursuing research on racism in the RTW process

Workers of color have the potential to experience discrimination across various phases of the RTW process. There is a need to build an evidence base describing the way racism operates across the RTW process. That includes racism in the workplace (e.g., racial inequities in injury reporting and access to workplace accommodations and supports), racism in the health care system (e.g., racial inequities in diagnosis and access to medical treatment and rehabilitation services), and racism in the workers' compensation system (e.g., assessing the extent of racial bias in the adjudication of compensation claims). Studies conducted across these different components of the RTW system will help us understand the intermediary mechanisms that drive inequitable RTW outcomes among workers of color. In the absence of evidence on the factors that contribute to these inequities, RTW interventions risk being ineffective – or worse, exacerbating the disadvantage that workers of color experience [20, 21]. Progress in this area will require improvements both in the routine collection of data on race and its appropriate use by organizations and researchers involved in work disability management.

## Intersectional research approach

Workers of color are not a homogeneous group. Race intersects with a range of other identities including age, gender, class, disability, Indigeneity, and immigration status [22–25]. RTW may be particularly challenging for workers of color who face overlapping systems of oppression (e.g., sexism, ageism, ableism) [26, 27]. By taking an intersectional approach, future research can unpack this complexity and help uncover unique and compounding sources of

cumulative disadvantage within work disability management systems that affect different subpopulations of workers.

## Collaboration with healthy equity scholars

Healthy equity scholars have been at the forefront of research examining racial disparities in population health outcomes. They have played a pivotal role in identifying the social and economic structures that underpin racial health inequities, including those arising from work and employment [14, 28, 29]. Health equity scholars have also advanced methods on the measurement of race and racism in population health research [30–33]. Closer collaboration with health equity scholars will ensure best practice in studies examining race and racism in the field of work disability management.

## Capacity building

Scholars in the field of work disability management ought to represent the diversity of the working populations they study. There is a need to ensure that inclusive and targeted training and mentorship opportunities exist for new investigators from systematically marginalized communities. Greater diversity within the field of work disability management will encourage the pursuit of research that better identifies, understands, and addresses systemic racism and other complex RTW challenges.

## Conclusion

Racism is a widespread and systemic problem with important implications for RTW research and practice. Despite the pervasive nature of this problem, researchers and practitioners in the field of work disability management have largely neglected issues of race and racism. Advancing scholarship on racism as a determinant of RTW will contribute to actionable evidence in the field of work disability management and help improve the design and implementation of strategies that improve RTW outcomes for workers of color and reduce the labor market inequities they face after sustaining an injury or illness.

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## Declarations

**Conflict of interests** Arif Jetha is a scientific advisory panel member of GainLife Inc where he receives a stipend. Arif Jetha's advisory involvement is not specifically related to the research presented in this manuscript and did not influence the presentation and synthesis of the findings. Faraz Vahid Shahidi has no conflicts of interests to disclose.

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