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Keywords

COVID-19, race, capitalism, medical anthropology

Disciplines

Anthropology

COVID-19: NARRATIONS OF RACIAL DISPARITY AND THE PRODUCTION OF HEALTH PRECARITY
IN PHILADELPHIA

By

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Abstract

The multimodal filmic aspect of this project interrogates notions of “novelty” and racial inequity through an archival exploration of Philadelphia’s racial and economic marginalization. This audiovisual project situates the current moment as a manifestation of this history, which places certain bodies at an increased risk of exposure and death. The paper that follows, explores the way that COVID-19 racial disparity is narrated, and conversely understood, in dominant discourse. I interrogate these dominant narratives around racial disparity, and point to not only the shortcomings of such an analysis, but also the potential dangers. Finally, informed by the theory of Loïc Wacquant, I propose a shift in our understanding of racial disparity to center the symbiotic relationships between race, class, and the state.

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Introduction

Across the United States, popular and scholarly sources alike often note that health outcomes vary greatly along the lines of Social Determinants of Health (SDOH), such as gender, race, occupation, and class. These framings often note that racially minoritized and economically impoverished neighborhoods tend to have higher rates of morbidity, mortality, and preventable illness such as asthma due to environmental exposure (Drake et al., 2008). In the field of health research, many researchers have worked to document these disparities and use their findings to advocate for ameliorative policy. The severity of this US health inequity has been made particularly visible through the current COVID-19 pandemic. For instance, news outlets across the country are stating that high poverty and minority neighborhoods have contracted the virus at disproportionately higher rates than “their counterparts” (Macias & Rogalski, 2020). While this research is important to point out the unequal distribution of poor health, it does not illuminate systems and processes that reproduce those inequities in the contemporary moment. Even more harmful, I argue, is that these discourses separate the relationship between race, class, and the state in an attempt to understand them in a vacuum.

In this project, I explore narratives around the Covid-19 pandemic as a case study highlighting contemporary understanding of racial health disparities in the United States, and provide an ethnographic analysis of media discourse. This analysis will shed light on the subtle ways race is mobilized as a “root cause” of health disparity. I follow this contemporary analysis with a historical framework to help shift our understanding of health disparity. Informed by the literature of Loïc Wacquant, the larger field of critical race studies, and based on archival analysis, I examine the mobilization of racial logics in the disenfranchisement of black Philadelphians under capitalist political economy.

I see this research problematizing the disparity discourses seen in the popular media and academic spaces that obfuscate the role of capitalism and the state in the production of health inequality. The blame for racial health disparity is frequently transferred from the larger nexus of political economy on to the depoliticized individual body, thereby ensuring that proposed “solutions” remain fixated on individual level practices rather than systemic reconfiguration. Dominant narratives, such as the cultural competency and social determinants framework, preclude asking questions about complex sociality. They also run the risk of reifying and naturalizing socially mediated categories, and the socio-symbolic meaning assigned to these categories such as race and class.

Both the cultural competency and social determinants framework attempt to identify the causes—and consequently, the logical solutions—of racial disparities in health, but they differ in where they locate those causes and solutions. The cultural competency framework broadly focuses on the attention and understanding of individual practitioners to cultural differences in an attempt to provide more ‘culturally competent’ care (Jongen et al. 2017). The insistence on the part of some that “cultural variables and their effects on health and illness behaviors” provides a lens through which to properly understand health disparity not only essentializes such behavior, but also presents a problematic ahistorical understanding (Giger, 2013, p. 5). Garneau and Pepin (2015) have critiqued cultural competency frameworks for reinforcing static understandings of culture, showing the risks in seeing “health problems as the result of cultural behaviors, instead of the result of other factors such as a person’s living conditions and socioeconomic factors” (p. 10). This is why many scholars have advocated for the Social Determinants of Health framework as a more nuanced understanding of such inequity, but the model has also been criticized for its shortcomings.

The Social Determinants of Health framework advocates for the “powerful role for social factors—apart from medical care—in shaping health across a wide range of health indicators, settings, and populations” and further, the causal relationships between such factors and health outcomes (Braveman & Gottlieb, 2014, p. 20) . Emily Yates-Doerr (2020) provides a critical analysis of the social determinants framework and its influence on research and political action. She contends that the “social” aspect of research is itself diminished, and in its place “the social becomes reified as a pre-established and fixed set of attributes” (Yates-Doerr, 2020, p. 5). A key component of this analysis is the influence on research and political action, namely policy. When these findings are used, they run the risk of problem closure, as explored by Julie Guthman (2013). Researchers, in an attempt to solve a predetermined problem, “fore-close alternative explanations” (Guthman, 2013, p. 142). This critique of certain models that purport to explain health inequity is not meant to discount the racial and other social disparities present in health outcomes. Rather, my critique of current discourse is rooted in a desire to break the loop of perpetuating such health disparity and the dangers in associating race as a root cause. Building on these critiques, I examine how popular discourses about COVID-19 and race tend to locate the cause of health disparities in a somatic notion of race.

Methods

To analyze racial disparity discourse, my main methods center around ethnographic analysis of digital assets, namely news articles and headlines in the Greater Philadelphia Area. I use Philadelphia and local news as a case study of the ways in which COVID-19 racial disparity is narrated. This analysis informs how researchers and the public, broadly speaking, understand the relationship between COVID realities and race. This form of digital ethnography served as a cornerstone for analysis and filmic asset collection. It also served as a convenient workaround for the limitations of social distance protocols throughout the process of research. While I conducted interviews with local nurses to understand the way local health practitioner understandings of racial disparity were influenced by these narrations, the sample size was small, and lacked a crucial element of participant observation to see how their understanding influenced their practice.

For the historical and archival part of my analysis, I explore an understanding of COVID-19 racial disparity that complicates the racial disparity discourses I explore in my analysis section. I rely on archival analysis of secondary and primary sources that present statistical, symbolic, and material realities of Philadelphia in the 20th century. In the film, this is seen through the wedding of archival imagery and film to create a mosaic of Philadelphia history, informed by the theory of Loïc Wacquant.

Analysis

Through the ethnographic analysis of these discourses as expressed in media clippings, I show that people are using ideas of race to explain and question the causes of disparities in COVID-19 hospitalizations and mortality. For example, the dangers of narrating the COVID-19 pandemic with “discourses of racial disparities” (Reed & Chowkwanyun, 2012) has manifested itself most severely in a burgeoning re-emergence of race science amongst the scientific community. The Naked Scientists, a group with a large following based at Cambridge University, stated that “black people don't do well on certain types of antihypertensives, specifically ace inhibitors. It's intriguing that covid, which uses the same receptor on cells, appears to be hitting these people harder” (2020). The statement, which may come off to some as a well-intentioned query into COVID-19 disparities, is enmeshed with pseudoscientific “race genetics” that purport to target some “black” essence. In one of the more jarring examples on the effects of COVID-19, the Red Cross warned about a shortage of Black blood following the onset of the pandemic (Scholsberg et al., 2020). The “black blood” which they identify as crucial for the treatment of sickle cell—the idea being that sickle cell is essentially a black condition. While true that the vast majority of sickle cell patients are racialized as black as noted in the article, there is a dangerous conflation of the disease to the blood of a racialized group. On the polar opposite end of this conversation of race pseudoscience, we are confronted with the likes of Idris Elba as seen in the film, urging people to stop the spread of misinformation that “black people can't get Covid”(Elba, 2020). This idea of blackness as biological impenetrability to contagious disease harks back to conversations in antebellum Philadelphia about the immunity of blacks to yellow fever, which, as with COVID-19, proved incorrect.

While examples such as this are quite extreme in their return to arcane forms of race science, popularized by the likes of Samuel Morton, as explanation for disparity, more discrete manifestations have infiltrated the logic of the American public (Mitchell, 2018). The Fields sisters, in their book, *Racecraft: The Soul of Inequity in American Life* (2014), show the insidious nature of the instinctive circular reasoning of race. In a section comparing the logic of witchcraft to that of race, they state:

Like pure races a while ago, Luther's witches enter the world, and come to matter therein, not by observation and experience but by circular reasoning. Neither witch nor pure race has a material existence. Both are products of thought, and of language. Having no material existence, they cannot have material causation. (Fields & Fields, 2014, p. 22).

They provide us with a clear delineation between race and racism, hammering home the point that “racism is first and foremost a social practice...an action and a rationale for action” and that the slippage of racism into race “transforms *racism*, something an aggressor *does*, into *race* something the target *is*” (Fields & Fields, 2014, p. 17). This practice is prevalent in COVID-19 racial disparity narrations.

In the first clip present in the film, an unseen news reporter makes a remark about the “troubling racial impact” COVID-19 has had in Philadelphia, and how city leaders plan to “flatten the curve in minority neighborhoods” (CBS News, 2020). As an introduction to the film, it serves to orient the audience into the landscape of discourse present around COVID-19 and race. Later in the piece we return back to COVID-19, and “the enormous toll it is taking, particularly on people of color” (Alcindor & Choe, 2020). The reporter makes the statement on racial disparity with a graphic positioned in the upper right hand corner of the screen exclaiming “Race Matters” (Alcindor & Choe, 2020). Though subtle, the message presented here points to the overarching theme of race as an underlying cause in COVID-19 racial disparity. Race is the thing that matters in this instance. This idea is further solidified in the language of the reporter. People of color are at risk, and the disease, “it” which is the active agent in the sentence, is at fault. Therefore, race matters. Slightly further in the video after the appearance of Idris Elba debunking black immunity, Van Jones points to the reality of disease comorbidity for many black americans:

It's an epidemic jumping on top of a bunch of other epidemics already in the black community. We already have an epidemic of high blood pressure, which is lethal if you get this disease. Nobody is saying that. We already have an epidemic of asthma, obesity, etc...(Jones, 2020)

In this snippet, we are confronted with a black community fraught with health complications that existed before the introduction of COVID-19. What's not seen in the video is the call to action Van Jones produces based on this information. It amounts to a demand for racial data from the federal government and a ringing of the bell to alert black people of the seriousness of the pandemic (Jones, 2020). He also oddly mentions that "the numbers for the black community are gonna be completely different than the numbers coming out of China or Italy," which proceeds his aforementioned statement about the reality of comorbidities in the black community. While not completely decipherable, there is a subtle gesture of some innate racial correlation with disease. This is evident through the comparison of the black community in the United States to all of China or Italy. There is a major risk here of problem closure (Guthmann, 2013) in our understanding of racial inequity, as with the other examples listed before and below. In the film, these woven segments are pieced together in a way to provide a cohesive narrative around contemporary discourse around COVID-19 and race.

Following this segment of the video, we are presented with the racial disparity in question, using Philadelphia as a case study. As of March 21, African Americans in Philadelphia lead all other racialized groups in hospitalization, death, and case rates per 10,000 residents (City of Philadelphia, 2021). Following this data, we see national data on reported pandemic-related layoffs and proximity to victims of COVID-19 aggregated by race as of March 1 (NBC 10 Philadelphia, 2021). The animation I produced in the background, blocked out by the reported data, works as a parallel to discourse in contemporary US media. The animation is created using data on COVID-19 7-day average mortality rates aggregated by neighborhood poverty levels as of November 14 (CDC, 2020). There is an evident size and x-axis difference amongst neighborhood poverty levels, both metrics generated to be relative in size and space to the highest recorded value. The idea behind the blocking out of such data was to mirror the trends in contemporary media of the immediate jump to racial data to understand inequity, rather than questions of class and social precarity. The instinct to explain job insecurity through a racial lens without an analysis of class structure fails to capture the nuance in such processes. Finally the section closes out with a flurry of news article headlines about race and COVID-19. My intention in this segment is to show the oversaturation and all-encompassing production of racial inquiry into COVID-19 disparity. It has become a genre convention of sorts to include data or language that links an aspect of racialism to disparity, regardless of the possible connection, or lack thereof.

Solutions follow the diagnosis of the problem, and a race-first approach in understanding such health inequity lends itself to race-based initiatives in health policy and research. In a series titled, *The Color of Coronavirus*, APM Research Lab monitors COVID-19 mortality data “to guide policy and community responses” (APM Research Lab Staff, 2020). At the end of the article, they urge state and local health departments to include racial and ethnic detail in COVID-19 mortality reports as a means of informing equitable resource distribution. Another article calling for solutions that target the long history of structural racism in Milwaukee propose focus towards “wealth distribution, economic and social mobility, and neighborhood stability and safety” (Heath, 2020). While seemingly impossible to disagree with, there is an underlying idea of a benevolent, racially equitable form of capitalism which ignores the processes of exploitation and marginalization as an integral component of the current economic structure.

Although a substantial portion of discourse around COVID-19 falls into this logic of race as causality, there are instances in which discourse shifts towards an understanding of race as relational to other processes in the formation of racial disparity. In an article exploring COVID-19 racial inequity, the Drexel Urban Health Collaborative noted that “while data disaggregated by race/ethnicity are critical, these data alone fail to fully capture the root causes of racial inequality in COVID-19 and mask the complex systems operating to produce them” (Barber et al., 2020). In conversation, Paul Apostolidis and Keally McBride (2020) center the role of gig economy labor, and labor deemed “essential” as a factor in COVID-19 disparities.

Finally, I find my inspiration in this framing partially from Whitney Pirtle’s claim that “Racial capitalism is a fundamental cause of the racial and socio-economic inequities within the novel coronavirus pandemic (COVID-19) in the United States” (2020, p. 504). Pirtle states that “racism and capitalism mutually construct harmful conditions that fundamentally shape COVID-19 disease inequities,” but doesn’t necessarily provide a theoretical backdrop to understand racial capitalism in action (Laster Pirtle, 2020, p. 504-505). This is not intended as to point out some shortcoming in the piece, rather the vast field of racial capitalism, and what some argue is a lack of explanation amongst scholars in the field (Ralph & Singhal, 2018). This critique of racial capitalism propelled me to incorporate the theory of Loïc Wacquant, in an attempt to provide rigid clarification for the relationship between race and capitalism. Following this initial provocation by Pirtle, the part of the essay that follows is intended to explore a more nuanced understanding of the “why” for racial health disparities. This analysis is meant to provide a different framing of health inequity in juxtaposition to the explanatory reductionism seen in “cultural competency”, Social Determinants of Health, and “race-based” approaches.

Theoretical Framing

Loïc Wacquant utilizes comparative sociology and a deeply historical anthropology to inform his understanding of urban relegation in the contemporary moment. The subject of his analysis is the urban city and the emergence of new regimes of poverty across the transatlantic world (Wacquant, 2001; Wacquant, 2019a; Wacquant, 2019b). While on the surface this may seem tangential to racial capitalism, he provides a powerful analytical framework to understand the relationship between the racialized body and the state as seen in Fig. 1 (Wacquant 2019a, 23-30). In his writing, Wacquant has been highly critical of racial definition, claiming that many “have accepted lay preconstructions of the phenomenon”, and that race has been mobilized as a tool of analysis, reifying “ethnoracial struggles of the past” (Wacquant, 1997a, p. 222). Further, he sees the blurring of folk and analytic concepts of race as contributing to such confusion, conceptual inflation, and semantic decomposition of the concept, exemplified in a “scientifically inept but socially powerful differentiation between ‘race’ and ‘ethnicity’” (Wacquant, 1997a, p. 222-229).

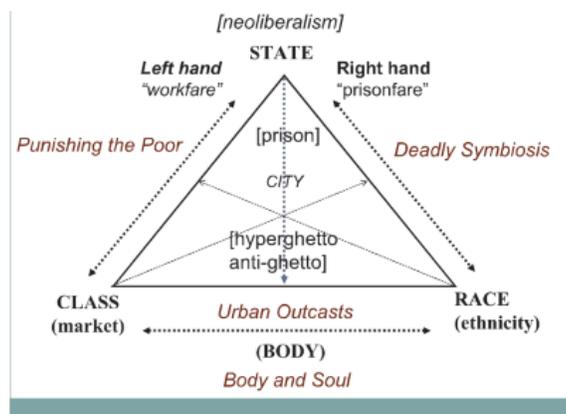


Fig. 1 -- The ‘fatal triangle’ of the urban precariat (Wacquant, 2019a, p. 29)

This provides useful framing for a later definition of race Wacquant proposes:

I use the term 'race' in the sense of denegated ethnicity: a principle of stratification and classification stipulating a gradation of honour (de-
clensed according to ancestry, phenotype or some other socio-cultural
characteristic mobilized for the purpose of social closure, cf. Wacquant
1997a, b) that purports to be based in nature, or else a paradoxical va-
riety of ethnicity that claims to not be ethnic—a claim that, infelicitly,
sociologists endorse every time they carelessly invoke the duet 'race and
ethnicity' that anchors ethnoracial common sense in English-speaking
countries. (Wacquant 2019a, p. 26)

Given this definition, race and ethnicity in the work of Wacquant are some-
what interchangeable, as the key object of analysis is that of ethnoracial divi-
sion and the actual mobilization of race in the neoliberal project.

Through this analytical framework, he proposes that the state, class, and race/
ethnicity operate in a dynamic triad, exerting forces across/on all axes. This
triangular formation is simply a way to orient the social categories of interest;
the relationship itself must be "empirically informed, relational, historical, and
sensitive to the sociology of knowledge" (Flint & Powell 2019, p. 3). This dialectic
between the body and the state and its extended relationship to health has
been explored by Adriana Petryna, as shown through her concept of biological
citizenship and theory of a moral calculus of risk (2013).

Exposition on the definition of a ghetto is crucial to understanding the relational aspect of race/ethnicity to this analysis. Wacquant defines the ghetto as, “an ethnic container” for the dispossessed and dishonored margins of society (Wacquant, 2001). In the US, we see the emergence of the hyperghetto as a device of ethnoracial domination and enclosure in the US, whereas the European ghettos have transformed to what he labels the “anti-ghetto”, marked by its “ethnic diversity, racial desegregation, and relative porosity.” (Flint & Powell, 2019, p. 12; Wacquant, 2001). This analysis exemplifies the understanding of race/ethnicity as relational to the project of neoliberal state formation as they exist in different contexts. What ties them together, however, is “fragmentation of wage labour, the retrenchment of social protection, and territorial stigmatization” leading to a position of advanced marginality (Flint & Powell, 2019, p. 10-11). Ethnoracial division in this context is to be understood as a lubricant of a sort, fueling the neoliberal agenda and its characteristic retraction of the social wing and penetration of the penal wing to curb the advanced marginality it produces (Wacquant, 2019a, p. 34-45). This fuel of ethnoracial division is supplied by the territorial stigmatization and symbolic taint of a particular marginalized race—in the context of the US, the black body. This advanced marginality, retraction of the welfare state, and conjoined penetration of the penal wing of the state has intensified and normalized the social insecurity of dispossessed Americans (Wacquant, 2001; Wacquant, 2019a). He elaborates on these two wings of the state under the rubric of “workfare” and “prisonfare” Wacquant has stated that prisonfare is seen as the penal wing, which focuses on “the stream of policies that responds to urban ills by rolling out the police, the courts, jails and prisons, and their extensions,” as well as “the whirling images of criminals...that trade on the fear of crime and feed a public culture of vituperation of felons.” (Winkler, 2009) Workfare, on the other hand, is the “forced participation in subpar employment as a condition of public support” (Winkler, 2009). These two together are seen as “modalities of public policy towards the poor” that embody a “centaur state” apparatus (Winkler, 2009).

In order to fully grasp the claims made here about “marginality, ethnicity, and penalty,” one must understand the symbolic aspects of Wacquant’s argument influenced heavily by the work of Pierre Bourdieu (Wacquant, 2019a, p. 37). Bourdieusian concepts of symbolic power, bureaucratic field, social space, and habitus are essential to such understandings. Bourdieu’s theories are worthy of books in and of themselves (Bourdieu, 1991; Bourdieu, 1994; Bourdieu, 1998; Bourdieu, 2000), but for this analysis, I only hope to show the effect of such theory on Wacquant’s framing as seen in Fig. 2 (Wacquant, 2019a, p. 41).

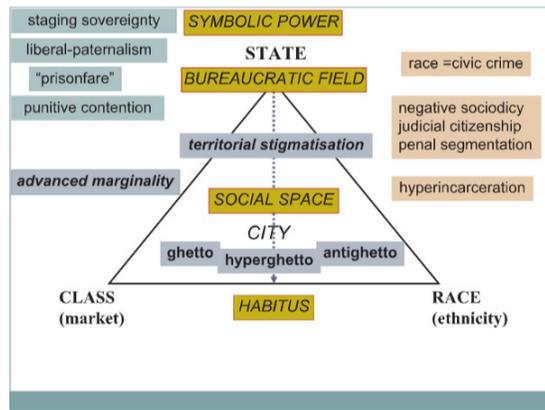


Fig. 2 -- The underlying theoretical architecture (Wacquant, 2019a, p. 33)

In Wacquant's framing, he sees the concepts as having two way causality, which in turns leads to the necessity of understanding the state as a dominant stratifying and classifying agent, including how powerful urban hierarchies are “ethnicized” (Wacquant, 2019a, p. 39). For example, symbolic power affects the social space, which affects and becomes embodied in the cognitive and habitus. The state, as “the holder of a sort of meta-capital” in the bureaucratic field, grants authority to the imprint of the state on the social space (Bourdieu, 1994; Wacquant, 2019a, p. 39). This is but one configuration of such an analysis, and it becomes clear that this framing is deeply contingent on localized realities.

Wacquant's framing of capitalism is not without critique, and several scholars have pointed to notable contestation to his claims. Piven (2010) questions the supposed "logic" of mass incarceration as a functional extension of neoliberalism as proposed by Wacquant. Piven also questions the claim that a large volume of marginal laborers who can be superexploited at will" (Wacquant, 2008, p. 25-26) is produced through the consequences of incarceration and the penal wing (2010, p. 115). Crane (2016) purports to complicate Wacquant's vision and role of the state "by demonstrating that the operation of the state in territories of poverty is shaped by poor people's movements that engage, subvert and even directly challenge attempts to govern and marginalise their neighbourhoods" in Oakland, California (p. 1109). This critique aligns well with the critique of Ralph and Singhal about the treatment of black subjectivity as a debilitated condition (2018). While Wacquant's framing could posit this sort of response, the centrality of habitus in his theory, and his understanding of it, shows this critique to be misguided. Informed by Bourdieu, Wacquant sees habitus as internalization of social conditionings and social limits, manifested in disposition toward action and expression (Wacquant, 2019a, p. 38-39). He further postulates that "habitus propels the lines of action that affirm or alter the structures of social space, and the collective meshing of these lines in turn reinforces or challenges...priorities of the state" (Wacquant, 2019a, p. 39).

With this framing of the state and its relationship to what we come to know as race, Wacquant provides us with a model for enriching our understanding of COVID-19 racial disparity in the United States. There are many disciplinary and methodological sections necessary for understanding the work in its entirety in any given context. For my analysis, I will focus mainly on the production of a racial logic in Philadelphia, what Wacquant refers to as the ethnoracial division which serves as a lubricant to the neoliberal state, and follow it with a glimpse into the relationship between this racial logic and the dynamics of the neoliberal market.

Historical Threads

Through an archival analysis of how health inequities evolved in Philadelphia's history, I show the complicated ways race has been used to make racialized black bodies more vulnerable than others, as seen through housing, education, and labor practices. Philadelphia has served as the breeding ground for the production of a stigmatized and dehumanized black racial other which, as I will show, is essential to understanding racial health disparity under a capitalist political economy. This racial other serves as a central component to the market logic of neoliberal capitalism. In Philadelphia, the conditions for racial disparity were present during the antebellum period. In the early 19th century, black philadelphians were the targets of anti-black violence through the forms of riot and arson for multiple decades beginning in 1829 (Hershberg, 1998). The logic of the elite at the time was that of social order, and that blacks were part of a criminal class threatening the social harmony within city limits (Weigley, 1998). This was due to the fears of a disorderly poor class, and the majority of black residents in the city were of this social rank (Alexander, 1998; Hershberg, 1998). Elites feared the violence of the poor, which was by and large a byproduct of the deprived conditions they lived under on the outskirts of the city. As John Alexander shows (1998), through analyzing city court records from 1794-1800, "in at least half the cases, hunger or need for clothing was the force that pushed these people into crime." (p. 20). This fear of and violence towards blacks was not relegated to the poor, however, as seen through the Edward W. Clay, *Life in Philadelphia*, series present in the film. As Gibbs (2014) points out,

his (Edward Clay) overriding purpose was to lampoon free blacks' aspirations to upward social mobility by painting them as ridiculous and ill-behaved in high-life settings...the humor consistently rested on scorning blacks' aspirations to the high life of fashion, culture, and civic affairs as an absurd contravention of the "natural" racial hierarchy of white social and political hegemony (Gibbs, 2014, p. 134-137).

In this way we can see how the stage was set for the wedding of blackness to a certain form of natural depravity in social and economic life. At the University of Pennsylvania, this idea of natural depravity was taken up by race scientists in an attempt to medically explain certain differences. The race science discourse was not born of this moment, however, and showed signs of emergence during the Yellow Fever Epidemic of 1793 in Philadelphia. Benjamin Rush, a prominent abolitionist at the time, convinced Richard Allen to send black medical practitioners to aid in the fight against the epidemic as he believed in black immunity from the disease (Rush, 1794). He later walked back on this assumption after seeing the toll it had taken on black bodies, but the idea that a biological form of race was a relevant metric to understanding health inequity remained (Rush, 1794). The Penn and Slavery Project has brought local university attention to the ways in which this racial logic was medicalized. For example, Archana Upadhyay and Carson Eckhard shed light on this study of innate racial difference at the University of Pennsylvania, and how it contributed to larger scale rhetoric of racial inferiority for blacks. As Archana argues in an interview, it not only had influence on the rhetoric of innate racial difference in Philadelphia, but also on the nation as a whole (A. Upadhyay, personal communication, March 13, 2021). Carson expands on this point by mentioning the American School of Ethnology—a prominent school of thought that focused on the study of racial difference, justified a white supremacist hierarchy, and that ultimately supported slavery and colonialism—was popularized and catalyzed by University of Pennsylvania professors and alum (C. Eckhard, personal communication, March 13, 2021). These examples of racial logic being present in Philadelphia are not meant to be all encompassing, but they function as a way of understanding how racial ideology manifested itself in processes of state formation throughout history. Relating back to the theory of Wacquant, the ethnoracial division so crucial to the functioning of capitalism has been fervent in the city of Philadelphia since the Antebellum.

Throughout the history of Philadelphia, we are able to see the white supremacist logic of anti-blackness in action. It is this logic, when understood in tandem with the market and penal ideology of capitalism, that we come to understand the inextricably linked relationship between the two complementary ideologies. The disastrous effects on health are produced through patterns in housing, education, labor, incarceration and various other processes linked to the state that have to do with equitable resource distribution. Bringing it back to Wacquant once more, an example of workfare is seen in the 18th century through the politics of respectability forced on the poor in order to receive relief funds (Alexander, 1998). This was a response to the elites' fear of the poor and immigrants at the time, and used to curb the disorder that the system produced (Alexander, 1998). The mere existence of ethnoracial division is only one axis of the triangle. It doesn't yet take into account the axes of class and state, and the symbiotic relation between the three axes. It is in this context, that we are more primed to understand the utter complexity of racial disparities present in COVID-19 mortality and hospitalization in Philadelphia.

In the film, the historical montage provides a general overview of the ways in which this logic manifests. The viewer is presented with imagery of state police violence towards black Philadelphians, residential discrimination in the form of protest against a black family moving to Levittown, and educational discrimination in the form of Girard College refusing acceptance to black students. This history of race, class, and state intersecting in Philadelphia has been richly documented, and once again, the analysis I present is not meant to serve as an all-encompassing explanation (Countryman, 2007; DuBois et al., 1996; Davis & Haller 1998; Warner, 1987). They inform us of key state formations such as urbanization, deindustrialization, and community disinvestment that have led to the state of social precarity for many in Philadelphia today. A key point to take away from these histories, is the dynamic nature of the economic system in the United States. In order to better inform our understanding of racial disparity, it is critical that we have an understanding of the historic shifts in state governance to avoid mapping present day or ahistoric notions of neoliberalism onto the past.

Conclusion

In 1974, Alan Pakula released the cinematic political thriller, *The Parallax View*. The film embodied the conspiratorial political tension of the time, and leaves us with one of the most visually stunning and intellectually rich montage sequences in film history (Pakula, 1974). In a scene, the main protagonist, Warren Beatty, is assessed by the Parallax corporation with a neurological response test to gauge whether or not he is capable of being a political assassin and thus work for the corporation. The assessment consists of a video presented with words and imagery. A word is presented in the video, such as man, family, and love, and is followed by a set of images associated with the word (Pakula, 1974). For example, the word “ENEMY” pops up on the screen and we see it followed with images of Nazi Germany, Mao Zedong, and Fidel Castro. “HAPPINESS”, on the other hand, is followed by images of money, alcohol, steak, and the body of a nude woman (Pakula, 1974). Words fail to capture the intensity and poetic nature of the piece, as it ramps up in cut speed to become somewhat of a blur as it progresses. While on the surface, the film presents it as a neurological assessment of the main character, there is a subtext of interrogation into the socially constructed meanings we produce. We are meant to interrogate notions of individuality and nationalism, and of pleasure and pain. Though released long before I was born, the film served as a fundamental inspiration in the production of my film, particularly my montage heavy moments of archival and contemporary media analysis. The moments are meant to serve as explorations into both material lived experience and symbolic meaning-making for black americans.

Through analysis of COVID-19 racial disparity narrations, we are able to see the prevalence of discourse centering race as a root cause of racial disparity. As I have argued, not only is this an insufficient framing to illuminate the causes of racial disparity, but also a dangerous separation of race from class and state. Instead, we must understand the role of the state in the material and symbolic denigration of dispossessed and dishonored populations (Wacquant, 2019a). This means treating and understanding health holistically, a position ripe for the insight of the anthropologist in explaining social processes. It is also a call for a unidisciplinary practice, as Wacquant embodies so well. As I have argued, these processes are unintelligible without deep historical understanding, and manifest in news headlines relating racial disparity back to an innate racial essence. Black as the go-to logic of understanding health inequity creates a false meta-narrative around a monolithic black identity and its relation to positionality in the United States. Potentially *most* important in the reframing of the problem is the subsequent reframing of a solution. McClure et al. (2020) and Pulido (2017) have put forth analyses of racial capitalism in action, diverting the responsibility away from the individual and mapping it on to occupational industries and the state respectively. While a historical framing can provide us with a deeply contextual analysis of how we got to the current moment, it falls short of illuminating contemporary processes. I argue that this space of exploration is critical moving forward, to better inform how researchers and the public, broadly speaking, understand health disparities.

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