

Colorful Communities: Toward a Language of Inclusion

*Blackfoot amiga Nisei Hermana
DownHomeUpSoufSistuh sister El Barrio suburbia Korean The Bronx Lakota
Menominee Cubana Chinese Puertori-
quena reservation Chicanacampanera
... sharing Sisters of the yam Sister of
the rice Sister of the corn Sisters of the
plantain putting telecalls to each other.
And we're all on the line.*

Toni Cade Bambara¹

This issue of the Journal is the first to focus specifically on the health of “women of color” rather than on women’s health more generally. The women’s movement helped shape a health agenda related primarily, but not exclusively, to reproductive health. In addition to important biological differences between men and women, differences in race and economic resources have dramatic consequences for health. Compared with White women, most women of color bear the burden of far worse health outcomes, although the analysis is far more complicated upon closer inspection.

The term “of color” after “people”, “communities”, and “women” describes at the same time racial, ethnic, and national groups. In a *Time* special issue entitled “The New Face of America,” William A. Henry noted, “the very use of the term ‘of color’—which embraces Blacks, historically antagonistic Asian ethnicities, Native Americans and Hispanics, many of whom are ethnically white—implies that these disparate groups are bonded simply by not being of Northern European descent.”² The term “of color” often evokes a visual, descriptive image. This editorial, rather than

being a complex discussion of race itself, focuses on the language of race.

Public health practitioners, researchers, and advocates all struggle for appropriate language to describe the rich cultural diversity in the United States and throughout the world. The 2000 US census brought changes in how we, as a nation, can identify ourselves by race/ethnicity.³ The new language of the census questions on race and origin enable those who rely on the US census to better understand the country’s growing diversity.⁴

Complexities not captured by the US census still require attention. For instance, foreign-born recent immigrants, who contribute greatly to our cultural landscape, are racially and ethnically classified in the United States as Latino/Hispanic, Asian, or African American/Black, even though most of them would not be classified as such in their country of origin. Thus, recent immigrants may not include themselves among these racial/ethnic “classified groups,” which may therefore be undercounted in the census.⁵

Debate continues regarding whether race or ethnicity is more meaningful and thus which data should be collected. Stephen Thomas believes that the social justice perspective of shifting away from “race” to “ethnic group” in some respects minimizes the apparent health impact of racism, especially for populations subjected to social prejudice because of their dark skin and facial features.⁶ Discrimination

based on appearances and characteristics, including skin color, hair texture, facial features, and accent, is all too common and contributes to egregious disparities in health. Health care and social service providers are part of a larger society where such prejudice exists. Patients with darker skin have been shown to receive substandard and differential care, even when socioeconomic status is controlled for.⁷

Preventive care information is systematically not given to patients of color; thus, not surprisingly, their health outcomes are worse than those of their White counterparts. As Thomas points out, this has more to do with racial bias in health care than with the social customs of those in need of care.⁶

In the 1980s, multiculturalists advocated a language to speak about and include various voices, in particular, the “colored” voice, the diverse voice, and the subculture-specific voice. Careful attention was paid not only to understanding the complexities of diverse voices but also to the importance of working toward language that conveys inclusion. Building on the gains of the civil rights movement, the multicultural movement proclaimed the importance of identity politics, not only for race but also for gender, class, and sexuality. Ethnic studies and, in some places, women’s studies departments, centers, and schools became more common on university campuses. The focus shifted from acknowledging that “Black is beautiful” and “Brown is down” to clarifying origins and strength-

ening ties and the terms “African American,” “Asian American,” and “Native American” were established. This vernacular shifted cultural paradigms. New curricula were developed and taught. Diverse schools of thought were established.²

The multicultural movement of the 1980s demonstrated that language is essential for inclusion, and it resulted in policies to fund needed work. In the commentaries and research articles in this issue of the Journal, many of the authors use the term *of color* but refer to a wide diversity of target groups. It is not feasible or necessary for any single research study to include every population of color. Although there are exceptions, few of the authors have separated the notion “of color” from race, ethnicity, nationality, or country of origin. In fact, color has come to mean race, and often these 2 words are used interchangeably.

Before 1950, Europeans usually were defined by their country of origin; now all northern Europeans (or those who look like northern Europeans) are classified as “White.” Earlier in the 20th century, people from Italy or Ireland were considered colored on the basis of their immigration status. However, with their mastery of English and the local culture and their skin color privilege, many were able to “pass as White” and eventually became part of a monolithic White race.⁶

In the early 1970s, terms such as *Asian*, *Hispanic*, or *African American* were not in the vernacular. Instead, US medical and health professionals used “yellow” and “brown” for categories of race on birth and death certificates. This practice was similar to South Africa’s former apartheid

government’s “pass policies” based on the color classifications of “Black”, “White”, and “Colored.” These color classifications were made on sight and depended on an inspector’s perception. Any pass deemed not in order by an inspector might be assumed to be fake, simply because the inspector perceived the pass holder as belonging to a different race. Family members could therefore be classified into 3 separate races and thus separated.

In the United States, the civil rights struggles of the 1950s and 1960s, which was based solely on race, needed to expand in response to a fuller understanding of oppression and the complexities of jointly considering race, class, gender, and sexuality. People of African, Asian, Latino or Hispanic, and indigenous descent came together for basic civil rights, but if they wanted to work against sexism, classism, and homophobia, race had to be checked at the door. In their fights against oppression, groups such as feminists, unionists, and gay rights activists found it difficult to include race with their other demands. The multiplicity of needs overwhelmed the activists working for social justice. Single-issue movements were considered to be successful in gaining victories. The voices “of color” were often silenced within the cacophony of diversity.

Understanding not only the collective voice of people of color but also the subtleties of distinction among them is important. In the birth control movement of the 1960s and 1970s, perceptions about “choice” were very different across racial/ethnic lines. Angela Davis noted that women who were racially oppressed were missing from the

movement. Many White women felt that women of color were overburdened by their people’s fight against racism or that they had not yet become conscious of the centrality of sexism. In fact, many women of color—including Black and Puerto Rican women—were highly suspicious of the birth control movement.⁸ Many of them experienced illegal abortions. They compared the birth control movement with early population control by means of forced sterilization, which usually had targeted them. In addition, many women of color felt they could not speak about race in the context of the women’s movement or the women’s health movement, which they considered to be “a middle-class White women’s thing.” According to Mitsuye Yamada, “a movement that fights sexism in the social structure must deal with racism” in a clear language that addresses this issue of control.^{9(p73)}

The debate about a language for race continues. In September 2001, the United Nations hosted the World Conference Against Racism in Durban, South Africa. Over 160 countries participated, and the delegates adopted the Durban Declaration against racism, racial discrimination, xenophobia, and intolerance. The conference lasted 9 days. Bitter debates raged about the language of the declaration and its failure to include the experiences of many groups, including the indigenous peoples of the world. Instead, the conference focused primarily on the Israeli–Palestinian conflict, which overshadowed other work. During the middle of the conference, the United States—with a limited governmental delegation to represent it—walked out of the historic event in protest over the language of in-

clusion.¹⁰ Given that the United States is the current global power, with a history of colonialism, imperialism, genocide, and racism, its departure from the conference was ill considered and ill timed at best. The walkout marred the progress that had been made by many indigenous groups toward obtaining reparation and apology.

The World Conference Against Racism illustrated vividly the important point we are at in the history of recognizing the effects of racism throughout the world. It also pointed out our continual struggle with the language of race. As we move forward, there is a pressing need for language to describe the rich diversity of groups with whom we work and live, as well as the oppression that exists as certain groups profit from the mistreatment of other groups. In 1980, the term up for debate, “Third World women,” was intended to show the connections among women of color in the United States, newly arrived immigrants, and their ties to their homelands of origin. In 2002, it is no longer “politically correct” to use “Third World” when describing developing countries.

There remains the need for both a collective voice for women who remain underrepresented and a language to describe them. The growth in the populations not only of Latinos and Hispanics but of people of Asian and African descent has led to the prediction that “Whites” will soon be the minority group in the United States. This is already true in certain US urban areas. As the *minority* becomes the *majority*, the phrase “of color” may take on an increasingly opaque and generic meaning. As with all racial designations, it should be used with care, and authors need to clearly define whom they mean. There is

a need to continually evolve and adapt the language of race. The overall goal of women of color is to include voices that alone may be muted but collectively are loud and strong. ■

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