

The left's latest DEI deception

The Democrats think you're too stupid to notice

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Why do the left's biggest priorities need to be cloaked in manipulation and even outright lies?

That was the question 15 years ago as Democrats desperately tried to pass Obamacare. They succeeded, and in 2013, the law's primary architect acknowledged that deceiving the American public was key.

Jonathan Gruber, speaking on a panel he surely thought would never be made public, declared that Obamacare "was written in a tortured way" to ensure "a lack of transparency." That way, he said, Democrats could take advantage of the "stupidity of the American voter."

Fast-forward to the present, and Mr. Gruber is once again assuming that Americans are stupid. He is no longer pushing a government takeover of health care but is trying to justify racial discrimination driven by diversity, equity and inclusion to pave the way for the reestablishment of affirmative action and the protection of race-based hiring.

Just like 15 years ago, Mr. Gruber isn't being honest. The public needs to know that leftists are trying to pull the wool over its eyes.

Mr. Gruber's foray into DEI centers on a much-discussed academic study he published late last year. Co-written with law professor Michael Frakes, the study makes the claim that racially diverse medical facilities in the military provide better care to Black patients, increasing the likelihood that they will fill their prescriptions, reducing mortality rates.

Mr. Gruber is up to his old manipulative tricks. As I show in a new analysis, the study never actually examines whether Black patients do better when they see Black doctors. In fact, buried deep in an appendix, we learn that Black patients actually do best when served by non-Black doctors in facilities that happen to have more Black doctors.

If that seems puzzling, it gets only more so. Mr. Gruber suggests that Black doctors may teach their peers how to connect better with Black patients, or that the presence of Black doctors in the hallways may help Black patients trust their non-Black care providers.

Neither explanation is plausible. How would Black doctors teach their colleagues to be much more effective than they are? And how would patients bump into enough Black doctors in the hallways to detect differences in diversity?

Mr. Gruber and his co-author have an ulterior motive: to persuade Supreme Court justices (including new appointees in the coming years) to support racial preferences in the hiring of doctors. Although the court limited race-based college admissions in 2023, it has said nothing about race-based hiring in medicine or anywhere else. The lives of Black patients are on the line, the Gruber study suggests, so constitutional concerns about racial discrimination should take a back seat. Mr. Gruber couldn't be more wrong — or, rather, more misleading. A thorough review of past research on this issue clearly shows that matching doctors and patients by race has no meaningful impact on patient health. Although plenty of analyses claim to show the opposite conclusion, they don't hold up under basic scrutiny. Justice Ketanji Brown Jackson cited a similarly flawed study in her dissent in the 2023 case that struck down affirmative action in college admissions. That study was decisively disproved in *City Journal*, which showed that it failed to add a basic statistical control that explained all its “findings.”

In other words, doctor-patient race matching made no difference, which the authors surely knew. This new study is no different: a political tract masquerading as medical science.

Americans have become increasingly aware that experts frequently manipulate the public to advance leftist policy goals. Mr. Gruber is now a two-time offender. He confessed to abusing his expert authority to manipulate people over Obamacare; now he is trying to deceive Americans once again regarding racial preferences, and he's not alone.

Let's hope neither the Supreme Court nor the broader public is fooled this time