BAME (black, Asian and minority ethnic): the ‘new normal’ in collective terminology

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BAME (BLACK, ASIAN AND MINORITY ETHNIC): THE ‘NEW NORMAL’ IN COLLECTIVE TERMINOLOGY

 Anyone who has been tracking the public health literature on the greater risks experienced by minority ethnic groups in the coronavirus pandemic will have been struck by the almost ubiquitous use of the acronym ‘BAME’. Government public health agencies use BAME as a modifying adjective for ‘... communities’, ‘... groups’, ‘... households’, ‘... people’, ‘... populations’, ‘... staff’ and as a noun. A 2020 report by Public Health England on the impact of COVID-19 on minority ethnic groups mentioned BAME 217 times without defining the term other than spelling out the acronym. Such usage is redolent of Ian Hacking’s ‘kinds of person’, a social group brought into being by the creation of labels for them and whose life narratives are dependent on social practices associated with such labelling.

 While ‘BME’ (black and minority ethnic) entered the lexicon in the early 1980s and was first used in Parliamentary proceedings in 1987, BAME made a later debut in this source in 2004 but had exceeded BME in frequency by 2020. A search of the GOVUK portal—the website for the UK Government launched in 2012—reveals that for the use of BAME substantially outpaces BME (428 vs 242), a progressively widening gap that now makes it the government’s collective term of choice for minority ethnic groups. Indeed, BAME was added to the Oxford English Dictionary’s ‘new words list’ in 2014, confirming its arrival in the authoritative lexicon of contemporary English and further sustaining its use.

 The use of BAME is problematic for a number of reasons. A survey by the Race Disparity Audit, the best available evidence, found that among nearly 300 people across the UK, 1% either recognised the acronym or knew what it stood for, against a required government standard of 80% of the UK population. The term is generally used to refer to all minority ethnic groups except those that are white, thus excluding such groups as Gypsies, Roma and Travellers, some of the most disadvantaged and marginalised in Britain. It is illogically constructed, raising issues of exclusion and divisiveness. Black British Academics argue that BME and BAME ‘reproduce unequal power relations where white is not a visible marker of identity and is therefore a privileged identity’. Both the Office for National Statistics and Cabinet Office advise against the use of these acronyms.

 In policy work on racial/ethnic disparities and inequities and structural or systematic racism, the language of BAME and BAME offers a convenient shorthand for those who are discriminated against by virtue of their physical appearance, but at the cost of confusion, ambiguity and a lack of understanding. Unfortunately, these acronyms are gaining in reality with respect to usage by government and the media. A wider public debate is invited on appropriate collective terminology for minority ethnic groups. There is evidence that terms like ‘minority ethnic’ and ‘ethnic minority’ are widely accepted and understood and a case for the use of accurate description to delineate the population groups encompassed by collective terms.

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 REFERENCES

 6 Bunglawala Z. Please, don’t call me BAME or BME! (Civil Service Blog, 8 July 2019). Available https://civil.service.blog.gov.uk/2019/07/08/please-dont-call-me-bame-or-bme/ (accessed 1 Aug 2020)