

## The problems of using migration background as a conceptual framework in palliative care research

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## **LETTER TO THE EDITOR**

in response to: X de Voogd, MG Oosterveld-Vlug, M Torensma, BD Onwuteaka-Philipsen, DL Willems, JL Suurmond. A dignified last phase of life for patients with a migration background: A qualitative study. *Palliative Medicine*, 2020, 34(10), 1385-1392.

### **Title: The problems of using migration background as a conceptual framework in palliative care research**

We commend de Voogd and colleagues for recognising the need for studying perspectives on a dignified last phase of life among people of diverse backgrounds; in this case, people born in Turkey, Morocco or Suriname who emigrated to the Netherlands. The authors described, interpreted and generalised participants' views using the concept of 'migration background.' We would like to argue that used as an analytical framework, this concept may not ideally suit the study's objective.

First, the concept 'migration background' has historically been defined and used in inconsistent ways.<sup>1</sup> While operationalising it as being born in one of the three countries studied, the authors do not describe or justify this operationalisation, or provide a working definition of 'migration background', which makes it difficult to understand to which groups they generalise their findings (e.g., whether this also includes subsequent generations born in the Netherlands). Second, as a pre-determined and externally assigned societal category, 'migration background' fails to reflect the complexity, fluidity and dynamic nature of migration experience, ethnicity, cultural dynamics and processes of belonging and identification.<sup>2</sup> It tends to group research participants into culturally homogenous 'others' against a majority reference population<sup>3</sup> and risks homogenising the precise diversity that researchers try to capture. Efforts to reflect relevant individual complexity and variation need not happen at the expense of transferability or generalisability of findings. On the contrary, in qualitative research, it is precisely the contextualisation of findings within relevant individual circumstances that is needed for the reader to judge to which groups or contexts findings can be transferred or generalized.<sup>4</sup> This is particularly important when studying groups defined by a-priori societal characteristics (e.g., migration experience) that are known to intersect with other societal descriptors (e.g., gender, class, age, ethnicity, sexuality).<sup>2,3</sup>

To strengthen qualitative palliative care research in culturally and ethnically diverse societies, we suggest researchers use descriptors of diversity based on participants' self-identification rather than externally assigned categories. Use of objectifiable pre-defined categories (e.g. country of birth) can be legitimate, but should be justified and accompanied by an exploration of participants' identification with these categories and the extent to which they perceive them as shaping their views on the topic at hand. At a minimum, migration experience should not be used in isolation to interpret findings but considered alongside intersecting societal categories that shape individuals' life experiences.<sup>2</sup> Researchers should also be open – and actively investigate – the possibility that the relevance of migration experience as such to understanding subjective perspectives on the end of life is minimal, next to other societal categories.

Furthermore, various methodological and theoretical frameworks that lend themselves to studying experiences, views and processes of meaning-making of diverse populations can be considered. For instance, phenomenological analysis (focusing on lived experiences), narrative research (studying narratives constructed around personal experiences), or ethnography (aiming to gain in-depth understanding of individuals' views and behaviour within particular contexts, often combining multiple methods and data sources) can help avoid essentialist understandings of migration experience, and over-generalisation. We also suggest that researchers familiarise themselves with literature from cultural and anthropological studies addressing the complex nature of cultural dynamics and identity-creation within globalised contexts, as well as decolonial research frameworks that critically reflect on current power dynamics in research (e.g. who creates which societal categories and why).<sup>4</sup>

Finally, we encourage reflection on the suitability of the predominant approach to studying cultural diversity in palliative care research, i.e., investigating minority populations' experiences solely within the context of that minority status. Perhaps the primary strategy should be to strive for better representation of diverse populations in *all* of palliative care research, thus allowing simultaneous exploration of differences and similarities based on diversity in a range of societal descriptors and identifications.

## References

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