

Together We Rise

Kjersti Knox, MD

Late on a mid-August night in 2016, I arrived home feeling tired but accomplished. Partnering with one of our residents, we had safely delivered a baby to a joyful mother, father, and extended family after inducing the mother for preeclampsia. I was met at home by the restful sounds of my own sleeping child. Despite the late hour, though, my husband was still up watching the news. “Something is happening in Sherman Park,” he told me. “The police shot and killed a Black man today.”

That night became known as the Sherman Park Uprising. Before the night was over, images of a burning bank and gas station were televised across the nation. Colleagues traveling across the country were later asked if they felt safe in our city. Thinking back to that time still makes my heart race and eyes water, not because of the smoke and flames, but because the wrong story was impressed upon the nation and much of our city that night.

The news missed the story of the hundreds

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of peaceful protesters marching and singing together—united in their shared anger and fear for the safety of their families, friends, and loved ones. The news missed the joyful story of the healthy Black mother and her partner, who made every prenatal visit, and their

supportive family, who lived blocks from the “uprising”—all present and ready to welcome a new life to their family. It missed that story’s frustrating coda—that despite being a healthy young woman in her twenties, this mom had developed preeclampsia, required induction, and become another woman in a long line of Black women in our community with “unexplainably” high blood pressures affecting her pregnancy. “Unexplainable,” yet linked to the unmeasurable stressors of racism over her lifetime quantified by health professionals as “allostatic load” in an attempt to measure the health effects of chronic, daily stress caused by structural racism and implicit bias.

The nation did not hear her story that night. Nor did the nation hear how the community rebuilt the burned bank building into a thriving community center, poignantly named the Sherman Phoenix—a beautiful and energizing community meeting hub housing Black-owned

businesses. Yet these are the stories we need to tell and that we need to hear.

What happens in my community happens in my clinic. Whether it is racism manifesting as preeclampsia or high COVID-19 rates amongst BIPOC (Black, Indigenous, and People of Color)

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populations, I hear about racism daily without the word being spoken.

As a result, my practice demands advocacy at every socioecological level, from supporting individual patients and families to creating welcoming environments and inclusive clinic and hospital policies to supporting community-led initiatives and state and national policy changes that will improve the health of my patients and community. I love my job as a physician for many reasons, but top amongst them is the opportunity to walk with my community and lift up its stories. As the County Health Rankings remind us, if we focus only on the clinical, we will miss 80% of our patients’ health and 80% of opportunities to make a difference for an individual, a family, or our community.¹

As a family physician who teaches medical students and residents, I have the opportunity to mentor learners on their community health and advocacy projects and see our community

for its tremendous assets. There is immense power in teaching learners to see the assets, resilience, and strength that surround us and to listen for these stories. There is immense power in growing partnerships with our neighbors outside of the formal clinic and hospital walls. These partnerships at times require us to lead and at times require us to follow. The key is knowing the right time for each and understanding that, along the way, listening is always required.

History repeated itself many times in 2020 as more Black lives were lost at the

hands of police or vigilante gunfire and protests emerged around the country. We cannot afford to miss the story again. We must listen to the stories of the hundreds and thousands of peaceful protesters sharing their anger and fear for the safety of their families, friends, and loved ones in our communities. And we must listen for the hope they share for better. We must meet the challenge, embrace the discomfort, look to connect, and listen. Together we can build a better, equitable health care system and society. In daring to hear the stories that surround us, together we can rise.

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REFERENCE

1. County Health Rankings Model. County Health Rankings & Roadmaps. March 29, 2016. Accessed March 12, 2021. <https://www.countyhealthrankings.org/county-health-rankings-model>

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