

Reckoning With Racism in Nursing

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We're addressing

racism in nursing

I was raised by

parents, a military father who was a career officer

in the Air Force

and a mother who was a elementary school teacher,

sense of who I was ethnically by my parents.

So I identify as black

have a maternal grandmother who is Cuban.

And so I just so I have embraced that Cuban side.

So I will put down that I am Hispanic or Latin X

and but I really identify as black

I loved always loved animals.

So I had gone to Davis

because they have a veterinary school,

and I thought I wanted to be a vet.

I wasn't really feeling it.

So I started looking like,

what else would I think I would like?

Mother told me about nurse practitioners.

That was the first time

I heard about nurse practitioners.

I had decided to go ahead and finish

my educational career there and get my degree.

I did get a degree interestingly enough,
in applied behavioral science with the emphasis on
adolescent and family
counseling in the black community.

I graduated.

It was
probably June of that year,
and I hadn't really thought
about applying to nursing school seriously.

And by then I had missed the window.

My father is from the Midwest, Kansas,
and he went to a school, Bethel College,
which is in central Kansas,

He said, Hey, Sheri,

you know, Bethel has a nursing program.

Father called the school

and said, Hey, my daughter wants to be a nurse.

She just graduated from UC Davis.

Is there any way she could start in the fall?

And they were like,

Sure, just send her transcripts, we'll take her.

It was a huge cultural shift for me

because it wasn't as diverse

as I was used to coming from California.

Where, you know,

black people, white people,

not a lot of different ethnicities.

And the nice, really nice thing

is since my dad grew up in that town,

I got to meet and get to know my paternal side, the relatives.

You know, some students even today have issues,

unfortunately.

But my experience, I would say overall was positive

The hospital in Dothan, they were all white.

They were all white.

They were all southern.

And they expected the nurses to get up

when they walked into the room.

The two of us who were military wives,

there was myself and then there was another woman.

She was white, but she was from Boston.

So they called her a Yankee.

When they looked at me.

I don't think they saw a black nurse

or a black woman.

People try to put you in a box

and try to figure out what you are.

Sometimes people will ask me straight out,

you know, what are you?

I used to get that a lot as a kid.

The nurses and staff,

they only, you know, black people only came in one.

They were one dimensional.

They were dark. They had, you know, kinky hair.

They had, you know, different features.

That's how they view black people.

We had a patient who got admitted,

and they all thought he had Cushing's

because of his complexion.

I walked into the room

and I was like, That man is black.

They were going to give him a,

you know, an autoimmune disorder.

Because he didn't fit in a box.

That opened my eyes like, oh, my God,

you people only see black people one way

I moved back home

to California, and I worked as a bedside nurse.

That position I had, I was working with white nurses,

Filipino nurses

oh, no, there was maybe one or two other black nurses

I got more

stuff from those nurses than I did

whenever I was in the South.

I was in the break room and

eating my dinner

bowl of gumbo, I'm in the break room eating

Filipino nurse comes in, sees what

I'm eating, and she says,

Oh, my God, I didn't know you people like crabs.

I had a patient that was intubated.

Was, I believe it was a surgical patient.

She was intubated.

She needed a line put in.

So I yell out that I need help.

I'm like, I need help in here.

And so the relief charge comes in and he says,

You know, Sheri,

everybody's complaining because you don't ask.

You don't say please or thank you.

And as he's walking out, I said, Thank you.

And he walked away

and he reported me to the supervisor

I had to decide to go back to grad school.

And I needed a letter of recommendation.

And I had asked her

because we had worked together

and she had agreed to do it.

She refused to do it.

She backed out.

She wouldn't do the letter of recommendation,

and they tried to, my unit manager was trying to,

I think, discipline me.

And I said, I'm

not going to meet with anybody without my rep

because we were unionized.

I heard more off color comments

by white nurses, by others.

In that unit, here in California, than I ever heard in

in the three Southern states I lived and worked.

I really enjoyed the spaces

in this last year that I have found talking to

overdue reckoning.

You know, those nurses in that space.

I have to there's two other faculty at my department

in the middle of reading Isabel

Wilkinson's book 'Caste'

The powers that be, the leadership have internalized

that they are the dominant caste,

black and brown

indigenous people where the lower caste

it's been legislated it's political.

It's in our political policies.

And that is why we have systemic racism.

You know, the genome has proven,

mapping, that everyone is the same.

There is no biological difference between myself

and, you know, President Biden, a white person.

You know, we're all the same.

Our bodies function

the same are they're made the same.

Everybody's got blood

the same. The components are the same.

We can't do it alone.

We have to work together.

There's more and more nurses and others

who are realizing that we need to

there needs to be a change.

Sharing and making sure people are aware.

So that's number one.

And then number two is identifying those

who are truly invested

and truly want to make a change.

It's not an easy conversation.

I had to have it with a faculty

who was a person of color.

She's Filipino, but she addressed an email,

which I was part of.

She addressed it to three faculty members myself.

And two other white ones.

She labeled them, Doctor, Doctor, Sherry.

I had a conversation with her

and I said, you know, first of all, we're all peers.

If you're going to say Doctor, doctor,

then you need to use everybody's title.

They don't have to work at

getting the respect

because it's automatic.

You and I, we have to earn it, unfortunately.

And it's like a light bulb went off her head.

And she was like, Oh, my God, you're right.

That was a really good conversation. And it was.

And she got it. She totally got it.

Coworker who I love.

She was great. Nurse. We got along great.

She was white, and she also happened to be gay.

She was trying to say our situations were similar

in that we faced discrimination.

I said, Yeah, but the difference is you're white.

And unless you disclose you're gay,

nobody will know it.

But I walk in the room, I can't hide this.

It is out there.

And that was her aha moment.

Look at the program that they're interested in

and see what is their curriculum.

See who is on faculty.

Reach out to them and ask them questions like,

you know, what kind of

what kind of experience would I anticipate having?

No matter what way they enter in the profession

to think about getting their degree

in order to advance in your career pathway,

they will put up a ceiling because of who you are,

but you don't want to add to that by

because you just don't have the degree

or you don't have the training.