

## ***Racism, Diversity, and Social Justice*** ***Dr. Barbara Nichols***



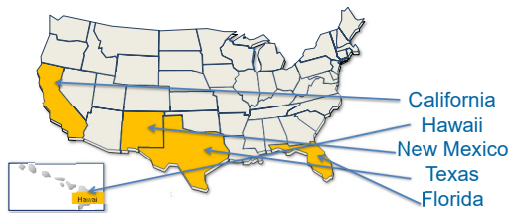
## ***USA – Changing Demographics***

Diversity needs to be viewed through changing demographics of race, ethnicity, religion, and age.



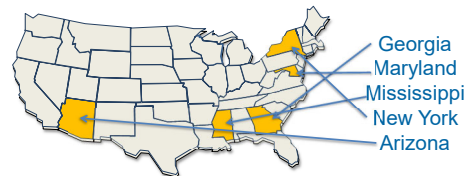
## ***USA – Changing Demographics***

*Five states have “minority” majorities:*



## ***USA – Changing Demographics***

*Five states have non-white populations around 40%*



## ***USA – Changing Demographics***

2050 – 90% of U.S. population will come from Asians.

People of color are a majority in 48 of the nation’s largest cities.

Hispanics are the largest ethnic minority.

Islam is the fastest growing religion.

The U.S. is the largest recipient of international migrants globally.

## ***USA – Changing Demographics***

## USA – Changing Demographics

This means Diversity in age, race, and religion challenges response to health care delivery, practices, & outcomes.



## The U.S.A. is becoming more:

- Multi-Ethnic
- Multi-Racial
- Multi-Linguistic
- Multi-Religious
- Multi-Cultural



**This  
Means  
That  
COLOR  
Matters**

## Prejudice Matters

### PREJ-U-DICE

Judgment or preconceived idea before the facts are known; usually unfavorable; marked by fear, intolerance, or hatred

Webster, New World Dictionary

## Prejudice Matters

Stereotype + Categorization = Prejudice

Prejudice + Social Context = Discrimination

Gordon Allport, *The Nature of Prejudice*

## USA – Changing Demographics

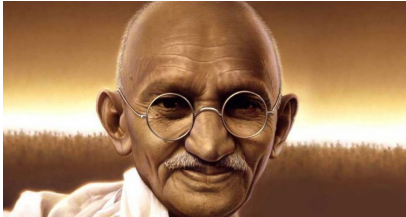
This means that health professionals must expand their view about providing culturally competent care across:

- Racial and Ethnic differences
- Cultural and Value differences
- Language and Religious differences

### ***Action Required***

“You must be the change  
you wish to see in the world.”

Mahatma Gandhi



### ***Action Needed:***

- 1) Collect, analyze, integrate & utilize data to develop evidence-based strategies
- 2) Build partnerships across multiple & diverse stakeholder groups (i.e., healthcare organizations, minority associations)
- 3) Promote, target & sustain diversity efforts across educational & practice settings (i.e., use of academic /practice linkages)
- 4) Create direct outreach approaches that engage diversity groups & stakeholders

### ***The Moral Imperative***

#### **Anti-Racism, Diversity, and Social Justice in Practice**

- Enhances communication
- Promotes patient satisfaction
- Improves access to care
- Assists in addressing disparities
- Provides diverse perspectives to solve complex problems

***“We are tied together in a single garment of destiny,  
in the web of mutuality ...”  
Martin Luther King Jr., 1968***

