

Lingering Racism in Health Care

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Thirty-nine years ago this July, Congress passed the Civil Rights Act of 1964, the first serious legislation of its kind in a century. The '64 measure made illegal what were then commonly known as "Jim Crow" practices—refusing to serve people of color in white-owned restaurants, hotels, barber shops, bowling alleys, and other public facilities. Most Americans greeted passage of the act joyfully, believing that racism had been abolished in this country. But subtler forms of it lingered on.

The most unspeakable form of all was in medicine. In 1932 the U.S. Public Health Service launched a now infamous experiment—the "Tuskegee Study"—in which reputable medical researchers followed the course of untreated syphilis on 399 black men—without telling the men they had the disease. Not until 1972, when articles about the Tuskegee Study began to turn up in the press, did the government stop it.

In "Prejudice and the Medical Profession" (p. 12), Fr. Peter A. Clark, SJ, PhD, mentions the Tuskegee Study as a particularly horrible example of racial and ethnic discrimination in U.S. health care. But that disgrace (and others like it) he offers mainly as background for his main contention: that health care racism—often unrecognized by the very people who practice it and, therefore, as untreated as the Tuskegee Study's syphilis—persists today.

"Racism in health care is an issue that should concern everyone in the field," notes Fr. Clark. "But it should especially concern people in the Catholic health ministry, because it is directly related to the *Ethical and Religious Directives for Catholic Health Care Services*, particularly to Directives 2, 3, and 23."

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