

Virtual Mentor

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PERSONAL NARRATIVE

Who Am I, and Why Am I Different?

Robert Davidson, MD, MPH

"Hey Daktari, they need you over in medical right away." This, thankfully, pulled me from a staff meeting on budgets to take care of a volunteer who had been assaulted and had a head laceration. The story behind this unfortunate event started me thinking about the subject of diversity in Africa.

The volunteer was a 25-year-old African American woman. She had been in downtown Nairobi on a Friday and happened to be near a mosque as the mid-day prayers finished and a group of men emerged into the street. She was wearing a hat that she had purchased in Africa, one traditionally worn by men of the Islamic faith. Several of the men approached her and started shouting to her to take off the hat. One of them grabbed it from her, and she got into a tug-of-war with him. She began yelling for him to stop and leave her alone. One of the other men picked up a board lying nearby and struck her over the head causing the laceration. As she let go of the hat to defend herself, the men ran off shouting back to her that she needed to learn her place. She was not badly hurt and was not knocked out. She got a ride to our office holding her head to stem the blood flow. After calming her and anesthetizing the laceration, we had the chance to talk as I cleaned and sutured the wound.

As we began to talk, the tears swelled in her eyes. "Doc, this happens all the time. Who am I and why am I different?" In my best open-ended question style, I prodded her to discuss the problem openly with me. Out came a poignant story of why she had chosen the Peace Corps and her experiences as an American with dark skin in Africa.

She had grown up in a predominately black community, gone to a prominent university dedicated to the education of black Americans, studied African American history, and was looking forward to working in Africa with "her people." Her actual experience was quite unexpected. She came to realize that she was much less African and much more American than she had thought. She related the experience of talking with a group of educated Africans in the school in her community. She told them she felt she was having difficulty being accepted as a friend and colleague and asked them why. They responded that she was a "Mzungu." She was shocked. Mzungu is roughly translated from Kiswahili to mean "European." It has taken on a much greater connotation, however, and is applied in a semi-derogatory manner to refer to the colonialists from Europe and developed nations and is applied to all ex-

patriots working in eastern Africa. It was a difficult realization for her that she had so much more in common with Europeans and with the other Peace Corps volunteers than with the Africans who looked much more like she did. She felt she was being discriminated against in Africa in a manner much more virulent than she had experienced in the United States as a black American.

A few days later, I was sitting in on a committee of volunteers called the "Diversity Committee" that had been formed to look at ways to attract a more diverse group of volunteers to Africa to better represent the many cultural groups of the United States. The same black American volunteer, stitches still in her scalp, addressed the group. I want to quote her as closely as I remember. "Diversity should not be a goal in and unto itself," she began. "If you work toward diversity, you are admitting that there is still discrimination. The goal should be to do away with any biases and allow true equal opportunity for all and then let what happens happen. I want to work with people who I care for and respect and who feel the same way about me. It has been very hard for me to admit that I am more comfortable working and relating with other volunteers, most of whom are white, than with the Africans I thought I identified with. I am also coming to the reluctant conclusion that I am probably better off as the descendant of slaves brought to America than I would be if my ancestors had remained in Africa. Do not get me wrong; I hate the whole idea of slavery more than anyone else does in this room. However, I am so glad that I have the opportunity in the US to accept people for who they are and not get hung up on the color of their skin."

As she finished, there was a stunned silence in the room. It had taken great courage for this young woman to express her feelings openly with the group. She had become the teacher on what diversity is all about. It had taken pain and incredible insight for her to come to this conclusion. I left the meeting with a good feeling that we will continue to advance in the US in our understanding and intolerance of racism and bias. We will be led in this process by young women and men of diverse backgrounds willing to explore and express their feelings.

So what does this have to do with diversity in the medical profession? For 22 years before coming to Africa, I was on the faculty of the University of California, Davis, School of Medicine. For 12 of those years, I served on the admission committee. Each year the committee struggled with the issue of diversity of the incoming class. There was almost universal agreement among committee members that there was a positive value in having an ethnically diverse class. What we differed on, often precipitating lengthy discussions late into the evening, was what criteria we should use in the selection process. It was seductively easy to fall back on the objective data supplied by the MCAT and undergraduate GPA. How could we measure our success in achieving diversity? We talked in terms of overcoming barriers as a measure of accomplishment, diverse language skills, and commitment to underserved communities. For some applicants, these notions helped us to see their potential value as future physicians and to secure them a place in the entering class. However, this did not address the applicant from a minority race or culture who was

not disadvantaged. If diversity itself was the goal, we should give preference to all members of a minority race or culture. It is clear that we were not seeking diversity alone, but the added value brought to the education process and to the future profession of a class that reflected the rich cultural diversity of California.

Just as the young black American volunteer's experiences enriched all of us, a diverse profession can do the same. She was able to define the meaning of diversity in a way that was impossible for someone who had not shared her experiences, and she was willing to impart this to the group.

We would not need to worry about the concept of diversity in the profession if the opportunity for admission were equal among all. The goal is finally doing away completely with bias by race or ethnicity. Then, as the volunteer said, "Let what happens happen." *We are not there yet.* We must continue to work toward this goal and, in the interim, be willing to accept that diversity in the profession has an added value both in the education process and in serving our patients.

Robert Davidson, MD, MPH is professor in the Department of Family and Community Medicine at University of California, Davis, where his interests include both rural health and the organization and financing of health care systems. In the past few years, he has served as both the director of Rural Health and earlier as the medical director of Managed Care for the UC Davis Health System. *Out of Africa* is an on-line journal of his odyssey in the US Peace Corps as the area Medical Officer in Eastern Africa.

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