



Racial Injustice & Inequities Perspective From Ally to Accomplice

by Cassie Ferguson, MD

I have for too long banked on my liberal political beliefs, my voting record, and my attendance at marches for women's rights and affirmative action in order to opt out of examining my own complicity and participation in racist systems.

I have for too long rested comfortably in my belief that I am an empathic educator, an enlightened mentor and advisor, and in the belief that this is enough to support the students to whom I am responsible.

And I have for too long stood by as our students of color are taxed with the extra burden of calling out the prejudice and racism that exists within the MCW community, rather than acknowledging that this is the work of educators. It is the responsibility of educators to see and address racism in our curriculum and assessment strategies; to review case materials and test questions for negative stereotypes; to swiftly condemn racist comments by students and our colleagues in the classroom and on the wards; to incorporate service learning opportunities into the general curriculum; to teach from a biopsychosocial model of disease; and, to recognize the limitations of using cultural competence training as a proxy for teaching about racism.

In her powerful address "Revolution Now" Rachel Cargle, an academic, writer and lecturer, outlines her framework for embracing this accountability and moving beyond allyship toward becoming an accomplice in anti-racism work. This work, she explains, must be done in all sectors of our society, including academics. It begins with the accrual and examination of "critical knowledge." The sources of this knowledge have existed for decades, written by academics, educators, and learners of color—including at our very own institution—

generously sharing their experiences to shine light on questions like these: How is racism institutionalized within medical schools? How does this racism impact the experience of our students of color? How does it impact their emotional lives? How does it dictate how they perform on entrance exams and “standardized” tests? How does it influence decisions on accommodations and remediation? How does racism impact the experience of white students?

At MCW, we have started this work by studying student experiences. Many of our underrepresented students describe experiencing a lack of support and connection, and disrespect from others in our community. We are now working to address this by investing time and resources in projects proposed by students.

The next step in Ms. Cargle’s framework is moving beyond passive empathy to what she calls “radical empathy.” Radical empathy entails pushing past attempts to feel what someone else is feeling and holding yourself accountable for the role you play in the pain that others are experiencing. To do this, I must lay down my defensiveness (conscious or unconscious) and acknowledge that my silence around the presence and impact of racism at our institution will mean that some of my students will not feel comfortable bringing their whole selves to the classes I teach. This is not acceptable.

The third and final step in Ms. Cargle’s framework is taking “intentional action.” At MCW, this looks like seeking out and supporting our local experts; those individuals, departments, and institutes who are already doing this work. For me, it also means using my sphere of influence to call for and enact change where I am able: How might I better support the well-being and mental health of students of color? How might I teach white students to be accomplices? How might I help to dismantle and rebuild our accommodations and remediation systems so that they favor equity over the bias-ridden concept of “fairness?”

Successfully moving forward is predicated on our willingness as a community to engage in conversations about structural and interpersonal racism, hostile environments, and microaggressions without being concerned about the

emotional fragility or anger of those with power and control. Doing this work well means trusting that we are strong enough to handle difficult conversations.

Walking through this framework is not supposed to feel comfortable. As Ms. Cargle states, “Anti-racism work is not self-improvement work;” it cannot end with a retweet or a collection of carefully curated Instagram posts. As medical educators we must ensure that all learners feel at ease and safe in the knowledge that they will be respected for their humanity and have a deep sense of belonging on our campus and in our profession.

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Link to the video of “Revolution Now” by Rachel Cargle:
<https://www.youtube.com/watch?v=leBPMyQ60HM>

Link to Dr. Cargle’s website, “The Great Unlearn”:
<https://www.patreon.com/posts/revolution-now-37706213>

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