

TW for Ep 6:

Death

Suicide

Illness including cancer

Coronavirus

Colonialism

Racism

Ableism

LGBT+ phobia

Depression and other mental health issues

Islamophobia

Karel Green 0:00

Welcome back to the POCSquared podcast hosted by Sehher, Pruthvi and Karel. Today's episode will focus on the history of race in medicine. Please be aware that the following topics are discussed: death and suicide, illness including cancer, and the Coronavirus, colonialism, racism, ableism, LGBT+ phobia, depression and other mental health issues and Islamophobia. A transcript and show notes for this and all episodes can be found on our website, www.poc2.co.uk, that's www dot POC, then the number two dot co dot UK and if you have any comments or questions, we can be found on Twitter and Instagram at pocsquared, that is POC, and then the word squared with no spaces. You can also contact us via email pocsquared@gmail.com. That's POC then the word squared@gmail.com. With all that said, we hope you enjoy the episode.

This episode is going to be about medicine and how it's not been done ethically, the way it should have been done throughout all of history I guess, and literally today.

Pruthvi Mehta 1:24

So, it depends where all of you want to start because there are loads of different avenues that we can take when discussing, you know, medicine and people of color. We can go down the historical route and talk about all the bad stuff happened to people of color when it came to medical development in the West. We can go to like how medicine today treats and impacts people of color differently. We could just go through like the we can even talk about food and how like food science and food health affects people of color differently. Like there's just a whole, there's a massive range of topics. Yeah, we can talk about... We can actually go... you can start from like anecdotal stuff. So we could we could talk with... you don't have to like delve into the facts right away. We can talk about maybe different experiences that we've had as people of color who have had health issues or you know, have had, have read or been involved in things related to medicine, and how they relate to race in our eyes. So, so who wants to talk about their body?

Karel Green 2:28

Wow, can't wait.

Pruthvi Mehta 2:32

Okay. Okay, well, now that I mean, okay, I'm just gonna talk about what I've seen through the window, which is a gray ass sky. I want to talk about how people in what like, especially why doctors in western medicine don't understand what... that different, you know, people of color meaning different things from their environment in terms of health. Right. So I think a big thing that we've talked about before is how like vitamins D consumption just... Well, first of all isn't standardized for even whites in the west. It's something that should happen. But how it much more negatively impacts people of color due to them literally having melanin in their skin and needing a lot more vitamin D exposure to absorb it. And how because of this hell country, we don't get any. I'm angry.

Karel Green 3:21

Yes, yes. I've noticed especially as like, so I noticed that a lot as somebody. So I'm black. If you haven't listened to any of the other podcast episodes, you should know that I'm specifically black. And when I was younger, my family used to go on holiday to Florida a lot, which is a very hot, near the Caribbean which is where like my family, my grandparents are from. So it's the closest state to the Caribbean. So it's basically like the same climate. And I noticed how like my health in Florida, so much better than my health when I was home in England. I used to... So I also have chronic illness and it wasn't discovered until I was one called down 22. So all throughout my teenage years, I was apparently just dealing with that. I don't remember. And I remember I was also just a very spotty teenager because nobody cared about my health. So like my skin was dying. So I used to notice how I'd go on holiday and like my skin would magically clear up and how my mood would suddenly get better. And how I was just doing a lot better in America. I've noticed, I would just never get a spot, my skin was so good. And then I'd come home and just like shrivel up and start dying again. And I was just always tired in the winter. I'm literally always tired. I'm just like a bird. If the sun isn't out, I'm not working right. And so, I think that was like, the furthest back. I noticed there was like a significant change in my body. And how like, there was nothing done to sort of mitigate that as somebody who lives in the UK, and how, who who would have guessed that a person from, whose ancestors are from a tropical country should probably live in a tropical country to best utilize their body, but there we go. So that's something that I really noticed.

Pruthvi Mehta 5:18

I also think, you know, and it literally makes sense from an evolutionary like standpoint, right? Like our bodies are not a climate of climatized to the cold to colder weather. And there's so many different aspects of brown and black bodies that are literally due to the way evolution works are adapted to sunlight, right, like, like sweat glands are different hair is different. And it's, like you said there's a definite there's that I can literally find papers on this for the show notes, but there's a definite positive correlation between mood and vitamin... vitamin D exposure, especially for people of color, because, like our ancestors, like you said, lived in hot climates, had

a lot of exposure to sunlight. I remember when I was younger, my mum told me that when she... you know she came to this country when she was 23, so she just got married. She came to this country to live here forever I guess and she told me about how she not only did she have to deal with like just racism being like a tiny, scared, brown woman in you know in England, she had to deal with like a lot of health problems as well. And I think she's never really linked it to sunshine herself but she does, she... I remember she did complain a lot about how she missed the sunny weather, how she missed the just the warmer climate in general but it's what our bodies are just like meant to... what it's accustomed to right and you've said it yourself, Karel, you have, you know, you have seasonal depression right and I'm going to do some more research into this but but there must be a positive link between like people who have seasonal depression living in the West and those people that were people of color and like that's definitely link that's there. Um, but you know, I think we've also done research on the flip side of the sun, which is the the way stuff like skin cancer, for example, something which is caused by a lot of exposure to sunlight, just isn't detected in people with darker skin tones because of how the melanomas look different, right. And I think that's really it's really scary. It's really really scary considering a lot, most of the highly trained doctors in this in this country are white, right? They're just not being trained in their own in a medical degrees to spot how different skin tones or different skin diseases look on different skin. Like, time to talk about my body, but I honestly I've never had skin cancer or anything but I have had a condition caused by repeated heating of my skin. I used to have to use hot water bottles a lot. And I like, so basically I kind of had this sort of like varicose vein-esque dark looking passing on my thighs and I didn't really realize that Until I okay, I stepped out a shower one day and I'm like, holy, you know, what is this? Right? And when I try to find like, you know what might have been causing it on the internet because clearly I'm a complete mess and will look at skin stuff on the internet, I'm just a massive hypochondriac. I couldn't... I couldn't find

Karel Green 8:22
You and WebMD

Pruthvi Mehta 8:23
WebMD has diagnosed me with so much. I couldn't find pictures of skin. I couldn't find pictures of the condition I thought I had on skin that looked like mine. And that's really weird. So, I was like, I don't have this. I'm probably fine. I went to the doctor and they were just like, oh, no, you do have this condition. The one brown doctor in my GP practice and Pinner was just like, oh yeah, you do have this condition. It just looks different on people who have darker skin compared to people who have white skin and I was like, Damn, okay, so you know, now I actually have treatment, only took me two years to get it. But there we go. Completely messed up. It's so messed up, how much it can affect you. But yeah, I've just talked a lot. Does anyone have any other thoughts or opinions?

Sehher Tariq 9:08

I don't really have anything major in terms of my health. Erm but yeah, I think in terms of the, like the whole sunlight conversation I, like just recently actually, last week, it was really sunny, like was really, really nice week, a week last week. And that was the first week that I worked from home. So I was getting up and I was being really productive. And I thought, okay, so I'm really not that bad at working at home, I thought I'd be terrible. I thought it wouldn't be that great. I won't be that productive. But I was really, really productive last week. And then this week, it was miserable all week, and it was raining and it was gray. And everything just seems so much more like just dull and everything was slow. And I could just, you can just notice that waking up when it's sunny is easier, obviously, that can be like maybe for everybody, but I just have had so much energy last week that I did not have this week. And that's probably because of the fact that it was just sunny and my mood was just so much better that I could feel like I could get things done. But yeah, that's probably what I have to say for now on in terms of like, the health and sun and climate and all of that stuff.

Pruthvi Mehta 10:36

Yeah, I think I think starting with sunlight is just something it does link back to the climate episode as well.

Karel Green 10:41

Listen to that. We have an episode on climate, listen to it.

Pruthvi Mehta 10:46

Literally. Um, but yeah, I think I think it's a nice starting point. Um...

Karel Green 10:53

I just I wanted to say how... So, yeah you talked about how you went to like the doctors this literal brown, the only brown doctor, the only doctor, I trust, your doctor from Pinner is talking about how you had the the skin condition and you couldn't find anything. So that's why you didn't think you have it. And I was just thinking about so right at the beginning of my diversity journey, I think you find, especially because... so we're all physics graduates. And I think we kind of found out about the load of stuff that happens in medicine, because it's the easiest one to put into context. And it's the easiest one to like, teach people about when you talk about diversity and about how stem isn't objective. And then I think we went away from that a bit because we are literally in physics. We are all physicists, so we were like just like you know what like we we agree, like that is right. But we're trying to sort out like our field because it's the field we're in. So what are the things that affected physics specifically, and going back to it, we heard a lot about this stuff from biology. And one of the main things that I remember and especially like you've literally just given us a everyday example of it. That's how at least in most universities, I assume, I have not done a medical degree I did a physics degree. But like the default is for like a white male and white female body to be taught about so as far as I know, there is almost like nothing on like intersex people, like transgender people, or anything on like the people of color who are also insane. So transgender or just in general. So like you said before, how

they'll be taught things like how to spot the symptoms of skin cancer and skin, but never taught how to spot that on skin that isn't white. And that can be very damaging, because like you said, skin cancer, a lot of skin cancers come up as dark brown spots. And if your skin is already dark brown

Pruthvi Mehta 12:50

Yeah, yeah, yeah. Exactly.

Karel Green 12:51

...what you're looking for, you know. So who would have guessed so yes, schools and universities teaching medicine on a default of white bodies is setting yourself up for failure.

Pruthvi Mehta 13:08

Exactly. It's I think what's really interesting is how like a lot of medical journals when they do, when someone does do research on how like for example, with with with like skin cancer, for example, when they do research on it, they'll sort of, they'll look at the difference and say, you know, deaths from melanomas, or, you know, the differences in spotting melanoma that's sort of like, Oh, that's just how the biology is, instead of, hey, we can change this by training white doctors to spot these growths on brown and black skin. Like they act as if it's not like a, not all like a, you know, natural biological phenomenon with a mysterious cause that's just there. Like, you know, what, they can potentially change that.

Karel Green 13:49

No, no, Pruthvi.

Pruthvi Mehta 13:51

Literally. It's such a mess, such a mess and like, I think the thing that is really like pervasive like thing I remember being told something when I was here Longer which is just completely wrong, which is black and brown people don't need to use sunscreen. Everyone should be using sunscreen in the in this especially in the summer right? Like UV rays don't stop for anyone. If you are black you can get skin cancer if you are brown you can get skin cancer, if you have the slightest amount of melanin you can still get cancer skin cancer, if you have all the melanin in the world you can still get skin cancer like... you always need to be wearing sunscreen but the amount of like white friends I had growing up who were just like, you're so lucky you don't have to put on sunscreen it really smells and I was like Shut up. Like I was so tired, I was so tired of this... People would come up to me and be like I'm tanning like... Did anyone do that to you? did anyone like just like some white friend like oh look like I'm tanning and then just hold the pale slightly reddened skin.

Karel Green 14:54

I don't want to see this.

Sehher Tariq 14:56

First thing, first of all, sun cream smells great. Okay. And then that that just happened to me a lot because I was in like a majority white school. So like they'd be like, and I don't know I do that. I do that, To my friends sometimes that I'm that I'm just like, comparing the like, I guess the difference in skin color, and I don't think that's a bad thing, but it's just like annoying when, when they're like, Oh, I'm so tired. I'm almost as dark as you and it's like, Yeah, no, no, that's not how it works. That's just No. It was really annoying.

Karel Green 15:34

So I'm just gonna say the worst thing ever. But yeah, I am. So I saw people speaking about stuff this exact conversation on *bleep* and I'm gonna have to bleep out the word Tumblr. I'm so sorry. But that's where I found out about how a literally first... I hate myself. I literally like first proper proper like learned about this when somebody on Tumblr was just like no black people also, were sunscreen, asian people also wear sunscreen, because doctors are literally less likely to find melanomas on your skin because they're not trained for it, and then they linked something. And then I read the link and started screaming. So, I just hate my life. It's a whole it's a circle of bad. It's just this circle of bad from beginning to end because literally it's like you're, again, they're less likely to wear sunscreen because of bad teaching. And then doctors are less likely to find out or realize that they have a serious illness because of bad teaching. So..

Pruthvi Mehta 16:37

As a consequence, you have like you know, so the survival rate for a melanoma is 93% for white people, you know, and obviously like we all have in melanoma has been the worst of all the skin cancer but if treated and identified quickly has a pretty high survival rate, for whites I should add and for black people it's 69%. That is a huge, in especially terms of medical, You know, medical differences, it's a huge difference. It's massive. And yet there is so little work being done on trying to change that. I bet you if you went to any medical school, we open up any medical textbook, we looked at the page or melanoma, right, we have pictures of melanomas on white skin and white skin only. And that's something that needs to change.

Karel Green 17:18

Pruthvi, you talked about funding there. And I was going to say that. So things like not just like in general, but there are illnesses that disproportionately affect like people of color, not specifically skin cancer, there are other illnesses, and they're somewhere in these notes and I'm gonna find them. But if a illness specifically, a certain race or certain ethnicity or certain nationality, so say if it was specifically like Indian that they're more likely to be brown people so therefore a specific race, they literally get less funding for, for when doctors are doing research into finding a cure compared to illnesses that affect it either every one or more likely affects white people. And I just want to talk about that at some point. So just know I'm about to start screaming,

Sehher Tariq 18:08

I thought... I just I find it really frustrating that there's this stuff like this that happens where everything is just it's based on a white male person, like even even when studies are done is like when you have like a diagram in a medical textbook it is based on a male body and then also when you're being more specific is based on a white male body. So like, you know, like diagrams, pictures and stuff of melanomas and skin conditions and it's tends to be like white male as well. And it's really, I always find it really frustrating that medicine is something that can easily be changed. So like when we were doing our equality and diversity work at uni, we were finding it hard because we it was it was hard to identify what, what is wrong when it comes to physics. And it is quite, it's quite difficult to change and spot like the specifics. But when it comes to medicine, spotting the specifics is not hard. Like you can see that there's a problem with there's there's statistically the survival rate of melanomas, survival rates of other things, which I'm sure that we'll go into later on. That that is something that can easily changed by doing extra research. But why is it taking so long to get this research done? Yeah, that's just the main point I want to make. It's just really frustrating.

Karel Green 19:48

I completely agree. And I just wanted to bring up like anecdotally, there's literally because I bought one today. So if you have there is a new game out there. Everybody who has depression is playing Animal Crossing New Horizons, right? And in the game you can buy things to furnish your house because that's not something you can do in real life in this economy. So just how it made sure... which is how it cures your depression and in the game because I literally bought one I went to Pruthvi's house, her terrible terrible house.

Pruthvi Mehta 20:21

My house is lovely.

Karel Green 20:22

It's terrible. Anyway, there is a... I've forgotten what it's called, but like, you know, there's mannequins of a human body, right? You can buy one in the game...

Pruthvi Mehta 20:31

Anatomical statue.

Karel Green 20:32

Yeah, anatomical statue I literally bought one myself today because it was on sale and I was like I've gotta have it, and it's literally a white man. Animal Crossing is made by Japanese companies, it's a Nintendo game. It's literally a white man like it's everywhere. It's everywhere.

Pruthvi Mehta 20:48

All the default like villagers as well all the human villagers, are like have look like white people. I remember you told me how you couldn't make a character like in

the older ones, you couldn't have brown characters unless they were like literally sunburned, like

Karel Green 21:02

So, Animal Crossing New Horizons is the latest game in the series before then you could have character customization, but that customization did not include skin tones. So, you can not be anything but white in the game, which is why I refused to play any of them. I've literally only played this one where you can be black and you know what the black is probably around my skin shade, but it could go a lot darker. And it's not that great. So I'm just bitter is what I'm saying. But yeah, literally Animal Crossing. The only wholesome game you couldn't be non white until the year of our Lord 2020 right. God forbid, God forbid you want to customize your hair and your skin. But yeah, it's literally everywhere. And I just wanted to put that in because I completely forgot. And now I'm gonna have to throw that anatomical statue in the bin I guess. Because...

Pruthvi Mehta 21:54

Look at mine, I threw mine out. if you go to my house.... In my way I was like, damn, you know what I can't live like this.

Karel Green 22:00

I think that's the healing content. And that's how it cures your depression. So there you go, there you go. But yes, now that I'm done making everything about me and Animal Crossing, I'm gonna make everything about me and money. But the illnesses that are prevalent in POC have less research done on them. And illnesses that are prevalent in POC have less money awarded to people to research them. So obviously, that continues to compound on the problem. So I'm just screaming because that's just a literal research and shown trend in medicine.

Pruthvi Mehta 22:38

Yeah, I think I think honestly, it's like one of the most insidious forms of systematic racism in society because it literally is directly correlated with deaths of people that should be... the whole the whole you know, medical motto is first do no harm. This is active harm.

Karel Green 22:52

Yes,

Pruthvi Mehta 22:52

In my in my opinion, active harm. I think it's one of the worst forms. I mean, even just thinking about just to bring Miss Rona into the conversation. Even thinking about the, you know, Coronavirus. Have you seen the... So there are lots of GPS especially in London who are dying, who are contracting the virus from patients because they don't have adequate you know, protection and protective clothing. And so many of them are like black or brown. Have you seen this? Have you literally seen this? I think yeah, I think I don't want to like you know, say stuff which isn't right but I've literally like

all of them so far seem to have seemed to have been black or brown like this is it just goes to show you how the people on the front line are people of color and how they're just not getting any help that they need. And it's it's terrible. It's absolutely terrible.

Sehher Tariq 23:42

This this is something... like a really, really annoying point me as well, but everything's just annoying. But yeah. So recently, this is gonna link to media coverage as well because obviously there's going to be a lot of media coverage of the NHS, of all of these people who are contracting Coronavirus. But there is blatantly... the media is blatantly whitewashing the people who are contracting the virus, people who are suffering from the virus and the people who have died as well. So I don't know how many doctors so far but I know like couple of days ago it was like four people... four Muslim doctors, they were people of color. I think I don't want to say what ethnicities were but there were like brown men...

Pruthvi Mehta 24:32

One of them, one of them was Sudanese. I remember that.

Sehher Tariq 24:34

Yeah, that's, yeah. And so there wasn't much coverage of that. And most most people who were talking about it were on Twitter and they were like POC themselves. And then a couple of days ago, two nurses died. And on the front cover of, of The Sun... Well obviously like we don't expect anything from The Sun. No, we don't expect any good coverage, but they said that two nurses have died working on the front line of Coronavirus. And the only picture they put up was of the white nurse. They, they spoke about the fact that there was two nurses but the only picture and the only person they properly named was the white nurse and the other one woman was an an Asian lady, Muslim. She wore hijab she you know, like everything The Sun probably hates. But still she was a nurse and she was working with all these people and she unfortunately contracted the virus and died from it. But they didn't bother to even acknowledge her existence or, you know, which is... That these people are doing the exact same jobs as everywhere the white nurse every other white doctor, but they're not being a appreciated for it either.

Pruthvi Mehta 26:01

There's definitely loads of articles like that in the media which are, you know, racially biasing the truth about the victims of the coronavirus...

Sehher Tariq 26:10

Oh, I did, I did remember something else as well i think was The Mirror and The Mirror... Oh I'm not actually no, I'm not gonna say anything about the media because the media is all exactly the bloody same they're all like very biased. But they had like a... it was like a cartoon and it was like "thank you to our NHS workers" or, you know, like the whole, "you stay home for us so we can stay working for you"

kind of thing, that that whole thing that's going around and they had these cartoons of all the different roles in the NHS. And at first, all of them were white.

Karel Green 26:48

Oh..

Sehher Tariq 26:48

And then obviously people got mad.

Karel Green 26:51

Yeah...

Sehher Tariq 26:51

And obviously like, a lot of the NHS is made up of immigrants and people of color. So then they ended up changing it. Good, they ended up acknowledging the fact that they they did something wrong. But why? Why did they? It's just why are they thinking that everything that is coming out of the front line in the NHS? Why do they think everything is coming from white people? It's really frustrating like, Oh, yeah, okay.

Pruthvi Mehta 27:22

I completely on board with you because due to the nature of how immigration works and how POC came to this... people who came to this country, right? It's like the public... like cushy private sector jobs where we were, you know, you can work from home, right? A lot of the time especially for, you know, our parents, for example, like private sector jobs aren't just aren't an option, right a lot of the time like we have to go to go into public sector to work especially when, you know, it was say like the, the, you know, this period between the 1960s and 1980s is when you had a lot of low paying public sector jobs going to people of color, especially immigrants because that's the only thing that, the only jobs that would hire them not only take them on, and that's sort of trend had stayed obviously there are a lot of, you know South Asians moving into business and stuff like that. Right. But still very much you know, I have a lot of my relatives, are GPs... I know it's like haha! You're South Asian you're, you know, you would become a doctor right now. But literally a lot of my relatives work in the medical, in the medical field and right now I'm worried for them, they're like GPs seeing people every day,

Karel Green 28:28

I want to say so I googled and I found the official gov.UK page on the NHS staff workforce by ethnicity. And this is just the... So the way this reads, it's just the number one way of if you don't know how to read statistics, it can be really misleading. So, first, you read it and it says that by ethnicity, 72.9% white, 10% Asian, 6.1% are black and then for some reason Chinese is 0.6% and they're not including an Asian I'm dying. So it's already bad. Mixed is 1.7% and other is 2.3%. Right? So this is clearly like a big skew. And then if you scroll down a bit, then breaks it down by ethnicity and medical versus non medical, because there are a lot of roles, just random office jobs...

Pruthvi Mehta 29:19
Admin jobs...

Karel Green 29:19

Yeah, exactly. And that is still very white. But there you go, you know, they get the cushy computer jobs. And if you go specifically to medical, it goes from 79.2%. So basically 80% down to 55.6. Asian jumps up from 10% to 29.7. So they go 10% to 30%. Black goes down a bit, Chinese goes up to 2.5%. Again, I don't know why they're not included in Asian, I'm still dying, and the rest go up. So, if you change it from medical to non medical, the only one that goes down is white people. The other ethnicities go up. And...

Pruthvi Mehta 30:02
Exactly.

Karel Green 30:03

It's a mess. Because again, there's already like a bias in that for, especially for say top doctors, brain surgeon, people like that. There's already a bias in hiring, you know people of color are less likely to get hired across the board. That's just a fact. So these are already skewed based on the history of racism that's allowed people to get these jobs. And it's just like, 40... 44.4... somebody check that and 100 minus 55.6. But, you know, almost half the NHS is staffed by non white people. And, and you

Pruthvi Mehta 30:41
Exactly

Karel Green 30:42

It's a significant amount. It's not 0.1%

Pruthvi Mehta 30:44
No, no...

Karel Green 30:45

It's half, It's, it's half...

Pruthvi Mehta 30:47

Literally and like here's the thing, right? Because especially when you take into, when you... when you think about the like the comparison between the actual like wider population, right? Like what what is a massive majority you know ethnic majority in this country and I feel like when you look at the numbers of, I'll find actual stats later, we look at the numbers of people of color working in the frontline roles in medicine I'm talking about you know, day to day GPs, people who actually interact with sick patients, right not not high up cushy dean of medicine, you know, brain surgeons... like like dean of medicine type people, right? So you know, those people in you know, universities and staff who are basically the head of medicine or whatever, but

don't really work in hospitals, people like that, like not about those jobs, not talking about desk admin jobs, right. Talking about people who literally work with sick people every single day. If you look at the comparison between whites, people of color, people of color, right, you will see there's a massive skew in the percentage compared to the general population of that ethnicity of people or people of color working on the frontline medical, frontline medical work compared to white people. Like that's definitely something that's true. Especially for low, low paying roles as well.

Karel Green 32:02

Yes, I especially want to say so I'm not going to go too into specifics here. But there is a close family member of mine who had to go to hospital for a surgery they're completely fine, don't worry. But I want you to know that they had to stay overnight to recover from the surgery. And I kid you not, the day nurses were white. And then it switched to the night shift, because we went to visit them and then we were just like, you know, here's some stuff. See tomorrow. And literally all, when they switched over their shifts. It's like all of the blacks emerged to do the work. And all of the whites went home like it was significant. I was literally just like, wow, literally like this lovely. Like, all of them were lovely. Don't get me wrong, but there was literally like a nice Irish lady who's like young and she was like, Yeah, I've come to because I did a medicine, whatever. I'm working here now and she was literally just like this is Olu, she'll be your nurse for the night. And it was literally just like the the entire department went from staffed by exclusively white people, to staffed by exclusively black people. I'm screaming, and I think this might I mean, good luck finding stats on this. I think it might be a bit niche, but I feel like it's definitely...

Pruthvi Mehta 33:19

I'll do it. I'll do it. I'll find it, you know me, you can trust me.

Karel Green 33:22

I can count on you, you'll do this, you'll do the survey. You need to, I trust you.

Pruthvi Mehta 33:27

I'm out there right now, what you on about? I'm in hospital.

Karel Green 33:31

Of course, you're counting them. You're talking to them. I love you for that. But I can tell you right now, I feel like something that really feeds into this is that I feel like especially like you said, lower paying roles or undesirable roles, lot of people of color, get the night shift work, and a lot of white people don't so they see them less and then just feeds in that way. And again, this was based on my one time being in a hospital, but once is enough for me to be upset and it's my podcast so it's staying in and I'm just gonna continue to scream.

Pruthvi Mehta 34:04

And I think also I think the emotional sort of labor jobs also go to black woman like I, again this is anecdotal as hell, but I was delivered, I was an incredibly like preemie

baby. I was tiny, right. And I was in the ICU Ward Northwick Park Hospital in Wembley. And I met like all the like, literally all the midwives, there are black women. And I go back to the hospital, basically every year on my birthday to just say, thanks for saving my literal life, here is chocolate. And those nurses. Exactly. And those nurses are still working for 20 years, still delivering tiny babies. And you're doing very emotional, extremely hard, diligent work to make sure these kids survive like it's it's incredible. It's incredible how little recognition they get as well. And yeah,

Karel Green 34:54

I think roles are very... so this NHS works force thing's really good, because if you scroll down a bit further, there's like the broad grade things. So it's like very senior senior blah, blah, blah. And they're all like 90%. White, but like, there you go. Put that in. Yeah, but I also wanted to say, yeah, I think a lot of roles are just like, sectioned off, because I don't know like, I remember how to get blood taken at like a hospital instead of like my GP because again, I've got a chronic illness and I had to go to the hospital to get blood taken. And like that was literally like a room of blacks who have been stacked into like cubicles with some Asians and they were all just the nurses who took blood and I don't understand why that's a now I guess a black and Asian role. Yeah, it was very, very brown and very, very black like that entire room. It was lovely again, like, there is nothing wrong with how they acted. But it was very noticeable that literally all of the nurses who had to take blood in this place with just black I don't know why. That that weird. Very weird. But yeah, I feel like, again, and I think this would be known better as somebody who's perhaps doing a medical degree rather than three physicists. But there you go. Yeah.

Pruthvi Mehta 36:09

Frantically googling while we're talking here, which is, by the way, every single episode.

Karel Green 36:16

Of course, but they don't need to know that, it's staying in. But yeah, I don't know. I feel like there are random roles, which are just very, which we've just ended up being very people kind of Central that people kind of get given. That's weird. And I don't like that.

Pruthvi Mehta 36:33

I think a lot about how especially because it's again, it's sort of stereotype but a lot of South Asian women will work in a pharmacy, has anyone heard of that stereotype. Right?

Karel Green 36:43

Vaguely.

Pruthvi Mehta 36:44

And...

Sehher Tariq 36:45

I've never heard of that...

Pruthvi Mehta 36:46

Okay, well, basically, it basically... That's like, um, it's like a sort of, it's just like whenever at least one in London wherever I go to pharmacy, there's always if possible, it's always owned by like South Asian people. So it's always like... pharmacy. And they're always like, again, this is anecdotal, but I can say this. Like, they're always like girls my age who are, you know, who are brown or South Asian walking there. And you know, I think about what they might be going through this time because obviously, prescriptions still need to be filled. People still need to get their medicine, I think the stress must be incredible like for them as well. And literally thinking about it on the whole, like, the amount of stress now on the backs of people of color who work in the medical field must be like, insane, but I only hear stories by white women going through it in the news. So somebody tell me what's up with that. What is up with that?

Karel Green 37:40

Something I wanted to bring up. So dear listener, when we first, so we prep the episodes. I know it sounds like a mess, but we do actually prep things. And we wrote a load of stuff that we want to talk about in a whole document that we read from every episode. But guess what? We did not predict a global pandemic when we first wrote this. So there has been a lot happening in the last couple months that have not been prepped into this episode, but we're going to talk about it. We're recording this on April 5th. And as you may know, the world, the whole goddamn globe is on lockdown because there is a Corona virus going around. Miss Rona has arrived in the chat, and she's killing people. And because racism never stops. It's bringing out the worst in a lot of people. And we've talked about it a bit before this, but I think now is a good time to just go in and start screaming about how the Coronavirus this huge virus which is affecting everyone is just completely just bringing to the forefront the amount of just systematic racism in medicine. So who wants to... does anybody want to specifically scream about anything? Or should I start with my tweets?

Pruthvi Mehta 38:55

I just want to yell about how so literally right at the beginning the you know the the... you know the Coronavirus? The CORVID-19 disease started...

Karel Green 39:05

COVID not CORVID leave the Ravens out of this.

Pruthvi Mehta 39:09

Oh my god CORVID, I'm so sorry.

Karel Green 39:13

CORVID sweetie.

Pruthvi Mehta 39:16

COVID-19 started in Wuhan, China and you'd get like a lot of there was a massive amount of anti Asian and still is anti, you know, East Asian hysteria going around like there were... So people who don't know I go to the University of Liverpool and the Liverpool have a sizable Chinese community because well in part due to how the University of Liverpool have a sister University in China. And then we got emails sent around of reports of Chinese students being harassed by white students due to this entire mess and it's so sad.

Karel Green 39:52

In terms of specific because it's a medicine episode. I wanted to talk especially about like how a lot of stuff yeah, it originated in China, but there is like a very different work ethic, I think in the East compared to the west especially in East Asia. And a lot of this could be due to like literally just overworking like it's crazy and, Pruthvi you can put in like studies, but that the way that they they live it's just not something that is great and like I said, many... I have many East Asian friends who just like yeah, I've moved to the UK because I don't like the work ethic I couldn't live like that. Japan has a Suicide Forest, it's bad. And it was definitely like an illness of overworking people having to do these crazy shifts or risk getting fired and not being able to pay their rent, stuff like that. Whereas compared to the west, quote unquote West should I say, all of Italy okay has got like the most Coronavirus cases ever, spread the most most deaths whole mess. Nothing's been said about Italians, I haven't heard a bad word about any Italians and they don't deserve it. You know, I'm not here to say you should start being mean to Italians. But it's just the reality of the situation. And it's just it's it's culminated in just everything being the worst, because there is been evidence suggesting that Coronavirus does not survive as well in hot climates. So you're seeing things like South Asian countries not having many cases and African countries having not many cases, and just hotter climates will not have in many cases, and it's just it's a proven fact here's some real facts, right? People of color, historically have been more cleanly than non-people of color, which is what I'm calling white people now. And as we know from our previous episode, where we started screaming about the, the Spanish monarchy and how they just stank... It's just in those countries that it's just part of the culture that they wash their hands more and whatever else. I guess from the statistics, I can only assume that that's true. And now they you having literally French goddamn doctors, literal medical professionals suggesting the they should test vaccines for Coronavirus on Africans because the racism just never stops. So thoughts and opinions on that I'm desperately upset.

Pruthvi Mehta 42:30

It's disgusting. It's like they learn nothing from the horrors of like slavery and the medical experimentation of black bodies. They just like don't... we can't read all of a sudden this is totally you know, it's like the... it's not even willing ignorance at that point. It's just straight up overt racism like it's just so disgusting and insidious and I'm just ready to fight all the France.

Karel Green 42:51

All of France is cancelled.

Sehher Tariq 42:53

Of course, they haven't learned anything though. I don't really... like they just they constantly deny their their history and their role and anything, they just keep saying, oh, that wasn't aus that was... That was like, hundreds of years ago, it was a century ago. We didn't have anything to do with this. And then they completely deny the role. So how would they learn? They wouldn't learn their lesson. That's just not how it's gonna work.

Karel Green 43:19

Exactly. And it just goes to show how. So we have it in big, big old letters in here, but it's like, you have to realize the fact that like everything, literally everything made by humans has biases, and you can't ignore the biases built into modern medicine, because it's literally causing the death of people. And there are little health professionals who are just straight up racist. And yeah, that is terrible. That's literally horrific. But there's things in between that and it can be real bad.

Pruthvi Mehta 43:53

I think we've talked about a lot of the modern day issues circling around people of color and medicine. I think it's time to just talk about maybe if you want to the medic... like medical practices that I think it was touched upon by you, Karel, the whole cleanliness issue. But people you know the medicine that involved in you know, the global south in countries that people of color have hailed from historically, in our opinions, completely maybe ignored by Western medicine or co opted by Western medicine like does anyone have any thoughts about that?

Karel Green 44:29

Yes, I have a lot. So there's like two sides to this because there's the medicine that was like, like you said, pretty tested on like, bodies of color for white bodies, so they can survive and the people of color were used as literal test subjects, but we'll come to that later. Because there's been lots of like medicine throughout history done by people of color, right? And it's just been just completely ignored, or pawned off as is it psuedo science...

Pruthvi Mehta 45:01

Pseudo.

Karel Green 45:01

Pseudo, pseudo science and stuff like that. I'm absolutely screaming and good luck finding this link from what I'm about to say, because it's the most vague example that I can remember. There was this literal like East Asian woman who has won a Nobel Prize. And I can't remember if it was in biology specifically, or if it was in chemistry or something else, but I'm screaming because the prize was on like it was on a treatment for some illness. And the way she found the treatment for this illness

was that she went through ancient, I can't remember she was... I think she was Chinese but I'm not sure. She went through like ancient medical records, because she was literally just, oh, you know, since this year, there has been a load of cases and it's just been going up and up and up. How did they deal with this before then, and guess what, she did what it said, and it worked and she got a Nobel Prize. Like who would have thought that people who weren't getting sick, knew how to not get sick. And that that counts as real science. Even if it wasn't done in a university in the Midlands of London, like... of London. Wow. You can tell I'm from London. Big yikes, I'm going to stop now I've scalped myself. Yeah, loads of medicine, much like all science has existed outside of the West, and it's just ignored. And it's extra dumb because people are literally dying when a cure is written down for things, and they just don't want to read it. And I don't know why and I'm upsetti.

Pruthvi Mehta 46:40

They suddenly can't read and like... Just so I have more information for like the shownotes, so what... Has this woman being featured in like articles on the site.

Karel Green 46:53

Yes. Not on the site, not on the site, but if...there might be there might be more than one.

Pruthvi Mehta 46:58

Okay. Okay. No no I know but I'm just like as in the one specific person you're talking about. I'm trying to remember how you remember them. Does that make sense?

Karel Green 47:07

I don't know It's just in my brain. So...

Pruthvi Mehta 47:09

Th at's fair. I love that. Love it.

Karel Green 47:12

I'll find it. I'll find it. Somebody else speak.

Sehher Tariq 47:15

Okay. Yeah. Okay, I've got some points. Erm so yeah, building building on that. So I know that there's been a lot of, quote unquote, Chinese medicine, I don't know whether I don't know about, you know, the other countries around that area, around the area as well. But in terms of like South Asia, there has been a lot of medicine and a lot of work in terms of the, the food you can eat, and or that you apply to your skin or, you know, just stuff like that, that that helps with various illnesses. So, I'm going to give an example. So I'm sure you know about this, Pruthvi, as well, but erm tumeric milk.

Pruthvi Mehta 48:05

Yes, yes.

Sehher Tariq 48:06
That has been...

Karel Green 48:08
Turmeric has been completely ruined, I'm so sorry, Sehher. Turmeric has been ruined by YouTubers.

Sehher Tariq 48:24
You put up you put to work and you put it in milk. You have it warm and yeah, you're just cured. That's it.

Pruthvi Mehta 48:30
Yeah.

Sehher Tariq 48:31
just is what makes me mad like that has been like a remedy for like South Asians for four centuries, like

Pruthvi Mehta 48:31
Yep...

Sehher Tariq 48:31
And, and now, they've they've, they've taken it and they're like, wow, tumeric has so many health benefits. Let's put it in coffee. Let's do this. It's the golden latte or something like that. Yeah, there's so many super foo... hashtag superfoods. And all this stuff that that comes from other countries of color. And then white people just are just like, Oh, we've never heard it before. Let's take it and turn it into a trend. It isn't like that they're trying to look at the actual benefits of it. They're just like it's a trend. It's a superfood. And, and then that's it. That's it like it's people get sick of it like, like, how you're sick of it, how I'm sick of it. I don't I don't want to hear about tumeric lattes anymore. But it's something that's been part of our culture for ages and there's so many medicines that my mum has given me that is, it's like it's made out of herbs, it's made out of just spices and stuff like that. And they work better than any medicine I have got off the... over the counter, in pharmacy. There's just so many that's like that.

Karel Green 49:48
Yes.

Pruthvi Mehta 49:49
Like, here's a thing but the but but at the same time you'll have people in the West drink turmeric lattes while dividing all medicine, you know, developed in like Non Western countries as being pseudo scientific, right? Like yeah, turmeric is literally turmeric has been known to the browns for ages to be, you know, an anti inflammatory ingredient right? And again, we didn't really... we know we didn't give

it the name you know curcumin, that's the anti inflammatory property it has the anti inflammatory substance in it. We didn't know about that but we, it has been used for ages. Right? Because it's just it's been grown there it's been utilized. Like we've talked about this in the environmental science ep that people of color used the plants have herbs around them to like, you know, improve their lives and like nourish them and tend, you know, tended to them, because they were important to their literal everyday well being and they realized that I mean, ayurveda literally is... a lot of it is to do with nature, right? And you're completely right like even even even even for example, if if certain things are pseudo scientific. I'm not saying all of ayurveda correct, right? Like, I'm not saying that I'm not not being a proponent of that, but it's like credit where credit is due. Right? If you can't go around and co-opt stuff like turmeric and put in your lattes and stuff, while just pooping all over, in any way any medicine that was not developed in the West, you can't have it both ways. That's not right. You know, credit where credit is due for everything

Sehher Tariq 51:26
Exactly.

Karel Green 51:27

And I would also like to say so I found the woman I was talking about, her name is Tu, T-U, so Tu, and then Youyou, she was Chinese, she won a Nobel Prize for a literal anti malarial drug. And this was something that I was, I remember talking about how the idea of malaria being discovered by like a white man in the West when Malaria is spread by mosquitoes, and is more prevalent in hot countries where mosquitoes live. And again, I can't I can't remember I found it. And well I might find it again and just speak about in a minute, but like there were natives of a country who thought that malaria was spread by mosquitoes and they were right, because guess what they lived with them. Not crispy white man, Lord White from Kensington who travelled there. So I'm out here just upsetti, and she literally, so her and her team read over 523 books to find historical methods of finding malaria, because guess what, all of China has not died of malaria. So they must have dealt with it some way Big Brain moves over here. And when she started, they said that over 240,000 compounds have been around the world had already been tested without any success, she found a brief reference to one substance called Sweet Wormwood, which has been used to treat malaria in China around 400 ad. It turns out that the active ingredient in it fights malaria friendly parasites and kills them off. To be ethical, she literally tested this on herself, before she tested on anybody else to make sure it wouldn't hurt people. And it worked. And she saved lives and she got a literal Nobel Prize. All because like I said, this woman she has not she's not in the medical field per se. She's a lecturer in something, but she's not a doctor, and she does not have a PhD, but she has a Nobel Prize. So she's already better than anybody with a PhD. That's what that means. And it's all because she read what people did, and did it as opposed to just dismissing it because it wasn't from the west. And I'm just so bitter that they won't do that because again, it's morally wrong. It's co... It's costing lives and it's literally it's literally making science worse, because objectively she was right whether you care about if people live or not objectively she was right.

Pruthvi Mehta 53:58

It's funny you mentioned like malaria sounds like there's another there's another article on here, on the notes page, which talks about the development and production of quinine which is you know, very like important like anti malarial drug and how it was native like the the tree that it comes from is like cinchona tree in the Andes region of like South America. And how...

Sehher Tariq 54:24

I think it's in South Asia as well.

Oh, yeah. I... Oh, yeah, that's true. Because... Oh, yeah India... Yeah. And like the, so that that tree is native to to like South America, and India, etc. But it was like, when when the Europeans came and they colonized South America, they like they would, they all got struck down with malaria and stuff and this indigenous population just been using the bark of this tree to grind up and make into what would be known as quinine, right, just forever just using it. And it's weird how now we think of quinine... Like when I go on holiday to India and I'll take a packet of quinine with me and it'll be like tablet form. And you know, it's weird how people just won't realize that's actually due to the indigenous people who lived in countries in the global south as opposed to white pharmaceutical companies. And there's a there's something we talked about with regards to how white people produce a control the means of medicine production, right? I feel like back in back in, you know, ancient India and ancient other global South cultures you wouldn't have the whole way the whole way like capitalism feeds into the medical industry, which is the monetized production of all pharmaceutical drugs or just like, you know, drugs in general. Like, I feel like you... you hear horror stories about how insulin the price of insulin in the US is just hyped up to ridiculous standards, when so, such a good... massive percentage of the population are diabetic or like type two diabetic and need it right. Like you are... I feel like if, for example, let's just say it was like, you know, if if the same sort of draws of stature were initially developed in countries in the global south, it would be it would be a lot more democratic as to how the medicine would be distributed. It wouldn't be so capitalistic IMO. But yeah, what are your thoughts on that? I just wanted to bring it up.

Karel Green 56:22

I definitely agree. And I think you say it. You said how, if it was sort of produced in that or discovered in the global south, it wouldn't be so capitalistic, but that that doesn't stop capitalism. Because let me get... Let me tell you. So I've got an article open and I'll put it in the show notes about the discovery of honey and the penicillin... not honey.... of hydrogen peroxide and penicillin, which are both like can kill bacteria, and they're used for like to treat infections, right? Because this was something else that I learned early on in my diversity journey about the way that things are just co opted by the West, because they're... I remember somebody saying that ancient Egyptians used to rub moldy bread because it has this thing that could be made into penicillin, but obviously just not as concentrated in it, to treat

wounds. But penicillin was discovered in 1928 by Sir Alexander Fleming. And I was just like, Well, no, it wasn't because if the Egyptians were using it, then they discovered it, but because it wasn't by white man in the same sentence, they don't see how that connects. And it's so messed up because, so like the article says here, more than 2000 years ago, moldy bread was used in and get this: China, Greece, Serbia, Egypt and other ancient civilizations as a treatment for some disease, for some disease conditions, especially infected wounds. And in 1550 BC, Egyptians used to use honey and lard as and lint for dressings on wounds. Because of a Honey, and all those other things contain a reasonable amount of hydrogen peroxide which can kill bacteria and keeps the wounds clean, right. That's why people who quote unquote what's it... search through the pyramids, were finding things preserved in honey, and could literally still eat it today because honey is so good at preserving things, right? And then you Google the words discovery of hydrogen peroxide. You get Louis Jacque Thenard discovered hydrogen peroxide in 1818. And if you just like I said, if you google discovery of penicillin, you get Sir Alexander Fleming, a Scottish man discovered it in 1928. Now I'm just like, so what's the truth? Because all you're saying is, what is the truth? Because like we said, you know, if you don't have a specific white man who's discovered a specific compound, in a lab in the West, it's not counted as discovered, even though literally every brown on the planet has been using it for centuries. So the whole tea is that it doesn't matter where it was found, because until a white man quote unquote, verifies it in the lab, and then gives it a Western name...

Pruthvi Mehta 59:09
Exactly...

Karel Green 59:10
Puts his name on it, it doesn't count as a real thing, even though literally people were doing it before then. And then they decided to bottle it up and sell it. And then it becomes the type of capitalism. And in the worst examples, you get America where the health service isn't nationalized, and you have to literally pay to live. So that's my thoughts. I'm just out here, and I'm upsetti. So I'm also going to put the link in the show notes about how some how egyptians worked out that penicillin and hydrogen peroxide, were in these literal natural things. And lots of white men in a lab. So there you go.

Pruthvi Mehta 59:49
It's really interesting how you mentioned how like the naming convention of so many, you know, basic medical procedures that we take for granted. How like the name influences like how you think about where they originated. Like if you ask like a random person on the street where like C sections come from, the word cesarian, you know, that they has clear you know, Western connotations whereas you know we we've done research and it's in the notes but how c sections were developed in you know ancient African nations, African kingdoms right so

Karel Green 1:00:20

Yeah

Pruthvi Mehta 1:00:21

Apparently on Bonyuro Kingdom in western Uganda, a huge really powerful Kingdom in in I think in circa... like basically that this massive Kingdom lasted from the 13th century to the 19th century. Um, and it basically it basically says how a in 1879, a Scottish anthropologist went to this kingdom in western Uganda and like, basically absorbed like what is essentially the, like, the first c section ever witnessed by a Western doctor. And so basically stands to reason that they were doing this like since they began since like, you know, 13th century since this like Kingdom began, but basically the, it was the first c section ever, like really, really just vital procedure to help aid the birthing process of a lot of women around the world because a lot of them just can't give birth through vaginal, em, you know, normal the normal vaginal process. If You know, there's a C section that was discovered and was in like, in western Uganda, in Africa. And that's just something people don't know. And it's important to know that because it's just, you know, a lot of people, especially now I think, are choosing to have c sections because labor is just hard.

Karel Green 1:01:38

Yes.

Pruthvi Mehta 1:01:39

Yeah, Like more people having c sections, because they just, they want an easier delivery. And it will, and I honestly think it's going to become quite normalized as well. I think less people are gonna want to have that natural quote unquote, birth and this is... is the foundation of it started in Africa. And that's something think about and know.

Karel Green 1:02:01

Yeah. And that, again, not taught in schools who have taught us standard. It's only the West that you've heard about. And that is, again, the white men who made the curriculum, didn't want to put in the truth. They just made them look good.

Pruthvi Mehta 1:02:18

Correct.

Karel Green 1:02:18

It's both factually incorrect and morally wrong. So whatever stand you want to take, it's bad for both. So if you care about pure facts, as you should, as a scientist, you care about decol... decolonizing all of these things because it's literally putting the facts back into the science. And if you don't, which is good, you should care about people and therefore, you know, this was lying, and you should, you shouldn't do that. So I completely agree.

Sehher Tariq 1:02:46

Ancient surgical procedures. So the... So medieval Islam so you know, that golden age of of Islam, and the the education that they were going

Karel Green 1:03:02

When they invented astrophysics, correct?

Sehher Tariq 1:03:04

Yeah, basically. So they had, they did a lot of stuff in the medical field as well, obviously. And one of the things that they they pioneered was eye surgeries. And one thing that they did very, very well, I don't know whether it's the first the first people that did it or they just put like, I guess, like, improved upon what had already been written in like... by other cultures, but they were very successful with cataract surgeries. And so they basically they, they made their own syringe, and they would insert that into the eye and then take out the cataract using that. And they they did it so well that it was it was it was pretty, I guess it was quite commonplace in culture that that point that that the you could do cataract surgery. And I don't know, like what what Western society says about cataract surgery or not but this is just an example of you know, people of color who use like that education and you know, developed something that was that is so essential today. And they did a lot of other work on optics in physics, but also just let you know, general medicine as well. But But yeah, that's just another example that I thought of.

Karel Green 1:04:35

That's excellent. I didn't know anything about that, and...

Pruthvi Mehta 1:04:38

I'll make a note of that.

Karel Green 1:04:40

Yeah, and that shows real like medical, because obviously nothing's easy in surgery, but something as delicate as eye surgery that isn't just taking out the eye, like actively fixing cataracts, because I think it's a fairly standard procedure now, but it's not easy because it's literally an eyeball. Like, yeah, that's crazy. I

Pruthvi Mehta 1:05:03

Lot of people have lost the sight like Exactly. It's very, it's a very delicate surgery...

Karel Green 1:05:07

To be able to do that shows that they guess what their medicine must have been on the standard day is today for it to work so, and on the same thing about talking about how Egyptians used to use penicillin and hydrogen peroxide, it says there is a surviving piece of text called the Ebers papyrus, E-B-E-R, which date back to about 1515 BC is the oldest preserved medical document ever. And it contains a list of formulas and remedies to cure illnesses and afflictions ranging from pains to cancer. So back in 1550 BC, they had effective treatment for cancer, which means that they knew what cancer was and was able to, you know, stop it in its early stages, but I just

want I wanted to put that in because I read it and I'm just deeply upset that this has just been ignored. I'm...

Pruthvi Mehta 1:06:04

I think, before we may move on to the solution section, I think there's like a one aspect of health that is so often ignored by the public by even, you know, supposed the health institutions not as a topic of mental health and how that disproportionately affects people of color. So, does anyone have any thoughts about that?

Karel Green 1:06:25

Um, I have a lot of thoughts. I, I think this so I do... I know we are talking about mental health now and it needs to be talked about but I'm going to wrap it into physical health as well. Because just mental health and especially mental health and people of color is very different from the generalized mental health and physical health which is built for generally white men right, right. And this so... if I quickly do a physical health, but before we move on, I wanted to talk about how specifically like South Asian people are high risk of type two diabetes and insulin resistance and how specifically black women are more risk of dying in childbirth due to like racial biases in medicine. And I just wanted to say that and say how much of a mess it is. Because, again, I don't know why this happened or how it happened. But it turns out that all South Asians are just susceptible to type two diabetes. So it's just coming for you two I don't know what to do.

Pruthvi Mehta 1:07:29

The role of the role of genetics and medicine, especially in regards to race is not fully fleshed out. And there doesn't seem to be the interest of medical profession to research it like I mean, I literally forgot to mention this I said I was going to but I just didn't, but the video I was watching before we started recording was about how erm so.. You all know that omega threes are good for you. Right? We all know this. And we all know that in general stuff like vegetable oil is better for you than maybe some other types of fat. But what isn't known is that isn't that widely known is vegetable oil, the fats in vegetable oils sort of act differently in the bodies of... Actually, I think they did this research on on basically people of color who like kind of hailed from like the African subcontinent. So you'd have, they basically did some tests and they realized that the vegetable... that the empty intake of vegetable oil as a cooking oil just saw inhibited the omega three production. And it's sort of basically pointed to the fact that vegetable oil isn't that healthy for people of color, especially black people to consume, as it might be for white people. And think about how often vegetable oil is used as a cooking oil in homes throughout the UK. Right. Like I said, we just use like it's not it might not be that good for us, but there's not been any research put into it. I mean, I know that when when I was growing up sunflower oil was the one thing that was being used constantly like we didn't even use ghee that much. But we use a lot of sunflower oil and it may not be great.

Karel Green 1:09:14

You didn't use ghee because ghee was only discovered two years ago by that youtuber who did a whole video on how good ghee is for you compared to butter, so I don't know...

Sehher Tariq 1:09:25

Wow, I'm gonna I'm gonna need a link to that... I clearly didn't know that.

Pruthvi Mehta 1:09:30

It'll be the only thing...

Karel Green 1:09:31

I've got it pre prepped. I'm gonna find it.

Pruthvi Mehta 1:09:35

Why are white youtubers just coming for all of us?

Karel Green 1:09:41

Pruthvi you you find it because actually you sent it to me. So I...

Pruthvi Mehta 1:09:44

You're right I did. I'm so sorry.

Karel Green 1:09:45

I forgot about that you sent me, you sent me that.

Pruthvi Mehta 1:09:49

I think another thing is that... I think another thing that like I would actually want to say and I think put in the notes is the fact that I think we've talked about this before, Karel, in that... I think all of us actually talked about it. We've talked about how the shift of like people of color when they immigrated and coming into like Western landscape and coming into contact with like, the western concept concept of food and especially fast food, and like the adjustment to that to from their like home cooked diet to this might be a causal factor and how you know atherosclerosis and heart disease disproportionately affects people of color. And I think that might be a thing, because, like a lot of research has been done into, a much... a fair amount of size has been done in to the eating habits of like South Asian people, for example. And they couldn't find anything inherently unhealthy with the food that was eaten. Like ghee isn't great, but it's used pretty sparingly. Your Indian sweets on my fridge just sugar and ghee compacted into little balls, but they're also eaten really sparingly like the main components of the diet are like vegetables. Like whole grains and maybe some yogurt on the side, and lentils and you know daal, right? And they couldn't really think of anything that would be causing these these health problems in specifically you know South Asian people, and when it came down to it, they were just like... You know, I think one thing that isn't researched that well is that it might be linked to the shift to a Western culture and a Western, like, fast food diet. And that was that... I can't remember it because I think we've I can't remember, I can't

remember, We definitely talked about it before, but there's this um, this region is... I think, an island nation. Yeah, it's an island nation. I don't know which one it... which one it is, but they basically relied for millennia on fishing and home cooking, etc. Then, recently, like a bunch of fast food joints from the west, McDonald's what have you have opened up in that region in the world, and the amount of diabetes and heart problems and just general bad health has just skyrocketed in that region. And,

Karel Green 1:12:04
Was that this country...

Sehher Tariq 1:12:06
Oh, oh, I think I remember what you're on about... Oh, was it was...

Karel Green 1:12:11
The infographics show. That's where I learned about it.

Pruthvi Mehta 1:12:14
Yeah, that's where I learned it too.

Sehher Tariq 1:12:16
There was... No, there was something else that... Oh, what was it? It was Hasan Minhaj... Obviously, all my information is from Patriot Act, by the way. He talks about I think it was Samoa. One... one of those ones, the poly... one of the Polynesian islands. And they... America shipped turkey tails like you know, the link between the turkey's tail and the body. There's like that one little bit there that people didn't want to eat in America. So they ship that over to one of those, the lets ju... like a Polynesian Island. And then people start growing a like a slight taste for it, they liked it. But then because of that it started like a bit of an epidemic in terms of obesity and health because it's so fat, like that bit was so fatty. And because they... America and their corporate greed and all that, they they were like they just kept sending over. The government ended up banning the the turkey tails because because it was causing such health problems. But then the US said, I think it was something like basically we'll put sanctions on you if you don't, or we'll change our trade agreement if you if you don't take these. So then they basically pressured them into taking the turkey tails and like ruining their diet.

Pruthvi Mehta 1:13:49
Oh that is disgusting.

Karel Green 1:13:51
I'm so upset.

I think also I remember the name of the island... Well, I actually didn't remember it, I looked it up but it's called Nauru, if that rings, any bells? I'll put that in the notes and I'm going to find find the turkey tails one now because this just... That's so sad and

disgusting how they just push this off cut this off cut of meat that they just didn't want in the in America to this poor little country, that's so sad... Oh God.

Forcing them to take it as well...

Sehher Tariq 1:14:18

I think like another point on the whole like the diets of of people of color is just completely different, when it comes to dairy like some... like we all know that when it comes to like people who aren't Caucasian... they it's very difficult for people to digest milk obviously like I'm completely fine with milk but I've got some family members who who really don't react to it well to it. Karel, your... you've got an issue?

Karel Green 1:14:55

Yeah my biggest allergy of them all.

Sehher Tariq 1:14:58

Yeah. So like, it's just just from that, that the dairy and the intolerance that is so prevalent in terms of it with like people of color, you can just tell that there's a complete difference in the way that our bodies react to things over, you know, centuries of having a certain diet, but they don't, they still don't want to tailor the medicine to accommodate that. And a lot of the drugs that they develop that that those are developed for white bodies as well, so, and they don't test they don't really, as far as I know, they don't really test to be specific about the race of a person to accommodate for the race of a person. So yeah, so just another reason why everything's going backwards and like just one simple thing of people being dairy like lactose intolerant and stuff like that. That's it should show you that you should do more research and... but they just don't want to.

Karel Green 1:16:01

Yeah. And another thing I wanted to say is that as somebody who is that person intolerant, I'm just upset all the time. But also I wanted to say that, yeah, it's so right, because it's so regional. And it's so shows how like, white standard is considered default for everything. And it's really messed up. Because if you do the research, you'll find that, in fact, a majority of people on the planet are lactose intolerant. Because it's only white people who really needed to drink dairy for whatever reason, right? So the fact that I'm lactose intolerant, it shouldn't, I shouldn't be called a person who's lactose intolerant. Everyone who can digest milk should be called lactose...

Sehher Tariq 1:16:43

Lactose tolerant. Yeah...

Karel Green 1:16:45

Because it's a minority of human beings who can digest milk, right?

It is so and it's just, you know, it's it's, it's not a big, it's not that big a deal. And people can deal with it. It's fine, but it just goes to show how just ingrained in society it is that the white default is the default that we live by whether it's accurate or not. Because most people can't eat dairy but I'm a lactose intolerant person when I'm in the majority. I shouldn't have a... I have other allergies but this shouldn't be an allergy, the fact that people can eat dairy should be like a I've forgotten the word but like a difference and it isn't and it's a whole mess and I'm yeah...

Sehher Tariq 1:16:50

Such a good point.

Pruthvi Mehta 1:17:11

I'm completely there with you like the like the the the dairy industry in the meat industry I like to goddamn prongs of like how like Western food has taken over and the fast food industry and just like, actually three things, that the way they've you know, the the western food market used to like kind of push this like globalization of Western food onto everyone it's it's really gross it's really bad and it really messes up the health of a lot of people of color around the world and it's it's disgusting.

Sehher Tariq 1:17:56

Yeah, yeah, I can I when I went to Pakistan last year, you could tell the massive difference from when I went from, like the time before. So the like the time that I went before that, they had McDonald's and stuff like that, but that was basically it in terms of fast food. But then this time, everything's just completely exploded like takeaway is so common now. Whereas the, you know, most of the time, it's, it's people making home food, it's mostly vegetables. Obviously, they have meat sometimes, but that used to be for special occasions. But now meat is like so prevalent. And that's because of the, like you said, it is the importing or exporting of the the Western diet. And that's just it's not going to be good for their health because they're not, then that just isn't how they.... everybody's systems have developed in those countries.

Pruthvi Mehta 1:18:57

Yeah, yeah, completely. Completely true. Completely true. Um...

Karel Green 1:19:04

I erm... Yeah. So I just quickly googled it. And I just want to say that approximately 65% of the human population is lactose intolerant. So there you go.

Pruthvi Mehta 1:19:12

Wow. And so we have...

Karel Green 1:19:13

In brown countries it ranges from 70% to 100% on average. Okay. Yeah. So I was right.

Pruthvi Mehta 1:19:20

Yeah, you're right. And we are and we are lactose tolerant and you are normal.

Karel Green 1:19:27

Correct. Goodbye, weirdos. Milk like a regular person. Good night. Um, yeah. Just last quick two things that I wanted to mention something. Again, we talked about, like human experimentation. I quickly want to bring up the Tuskegee syphilis experiments because they're terrible... And where they literally just took black people and gave them syphilis to see how it spread in the body, such that the whites wouldn't die in America in goddamn Alabama from 1932 to 1972. So, and that 1972 wasn't that long ago and my parents were born before then. So I'm upsetti. And then quickly, quickly before we go back to the syphilis experiments, because they were so bad. I wanted to mention how when I said that black women are more at risk of dying in childbirth, it's not because of any inherent difference in race that isn't being studied, is the cause. First of all, they're five times more likely than white women or I see women people who could have children biologically, they're more, they're five times more likely, because doctors don't... they don't... whether it's subconsciously or not, they don't care about the pain of black people compared to white people. And it's a literal studied because one black woman had like a septic infection and almost died and then got the study on and it was all over the news. And that's where this all came out that black women are five times more likely to die because doctors just don't care, I guess about black people who give birth. So know that. Know that it's not always about like genetic differences that are not studied, you know, science is being made worse by people actively not doing it properly. So yeah,

Sehher Tariq 1:21:23

It hasn't to erm... It happened to Serena Williams, when she was when she was giving birth to her child. And so she I can't remember what the exact thing is called. But it's basically I think it's like a clot that or, like when a woman gives birth, there's there's a chance that she can develop really high blood pressure and that something that leads to like clots or something like that. And she was feeling... she knew that she was feeling the symptoms of that. And she kept saying, like, take me for a scan, take me for a scan and they were like, no, we think you're fine, we think you're fine. Obviously these are like white nurses and doctors. But then she kept having to insist it. Look, I'm having these symptoms, you're gonna have to take the first scan. And finally after so much asking, they took her for a scan. And they found out like, Oh yeah, she actually has this condition that that, you know can occur after childbirth. And then she like it... It really wrecked her for a while. Yeah, but yeah that

Karel Green 1:22:31

She has that privilege of being a well known, rich, black person.

Pruthvi Mehta 1:22:35

Exactly.

Karel Green 1:22:36

Everybody else just dies as shown by the statistics.

Pruthvi Mehta 1:22:39

Yeah. It's horrendous. Absolutely horrendous.

Karel Green 1:22:43

Yes. So that was just extra bad and this probably... that and along with, I'm just gonna keep bringing things up. I... HeLa cells are probably like the most common and worst examples of human experimentation on black bodies for white bodies where they legit just took 600 African American men 399 were given syphilis, 201 did not have the disease, they were a control group. And they just made them live like that, to see how it would go. They were legit... they were given free medical care and meals and the free burial insurance for participating in this study, because they're not human enough to be considered not to not to give syphilis to. But they are human enough to make sure that white people can check out spreads to make sure that they don't get it. So that's what happened. And...

Sehher Tariq 1:23:38

I think they they didn't know that they were being part they were part of the study for about, I think, for quite a while, like they, they knew there would be they, they were being part of the experiment and then the funding was cut for the experiment or something like that, and then they continued to study them, even though they didn't know it, I think that's what it was.

Karel Green 1:24:05

That's disgusting.

Sehher Tariq 1:24:06

I'll have to look that up. But yeah, carry on.

Karel Green 1:24:10

I'm just reading the wiki, it says that they specifically targeted impoverished African American sharecroppers. So, they specifically went for poor people that they knew would be like, willing to do anything for money. And I... didn't tell them everything properly, like you said, didn't definitely didn't pay them because all the money got taken. And I'm just out here screaming. Same goes for HeLa cells. If you don't know there was a woman named Henrietta Lacks who has what is known as like the worst cancer ever, in that cancer cells are cells that constantly split. And even though people have cancer cells, usually they die after certain amount of time. To this day, her cells keep splitting and don't die off not really known why. It's used commonly in like medical labs for testing other drugs on for things, because they have like the cells now that they can use as control study, they were taken from her body without her permission before she died. She was in a... The coloured wing of a hospital. I can't remember... there's a whole article on her on our website, the first one I ever wrote. So, good luck. You can read all about that there. There's a whole movie and

everything. But the main point, the main point here is that the fact that she was alive in like the 60s and 70s like it wasn't that long ago, it was within the 20th century, and her literal grandchildren and children are still alive, and they are too poor to afford medical care in America, and her cells aren't free. If a university wants to use to study something, they have to pay somebody to get some, they have to pay somebody to grow some more. And her family is too poor to afford the medical care that has been made available via her cells. So just know that it's a whole nightmare. And I'm out here screaming because you Medicine has been a whole mess throughout history. And I just wanted to put those in, before we went on to mental health which is a whole other can of worms...

Pruthvi Mehta 1:26:07

No, those those are those are really, those are really good, really actually really important ones to touch upon because they really just encapsulate how, how unfair and how racist the system system is. And in not that not even that long ago, this was happening and the childbirth the the the, the rate of death during childbirth for black woman is still very high and nearly happened of Serena Williams so you said, is a, you know, privileged... You know privileged in the sense that she is rich, and well known and... it still nearly happened to her and it's just like god, god damn everything's still absolutely horrendous. Um, so yeah, thank you for bringing up those points.

Karel Green 1:26:48

Yes. Can I say I googled it. So her child's name is Alexis Olympia and she's two years old. So this happened in 2018. What's...

Sehher Tariq 1:26:57

Yeah.

Karel Green 1:26:58

So, that was recent. Literally two years ago.

Sehher Tariq 1:27:01

Can I just clarify the bit about the Tuskegee experiment? So I'm on the Wiki as well and it says, the, this is quite what I guess, like quite near the beginning. So like, pretty important point. The men were told that the study was going to only last six months, but it actually lasted 40 years. After funding for treatment was lost, the study was continued without informing the men that they would never be treated. None of the men were told that they had the disease and none were treated with penicillin, even after the antibiotic was proven to successfully treat syphilis. They basically let them suffer, even though knowing they could easily be treated.

Karel Green 1:27:46

Yeah.

Sehher Tariq 1:27:47

And they were never told that they were just going to have to live with the disease.

Karel Green 1:27:51

And I've googled it. And it's, I think, I think the general consensus is that it's curable, if you catch it fairly. And if you don't it just progresses and eventually kills you because as far as well this NHS website says that the symptoms of it are like sores and ulcers and your you get a blotchy rash. You get skin growths, white patches in the mouth, and then you get like tiredness, headache, joint pains and a temperature and stuff like that. So, those would just continue to go on until you eventually pass away. So if... Yeah, and it says "if it is left untreated for years, syphilis can spread to the brain or other parts of the body and cause serious long term problems". And it was left for 40 years. So all these men were just killed. That's what that means.

Sehher Tariq 1:28:40

Yeah, it was basically murder.

Karel Green 1:28:42

Mm hm. And that was that was okayed by the American government. So okay, I'm... I derailed that a lot, but

Pruthvi Mehta 1:28:50

No, no.

Karel Green 1:28:51

But you said, mental health is important and we are going to speak about it because I support mental health. Equally important.

Pruthvi Mehta 1:29:00

Again, thank you for bringing up those points. It's like it's weird how like, we're just like we would... like, you know, like, okay, let's move on to mental health and then a whole load of worms just came up and we're just like, Okay, you know what, we have talked about this, this and this because you're right, it is very important. And, you know, even though it's not like, you know, we, like I didn't want to miss out anything that we've written here and other stuff that people wanted to say. So it's really good that it was brought up. Um, so thank you. You did not derail at all it was really important to bring up and I want to thank you for that. And yeah,

Karel Green 1:29:35

Thank you. So now mental health, the big old... the bigger kind of worms, which in the West has only recently been cared about but I assume, like most other things has been cared for, significantly throughout history in countries of color, no doubt. But yes, let us talk about mental health and how it disproportionately affects people of color. I don't know, I feel like generally in families of color, I guess there is not a, not much of um... People don't care as much about mental health, it's not on their radar as much. I think a lot of that is due to just the times that people grew up in, especially times before now it's not great now, but especially was especially bad, even like 34

years ago, as we can see from the syphilis experiments, which ended in the 70s. I'm, yeah, still angry. And if you're dealing with severe poverty, and major, you know, major racism in the country that you have been shipped to, as God damn slave or whatever. I imagine that people, not that people didn't have mental health issues, having a serious medical condition... For example, major depression, where people can't even get out of bed. I don't imagine they have, they would have fared worse than they did now, because people will literally like we have to work for our pennies so we can pay for food. And I think that's just been a part of the quote unquote, culture of people of color, because they have been oppressed so badly, such that even people in our parents generation don't really know much about mental health because they quite literally didn't have time for it.

Pruthvi Mehta 1:31:33

My parents say everything to do with mental health, can be sorted by praying and sleeping. That's it.

Karel Green 1:31:44

The sad thing is that's not unique to your family.

Pruthvi Mehta 1:31:47

That's... Exactly. It's not, it's not unique and it's literally it's most... It's a really pervasive attitude. And it's, it's, it's borne out like you said from the fact that when you know when you are a person of colour who's recently immigrated to another country. You're having kids and you're dealing with the racism and all that bull****, it's like, you'll be... like my parents were probably depressed as hell when they came over to this country, right? They just didn't know it. They just didn't know because no one told them hey, this is a thing. I know I'm like, you know, I know there are mental health issues in my family but are just not spoken about or talked about or you know, addressed or even thought about treating or seeking help for because it's not seen as something which is a real thing and and and an option for a lot of brown and black people. Like

Karel Green 1:32:29

Yeah.

Sehher Tariq 1:32:29

Yeah.

Karel Green 1:32:30

Like the sad truth is, is that you have to have a certain amount of privilege to have mental health treatments. Yeah, that's just what that is. It's the life we live in. And historically, people of color, who are oppressed, do not have that privilege.

Sehher Tariq 1:32:47

I mean, even even people... like the NHS is so bogged down. Like this is before Coronavirus, as well. But yeah even it's so bogged down that even people who do

have the privilege of getting the mental health treatment that they need, even they can barely get it. So, people of color who who are suffering, they're less likely to get to get any treatment either.

Pruthvi Mehta 1:33:18

And there needs to be a difference. There needs to be like a difference with regards to how mental health treatments approach people of color versus white people, right, because

Karel Green 1:33:27

Yeah...

Pruthvi Mehta 1:33:27

Because I would much... I would, I would much rather, like there's a thing, I don't want like a white woman or man therapist, like I want a woman of color as my therapist, right, because a lot of the issues that I have, if I was I go to therapy, would be so... A lot of them will be centered around the lived experience of women of color. And I feel like that will be the case for a lot of people of color in general, right? Like, you want a mental health professional that understands your background and why your mindset might be the way it is and race plays a part in that. And you know, we'd deserve more women of color who are mental health professionals. But due to how the system is just racist as hell. They're few and far, far, far between. And it's really bad.

Karel Green 1:34:13

Yeah, I've seen exactly like, women of color on Twitter. So there you go take that, as you will be talking about how they gone through several therapists, because they go to a therapist, talk about their life and their lived experiences. And these are usually steeped in the color of their skin, because that's what life means to be a person of color. And especially with like a white woman, they would try and be like, Well, yeah, like I understand your oppression, because I am a woman. And but clearly this isn't as bad as you're making out to be, but there's a difference between your mental health doing that and like a literal truth. And so they've had to change therapists because they're just like, no, this white woman doesn't understand that even though we are both women, the fact that I've experienced like gender bias and racial bias, like said you racialized gender bias, it's a separate thing. It's not the amalgamation of racism and misogyny, it's a separate thing, misogynoir, and it's really important to have like a mental health professional who recognizes that, especially for like, major health issues. I'm not part of the group I'm about to talk to. But I was going to talk about specifically like LGBT plus people, and throughout history and today and essentially obviously they're not getting the help they need a lot of LGBT plus people have major health issues due to being forced to hide themselves their entire lives. And then I also wanted to say how especially specifically like non binary trans people and intersex people have existed throughout history, in loads of cultures that aren't European. Completely fine, without any issue, right? And a lot of medicine, like bigs up how we have gender confirmation surgery and stuff like that now, because

it's been done in the West. And I'm just like, no, sweetie, everybody's been fine everywhere except for Europe for all of time. So I just Yeah, I thought I'd just say that. I don't know if anybody has any thoughts, but I just wanted to say that especially LGBT plus people, many cultures that aren't white have had them just ingrained in their culture because guess what they are human, and are common in the human population, and have always existed and have literally always been fine except for in Europe. So that's the tea.

I can't like... I literally can't imagine how hard it must be mental health wise to be an LGBT plus person who is also you know, growing up with a, in a traditional, you know, family of color, right? Like because it's like, it's just it's... with regards to like personal identity and mental health and everything in a pair of parents and color, I'm just putting "of color" on everything now. Just don't just don't, I don't know there's just there's a disconnect because of how badly they were treated badly and neglected their own emotional needs were sort of like, they can't seem to, you know, they want to, they want to protect their child from any sort of like, they want to protect their child from any sort of deviation from, what is the standardized norm, because they feel like it would it would expose them and hurt them and then hurt the family. Right? And it's sort of like it's like, it's protection in the worst sort of smothering terrible way. Because in some, in some ways, it stops them getting the help they need with regards to mental health, and regards to like sexuality and gender identity, it'll it'll stifle that too and do and do so much harm. And there's just a lot to unpacked there. And like, I'm not I'm not a member of the LGBT plus community. I don't... I can't speak on what that is. But I know it's just it must be so hard. And I go my heart goes out to like brown and black, like gay kids just living in a traditional like family unit with like... I already lie so much to my parents about like basic stuff as like a fairly privileged straight. Like Yeah, I can't imagine I cannot imagine.

Yes, yes. The entire mess...

Pruthvi Mehta 1:38:30

Mum and dad, please don't listen to this podcast.

Karel Green 1:38:33

Pruthvi, the entire mess that is your life cannot be exposed on this podcast. I'm going to veto anything you say. And then move on to solutions before you literally get murdered.

Sehher Tariq 1:38:45

Oh, I was gonna talk about Caster Semenya.

Karel Green 1:38:53

Oh, yeah. Yeah, say it.

Yeah, like it was just because what they did to her was very very unfair. So, if nobody knows who Caster Semenya is, she is an athlete. She does the running I think she

does the 800 meters. Yep. On the wiki page it says 800 and 1500 meters, and basically she was... She's intersex. She was born intersex, but she is... She was raised female. There's, like just, she's female, that that's it. But just because she was born intersex, she has higher testosterone levels. So the athletics committee, Olympics committee, I can't remember which event it was, but I think it was like the same like athletics. Like the government of athletics, whatever it is, they were basically saying that she either that she can't compete or She has to take. She has to take drugs to reduce her testosterone levels. Because they said that it was a disadvantage for other people. And yeah, it was just it wasn't it wasn't fair because I think she she basically was, I think she was she disqualified? I don't know if if you two know exactly what happened, I think I'm gonna need to... This is why shouldn't have...

Pruthvi Mehta 1:40:36

I'm looking it up. I think so... I've looked up the article so it says at the bottom... So I think her lawyers sort of insisted that she wasn't to blame for genetic advantages... that that the existing law is discriminatory against women because men are not screened for high natural testosterone levels and we're able to... Yeah, and then basically, in the meantime allows Semenya and some other intersex athletes to compete without without needing to take hormones to lower testosterone levels. Yeah, so the I think the case went in in her favor. Yeah, makes sense because you don't see like the same sort of discrimination for like especially in men's sports right? When you look at basketball players you don't see the ones being... ones who are naturally taller, being like, you know, disqualified or having a case put against them. It's ridiculous, like Biological Variation is a natural sort of is a natural phenomenon. Right? And it's just it's just the way you know, selection goes biological advantage is biological advantage people use them throughout sport and just life in general to do better at other... at things than other people. That's not unfair. That's just the way it is. Like, I can't believe it, like it's just it's an adverse... it smacks of racism. It is racism because she was targeted as a black woman...

Karel Green 1:41:57

Yeah and this is was white women who were losing, and they were the biggest like whistleblowers of this. And yeah, you're right, because people who are intersex who then decides, you know that they are against because you know, the world's the worst and they're just like pick one and decide that they're male but then have lower testosterone aren't given extra testosterone pills to take before games, right? It's like that doesn't happen in men's sports. So the opposite isn't true. The the male equivalent isn't true. So it's literally just the worst. And I'm out here screaming because what about 1.7% of the population are intersex and 2% of the population is ginger. So it's just the way that humans are. Right? But it goes back to the fact that there isn't a gender binary, it is a gender spectrum, that everybody falls somewhere on the spectrum just because people tend to be nearer to one end doesn't mean that that's exactly what happens all the time. Like I said before, that has been reflected throughout cultures throughout history there have been not only trans people but intersex and non binary people. And they were just a part of the literal

society they weren't even like labeled as specifically different in... Just people. I'm screaming.

Pruthvi Mehta 1:43:14

And like oh my God, you're completely right because I've just... It's just really, it's just really disgusting how like a bunch of like, white women came out and just like... they do the same thing with any successful black female athlete. Who...

Karel Green 1:43:34

You know, the woman who recently retired I forgotten her name, but she was like the white woman who serene who hated Serena because she always lost and took drugs.

Pruthvi Mehta 1:43:44

Maria Sharapova. Was that her name?

Karel Green 1:43:47

Yeah, something like that. I just I just remember her from the memes of how everybody's remembering her and it's Serena winning with her in the background. And yeah, absolute mess, and how she spent more time doing goddamn ads than being an athlete and wondering why she was losing.

Pruthvi Mehta 1:44:02

And at the end of the day, at the end of the day, it's all about work ethic and talent, right? It's like, you know, like the here's the thing, right? You could pit because testosterone levels only do so much right? You could pit like average Joe, I have just a random guy in the street who will have a higher testosterone level due to the fact that he's male, then like, a intersex athlete who will... put like Caster or whatever, right?

Karel Green 1:44:28

Yeah. Who's gonna win?

Pruthvi Mehta 1:44:30

Exactly, who's gonna win? Testosterone level isn't something that magically makes you better at sport, right? Yeah, like, that's not how that works and the *BLEEP*. Bleep that out but I'm mad. The sticks, the sticks, that these... The crumbly sticks that these white women based allegations on, is they're just so garbage, and they know it, their racism is showing, it's showing at this point.

Karel Green 1:44:56

Just to continue this, because I love being angry though some race that happened, I can't remember. Like the first like four women who won were like black from different countries, right? And then a white woman came fifth. And it was literally just like she was the, like the first white woman of the five winners to pass a line or something stupid like that. And literally everyone on Twitter was just like, so she came

fifth, because there are four other black women who passed the line first. Like it's just the way that they go, they just get upset and upsetti and get that cry-ie and moany and it's just it's the worst because you can't even ignore them because they literally try and get people who are better than them disqualified. So I'm out here stabbing, is what I'm saying. It's a whole mess. It is a whole mess. For some good. I'd like to point out that Caster and she married her wife in February of 2015. And they have been married since 2015. And I'm very happy because they are so pretty. So this is some good news. Pruthvi put pictures of them in the show notes. Just

Pruthvi Mehta 1:46:02

That's the only thing in the show notes now. Ok? I have decided I made a ruling.

Karel Green 1:46:08

Yep. They've found love and I'm jealous because they look so good. And their skin is blemishless and I'm just crying. And yes, so they have been enjoying five excellent years together after years of dating and having to deal with God damn homophobia ingrained into black communities. And they did that and got married. And it's what we deserve. So, yes, they did that. And she looked amazing. She had a blue wedding suit, but it was also like, traditional African and it was just so good. And I wish I could look that good. Not... Just anytime,

Pruthvi Mehta 1:46:49

At any point in this lifetime or subsequent lifetimes.

Karel Green 1:46:53

We never will, so there we go.

Pruthvi Mehta 1:46:57

Okay.

Karel Green 1:46:57

Let's accept the fact that we're all ugly and go into possible solutions.

Pruthvi Mehta 1:47:01

Yeah, I think I think that was a nice positive note to end on. We are all ugly and now solutions.

POC Squared 1:47:07

Solutions.

Pruthvi Mehta 1:47:08

So how do we fix all of this mess? How do we fix it?

Karel Green 1:47:15

Wow. Wow, what a big question. So obviously, a good thing that could be done which goes back to our original ethos is that you should decolonize the curriculum.

Wow. Because it's like you should train doctors who claim to help human beings not die. You should train them on all human being body types such that human beings don't die. So, yes, once again, going back to university roots. There needs to be a major overhaul of the curriculum both past and present. Because like I said, so many cultures, ancient Egyptians discovered penicillin. So many cultures have done science better and whether you care about the morals or not and we are assuming you do because you're listening to this podcast, even if you don't by decolonizing the curriculum you're saving lives and literally putting more facts into a science so there is no downside. Okay the white... the dead white men can continue to be dead, it's fine you can...

Pruthvi Mehta 1:48:23

Decolonize the medical curriculum, put in examples of science from people of color in the global south, both current and in the past. Give credit where credit is due with regards society... with regards to medical accomplishments, right stop the turmeric lattes. I don't want to see one. Oh...

Karel Green 1:48:43

I can't believe white women have done the turmeric I'm just so sorry.

Pruthvi Mehta 1:48:47

I'm fine...

Karel Green 1:48:49

You're not fine, you're not because you can't eat turmeric anymore, so you're not okay. So...

Sehher Tariq 1:48:54

Put pressure on wherever you can obviously, it is quite difficult, but put pressure on extra research into medicine for people of color and research into medical conditions for people of color. That that would be very good and helpful.

Karel Green 1:49:15

Something very easy that you could do, if you are in a medical school or whatever is that if you have a module, like I said on specifically skin cancer, like Sehher mentioned, if they only ever show white people, that's the really easy place because even if you don't want to, like even if you're a bit worried or a bit just scared of speaking out about it, that's like a legitimate medical question. You can say, hey, these are all images of skin cancer on white bodies. Do you have any of bodies of other colors? They're not smart enough to think you're decolonizing, that's just the science question haha you can sneak it in. So do that lads if you're listening, you can do that.

Pruthvi Mehta 1:50:00

And as a patient, another patient just demand, you know, from your doctor, access, treatment, actual explanations, and always just like, like, I hate this idea that you

know, you shouldn't you should pretend to know less than a doctor or whatever, like if I hadn't gone and like asked a doctor "Hey, you know my skin's a bit weird Do you think it's this?" It might not have been diagnosed but you have to always like venture, it's the sad truth about being ill and stuff, but you also have to like, go hey, you know, do I have this thing and be like be firm with your GP. And you know, just be firm and you know, demand those tests because you are a human who deserves it. Right? And race will always especially if your doctor or GP is white race will always be a biasing factor. You know subconsciously if they don't really realize that it will be there. So always just demand the best treatment demand, you know good treatment and just support people of color who are ill into getting that treatment. Um..

Karel Green 1:51:02

Like you said, that woman who almost died and then got the stats on black women or black people who can give birth, giving birth. Or literal Serena Williams, the worst that could happen is that you find out that you are fine, and nothing needs to be done. So it's just easy to do that. And I'm trying to find the quote. And as we know, thanks to Instagram and Pinterest, it is now impossible to find quotes. But there is...

Pruthvi Mehta 1:51:29

I've never seen a quote in my life.

Karel Green 1:51:31

I've seen all of them and they are all on Instagram. And I'm upset because I don't even have Instagram, but the quote goes something along the lines of quote is from the point of view of you talking to the doctor, and you say to them, you can't compare your 10 minute lecture to my lifetime of dealing with an illness, and it's based around having a chronic illness. If you have something wrong with you. You are the like person who understands it most in the world.

Pruthvi Mehta 1:52:00

The most exactly, yeah, it's a lived experience exactly that you needs to be heard more than anything.

Karel Green 1:52:04

You are the professional. Exactly. So, your day to day decolonizing is not just about going to change curriculums and doing these overhauls of things, it's about taking care of yourself. And many, many people with lifelong chronic illnesses will agree doctors, doctor's one hour lecture on this illness 40 years ago is not the same as your lived experience dealing with it every waking second of your life, just complain. Literally, like I said, it can't be worse than finding out that you're fine. So it's it's okay go for it.

Pruthvi Mehta 1:52:42

And in your end and in you know the words of your Lord your silence will not protect you. Right like I know if you don't speak up for yourself and if you don't speak up for

other people of color nothing's gonna happen magically for them. You have... you know, and nothing will happen for you know chronically ill people, you have to speak up yourself and ask and demand and fight for the adequate resources and treatment. Um, I think you know, that segues nicely into helping people helping people of color with mental health. So on the notes page, I think one thing I want to bring up now before I forget, is that we have actually collated and I will add to it, a list of mental and physical health services, resources slash tips for women of color, and I think people call in general as well, because men of color definitely need a lot of you know, mental and physical health checks because toxic masculinity and being a man of color, just a whole lot of bag of worms,

Karel Green 1:53:40

Yeah the amount of men who die of like prostate cancer...

Pruthvi Mehta 1:53:43

Yep.

Karel Green 1:53:44

Such a mess, and a lot of these are like disabled friendly. I'm kind of embarrassed to say that we haven't talked too much about disability specifically in a medical episode.

Pruthvi Mehta 1:53:55

It's true.

Karel Green 1:53:56

And that's a bias that we freely admit that we have and I'm a clown. So...

Pruthvi Mehta 1:54:01

Again, we can't we can't speak on them again because of how I, I would say like, again, I have I have chronic illnesses, but I'm not, you know, I wouldn't consider myself massively disabled in any sort of way, or in any way that actively hinders my life at the moment, you know, so I can't speak on this, but we will include more resources for people of color who are disabled as well. I think another good thing to bring up is... So just generally just training social and mental health departments in universities to hire therapists that understand the specific difficulties faced by students of color. Because that is like we talked about various, you know, mental health people of color, especially young people of color is just you have to treat it differently for people... to like whites and people who've been brought up in like white families because a lot of the time like you cannot compare the experiences because you know our family lives are very much a part of who we are growing up, and our our parents beliefs about mental health will be imprinted onto us even if we're trying to reject them. So yeah, we need we need mental health professionals who are people of color.

Karel Green 1:55:14

Yes.

Pruthvi Mehta 1:55:14

Something else I would add is, was it's really just... basically making like, crisis rooms... you know safe space room, you know safe space has gotten a lot of flack with, you know, the way the term has been co opted and mocked. But...

Karel Green 1:55:29

Have you seen Marvel's new like...

Pruthvi Mehta 1:55:32

Oh, god, no. Why bring this up?

Karel Green 1:55:37

Okay, nobody Google that if you're listening and you know what...

Pruthvi Mehta 1:55:39

Safe space. No brought it up you have to talk about it, you've done this.

Karel Green 1:55:43

Two blacks who are clearly like, one is clearly coded as a cisgendered, female body. The other clearly coded as a cisgender male body, but they're both non binary, what's the name safe space? And what?

Pruthvi Mehta 1:55:59

Snowflake. Snowflake.

Karel Green 1:56:02

Just like "no, it's satirical" and I'm just like, how about, for once, you just give people something nice, you know? It's like how like all movies starring like BAME people or LGBT plus people are like tragedies. And everybody's just like can we not have something nice for once which is why Black Panther was so good and now they've just done the same for... Okay, I'm gonna stop I'm so upset but that was bad and I'm leaving it in.

Pruthvi Mehta 1:56:31

It's it's it's really it's really... it's just it's... it's awful. It's so... it's just I can't, I couldn't believe my own eyes. I was like my eyes are making this up. Like there's no way that these are real.

Karel Green 1:56:43

Marvel's New Warriors.

Pruthvi Mehta 1:56:45

What were they thinking? What were they thinking?

Karel Green 1:56:48

I'm killing everyone. One's called Screen Time, Snowflake, Safe Space and B negative. Trailblazer. I'm... Here's the link. Everybody look at it. Here's the link look at it

Pruthvi Mehta 1:57:03

Don't put it near the list, the good list. I hate you so much. And yes, I'm opening it...

Karel Green 1:57:09

And yet we're opening it. every single one.

Pruthvi Mehta 1:57:12

It's very bad. It's almost like a sort of... What were they... Were they trying to be ironic and then just backfired? What were they even thinking?

Karel Green 1:57:18

And like... Well, first of all, there's no way they will try to be ironic, they they got clowned for being so obviously offensive and then they would say no, it's ironic, because they're real superheroes but also all they've done is given two black people a shaved head and yet and... Can I also say when you have a shaved head and you're black, and your hair does not it's still... even though it's shaved it still doesn't look the same texture because you have an afro and as usual any black character must have white hair and white eyes and that their hair is straight and they have like a light eye color. So there is nothing new here.

Pruthvi Mehta 1:57:56

They don't look like they have bad pixie cuts. I'm gonna be honest with you.

Karel Green 1:57:59

It would be nice to have representation where somebody who has like Afro textured hair and brown eyes but Snowflakes and Safe Space aren't giving me that.

Pruthvi Mehta 1:58:08

There's not a single black person on the board of people who okayed this, there's not a single one I'm telling you now. It's so bad.

Karel Green 1:58:15

B negative is a teen living vampire exposed to Michael Morbius's blood as a child in a rogue.

Pruthvi Mehta 1:58:26

Okay

Sehher Tariq 1:58:27

I hate this so much.

Pruthvi Mehta 1:58:27

Everybody, I'm chopping out this entire section. But also I'm leaving it in.

Anyway, anyway. Yeah, basically mate, you ruined this, make safe space rooms for students that need them. And make sure it's not some random white admin lady who's there. Make sure it's like a proper person who knows what social care is and knows what mental health is and knows how to help students who are suffering. God. I am...

Karel Green 1:58:57

I'm so sorry. You know, in other news, I found the quote, it was the only white woman I trust, I guess Trisha Greenhalgh who is a professor of primary care at the University of Oxford, but the quote goes, where it's a doctor speaking and the doctor saying, Don't confuse your Google search with my six years of medical school, and the patient is saying, don't confuse your one hour lecture you had on my condition with my 20 years of living with it. So the point is, you need to tell them because like I said, human beings have bias. And as somebody who has been to many things, which are one hour lectures, and I now mark scripts and things that I did, once, three years ago, and don't remember and tell people, they're wrong, you need to speak up for yourself, they will moan and you will die. And so just, their their feelings don't matter if your life is on the line. And from the examples we have spoken about, the majority of the time intuition is correct and your life is on the line, it's almost like how humans have survived this long, so it's okay. It's okay.

Pruthvi Mehta 2:00:08

Really like that quote.

Karel Green 2:00:09

I've put a link in the notes.

Pruthvi Mehta 2:00:11

Thank you God bless. That's made... That's barely made up for this... I'm very upset. I can't believe you've brought this up now of all times.

In solutions.

Sehher Tariq 2:00:23

You could have just waited. Could have just have waited um... you know what, now we're moving on... making us move on. Moving on to media recommendations.

Karel Green 2:00:32

My media recommendation is the Marvel New Warriors.

Sehher Tariq 2:00:35

No, no.

Please don't, don't do this.

We're gonna need actual media recommendations.

Karel Green 2:00:50

Okay okay. You know what, I'm gonna I'm gonna I'm gonna do something good for once and continue to be the worst. So my me... so other than all the good things that are said in possible solutions which you should already check out because they are actually good reads, a lot of them are from you wouldn't believe this but Teen Vogue is... has gone... You can see how times have changed because Teen Vogue used to be about you know what bubblegum flavor you to literal decolonial activism, but it's wild, but I love them. They have really good articles on there. So maybe Teen Vogue, but I was going to bring up. So my media rec is actually a book series, and it's my favorite book series. And it's good and bad, because I'm sorry, it was written by white man. But, and please don't click off. It's a really good book series. And it's my favorite book series. It's called the Lightbringer series. The first book, it's called the Black Prism. And, and what makes up for the fact that it was written by a white man is that it stars... So it's high fantasy, so it's got a lot of like, it's got a lot of characters, but the main character is a dark skinned, well he's mixed race but he's constantly referred to as a dark skinned black person. There are lots of very, very dark skinned black people. Clearly several sections of the world were based on just like this is where the blacks come from, without any kind of colonialism. So they are all very dark skinned. That is excellent. And there's just loads of ethnicities and it's excellent and I love it. And it's based around a magic based on light. So these people called drafters and what they can do is that you can, most people can only draw maybe one or two colors of the six colors in the regular magical, reg... regular light spectrum. Each different color has its own properties, like yellow is light, you can just make flashes of light, it's really hard to make solid, but if you do, it's the strongest of all solids. And red is like a jelly that's really flammable and stuff like that. Super cool. But the trick is is that the more you draft it, which is when you make the light colors, the faster it kills you, because once you... as you draft it, your eyes get stained the colour that you draft and the second it breaks out of your iris, you go insane and you have to be killed. And it's based around all of that but it's got a load of like political stuff, loads of good things sort of like Game of Thrones but not trash and not garbage and not written by George RR Martin.

Pruthvi Mehta 2:03:23

No incest.

Karel Green 2:03:25

Negative incest, in fact, so I'm so happy.

Pruthvi Mehta 2:03:29

That's what I like to hear, I love negative incest from my media.

Karel Green 2:03:33

Exactly, literally no incest. And it's just so good. And it talks about all kinds of things. There's disabled characters, there's characters with trauma, some of the main characters are disabled, and you don't find out until later on because why would you you know, like regular humans. One of them the smartest one in their group who's like a really good engineer is is... they don't have a word for it in the world, but he's basically severely dyslexic. He can't read but he gets on completely fine, because he can do. He has loads of other strengths and that's what they are. Obviously, he's a person and they're friends with him. And there's like a whole arc about him trying to deal with his dyslexia amongst a literal war, it's so good. And everybody's just like, Well, you know, we all have strengths and weaknesses and you are not inferior because you find it difficult to read. And it's just it's so good. It's so good. The last book came out like three months ago before the Coronavirus outbreak, back when things were slightly less bad. And I read it and I was so happy and it's my literal favorite book series. So you can buy the entire box set and just have a great time. And I'd really, really, really, really recommend it. Please read The Lightbringer series by Brent Weeks.

Pruthvi Mehta 2:04:46

Nice. That's a lovely recommendation.

Karel Green 2:04:50

Does it make up for the bad?

Pruthvi Mehta 2:04:53

It does, it does. It's a good recommendation. I would... My recommendation is a podcast called Coffee with Comrades, it's um, according to its own bio on Spotify, "It is a podcast discussing current events, theory and action through a radical lens". And it's basically like a socialist sort of podcast where they discuss stuff like race theory and other things like that. And I got into it when I listened to an episode they did, which was reviewing the book called The Dispossessed by Ursula Guin, I think I maybe have recommended before on the podcast. But the... there's a particular episode I wanted to recommend called, it was Episode 74 called "Eating the Other". And it features Dr. Alisha Gaines, who is like a black woman who is a doctor of I want to say English literature, at a University in the US she does like sociology and literature. And the entire episode is basically about racialized empathy and the failures of like white liberalism and how to be authentic in your solidarity with people of color and especially black people. And it's like a lovely like relaxing conversation between the host and Dr. Gaines. And I'd really recommend it. I just had it on when I was working like a week ago or something, and I really liked it. So I'm just recommending the podcast in general Coffee with Comrades. But also Episode 74, Eating the Other, featuring Dr. Alisha Gaines. If you're gonna listen to an episode of this podcast, I'd recommend Episode 74.

Sehher Tariq 2:06:30

My recommendation is probably one of my favorite books that I've ever read. And that is Noughts and Crosses. And the reason why I brought that up is because they

have a TV series out on BBC at the moment that is based on Noughts and Crosses and it's by a black, female author called Malorie Blackman and she's great. Follow her on Twitter. She's brilliant. But yeah, this is a book that I read when I was in secondary school. And back then I wasn't really like I didn't really have that much of an idea about racism. And then when I read this book, it just completely opened my eyes. Like one thing that they mentioned in there that really like blew my mind that I never actually noticed before was plasters are made to camouflage into white skin. And in the book, there's a scene where they put a plaster, they have like a bit where they put a plaster on. Okay, yeah, I need to explain the plot of it first. So basically Noughts... So basically Noughts and Crosses is basically where the black people are the ones that are quote unquote, more superior than white people. So it's basically our current racist... racial kind of structure but flipped. And so it's going from the lens of black people are the ones who have the power and white people are the ones without the power. So it really makes you think about, about how like, you know how black people are treated now, but you know it I guess it's it's so white people can understand the fact that this is stuff that happens to black people that could happen to them if it was just the other way around. So that that scene that I was talking about, about the plaster, so they put a plaster on the main... one of the main characters called Callum, I think, they put a plaster on him and it was dark brown color. And that's because plasters in that world where black people are the ones in power. It's disguise... It's supposed to be disguised on their skin tone, as opposed to on a white person's skin tone. So that completely blew my mind. Because it's just something so small but it's just you know, you know, you don't you don't really realize that that's something that... it's because of a racial structure. And yeah, so I'd recommend that book a lot. And yeah, it's for all ages, doesn't matter how old you are. You should read it. Definitely. Yes.

Karel Green 2:09:45

That was nice. That was actually a nice ending. And I'm sorry I got real bad in the middle there.

That's happening.

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Pruthvi Mehta 2:11:01

Again this is like the same the same vein than the climate change episode we went through, where it was just like... Problem after problem, after horrible thing after horrible thing, and at the end we were all just screaming.

Transcribed by <https://otter.ai>