

Transcript

00:00:10 Speaker 1

Hi everyone, this is Harney from Black and brown and bioethics. And you're listening to the power and privilege in academia podcasts.

00:00:17 Speaker 1

A show that brings together academics from marginalised backgrounds to question academic hierarchies, structures and convention.

00:00:23

Thanks.

00:00:24 Speaker 1

Here we unpack the inherent issues and discuss solutions. Today we're thinking about research culture and representation from a US perspective, with Professor Keisha S.

00:00:33 Speaker 2

Ray.

00:00:35 Speaker 2

Keisha is an associate.

00:00:36 Speaker 1

Professor of Bioethics and Medical Humanities at McGovern Medical School in Houston, TX, and in this conversation we discussed everything.

00:00:43 Speaker 1

From intersectionality to imposter syndrome. So let's dive in.

00:00:49 Speaker 1

I'm so pleased that we've finally been able to have this.

00:00:53 Speaker 1

I recognise we were very keen to invite you and I just wanted to ask why it was that you wanted to participate in this podcast and accept our invitation to collaborate with the black.

00:01:01 Speaker 1

And brown and bioethics network.

00:01:02 Speaker 3

There's a few initiatives in bioethics that I'm a part of that try really hard to get underrepresented. Students interested in bio.

00:01:11 Speaker 3

They and also give them support if they all ready are in bioethics programmes but need a community need people to look at papers, need advice on jobs and so for me this was an extension of that work that I've already been doing. It was always really important to me to.

00:01:29 Speaker 3

Once I got to be a biotics professor to be the person that I needed when I was a bioethics student. And so that's what I tried to do. Now I had really, really great mentor.

00:01:39 Speaker 3

But none of my mentors looked like me, and none of my mentors understood those sort of nuances about Korean bioethics that are related to my race related to my gender, and that intersectionality. And so I really wanted to be that representation to other students. For instance, just yesterday I was talking to a black woman.

00:01:59 Speaker 3

Student and I, we were talking about bioethics and how to get started, what to read. You know how to just connect with.

00:02:06 Speaker 3

People. And then we had a conversation that as a black woman, 2 black women is a very black woman conversation. We start talking about her hair, right. And then the whole time I was thinking I would have never been able to have that conversation and that familiarity with my professors when I was a black woman grad student because they didn't look like me. They didn't have those same kind of concerns.

00:02:29 Speaker 3

Or the same sort of cultural expectations, or just the same culture as me. And so I want to be the person that I needed when I was a grad student and this podcast, this group, really seemed like. That's the work that you all doing. And so I'm always happy to support it and do what I can.

00:02:48 Speaker 1

We greatly appreciate it and I suppose, reflecting what you said about familiarity with people that are more senior to you. I suppose that's something.

00:02:56 Speaker 1

That the cofounders of Black and brown and bioethics and I were all very aware of that. Actually, when you find somebody that looks like you, it does create a sense of belonging. You do feel like this is something you could do because people that look like you have done it before. So with that, I'm going to jump into kind of the first main question, I guess for this topic. And it comes with a bit of background. So I've been watching.

00:03:16 Speaker 1

Have elementary for Comic Relief while being writing up my thesis and I would recommend it to everyone. It's a documentary about working in the public school system in the US and one of the stars of the show commented that education is seen as the great equaliser.

00:03:29 Speaker 1

In lots of immigrant families, and so I'm a third generation immigrant and this is certain nature of my experience growing up in the UK, but it seems to stay within higher education, even though tenured professors like yourselves are arguably some of the most educated members of society, people of colour are still disproportionately underrepresented in the most senior academic positions.

00:03:51 Speaker 1

And so the question is, why do you think that is?

00:03:54 Speaker 3

Right, this is something that I've been thinking about a lot lately. As a recently tenured person realising that I am among 5% of black people of I AM 51 of the 5% of senior professors who are black and in the United States. And so I've been thinking about why is it only 5%?

00:04:16 Speaker 3

Why is that number so low and one of the reasons that I think that number is so low is I think.

00:04:24 Speaker 3

There are a lot of barriers and there are lots of barriers that are not foreseen and are not explained to people of colour, who are maybe foreign to academia and how it works, and so when they enter this space, they don't know how to navigate those barriers. There's not a lot of mentorship that understands.

00:04:44 Speaker 3

Again, that intersection of academia and race and gender and class and ability and sexual orientation.

00:04:51 Speaker 3

Right. And I think a lot of our senior academics still have this sort of mindset of there's only a certain amount of resources. And if I hope someone else gets something, then I don't get mine or I get less. And so I think there's not a mentorship mentality that a lot of black and brown people could really benefit.

00:05:12 Speaker 3

From to move up within academia and to those senior positions. And I also think there's a lot of expectations when you are a new professor, there's service obligations and we know that with your woman, or if you're a person of colour, you're getting a lot more service requests and you're within your university. And those things don't equate to getting tenure and promotion.

00:05:32 Speaker 3

And sometimes there's also a lot of demons discrimination, and that can push people out of academia. People who are very bright people, who are very dedicated to research and to teaching.

00:05:44 Speaker 3

And to surveys get pushed out of academia.

00:05:47 Speaker 3

Because they are discriminated against, they have all of these sort of barriers that are related to their demographics. And so I think there's just.

00:05:58 Speaker 3

Not a lot of support, and there's not a lot of mentorship, and there's a lot of expectation.

00:06:04 Speaker 3

That people are unaware of when they enter academia, and a lot of black and brown people don't have parents who are professors. They don't have aunts and uncles that professors that could lay give them the lay of the land and tell them how academia operates. And so they're already starting off with a disadvantage. And so I think that's some of the reasons why we don't see black and brown.

00:06:26 Speaker 3

When these senior positions.

00:06:28 Speaker 1

Something that we've often spoken about is knowing how to play the game. I'm so glad that we've really started talking about kind of intersecting identities and the idea of intersectionality because I think that you've drawn attention to the fact that there are so many different forms of disadvantage.

00:06:41 Speaker 1

Which that come with potentially being a person of colour, and the conversation about socioeconomic status and class is just as important in this dimension. But I wonder, what do you think equality, diversity and inclusion should mean? Like, how do we make it a useful statement? And what sort of things should it include?

00:06:59 Speaker 3

It's complex and difficult. I was waiting for the answer, but you know the kid be hired and make lots of money. If we had the answer to what should that mean? But for me, one of the things that I constantly, always go back to when people ask.

00:07:15 Speaker 3

How they can make a change? What can we do? And I always tell people focus on your corner of the world, your institution and what you have power over and what you can influence. And so for me, thinking about EDI is looking at your institution and looking at the ways that they have historically and likely.

00:07:36 Speaker 3

Currently make it difficult.

00:07:39 Speaker 3

For other types of people to participate in whatever it is you do, if it's an academic institution, a medical institution, what is it that your institution is doing that makes it difficult for people to access the services and the resources, and what can you do to correct that, that in itself to me is is EDI because for me, the issue is about.

00:08:00 Speaker 3

Resources. It's about access to the things that we need to succeed, and if there are unjust barriers to those resources based.

00:08:09 Speaker 3

On morally arbitrary features of ourselves, like our skin colour, our gender, our abilities, that then that is not doing what should be in service of EDI. So it's how do we make sure that people get what they need to succeed and to equally or equitably contribute to equitably.

00:08:30 Speaker 3

Be a part of the group to equitably have access to success, and so that's what I think EI is, at least for me. What I really try to do when I think of that term.

00:08:41 Speaker 3

And I think.

00:08:42 Speaker 3

That what it what does it actually mean to do it in practise, right? Because we talk about it a lot. People have mission statements on their website, the terms that people throw around a lot. But for me it's about Equitable access to resources needed to succeed. And what am I as an individual? Where is my institution doing that prevents people from getting?

00:09:03 Speaker 3

That access to those resources to succeed within that institution.

00:09:07 Speaker 1

I really like that. Keisha. What you reflected on was the importance of making kind of small local impact. And it really reminds me of this painting or this mural I saw on.

00:09:16 Speaker 1

The Ballin wall.

00:09:17 Speaker 1

About how lots of small people and lots of small places lead to big change, maybe that bottom up approach working within individual institutions rather than trying to fix everything across all institutions in one go is what's needed.

00:09:27 Speaker 1

Because there's still a lot of uncertainty around what these different.

00:09:30 Speaker 1

That's mean, but in the context of the different populations that like each institution potentially serves, there's also potentially different needs at each institution. So trying to fix it all with one big brush stroke isn't necessarily the solution, but also noticed that when we have been reaching out to different people to collaborate with us, that the people that have demonstrated the biggest interest.

00:09:51 Speaker 1

In improving racial equity in particular, have tended to be women or non binary, and I suppose this probably does come back to what we've already been discussing about intersectionality in different forms of disadvantage that people.

00:10:03 Speaker 1

But I wonder why you think that might be.

00:10:05 Speaker 3

I think women and non binary people are used to for a better lack of work. They're used to the fight they've grown accustomed to having to work to get what they need. They've grown, we've grown accustomed to having people doubt us. We've grown accustomed to having a a sort of community mindset.

00:10:27 Speaker 3

Whether that socialisation we could talk a whole nother conversation about why the.

00:10:32 Speaker 3

That is, but I think that we've grown accustomed to community and helping out each other in the Community. And then also we reap the benefits of that community also helping us. And so I think our mindset is just a little bit more when I succeed, reach down and pull someone else up with us because I think for so long, that's how we've gotten.

00:10:52 Speaker 3

Success. That's how we've gotten to be in these positions of power and authority because someone helped us, and now we're helping others. And so I think it's just a mindset that we have had to.

00:11:02 Speaker 3

You have in academia because that's what you have to do to succeed. And so when we have people, organisations, groups like you, all who are who we see, that's very reminiscent the work that we're already doing and reminiscent of the work that has been happening for decades. We're like, oh, yeah, this, this we recognise this.

00:11:23 Speaker 3

This seems like something right in alignment with how we've always had to get our success. How we've always had to get our voices out. I I can see that also.

00:11:32 Speaker 3

For better or for worse, I think sometimes women, and not many people who are in academia, have a a service mindset. Now, I do think we have to temper that a little bit

because we know that that's not how you succeed, even if it is a very good thing. But I do think we need to spread out that service just a little bit more. But at the same time.

00:11:52 Speaker 3

Do those things that we're passionate about and if that's helping people, then more power to us. But I do think that there has been a little bit of a a mindset of you have to do service.

00:12:02 Speaker 3

Because no one else is doing it. And if more people contribute it, then we could be doing those other things that do give us promotions do give us power and influence and rooms that we could be in these rooms helping other people also succeed. Who are women and non binary people.

00:12:17 Speaker 1

Your answer there has basically perfectly captured why we set up the network in that Kamari matimba, and I all felt that we have got to where we are and we've been incredibly privileged to receive the opportunities that we have.

00:12:29 Speaker 1

Off of, I guess the opportunities we've been given by other people. And so we wanted to try and reciprocate those opportunities and lift up other people that are at the start of their careers but might not have that same support within their.

00:12:40 Speaker 1

Own institutions, I wonder.

00:12:42 Speaker 1

If we can go back to what you just raised there about institutional change, if we could reflect on how do you think that research culture?

00:12:49 Speaker 1

Needs to.

00:12:50 Speaker 1

Change.

00:12:51 Speaker 3

I don't think it's unique to bioethics. The issues I think. I do think that they are across the board and I think although I have individual issues, I think it can all be summed up in the

reexamination of our values needs to happen. We talk a lot about justice and beneficence and all these things. But I also wonder if I what this is, if researchers.

00:13:12 Speaker 3

Really take to heart, what does it truly mean to live up to the principle of justice? What does it truly mean to live up to the principle?

00:13:19 Speaker 3

Of.

00:13:20 Speaker 3

Respect for persons beneficence. Nonmaleficence, I think we just keep throwing those terms around. But if we really value them, it would require a lot of us. As researchers, it would require us to think about the social impact of our research. It would force us to think about people having access to our research. That's what justice is. We can't write these really important.

00:13:42 Speaker 3

Works and do all this important research and then put it behind the paywall or only talk about it with other academics when it affects everyday people, and yet they can't read it, they can't access it. So thinking about who has access to our research.

00:13:57

The main thing.

00:13:57 Speaker 3

About how we collaborate with other people in other departments and other fields, there's so much benefit if we move beyond bioethics. If we move even beyond law and philosophy. But let's talk about people who are doing medical anthropology, people who are doing more of the humanities, people who are over in sociology.

00:14:17 Speaker 3

That we have a lot to learn from each other, so collaborating with other people that are not just by what this is I think is something important. And then how we collaborate with our participants even how we think about them, not calling them subjects, but how we give them ownership of this research that they are essential to. We can't do our research without parties.

00:14:36 Speaker 3

Depends, and yet we treat them as sort of a means to an end. We sort of commodify them. So thinking about how we even interact with the people who are helping us get

this research and then what benefit do they get from it, what benefit does their community get from it? So again, I really think all of that is just summed up and we need to rethink our values.

00:14:57 Speaker 3

And how these ethical principles, what they really calling us to do, they call on us to be courageous, they call on us to have a dedication to society and the people that the communities that we are part of. And so I think we need to, we need to remember why we're here and who we're doing this research.

00:15:14

Where?

00:15:15 Speaker 1

I'm so pleased you brought up the point of justice because something else that we've often wondered about within the network is, are we actually practising what we preach? And I thought about it, particularly in the context of clinical ethics consultation, where we so often talk about justice, but I don't even know if our own processes are fair. So I'm yeah, really pleased you brought that up and given that you've spoken a bit about.

00:15:36 Speaker 1

Bioethics as a.

00:15:38 Speaker 1

Field, we'll call it a field for now.

00:15:40 Speaker 1

Now I wonder if we could use this as a follow on into my next question. Bioethics is often described as being an interdisciplinary pursuit informed by law, philosophy, and medicine, amongst others. However, medical research has historically contributed to incorrect biological assumptions about race. Law has arguably underserved racially minoritized groups and western.

00:16:00 Speaker 1

Mosby has long idealised the theories of archetypal Western European white men, social sciences and anthropology do seem to offer some hope, but I wonder, do you think the research culture within bioethics is particularly entrenched?

00:16:13 Speaker 1

Because of its interactions with disciplines that have historically been racially biased.

00:16:17 Speaker 3

I do. I think bioethics starts off at a deficit when we're doing research.

00:16:24 Speaker 3

Because there is still the impression, and because of our relationship to medicine, our relationship to just clinicians, just our entire relationship with the medical community, we start off at a deficit given that communities.

00:16:41 Speaker 3

Interactions and just violent history with a lot of different groups and it's continued violence against a lot of different groups against transgender individuals, black and brown people, disabled people, right, that sort of troubled relationship is ongoing. And then within violence, we have our own.

00:17:01 Speaker 3

Issues with the ways that we treat certain groups of people with those, those same groups. So it's sort of like we have this, this double barrier that we begin with when we're starting our research to us being seen as one a field that actually lives up to its principles, like justice, but then also as a as a research.

00:17:22 Speaker 3

Culture that actually cares about another principle in bioethics that we.

00:17:26 Speaker 3

Don't talk about all the time, but it's our dedication to vulnerable populations or populations made vulnerable by politics, by the environment, by socioeconomic status, that status created by other people. So I do think that when we're doing research and bioethics.

00:17:46 Speaker 3

That we have to pay extra attention to how our research impacts these groups that are already made vulnerable by all of these social institutions, because we don't want to be another institution that further makes them vulnerable. But I don't know that we always do a great job of that, or it's always the same people who are.

00:18:06 Speaker 3

Making that call or who are doing that work with regardless of the kind of bioethics work you're doing, if you think that your work has absolutely nothing to do with vulnerable population.

00:18:16 Speaker 3

One, you're probably wrong, but two, I think you should make a special effort to think about what's the impact of my work on these other groups, and you don't have to be someone who studies black health like I do. You don't have to be a disabled philosopher or disabled biologist who studies disability ethics to do this work. It should be something that is just the basic.

00:18:38 Speaker 3

Requirement of doing bioethics where regardless of who you are, your demographics or the kind of work you're doing is to think about how does your research impact these vulnerable?

00:18:47 Speaker 3

Groups.

00:18:48 Speaker 1

So that leads nicely into my next question and it's about whether we should be disrupting existing systems to try and instigate change or whether you think it's perhaps more helpful to create separate spaces for these conversations to occur.

00:19:00 Speaker 3

The reasons that I think we need both spaces is because this work that you're doing this justice work, this anti racism work, this gender equality work, it can be tiring, it can be lonely, it can be exhausting. It can be emotionally draining, it can be frustrating.

00:19:20 Speaker 3

Thing and when you have those separate spaces of like minded people with similar experiences, you get that rejuvenation from community that you need to keep going. You get the I'm not crazy because everyone around me they're think they think like I like. It's not just me. I'm not the only one who thinks this is important work. Look at all these other people in this separate.

00:19:40 Speaker 3

Is that think this is important work too, or you get that? Yeah, you just get that community, you get that support, you get the pat on the back. They keep going. The sometimes if you lose your way, you forget why you're doing this work. You have your colleagues and your friends and your family reminding you this is good work and that you're doing a good job. And sometimes we all lose our way or we all get.

00:20:00 Speaker 3

Frustrated having that separate space that community can be an act of self-care, and I think we have to always remember to take.

00:20:07 Speaker 3

Care of ourselves.

00:20:08 Speaker 3

When we're doing this work because we can't burn out, we just have to remember to take care of ourselves and take care of each other. And so those separate spaces, I think, allow us then to say, OK, now we can go into these existing hierarchies.

00:20:20 Speaker 3

Knowing that every time I'm in this room with these existing.

00:20:23 Speaker 3

Is my community is right behind me? My community has my back and so I think these separate spaces are for organising. They are for rejuvenation, they're for self-care. That then allows us to go into these spaces where you might be that only brown face in that room. You might be that only woman in that room and knowing.

00:20:43 Speaker 3

You might be there physically alone, but you're not there emotionally and mentally alone, and you know that you have this community support behind you. As someone who has been a an advocate.

00:20:53 Speaker 3

For black bio.

00:20:54 Speaker 3

Ethics and this idea that it can be a separate discipline, but at the same time people who are not working on black people's health can still participate in black bioethics and make their work think about its impact on black individuals and their health outcomes. I'm always thinking about this question, so I'm glad that you brought this up, but that's how I tend to think about it.

00:21:14 Speaker 3

At least for now, if I change my mind in a year, don't hold that against me.

00:21:19 Speaker 1

We can have a follow up podcast. Maybe any of us just to reflect on what you said about having a safe space and having that sense of community. I think that's also what we found through doing all of this work. We've come together in a way that none of us would have expected.

00:21:32 Speaker 1

And even though we're doing this work and it's taking up quite a lot of our time, we feel really energised when we're doing it because we recognise that we have that support around us to be able to do it. I'm really conscious of the fact that I've been given a lot of incredible opportunities in my short career.

00:21:46 Speaker 1

So far and.

00:21:47 Speaker 1

It is possibly imposter syndrome, but sometimes I made to feel through indirect comments or when I'm team scrolling on Twitter.

00:21:54 Speaker 1

So there is a tokenistic element to it, as though I'm being given the opportunity to meet some sort of equality, diversity and inclusion.

00:22:02 Speaker 1

Quote her as a woman of colour and so I worry sometimes that my presence in certain research groups or committees might be perceived in that way and that my qualifications and my academic contributions might be overlooked. I wonder if you've ever been made to feel like that, and if so, how did you respond to it? And if you haven't, then I'm.

00:22:19 Speaker 1

Really pleased for.

00:22:20 Speaker 1

You, but what advice would you give to Ally?

00:22:22 Speaker 1

Their research of colour? They might similarly be doubting them.

00:22:24 Speaker 3

So yeah, you know, I think you said something that's very important that I try to remember about Imposter syndrome and what I try to tell other people about Imposter syndrome is, I think, colloquial. Colloquially. We try to think of impostor syndrome as internal, but it's really external. It's other people making you feel like you don't belong. It's not always you feeling like you don't belong.

00:22:45 Speaker 3

I don't think that it just spontaneously happens within us.

00:22:49 Speaker 3

I think it's our environments that make us feel like we don't belong. So what I've had to remember and how I got over my imposter syndrome is again slightly negative. But it is what it is. I just assume that everyone in that room thinks that I.

00:23:03 Speaker 3

Don't belong there, I.

00:23:04 Speaker 3

Just go in with the assumption I I don't even wonder. Do they think I only got this?

00:23:09 Speaker 3

Because I'm black. I'm a woman. I think there's a chance that they probably old.

00:23:12 Speaker 3

Think that? So I just go in with that as a default and I don't worry about changing their mind. That's just not what I'm here to do. And I always try to remember that regardless of how I got in this room, what matters is what I'm going to do now that I'm in this room, they only see the external me. They don't know the power that I have with them. They don't know what.

00:23:33 Speaker 3

I can do with the resources that maybe.

00:23:35 Speaker 3

They didn't make the most of or they turned down, or that they don't know me. I know me the best and I know that once I'm in this room, I am going to do my best to contribute and make the most out of it. And so I always try to go in with the default that they probably think that I'm here for that reason. But I know that even if that is true, because sometimes I do think that that happens.

00:23:55 Speaker 3

I do think sometimes we are put in these.

00:23:57 Speaker 3

Spaces and they think that.

00:23:59 Speaker 3

We're not going to do much. We're going to be very quiet. We're just here to be a brown face in the room, but they don't know about me. They don't know what I'm going.

00:24:09 Speaker 3

To do with this opportunity, and I think that's truly what matters, is now that you have the opportunity, regardless of the reason, what are you going to do with it and how do you be a voice in that room for the other people who did not have that opportunity and you are?

00:24:22 Speaker 3

There and representing them in some way. What are you going to do with this opportunity? And I think that's truly what matters and that's what I try to focus on, is they don't know me, they don't know my power. They don't know what I'm going to do now that I'm in this room and they've opened the door for me and I have access to their resources and to their time and.

00:24:42 Speaker 3

And that's why I try to tell other people that are in similar positions.

00:24:47 Speaker 3

And try not to feel so bad. I know a lot of people get really down on themselves and they say, oh, I'm feeling imposter syndrome. And I know I need to get over it. It takes time, and we all do it. So don't feel so bad about yourself or beat yourself up if you are feeling some imposter syndrome. It's really just about how do I make sure that I use.

00:25:07 Speaker 3

What is in front of me in the best way and represent myself the best and get what I need?

00:25:12 Speaker 3

Need from these opportunities? And then how do I help other people get these same opportunities?

00:25:17 Speaker 1

Thank you so much for such honest and reflective answers to that question. This is a very personal reflection, but 3K, founding black and brown and bioethics. I've been incredibly fortunate to meet wonderful researchers. I think that meeting Kamari in the timber and developing this academic sisterhood that we have has been one of the highlights of my PhD.

00:25:37 Speaker 1

Money. So my final question in this section is how has being a researcher from a minoritized background enriched your career?

00:25:46 Speaker 3

Being a black woman who is a researcher who is in academia has made me very attuned and very sensitive. When I see a person having a hardship or being discriminated against because of part of themselves, if they are disabled or transgender or.

00:26:06 Speaker 3

More income background and it's made me more sensitive to other kinds of discrimination that people face that maybe I don't, because if I face my own kind and I know that there's all kinds of discs.

00:26:16 Speaker 3

Nation it's maybe just be more hyper aware. I can read something and say oh, this is a little ablest, you know, I it, it's just made me a little bit more aware. Now again, it doesn't mean I don't have room to grow. It doesn't mean that there's not more for me to learn, but it definitely has made me more tuned and pick up on things like that when I'm either reading or in certain rooms.

00:26:37 Speaker 3

And then I would.

00:26:37 Speaker 3

Say I'm an only child. I've been independent for a while, right? So it academia can be very solo. It can be a very solo experience. You're in your office, you're in your room, you're at your kitchen table, you're writing, you have your computer, you have your books, right?

00:26:53 Speaker 3

It can be very just a you project and I think being a racialized minority in this career in his profession has forced me to seek community. It's forced me to be in groups of people who have similar experiences, also people that I can reach out to and also because we're a small group like by what this is in the US is a very small group.

00:27:14 Speaker 3

And almost all of us know each other. We also can help each other in ways. So, for example, there will be some organisation that is trying to take advantage of one of us and then the that person says no, then reach out to the next one. That person says no and we'll get.

00:27:29 Speaker 3

In Group chat and say, hey, heads up, there's people they're looking for this. They already came to me. I already told them.

00:27:35 Speaker 3

It's a bad.

00:27:35 Speaker 3

Offer right? So it also helps me to protect myself, protect my interest, and just to do a do the best job that I can because I have this community behind me. They're the people that I can reach out to and say, hey, does this seem off to you?

00:27:50 Speaker 3

Or what did you do in this position? Or hey, I know that you spoke at this school. Did they give you the same honorarium that they're giving me? You know, that kind of thing. So.

00:27:59 Speaker 3

This is also forced me to see the value of Community and that's something that if I had to do it again, I would have done a lot sooner. I just recently started engaging in this community of block by all this is and I wish I had did it a lot sooner.

00:28:12 Speaker 1

And I really.

00:28:13 Speaker 1

Love that during this discussion again, we've just kept going back to the value of community and supporting people that maybe haven't had the same advantages or have potentially had to face more barriers, but feeling secure in the sense that you know that other people are going through it with you. I'm just very conscious of the fact that race can mean very different things.

00:28:29 Speaker 1

From the UK context to the US context. So in the UK you have lots of one might describe as white groups that are racially minoritized. For example, if they're from the travelling community.

00:28:39 Speaker 1

So I wonder how well and how neatly you think anti racist initiatives in US higher education systems can be translated across to the UK.

00:28:48 Speaker 3

OK, so I think there is something that are crossovers between US.

00:28:53 Speaker 3

And UK like.

00:28:54 Speaker 3

Tourism, I think that is something that is worldwide, although I think what is country specific region specific is how that translates into access to resources or how that translates into discriminatory acts.

00:29:08 Speaker 3

To be violent acts, I think that's different and there are going to be some things that absolutely do not translate. But I've given a couple of talks about black Americans and their healthcare in other countries and they're just fascinated that there's that, you know, that they're just fascinated with some of the topics. And I can see it's because their concept of race is different. But the idea that colorism.

00:29:28 Speaker 3

Exist.

00:29:29 Speaker 3

That there is some biases against darker skin. I think that is something that is universal, but I think with anti racism work, it's really important to think about the needs of where you're at and how it operates and where you're at. So that way you can implement effective practises, whether that be policy, whether that be.

00:29:49 Speaker 3

Institutional wide policy, whether that be education, right. But I think how you go about that has to be specific to where you are in the world. And I think trying to do a blanket statement on anti racism acts just like we talked about with.

00:30:03 Speaker 3

The eye can be problematic and can also be counterproductive, so I am at a medical school and the medical schools in the US, not sure with UK, but they especially a public medical school. They're told a lot about what has to be in the curriculum by the state and so a lot of times when you want to.

00:30:24 Speaker 3

Institute new courses or new topical courses.

00:30:28 Speaker 3

It's a matter of finding room in their curriculum because there's so much that's already there that we have to make sure that every person that graduates from a public medical school in Texas has this knowledge or this experience or these skills.

00:30:42 Speaker 3

Right. And I.

00:30:42 Speaker 3

Think a lot of the times the humanities it's seen as less important than these other kinds of skills.

00:30:48 Speaker 3

And as someone who is a medical humanities educator, as a bioethicist and bioethics.

00:30:54 Speaker 3

Indicator I think that they illuminate the skills that students learn while they're in medical school, and so they they complement each other. They should go hand in hand. They try to make sure that it is within all of the of the established courses. For instance, if I'm doing psychiatry ethics while they're doing their psychiatry rotation.

00:31:15 Speaker 3

In that class we're talking about case studies, I make sure to talk about intersectionality, make sure to talk about biases in the patients that they see. I try to make sure that we talk about how sometimes you see people at the worst time and that can influence how you think about patients.

00:31:29 Speaker 3

And how not to get jaded and burned out. And so I find, rather than just having one class, that they go in for an hour and then they forget about it, but that if you read it throughout their curriculum, that's one way that I've said this is how I can contribute change. I can take the knowledge that I have and help my colleagues spread it in their classes thread anti racism thread.

00:31:49 Speaker 3

Medical racism fed social determinants of health threat that in their courses that they're already doing if they're doing their anatomy lab, let's talk about the history of medical schools.

00:32:00 Speaker 3

Look at their bodies and how they used to go and take bodies from grave sites with black people. You can always put in that history so they know this is an institution that I'm now part of and this is how my patients may see me as representation of an institution that has been violent against their people. And so that's one thing that I try to do.

00:32:20 Speaker 3

In my neck of the woods and help students see that this is important part of the institution that they are now a part of.

00:32:33 Speaker 2

That was the end of the main discussion, after which I thanked Keisha profusely for being so honest and so reflective in her answers. What still resonates with me is the importance of having a community around you.

00:32:46 Speaker 1

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00:32:54 Speaker 1

Dot bristol.ac.uk/black-dash-brown-dash, bioethics to listen to more of our podcasts, follow our work and connect with our network credit. Thank you to the Centre for Ethics and Medicine at the University of Bristol and to the ethos.

00:33:14 Speaker 1

Centre at the University of Oxford for their support. Thank you to Doctor Qasim Ashraf for providing the intro and outro beats.