GUEST EDITORIAL

MULTICULTURAL DIVERSITY IN MEDICINE

Constance D. Shabazz, MD, and James H. Carter, MD, FAPA Chicago, Illinois and Durham, North Carolina

African-American scholars and especially African-American journals have been extremely silent on the dreadful push to eliminate multicultural diversity in American universities and colleges. It is implied today that excellent educational standards can only be maintained by strict adherence to Eurocentrism and therefore the decline in educational performance by American students is a reflection of the 1954 *Brown* decision. This pre-civil rights era perspective carries drastic implications for future African-American students.

For the past decade, racial and ethnic minorities have been openly delegitimized by Anglo-American scholars under the guise of freedom of speech. Europeanoriented radio and television talk shows are constantly codifying African Americans as subhuman creatures prone to violence and criminality. African Americans are typically portrayed as socially, intellectually, and financially impoverished individuals—often engaged in welfare fraud, plagued with teenage pregnancy, and involved in drug-related black-on-black crime. Without a doubt, African Americans are disproportionately represented among the socioeconomically deprived. Nonetheless, African-American families have endured unimaginable stress, and the African-American family remains the one true salvation. Non-African Americans and even some African Americans tend to underestimate and deny the devastating effect of the institution of slavery on the lives of all African Americans, regardless of education and socioeconomics. If there were any toxic environmental exposure that took a toll on a people, it was the institution of American slavery.

From Duke University Medical Center, Durham, North Carolina. Requests for reprints should be addressed to Dr James H. Carter, Professor of Psychiatry, Box 3106, Duke University Medical Center, Durham, NC 27710.

In a multicultural environment such as ours, it is most unlikely for a member of the medical profession to never encounter patients from a different culture and ethnic background. To be an effective communicator in a cross-cultural situation, the health-care provider must be taught ways in which the patient's cultural value systems influence the helper-patient relationship. It is also necessary for the health-care provider to recognize the manner in which his or her own culture influences attitudes and actions. For example, because a large part of some physician-patient relationships involve touching and close physical proximity, awareness in touching and personal body space is important; i.e., it is taboo for East Asians to touch or to be touched on the head. It is a fact that some African Americans believe that diseases are caused by evil influences and illness may be impacted by the laws of nature. We may even discover that some obscure form of anemia in pregnant female African Americans may be related to the habit of ingesting clay-a poorly understood tradition in some regions of the South.

Another area of potentially serious misunderstanding is eye contact. Studies have shown that African Americans use eye contact in patterns that differ greatly from those used and expected by Anglo Americans. Anglo Americans are observed to maintain eye contact while listening and to look away while speaking; African Americans tend to maintain eye contact while speaking and to look away while listening. Misunderstanding can occur if the physician assumes that the lack of eye contact indicates a lack of respect on the part of the African-American patient. However, more sound scientific data exist in medicine regarding biological differences, eg, the pathophysiology and course of hypertensive cardiovascular diseases in African-American populations differ significantly from those of non-African Americans. Treatment for hypertension in

African Americans is much more effective when directed at the specific underlying pathophysiologic abnormality.

African Americans and other minorities of the medical profession are in a unique position to demonstrate that compassion, empathy, love, and cultural understanding are important in our society. Today's society, characterized by avarice, greed, and selfishness, will ultimately self-destruct unless we, as African Americans and minority professionals, step forward to demonstrate to the rest of the world how essential multicultural diversity is to modern medicine.

