Letter to the Editor

Cite this article: Baider L, Wein S, Goldzweig G (2022). Facing discrimination in research. *Palliative and Supportive Care*, 1–2. https://doi.org/10.1017/S1478951522000761

Received: 29 May 2022
Accepted: 7 June 2022

Author for correspondence:
Simon Wein, Palliative Care, Davidoff Cancer Center, Petach Tikvah, Israel.
E-mail: simonwe@clalit.org.il

Facing discrimination in research

Lea Baider, PH.D.1, Simon Wein, M.D.2 and Gil Goldzweig, PH.D.3

1Assuta Medical Center, Oncology Institute, Tel Aviv, Israel; 2Palliative Care, Davidoff Cancer Center, Petach Tikvah, Israel and 3School of Behavioral Sciences, Academic College of Tel Aviv-Yaffo, Tel Aviv, Israel

The *Palliative & Supportive Care* journal challenges us to recognize and to fight racism in research (Goldzweig et al., 2021). We suggest broadening the perspective of racism to include prejudice. Prejudice is recognized in many dimensions of difference including class, culture, language, gender, religion, sexual orientation, disability, and intellectual.

Prejudice against a given intellectual stance may be more difficult to identify and overcome. Herein are examples of intellectual prejudice:

1. Academics from a different race who might have different ways of analyzing and thinking may find it more difficult to be published in higher impact factor journals.
2. Researchers from countries which are the target of international discrimination may be collectively labeled and have their papers discriminated against.
3. Strictly quantitative data are also subject to interpretation (Coryn, 2007; Lakew, 2017), hence different understanding and methodologies can produce divergent and even opposing results. This disparity will grow as big data, artificial intelligence, and computerized algorithms are increasingly used in risk factor identification and clinical decision-making.
4. Where research shows that race is a risk factor for unhealthy or unacceptable behavior, should this finding be ignored since it might promote race-based disparities, or should these findings be used to improve care?

Social psychology research identifies several approaches to reducing prejudice and discrimination. They include:

- Increasing intergroup contact and dialogue to dispel stereotypes (Wells et al., 2016).
- Fostering greater empathy and perspective.
- Creating specific anti-discrimination and anti-harassment policies.
- Transforming academic publishing norms to express the value of a plurality of identities and modes of identity expression.

These broad guidelines should find their place in medical and nursing schools, healthcare institutions, and national and international healthcare infrastructures.

The purpose of addressing discrimination and prejudice is to enlighten and to remedy — and where better than in science?

“That is what science is: that it is worthwhile rechecking, by new direct experience, and not necessarily trusting… experience from the past… Science is the belief in the ignorance of experts… It teaches the value of rational thought as well as the importance of freedom of thought. There is the beauty and the wonder of the world that is discovered through the results of these new experiences” (Feynman, 1968).

As scientist and palliative care physician, William Breitbart wrote: “I am… in awe of the material world but I am also a human being who will continue to wonder and explore what lies within, without and beyond” (Breitbart, 2005).

Author contribution. All authors contributed equally to the paper’s design and writing.

Financial support. No external funding was used for writing this article.

Conflict of interest. The authors have no conflicts of interest to declare.

References
