

Ethnicity is not Equal to Citizenship

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To the Editor,

I recently read the article by Songöz et al.¹ entitled "Comparative Analysis of Angiographic Parameters and Percutaneous Coronary Intervention Outcomes in Diverse Populations in Türkiye." The authors compared angiographic parameters and percutaneous coronary intervention outcomes between two different study populations in Türkiye, categorizing these groups based solely on citizenship and equating citizenship with ethnicity. Therefore, the authors should have provided a more scientific method for grouping the study populations.

Ethnicity is a group of people's shared identity based on culture, language, common ancestry, and religion.² Ethnicity does not correlate with an individual's citizenship status.³

Citizenship, legally speaking, allows individuals to travel freely between countries and to enjoy privileges from the state. There are several legal pathways to acquire citizenship, which may differ from country to country. According to the Turkish Constitution of 1982 and current legal regulations, a person is considered Turkish after acquiring citizenship through birth, marriage, investment, etc., regardless of their race, religion, or ethnic origin. Therefore, the citizens of Türkiye may have different ethnic backgrounds, similar to populations in other countries. Thus, ownership of Turkish citizenship is not a scientific criterion for grouping study populations, and it would be scientifically incorrect to consider this difference as ethnicity.

Additionally, no official national census addressing ethnicity has been conducted in Türkiye since 1965. Similarly, several ethnic groups in Syria hold Syrian citizenship.⁴ People from similar ethnic groups reside in both Syria and Türkiye, and Syrian citizens have migrated to Türkiye in the same composition since April 2011.

The differences in the outcomes of the study populations were not related to so-called ethnic differences but were mostly due to differences in the patients' ability to access medical services, medications, etc. The variance in access to medical services is largely attributed to language barriers, economic constraints, and social beliefs regarding medical diseases among the populations concerned, rather than to ethnicity or citizenship.

The authors should revise the structure of the article concerning the classification of the subjects and avoid using ethnicity and citizenship interchangeably.

Conflict of Interest: The author declares no conflicts of interest.

Funding: This study received no financial support.

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LETTER TO THE EDITOR EDİTÖRE MEKTUP

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Received: May 17, 2024

Accepted: May 24, 2024

Cite this article as: Ede H. Ethnicity is not equal to citizenship. *Türk Kardiyol Dern Ars.* 2024;52(5):371.

DOI:10.5543/tkda.2024.76822



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