TIM HOFF: Welcome to another episode of the Author Interview series from the American Medical Association Journal of Ethics. I’m your host, Tim Hoff. This series provides an alternative way to access the interesting and important work being done by Journal contributors each month. Joining me on this episode is Sterling Johnson, a doctoral candidate in the Geography and Urban Studies Department at Temple University in Philadelphia, Pennsylvania. He’s here to discuss his article, coauthored with Dr Kimberly L. Sue, “Drawing on Black and Queer Communities’ Harm Reduction Histories to Improve Overdose Prevention Strategies and Policies,” in the July 2024 issue of the Journal, Harm Reduction and Opioid Use Disorder. Sterling, thank you so much for being on the podcast. [music fades]

STERLING JOHNSON: Thank you. Thank you for having me.

HOFF: So, to begin with, what is the main ethics point that you and Dr Sue are making in this article?

JOHNSON: I think as we have gone through this overdose crisis, which has lasted for maybe—I mean, I feel like that’s contested, right, whether it’s maybe 12 years since 2012, or it could be from 2016—it’s clear that it’s still happening. There are a lot of histories that have been buried or just aren’t known. There are a lot of people that are not...that are just not in the history books. And I think this work that we’ve put together is about revealing some of those hidden histories. And I’m thinking about Dr. Rashidah Abdul-Khabeer, a Black Muslim woman from Philadelphia, Imani Woods from New York, and they’re also health workers. So, it’s kind of just, I guess, making sure they’re making space, creating space for these other narratives around who cares about overdose. And I think for me, this is always part of a larger project of understanding that, of course, there are these voices, these Black femmes and women that are a part of it. But also, there are many other stories that need to be really central in this story around the responses to HIV and responses to overdose and to, overall, the harm reduction story.

HOFF: And so, what do you see as the most important thing for health professions students and trainees to take from your article?

JOHNSON: Oftentimes, we’re thinking about health care and some of the pillars of public health that are around prevention, treatment, and harm reduction as just these
things that don’t have a history, that don’t have a lineage to them. And for public health workers, for health workers, for students that are coming up, I want them to learn that history. I want them to know that there’s a long line of experiences and information and learnings that’ve gone throughout that time that need to be carried further, carried forth. I think that it’s not always good to just be kind of navel gaze-y or to look to the past just for the past. But hopefully, you’re learning from that past so you’re not making future mistakes.

[00:03:44] HOFF: And finally, if you could add a point to your article that you didn’t have the time or the space to fully explore, what would that be?

JOHNSON: I would’ve liked to have gone further into the specific histories of Philadelphia, which I feel like other people should know more. It’s a special place for me. I am a person that has family that came to Philadelphia as their first place for freedom in the United States, and there’s a large Black population with lots of Black history here. I wish I could go further into understanding why it was so important that those communities created programs that were able to get to the goals that made it so HIV is what it is today. I think it’s quite a success to think about that people can be living with HIV, you can be tested, and there is immediate access, in some places—mostly in cities; I can say it in Philadelphia—there is access to medications that will save your life. And that’s just a really, really important story.

There were all these organizations that fought for the people that they saw dying around them. They fought for their friends. I want to tell those stories of how we, of how the HIV movement really, really struggled with that, but it was necessary struggle. It was this productive struggle that led to the place that we’re at now. And I can say as a person that is living with HIV now, regrettably, but living with HIV now, that that access to medication that will save your life and that will allow you to live basically a life with HIV as a chronic illness, I’m just horribly, horribly grateful for all those people that did that because it matters so much to the future. [theme music returns]

[00:05:54] HOFF: Sterling, thank you so much for your time on the podcast today, and thanks to you and your co-author for your contribution to the Journal this month.

JOHNSON: Thank you so much.

HOFF: To read the full article, as well as the rest of this month’s issue for free, visit our site, journalofethics.org. We’ll be back soon with more Ethics Talk from the American Medical Association Journal of Ethics.