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“Incorrect Diagnosis and Prescription”

If an illness persists for an extended period under a doctor’s treatment, then it is wise to reconsider the diagnosis and the prescription(s) that the doctor identified.

For hundreds of years now, the nation and the world have suffered tremendously from the vagaries of racism. In a modern context, academic doctors in many fields have diagnosed the racism disease and prescribed a variety of medicines.

To the extent that we even acknowledge it, economists point to discrimination as a primary impetus for the racism disease. Other scholars (especially those in the law field) and lay persons alike accept that diagnosis and agree that the correct prescription is anti-discrimination laws along with sufficient funds for legal enforcement of those laws. All the while, many have linked racism to White Supremacy.

As you know, White Supremacy is a mindset. Economists are not equipped to address illnesses of the mind. Who has license to address illnesses of the mind? The obvious answer is: Those who study and comprehend the workings of the mind. Indeed, what do the social psychologists have to say about the racism illness?

Many years ago, during research on the racism disease, we identified a definitive social psychology text entitled *Stereotypes and Stereotyping*.¹ In Chapter 9 of that text, “Stereotyping, Prejudice, and Discrimination: Another Look,” John F. Dovidio *et al* conclude that the chain of events that lead to racism begins with stereotypes.² Stereotypes are beliefs about the characteristics of social categories/groups, and they are precursors to the formation of prejudices. Prejudices, in turn, serve as the basis for discrimination. It is the operationalization of discrimination that produces acts of racism—the illness. By going to the root cause of racism and preventing stereotype formation, one can prevent the formation of prejudices, and the resultant discrimination—i.e., racism.

Economists’ treatment of racial discrimination (racism) with anti-discrimination laws is akin to a medical doctor just resetting the bone and immobilizing a broken leg that resulted from running and falling down a flight of stairs. It is acceptable for the doctor to address the broken leg, but the most important task is to instruct the patient to not run when approaching a stairway, so that there will neither be a fall nor a broken leg. The broken

¹ See C. Neil Macrae, Charles Stangor, and Miles Hewstone, Editors. (1996). *Stereotypes & Stereotyping*. The Guilford Press. New York.

² The chapter’s remaining authors are John C. Brigham, Blair T. Johnson, and Samuel L. Gaertner.

leg, like racial discrimination (racism), is just a result (an illness), not a cause.

Over ten years ago, we attempted to bring light to incorrect diagnoses and prescriptions for racism in an article that discusses a causal link between the media—a ubiquitous purveyor of stereotypes—and the Black-White unemployment rate gap.³ The article shows that the unemployment rate gap is a manifestation of racism (racial discrimination) whose antecedents are prejudices and stereotypes.

Is this an accurate diagnosis of the media's role in producing racism? Consider that it is not difficult to recognize that media (in its many forms) is a primary governor of much of our thinking and actions.⁴

The media informs us of what is transpiring in our world. It tells us to be hungry and what to eat. It tells us to get sick and which medicines to take or procedures to undergo to cure our illnesses. It tells us what favorable leisure is and how to enjoy that leisure. It tells us which clothes, shoes, makeup, and scents to wear. It tells us when to shop because the “sale is too good to miss.” It tells us which forms of transportation we should employ. It tells us that education is important and the sources we should seek out to obtain that education. It tells us the job that is correct for us, how to obtain that job, and how to act in that form of employment. It tells us how to invest our money to secure transportation, housing, and a nest egg for our retirement. Finally, it tells us how to die and what to expect after death. There is a program for everything and for everything a program.

And amidst all that the media offers, it tells us overtly and/or subtly how to perceive and

react to others depending on whether they are Asian, Black, Hispanic/Latino, Middle Eastern, Native American, White, etc. These perspectives about others are essentially stereotypes (positive or negative), which initiate the chain that can lead to racism.

All of this is to say that economists appear to have issued an incorrect diagnosis and recommended an incorrect prescriptive action for addressing racism. Racism (often expressed as White Supremacy) is a mindset that results from imbibing stereotypes through the media and our social environment that produce prejudices and, in turn, leads to discriminatory actions that are evaluated as racist.

Economist should recognize that acts of racism can have economic effects, but that going no further than linking racism to discrimination and seeking to address the illness through anti-discrimination laws or diversity initiatives is insufficient. Rather, we must address the root cause of racism, which is stereotypes that are promulgated in large measure by the media.

If economists fail to correct our diagnosis of, and our prescriptive treatment for, racism, then Black and other non-White Americans will suffer the effects of racism (economic and otherwise) far into the future.

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³ See Brooks B. Robinson (2009). “Black Unemployment and Infotainment,” *Economic Inquiry*: Vol 47; No. 1, pp. 98-117.

⁴ Admittedly, social/cultural capital (all that we inherit from our environment and use to produce our lives) is also a very influential force in our lives.