

Reckoning With Racism in Nursing

Danaya Hall Transcript

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We're addressing

racism in nursing

My mother is white, and my father was black.

My mother's side was actually Jewish.

Never really just said I was fully white because

people know that I'm not

From a very young age

I had a very humanitarian outlook on the world

and interested in how the human experience

affects everyone differently.

I was raised by my single mom

in low income housing.

I never thought nursing would be something

I would ever do as a young person.

I was , I think. Thirty four, thirty five when I became a nurse,

and I actually fell into it

because I had had a pregnancy loss

in my early twenties,

and I got really interested in midwifery,

thought I wanted to be a licensed midwife.

And so I started doing the things that one would do to

do that. So I became a doula.

I worked at Planned Parenthood

and their prenatal clinic,

and then I worked with an obstetrician and a midwife

that owned a freestanding

birth center in Livermore, California.

I decided that I should probably go to nursing school

because I needed more skills.

I was the labor

and delivery nurse for ten years,

and then I realized

as I'm older, I'm , I'll be this year

that I really want to care

for women across the lifespan.

I'm very aware of my proximity to whiteness

and that my experience of racial discrimination

is really different

than my darker brothers and sisters.

Growing up in the San Francisco Bay Area.

My dad was recruited as a Black Panther.

I've always felt that representation matters

and having somebody see you culturally,

especially as a medical provider,

is really vital to the health of the person that

is seeking care in front of me.

That racial justice piece has always been with me.

I left my labor and delivery job

because of a lot of microaggressions

that I was experiencing.

Asked my, the management,

to make a statement to the staff

because I was feeling isolated

and really uncomfortable

and it just never happened

and went to the county

to work in the student health center,

working with the county

with any county health department.

You're going to have a lot more diversity in the staff

I've always had a strong desire to serve my community.

I went to an ADN degree program

in California, and then when I became licensed,

I moved up here

to Portland, Oregon,

and worked on the labor and delivery unit here.

I lived in Oakland, California, for a long time,

and I was a part of the National Black Nurses

Chapter there. When I moved here with my first job

I was ready to

become a member of the local chapter here,

and there wasn't one That was years ago.

Working with the students

in the Student Health Center,

I did a lot of educating these young kids

in these diverse schools

wanted to be more for the students.

And so I went back to school to get my

WHNP had to do a community health project.

I was able to weave that project

into starting our chapter

here in Oregon of the Alliance

of Black Nurses Association.

One of our legislators here is a nurse practitioner,

and she's an alumni to my school

I reached out to her just as a way to network

and telling her my story

of who I am

and telling her about the lack of black nurses

association here. She said, Well, you should do that.

And so I did

Medicine is inherently very racist.

A lot of our science right

that we are taught in our textbooks

as nurses, as medical providers

are really racist.

And we're just now starting to reckon with that.

One of my textbooks, Barneys Midwifery, has values

for black women

and anemia different than everybody else.

Legislators

in our House of Representatives

just passed a bill to name

racism as a public health crisis.

We really need to look at

how we collect,

how we do research

so that black people are studied in an ethical way

to really figure out

how to improve the health outcomes.

How many PhDs

are there that are people of color in nursing.

I'm pretty sure the folks that are in

those positions are surrounded most of the time,

by a sea of white people. There's not enough support

because you just have to fight to be heard

I would like to see people of color overall

to not have to fight so hard to be heard

I want to see a whole lot more diversity and nursing.

I want to see a whole lot more black nurses

in every aspect of nursing, faculty, management.

Outreach to our community and in our schools.

Interacting with elementary school

kids and middle school kids

and showing them

all of the things that nurses are and can be

because we're everywhere in every aspect of society.

I want their families to see that it's a viable avenue

out of poverty

After the lynching of George Floyd,

a midwife from the Bay Area, attended

the midwifery conference and was really rattled by

not a great statement from the ACNM.

She put out a call to action on Facebook

to tell all black midwives

to divest from the American College of Nurse Midwives

because they weren't doing the job

that they needed to be doing

to be centering black and brown voices

Posted it on my school Facebook page

and it was taken down

by the ACNM really didn't like being called out.

And I go to the Frontier

Nursing School, which is run by midwives.

The folks who are running

the school are also the leadership in the ACNM,

and this really struck a nerve.

I reached out to our DEI organization

at the nursing school and

they acknowledged

that this was an issue. Cut to a year later,

one of my courses that

I'm taking right

now, this is the first time that they

revamped the course.

Now, social justice is woven into every single module.

My courses

before this one race always being this construct

that was a risk factor.

That is being dispelled, it really gives me a lot of hope for the future.

Really supported with my family

those matriarchs that we have in our families

I definitely had my aunties.

You know, a lot of strong women in my life as a child

feels like my duty and I feel

I feel grateful when I look around at the leaders,

you know,

the nurse leaders that are running hospital

systems and clinics,

you know, they don't look like me.

There are barriers and there are glass ceilings

and those need to get broken down.