Diversity Awareness Essay, Research Paper

Diversity Awareness

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Differences in our society are many, including age, religion, physical and

mental abilities, gender, sexual orientation, income, family or social status, and

physical appearance. Anyplace where differences are found leaves room for

stereotypes.

Stereotypes are generalizations about people usually based on inaccurate

information or assumptions rather than facts. (Wei, 1996) Stereotypes do not take

into account the great diversity of people within a group of people. Nor do

stereotypes consider the present circumstances of the individual. Even worse,

stereotypes can lead to prejudicial or discriminatory behavior.

Most of the observations I made concerning my stereotypypical behavior

circled around rich people, foreigners, and the elderly. All the reasons I have

developed generalizations for these groups are because of my limited contact with

members of these groups.

The first group that I have noticed I stereotype more than others are what I

consider rich people. Ole Miss and Oxford has an over abundance of these people

which has led me to distance myself even farther from them. I believe that all rich

people are arrogant and that they always look for ways to down people of a lower

socioeconomic status. I think most of these generalizations that I have concerning

this group evolve from my personal experiences with students at Ole Miss.

I am from a family that struggles to make it week to week and cannot afford

to help out with my college expenses. Ole Miss, from what I have observed, caters

to the rich and provides no support for those not fortunate enough to label

themselves as rich. I find it hard to relate to students that are fortunate enough to

have their parents pay for their living and schooling expenses. My generalizations

of this group come from the rich at Ole Miss because the majority of students that

come from money are almost always in Greek life, drive cars nicer than those of

myself or my family, wear nice clothes, and hang out in clich?s. My hometown is

nothing like the Oxford community; almost everyone in my hometown works in

trade industries which never allow one to live a lavish life.

For every arrogant rich person there is a caring philanthropist that helps

people like me and does not flaunt their money. Although the generalizations I

have formed about rich people will be hard to disown, I think that they should

disappear with more contact with members of this group. (Husain, 1996) I also

believe that once I graduate from college and become acquainted with rich people

outside of Oxford, I will form new opinions of them.

The second group that I often stereotype are the Asian students at Ole Miss.

It seems that wherever you go around campus you never see them with people of

different ethnic backgrounds. I often see them as antisocial individuals that spend

all their time in the library. I have not been around many Asians and how I

perceive them is through the few that attend Ole Miss.

I believe that culture has a lot to do with why I formed the generalizations

of Asians. The media often notes that Asians are academically superior to

Americans. Members of the Anglo and African American ethnic groups often

agree that Asians are less than we are to try to gain stature upon one group. I also

noted that whenever I went to work, went out, or went to church that there were

never any Asians to be found. However, whenever you enter the Ole Miss campus

or the library you can find them everywhere. Being that I am a college student, the

college can be viewed as part of my culture.

There are many Asians that enjoy life outside of academia and carry own

social lives with people outside their ethnicity. (Cort?s, 1979) The limited

population of Asians at Ole Miss only leads to broad generalizations of this group

because there is no chance of interaction in my hometown. There are also Asians

that struggle through college much like there are Americans that struggle through

college.

The third group that I notice I generalize is elderly people. I have had

limited contact with members of this group due to the way America looks at its

elderly. My generalizations of this group include a lot of generalizations that may

other Americans hold. I look at elderly as being old and not capable of performing

in a constructive manner. I generalize them all to be living off the Social Security

that I have paid in. I also think that they all just ramble about insignificant

thoughts.

Many elderly are very capable of performing in many aspects of life. There

are many elderly that work, travel, and engage in serious talk. Many elderly also

have valuable knowledge that they have acquired throughout their life. The media

again plays a part in the generalizations that I hold about elderly.

Generalizations are often times based upon ignorance about a certain group

of people based on limited exposure, heresy, media, and various other sources. I

think that as long as there are people of different backgrounds, there will be

stereotypes and generalizations. By evaluating the reasons an individual holds

these beliefs about others, researchers can find ways to teach people about various

groups.

I think that if I were to work in a field such as social work, I would have the

most trouble working with individuals with the AIDS virus. I do not feel that I

harbor any negative generalizations towards AIDS patients as a whole; however,

the terminality of a life with AIDS does scare me. Researching the topic of AIDS

has prompted me to believe that AIDS will touch the professional lives of almost

all social workers before they retire. (Shernoff, 1990)

The number of cumulative AIDS cases in the United States alone by the end

of 1989 was estimated to exceed 100,000, and, by the end of 1991, between

300,000 to 400,000. It is estimated that there are more than 1.5 million people in

the United States infected with human immunodeficiency virus (HIV) (Heyward &

Curran, 1989), and this number is still growing. Whole families of intravenous

drug users are becoming infected and dying (Leery, 1989; Williams, 1989);

orphaned children with AIDS languish in inner-city hospitals; gay men die; elderly

parents grieve for sons, daughters, grandsons, and granddaughters; and agency

staffs are immobilized by the illness of a social work colleague repeatedly

hospitalized for one opportunistic infection after another. No setting in any region

of the United States will be spared by the pandemic of AIDS that will continue

into the next century, according to all the best estimates.

I think the best way to tackle the issues of working with an AIDS patient

involves resolving my own conflicts. The fact that AIDS is a terminal disease is

probably the biggest reason I would have a problem working with these

individuals. Death in itself is a topic that I do not like to ponder and I must come

to terms with this if I want to work in any field that involves social counseling. I

also believe the risk of getting AIDS is a chance I would not like to take no matter

how small the chances are. I do not think literature would help me overcome this

conflict. I believe that if I come to terms with the aspects of death and dying then I

would be able to better work with this group.