Episode: Author Interview: "An Abolitionist Approach To Anti-Racist Medical Education"

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[bright theme music]

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 format for accessing the interesting and important work being done by Journal contributors each month. Joining me on this episode is Russyan Mark Mabeza, an MD/MPH candidate at the University of California, Los Angeles David Geffen School of Medicine and Jonathan and Karin Fielding School of Public Health. He's here to discuss his article coauthored with Betial Asmerom, Dr Rupinder Legha, and Vanessa Nuñez, *An Abolitionist Approach To Anti-Racist Medical Education*, in the March 2022 issue of *The Journal*, *Toward Abolition Medicine*. Russyan, thank you so much for being on the podcast today. [music fades out]

RUSSYAN MARK MABEZA: Thank you so much for having me.

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

MABEZA: So, really, with this article, what we're hoping to communicate is the reality that racism is so deeply embedded within the profession of medicine. And that has some huge ethical ramifications in terms of when we continue to partake in this profession, whether that is as a trainee or as a practicing physician, we are really signing up for a profession that has been shown to harm minoritized people. And so, with this article, we're really calling to action folks across the continuum of training within medicine to look into and self-reflect and see how they might be complicit in racism. And it goes into how we created this process of building an anti-racist medical education curriculum to counteract this, and how might we, in our positionalities, dismantle and detangle ourselves from this complicity. And so, that's really building on how can we make sure that ethically we are founded on justice and making sure that we are truly caring for and working towards the healing of all our patients, regardless of what background they come from.

HOFF: And as you note, this is important obviously for people across, you know, at different points in their careers. But what is the most important thing for health professions students and trainees specifically to take from your article?

MABEZA: We want to challenge trainees to think about what they're going into, [chuckles] for lack of a better term.

HOFF: [chuckles]

MABEZA: I think one of the things that we aspire to as we enter this profession—and I'm saying this as myself a trainee—is the idea and the hope of truly caring for patients and being with them in their most vulnerable and really making sure that we are advancing their care in multiple ways. But for trainees, it's really important for us to come into this

profession with informed consent. We need to see what is it that we are getting ourselves into, and we need to see how the system is built as a way to sort of prophylax against moral injury and burnout. And I can tell you that a lot of my colleagues who are entering medicine and seeing subpar care, particularly for patients of color, that has been a huge source of burnout and moral injury, like I mentioned earlier.

HOFF: Mmhmm.

MABEZA: And so, for trainees in particular, I just want to share to us collectively that we are so incredibly powerful in our voices, in the ways that we still have yet to be broken down and jaded. And so, I want us to protect that, but also seeing exactly where we are headed to make sure that we also know how we can prepare ourselves to be potent agents of change and transformation within the system in which we're partaking.

HOFF: Mmhmm. Well put. Thank you. And finally, if you could add a point to your article that you didn't have the time or space to fully explore, what would that be?

MABEZA: I just wanted this article as sort of a bat signal. [laughs] We are out here. We are doing the work. I know that for a lot of people who are anti-racist and abolitionist and decolonialist, the house of medicine could feel so incredibly isolating, and a lot of times people who do this work tend to feel so beaten down by the resistance that they see and experience with current leadership. But I just want everyone to know that there is a collective of us. We are growing. This is a movement that is not going to stop. And it's really critical for us to know that we all should link arms in this work, and there's a lot of us who are beginning to really unravel the complicity of medicine and racism. And as we move forward in our careers and our practices, it behooves all of us to really make sure that we are building this community because it will take all of us to catalyze and finish—not that it will be finished in our lifetimes—but to catalyze medicine's anti-racist transformation. So, hang in there. We're all doing the work, and we'll be great. [theme music returns]

HOFF: Russyan, thank you so much for being on the podcast today, for you and your coauthors' contribution to the Journal, and for the great work that you all continue to do.

MABEZA: Tim, it was such a pleasure and privilege to speak with you today. And also, thank you for giving us the space to share our thoughts in the Journal as well.

HOFF: To read the full article, as well as the rest of the March 2022 issue for free, visit our site, <u>JournalofEthics.org</u>. We'll be back soon with more *Ethics Talk* from the *American Medical Association Journal of Ethics*.