

Reckoning With Racism in Nursing

Kemmarie Beal Transcript

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We're addressing racism in nursing.

I'm Kemmarie Beal, and I identify as a black woman. I migrated to this country back in the 1980s as a child, and it was actually interesting that people would often try to tell me who I am and they would say, You're not black, you're Jamaican. I said, No, my color is black, but my ethnicity is Jamaican.

I had always wanted to be a nurse. I like to care for people I also remember as a child, my mother had always wanted to be a nurse.

One of the biggest words that come to mind even all these years later, is trauma. As much as I wanted to be there and felt that I deserve to be there, there was always an attitude of exclusion. It didn't feel like the people who were there to guide you or guide me as a future nurse were interested in that.

They were more interested in weeding people out One of the main classes, I believe it was Fundamentals One of my assignments was that we had to write a paper. We were told during the lecture that we were responsible for whatever the information that was provided to us is what we were responsible for because it was not in any of the literature that we were asked to purchase for this semester.

Was a student who not only attended classes, but I also recorded my classes. There was three theories of aging that was given to us. I happened to interview this older gentleman, and I felt that two of the theories applied to him. My paper was graded a .

Keep in mind, passing was . For me, that was intolerable, and I definitely did not speak to my my let my skill level.

The professor essentially told me that I didn't know what I was talking about because her words exactly were that I misconstrued the information I spent that weekend. Of course, instead of being focused solely on my final exam, I was listening to recordings trying to find these theories on aging I didn't have any other exams that day, and I hung out at the school practically the whole day just waiting for this woman to give me minutes of her time.

I brought two recorders with me that day. I brought the recorder so that I could play the tape with her, indicating what the different theories of aging were. And then I brought her brought a recorder to record our conversation. I sat with her. I reviewed what was said on the Friday before and let her know that, you know, I brought the recorder because I want to make sure that if I misconstrue anything I could then use it and use the recording as a reference.

He then said to me, OK, no, I guess you're right. And she said, Well, how about I give you five more points? I looked directly at her stone face with my conviction and I said, All my points will be sufficient. And she did not argue. She gave me my points and I went on my way my hardest time in nursing, to be quite frank, was in the undergraduate level.

There was a lot of, you know, belittling behavior. But the only person, you know, who looked like me in my clinical group, we had learned to write some notes. And that first semester, fast forward to clinical and that second semester and most people in the group did not recall how to write show notes. I held a letter to Torial on how to write notes for the clinical group that I was in.

The instructor had a problem with nobody else's note except mine, which I found to be interesting, because if mine was wrong, then everybody else's should be wrong, too. Well, it was also striking for me in that moment. All those folks that I sat with and did the tutorial. From what I remembered, no one spoke up for me as I was studying to be a family nurse practitioner and we were, you know, in the clinical phase of things.

And one of my classes, I recall a Caucasian woman she was at a clinical site, I believe it was in Waterbury. She was at a clinical site, and she made some truly derogatory comments about the Hispanic population that she was working at. The young woman was about age 30 or so and was concerned because she was trying to have a baby and had not conceived.

Instead of looking at, you know, what would, you know, what went into a 19-year-old who is still in high school, their priority being, you know, conception instead of examining, you know, what could be playing roles around that. I recall the professor saying that she happened to be Hispanic I recall having a disagreement with one of the nurses.

It was close to evaluation time. All those nights that I got up and you know, came in for or those extra hour shifts that I picked up from my missed lunch. None of that stuff showed up on my evaluation. The language on my evaluation, it was clear that my evaluation was governed by my disagreement with this nurse course you know, there was denial that of course that's not the reason why my evaluation look, the way that it looked, while I didn't get any answers then I can tell you that my next evaluation, those things were mentioned.

You're never given the benefit of the doubt and people can say whatever they want. And if they call your name next to it, you don't get to defend yourself. I'm always, you know, been more so an outspoken person. So people generally remember my name after I had become a nurse practitioner and I had resigned from my role as a registered nurse at the hospital, a friend of mine who still worked at the hospital called me and said, you know, jokingly, you're going to get written up.

Keep in mind, I no longer work at this facility. So I said, I'm going to get written up. What did I do this time? And she said, Apparently you were swearing at somebody on the phone. The nursing supervisor apparently had marched on to the floor. You know, gunning for me. What if I had still been working there? There was no way that I could have said I was nowhere near the phone or I could say that that didn't happen.

And I would have been believed I trust strength from several things. One of them is my faith another place that I'm able to draw strength from is talking to other black nurses and being able to decompress and, you know, talk about some of these challenges. One of the biggest things and talking to other black nurses and coming to the realization that it's not in my head and B, it's not just happening to me.

There are several nurses who you know, I've been nurses, I believe , years. And they were talking about, you know, some of the same thing that we've faced. What hope do I have, you know, to feel that things are going to change, hopefully not allow, you know, the sting of these assaults that we often face to change me as a person but racism continues to persist in nursing and in our society because people fail to identify it as a problem.

They understand that the society that we live in whether I'm wrong or right, I will always be wrong. The systems that are in place need to be deconstructed. You know, last May, after the killing of George Floyd, I mean, agency after agency, CEO after CEO, you know, directors, everybody came out with a position statement. But go talk to the employees that work at these places.

And those position statements mean nothing because the same behavior persists when I'm in the trenches, you know how I'm treated tells me a whole lot more than your position statement.

Of being a nurse, not only serving my community, but to serve every patient that I serve, no matter what they look like. There's also, you know, lots of loneliness. There's also a lot of frustration I would tell her to go be that nurse. I would also caution her about some of the things that she's going to face and let her know that it's not unique to her, but do not allow it to be a deterrent to her.

Nursing in itself has a pretty devastating history when it comes to race. Florence Nightingale, for me doesn't mean anything. And it's not about cancel culture. It's about she's someone who would have definitely been, you know, a jersey barrier in my way.