



Four Critical Paradigm Shifts for Equity in Healthcare (and the Questions We Should Be Asking)

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For the **EdChange.org** and the *Multicultural Pavilion*
<http://www.edchange.org/multicultural>
<http://www.mhhe.com/multicultural>

1. **The Base Shift: Equality → Equity**

- a. Does every person seeking healthcare have the opportunity to receive the best possible care and treatment, regardless of race, ethnicity, socioeconomic status, gender, religion, first language, sexual orientation, (dis)ability, or any other dimension of difference around which we currently see disparities in service and access?
- b. As long as the answer to this questions remains "no," am I, and is the system, willing to be transformed?

2. **Cultural Competence → Equity and Social Justice**

- a. Is the focus on feeling good and celebrating difference or on institutional change?
- b. Am I willing to push myself and the healthcare system out of our comfort zone to honestly and continually assess and address inequities including racism, sexism, heterosexism (homophobia), classism, and ageism?

3. **Difference as the Problem → Inequity as the Problem**

- a. Do I, or does the institution, tend to problematize difference and its complexities, such as language diversity, instead of problematizing the history and present of inequities that have led us to a point of remaining unprepared to effectively and efficiently navigate these differences?
- b. Am I, or is the institution, willing to tackle inequities—even those that assign privilege to me and the majority of those in power in the healthcare system?

4. **Expectation that the Client Will Adapt → Sense of Responsibility to Be Transformed**

- a. Do I, or does the institution, believe that it is the responsibility of the patient or client to adapt to the mainstream culture?
- b. Am I, or is the institution, willing to change to the same extent that people outside the mainstream culture are forced to change just to use our services?