

Abstract

Background Understanding the diversity and multiplicity of identities experienced by youth in Aotearoa (Te reo Māori name of the country) New Zealand (NZ) is vital to promoting their wellbeing. Ethnic minority youth (EMY) in NZ (defined as those identifying with Asian, Middle Eastern, Latin American and African ethnic origins) have been historically under-studied and under-counted, despite reporting high levels of discrimination, a major determinant of mental health and wellbeing and potentially a proxy for other inequities. In this paper, we describe the protocol for a multi-year study that examines, using an intersectional approach, how multiple marginalised identities impact mental and emotional wellbeing of EMY.

Methods This is a multiphase, multi-method study designed to capture the diversity of lived realities of EMY who self-identify with one or more additional marginalised intersecting identity (the population referred here as EMYi).

Phase 1 (Descriptive study) will involve secondary analyses of national surveys to examine the prevalence and relationships between discrimination and wellbeing of EMYi. Phase 2 (Study on public discourse) will analyse data from media narratives, complemented by interviews with stakeholders to explore discourses around EMYi. Phase 3 (Study on lived experience) will examine lived experiences of EMYi to discuss challenges and sources of resilience, and how these are influenced by public discourse. Phase 4 (Co-design phase) will use a creative approach that is youth-centered and participatory, and will involve EMYi, creative mentors and health service, policy and community stakeholders as research partners and advisors. It will employ participatory generative creative methods to explore strengths-based solutions to discriminatory experiences.

This study will explore the implications of public discourse, racism and multiple forms of marginalisation on the wellbeing of EMYi. It is expected to provide evidence on the impacts of marginalisation on their mental and emotional wellbeing and inform responsive health practice and policy. Using established research tools and innovative creative means, it will enable EMYi to propose their own strength-based solutions. Further, populationbased empirical research on intersectionality and health is still nascent, and even more scarce in relation to youth. This study will present the possibility of expanding its applicability in public health research focused on under-served communities.