Affirmative Action: Essential to Achieving Justice and Good Health Care for All in America


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The U.S. Supreme Court has agreed to hear two cases in spring 2003 regarding admissions policies at the University of Michigan in which plaintiffs have challenged the university’s undergraduate and law school admissions policies that consider race as a factor in granting admission. The two cases, Grutter v. Bollinger (law school admissions) and Gratz v. Bollinger (undergraduate admissions), provide an opportunity and a challenge to the Supreme Court and the nation to reconsider the issue of affirmative action and indeed to ask whether affirmative action will continue as a cherished American principle of fairness and justice or whether it will be declared an illegal violation of equal protection under the law. The American Dental Education Association and, in particular, ADEA’s Center for Equity and Diversity argue in favor of the former: that affirmative action represents America’s longstanding principled and constitutional commitment to equal opportunity for all citizens. This article explains why.

The History

Emblazoned on the stone walls of the Jefferson Memorial in Washington, D.C., is President Jefferson’s timeless declaration of American freedom and principle: “We hold these truths to be self-evident; that all men are created equal; that they are endowed by their Creator with certain inalienable rights; that among these are life, liberty, and the pursuit of happiness.” As we know, for more than two centuries our nation has struggled, with varying degrees of success and failure, to fulfill this declaration. Yet even as the slaveholder Jefferson acknowledged, then and now there has been a great gap between the stated principle and the reality of Americans’ daily lives.

The first efforts to close this gap between principle and reality came in the aftermath of the Civil War in which, in Abraham Lincoln’s words, this nation’s dedication “to the proposition that all men are created equal” was severely tested. It was then that the first civil rights programs were established as a result of the passage of the Thirteenth, Fourteenth, and Fifteenth Amendments to the Constitution. Those amendments were passed to help African Americans come to enjoy the rights and freedoms of full citizens in the United States. (Women of any color were not accorded these freedoms until much later, in 1920 with the passage of the Nineteenth Amendment giving women the right to vote.) The Thirteenth Amendment made slavery illegal, the Fourteenth Amendment guarantees equal protection under the law, and the Fifteenth Amendment forbids racial discrimination in voting.

The nation struggled to fulfill the promise of those amendments in the decades following, but it was not until the civil rights movement of the 1950s, 1960s, and 1970s that there was significant legislative and executive action to further close that gap and make our stated principles of freedom and equality the practice in Americans’ everyday lives. The 1954 U.S. Supreme Court decision in Brown v. Board of Education outlawed segregation in schools. The 1964 Federal Civil Rights Act forbade racial discrimination in public accommodations and race and gender discrimination in employment, and the 1965 Federal Voting Rights Act strengthened the nation’s commitment to outlaw racial discrimination in voting.
Many people say that it was in 1965 that President Lyndon Johnson first used the phrase “affirmative action” in his Executive Order 11246. The order required federal contractors to take affirmative action to ensure that applicants and employees are treated without regard to race, color, creed, or national origin. And in 1971, President Richard Nixon’s Department of Labor issued an order requiring all contractors to develop “an affirmative action program,” establishing goals and timetables to correct deficiencies in utilization of minority groups and women.

Thus, the principle of affirmative action was born. But it was not long before it was challenged in court. In 1978, the U.S. Supreme Court decided in *University Board of Regents v. Bakke* that while the use of racial quotas in admissions was not permissible, the consideration of race in some circumstances was justified. That decision has been the basis for most of higher education’s use of affirmative action policies in admissions policies and practices for the last twenty-five years.

### The Pursuit of Justice

In June 1965, in President Johnson’s commencement address at Howard University, he declared:

> You do not take a person who for years has been hobbled by chains and liberate him, bring him up to the starting line of a race and then say “you are free to compete with all the others;” and still justly believe that you have been completely fair. Thus it is not enough just to open the gates of opportunity. All of our citizens must have the ability to walk through those gates. This is the next and the more profound stage of the battle for civil rights. We seek not just freedom but opportunity. We seek not just legal equity, but human ability, not just equality as a right and theory, but equality as a fact and equality as a result.

With those words, President Johnson went to the crux of the issue of equal opportunity and, indeed, affirmative action. It is not enough to pass a law and declare the struggle for equal rights to be over. It is in the results that we find the true test of whether we as a nation are closing the gap between our stated principles and the reality of our practices.

The reality is that our nation has systematically excluded the talents of many individuals from a variety of opportunities—jobs, professions, housing, education, and healthcare—on the basis of “qualifications” or “standards” that were often enforced in the name of “fairness.” Most of us now recognize that the exclusion of minorities from these opportunities is not just, is not fair, and is not true to the principles of the U.S. Constitution. However, we also must realize that, without the pressure of court decisions, legislation, and executive action, along with the courage of individuals who decided to change America’s ways of doing things, we would still be a nation that excluded minorities and women from these opportunities.

We tend to forget the sacrifice and struggle that have contributed to minority access to mainstream America. It was not easy: there were protests against Jackie Robinson playing professional baseball. It was not easy: there were protests against Thurgood Marshall becoming the first black Supreme Court justice. It was not easy: there were protests against James Meredith enrolling in the University of Mississippi and against many of the other first black students at schools, colleges, and universities across the country. It was not easy: there were protests against African Americans and, indeed, African American women becoming leaders in the health professions and in particular the dental profession.

But in every case, the addition of the talents of minorities and women have made these institutions and these professions stronger and better. The same can be said about our nation as a whole.

None of this could have been accomplished without the principled affirmative action of leadership, because the assumed natural order of things prior to these changes was exclusion. Affirmative action represents our nation’s best effort to utilize the talents and energies of all of its citizens—all of whom can achieve and contribute to the success of our nation if given a chance. Affirmative action is an effort to include the many diverse people and cultures that comprise our American society. With a population that is increasingly nonwhite, it is good business to include diverse people in our institutions, businesses, and professions so we can be more effective and successful in dealing with these emerging majority Americans. Affirmative action is not and should not ever be an unjustified preference for the unqualified over the qualified. It should never be defined in terms of quotas. It does, however, give
minorities a chance to demonstrate their qualifications and their abilities.

We also know that, without the dictates of affirmative action, our country faces the possibility of regression back to pre-civil rights era segregation. There is plenty of evidence that the playing field has not been leveled and that a simple declaration of openness does not motivate people to be fair or open. The concept of a meritocracy, although ideal, soon becomes a fiction when one sees that America’s systems of school admissions, employment, and professional measurement often reward those from the white male power structure and discounts those who are not from that structure.

Surely minorities and women deserve the “break” of affirmative action so that they too can have the opportunity to compete, to achieve, to serve, and to contribute to this great country of ours. America needs these minorities and women if it is going to succeed in the diverse reality of the twenty-first century.

Affirmative Action and Dental Education

U.S. Surgeon General Dr. David Satcher in April 2000 issued the first oral health report produced by a surgeon general. The report, titled “Oral Health in America,” declares, “There are profound and consequential oral health disparities within the U.S. population.” The report further states that dental health care has been demonstrated to be a vital link in comprehensive health care and that research studies increasingly document the integral relationship of oral health and total systemic health. The report concludes that the effort to recruit minorities to the dental profession could result in enhanced “access and utilization of oral health care by racial and ethnic minorities.”

Recent American Dental Association research shows that minority dentists overwhelmingly serve minority patients. Additionally, the 2002 ADEA Senior Survey found that significantly more African-American students plan to practice in inner cities than do their white colleagues. Another recent study documents practice location characteristics of black dentists. In spite of this, U.S. dental schools are graduating only 200 African American dentists every year, which will scarcely be enough to replace the number of African American dentists who are retiring or dying.

The dental profession recognizes that diversity among its ranks is absolutely necessary to provide culturally sensitive health care that is effective across the spectrum of languages and cultural traditions that comprise America’s diverse population. Indeed, ADEA, in conjunction with the American Dental Association, has made achieving a dental workforce that represents the diversity of the nation a priority mission. Central to the success of this effort is the principle of affirmative action. Affirmative action, as it is manifested in admissions, student educational progress, faculty development, and faculty hiring, is the single most effective tool that dental schools have to ensure that America can respond effectively to the need for adequate oral health care and public health for all of its citizens.

While President George Bush has seen fit to file a brief with the Supreme Court opposing the affirmative action policies of the University of Michigan, more than 300 groups and organizations representing academia, corporate America, labor unions, and several of the nation’s preeminent former military and defense officials have filed briefs in support of Michigan’s position. As University of Michigan’s President Mary Sue Coleman has stated: “This is not a case about college admissions alone. It touches on every major sector of our country, and the outcome will influence the direction of America’s policy.” Or as Kenneth Frazier, senior vice president and general counsel at Merck, has said: “Diversity creates stronger companies. Understanding people is essential to our success.” In addition, Bowen and Bok have documented the long-term effects of considering race in college and university admissions.

ADEA supports these efforts to preserve the principle and practice of affirmative action in higher education and, in particular, the University of Michigan’s admissions policies. We know full well that the oral health of the United States, the efficacy and success of the dental profession, depends on our ability to achieve diversity in our ranks.

As a result, ADEA has taken the following initiatives and commitments:

• It has joined with the American Council on Education and dozens of other higher education and health professions education associations to challenge President Bush’s opposition to affirmative action policies at Michigan.

• ADEA has joined fifty other health professions organizations in the Health Professionals for Di-
versity Coalition. The coalition was organized in response to the Hopwood case in Texas and Proposition 209 in California, which in effect barred affirmative action practices. The coalition’s objectives were to inform the public of the value of diversity in health professions education and to support the right of institutions to determine their own admissions policies.

- ADEA’s Center for Equity and Diversity has sponsored five national conferences and several workshops that focus on issues of interest and concern to minority and women faculty and students. The center collaborates with the American Association of Medical Colleges, the National Association of Advisors of Health Professions, the National Association of Medical Minority Educators, the National Dental Association, and the American Dental Association.

- ADEA’s policies on curriculum content include cultural and linguistic competence concepts.

- The bylaws of ADEA state that a core value of ADEA is “Expanding the Diversity of Dental Education. The Association values diversity and believes that those who populate dental education—students, faculty, staff, administrators, and patients—should reflect the diversity of our society.”

- In September 2001, ADEA was awarded a $1 million grant from the W.K. Kellogg Foundation for the ADEA Access to Dental Careers Program. This program is designed to help increase the number of minority students and faculty members in U.S. dental schools. Dental schools will receive funds to distribute to students and faculty as scholarships, financial aid, and postdoctoral and fellowship support or to use for faculty, student, and campus development. An additional $100,000 was awarded by the W.K. Kellogg Foundation in January 2003 to add an additional school to the ten receiving these grants.

- In 2001, ADEA approved a policy that states: “ADEA strongly endorses the continuous use of recruitment, admission, and retention practices that achieve excellence through diversity in American dental education.”

- ADEA’s commitment to diversity initiatives was institutionalized when it established what is now known as the Center for Equity and Diversity in 1993. We are now celebrating the first decade of its existence.

- On January 10, 2003, ADEA joined the American Council on Education (ACE) and thirty-three leading health and higher education associations in a letter to President George Bush seeking support from his administration in the effort to preserve diversity in higher education.

- On February 10, 2003, ADEA joined the Association of American Medical Colleges (AAMC) and twenty-nine leading health and health administration associations in an amicus curiae brief to the U.S. Supreme Court in support of the Michigan case.

- ADEA also joined the American Council on Education (ACE) and fifty-three other higher education organizations of colleges, universities, educators, trustees and other representatives of higher education in an amicus curiae brief to the U.S. Supreme Court in support of the Michigan case.

Summary

Affirmative action is an established principle that brings fairness and justice to admissions policies and practices by setting goals that encourage and pressure institutions and individuals to create educational and professional opportunities for minorities and women. If it were not for affirmative action, we would waste the talents of countless individuals who would be discounted because they are minorities or women. The result would be a nation that is weaker because it would be segregated once again in a system in which white people and men would have the preponderance of opportunity and authority and in which access would be very limited for minorities and women. It may be time to reframe the argument for affirmative action in language that denotes its benefits to all Americans by increasing access for emerging majority citizens now and in the future.

ADEA, academic dentistry, and the dental profession should continue to do everything it can to preserve the policies and practices of affirmative action, especially through the support of the University of Michigan admissions policies as challenged in the cases before the U.S. Supreme Court and in our own practices.

REFERENCES

5. The New York Times, 2/18/03.