D&I Diaries Episode 3: An Interview with Dr. Karen Kim Transcript

Speaker 1 [00:00:15] Hello and welcome to this episode of D&I Diaries, a podcast produced by the Office of Diversity and Inclusion in the Biological Sciences Division at the University of Chicago. My name is Camilla Frost-Brewer, and I am one of the program managers for diversity and inclusion in the division, and I'll be one of your hosts for the show.

Speaker 2 [00:00:32] And my name is Tobias Spears, and I will be your other host. And I serve as Assistant dean of diversity and inclusion in the division. Through this podcast, Camilla and I hope to highlight and showcase the diverse voices of everyday BSDers. We want to create a space to authentically and candidly share our DEI stories where we get to know one another outside of our professional roles. And finally, we hope to engage a coalition of listeners who value DEI and increase interest in DEI work and conversations across the BSD. So without further ado, let's begin the show.

Speaker 1 [00:01:13] Hello listeners, and welcome to this episode of D&I Diaries, the show that uncovers diverse stories in the BSD. We are your hosts, Camilla Frost-Brewer.

Speaker 2 [00:01:21] And Tobias Spears.

Speaker 1 [00:01:23] And today we are joined by Dr. Karen Kim, who is the Sara and Harold Lincoln Thompson Professor of Medicine, the Vice Provost for Research for the institution, the Associate Director for Community Outreach and Engagement in the Comprehensive Cancer Center, and the Founder and Director of the Center for Asian Health Equity. So thank you so much for joining us today. We're so excited to have you here.

Speaker 3 [00:01:42] I'm so excited to be part of this conversation. So thank you for the invitation.

Speaker 2 [00:01:48] Yeah, it's cool. So, of course, I love you, Karen. So I'm going to say that so people know.

Speaker 3 [00:01:54] Thank you.

Speaker 2 [00:01:56] You're one of my favorite people on campus, and I'm really excited about talking to you because I know that you do a lot of work around health equity, which is really important, I think, in this moment, particularly as we think about and make these linkages between wellness and diversity, equity and inclusion. So I also want to say congrats. Let me read the name of your professorship for your Sara and Harold Lincoln Thompson Professor of Medicine, because that's a named professorship. And that's not easy. And it's something that we need to recognize. And I don't know. Are you one of the only Korean women on campus with a professorship?

Speaker 3 [00:02:33] I think that if I'm not sure if I am, but I will tell you, there will probably be less than a handful of Asian women with with a professorship. So I'm very excited.

Speaker 2 [00:02:43] Yeah, yeah. So. So congrats again.

Speaker 1 [00:02:46] Congrats. Yes.
Speaker 2 [00:02:47] So I will go to that first question, which is we'd love for you to tell us about your work at UChicago and a little bit about your academic journey and maybe some of your interests.

Speaker 3 [00:03:00] Thanks for the questions. So I have been at the University of Chicago for my entire career. I started here in 1997 after finishing my GI fellowship, and I think what's kept me here is the ability to really express yourself both academically and I think among your peers in a way that really can be authentic. So I grew up on the South Side of Chicago, on the other side of the Midway, so really a true south sider, although people don't often look at me and think that I'm a product of the Chicago Public Schools and always looked at the university from the outside in and now kind of have that view of the inside out. And it has really informed the work that I do. So my work is really focused on colorectal cancer prevention and cancer prevention among vulnerable populations. And I currently run the nation's largest trial, pragmatic trial, which is sort of like a practical trial, looking at our ability to work with federally qualified health centers to improve colorectal cancer screening. And that work has been very meaningful. And this has been funded by the NCI, the Beau Biden Moonshot Initiative. But from that work, we've also been able to leverage lessons from that work, and we now run the state's colorectal cancer control program. So most of my work academically has been focused on colorectal cancer. But I think the more important part of my work is trying to understand how we bring diversity, equity and inclusion to the forefront in terms of not only the delivery of patient care, but how do we develop programs that are truly inclusive and use that as the lens for doing our work going forward?

Speaker 2 [00:04:45] Yeah. Nice. Thank you. And you are the Center for Asian Health Disparities is one of the only places that has received this Beau Biden funding. Right? Like, I mean, it's three in the country. So I just wanted to shout that out as well.

Speaker 3 [00:04:59] Thank you. And it's interesting, we approach this grant with the lens of we're in the community doing the work and we need to solve a problem, not so much that we have, you know, 500 publications in high impact journals. We're making impact by being with the community. And I think this is an implementation science grant, and I feel like we are just really making a huge difference.

Speaker 2 [00:05:23] Yeah, Thank you.

Speaker 1 [00:05:26] That's amazing. I will ask you the next question. And I have a feeling you'll probably talk about the Center for Asian Health Equity as I ask it. So how does diversity, equity and or inclusion connect to the work that you do? How do you incorporate it or see it as integral to the work?

Speaker 3 [00:05:44] I would say that the moment I discovered that I needed to think about diversity, equity and inclusion is the moment that my mother was diagnosed and subsequently died of Hepatitis B, which is a disease that disproportionately impacts Asian Americans. And at that point I was a GI Fellow and no one had talked to me about the disease that I ended up treating as a gastroenterologist, that that there was this disparities. And when my mother was dying, I remember we went from hospital to hospital hopeful for that we could find a cure, but we knew she wouldn't be able to, you know, live beyond this disease. And what was interesting is one of the doctors asked me, they said to my mother, you know, Dr. Kim, you should take a long extended vacation in China, which made no sense because we're Korean. And so I realized then that there is just a tremendous need for cultural competency, for an inclusive discussion around Asian health. And even though
I was studying epithelial transport, very happy in my basic science lab, I thought looking like this, if I don't step up and do something around Asian health disparities and start talking about it, no one's going to do it. And so a quarter century later, this is the work that I have been doing. And the way I have done this is in 1997, I formed a nonprofit organization called the Asian Health Coalition, really one of the first nonprofit organizations dedicated to capacity building of direct service serving Asian community based organizations in the region. And the lessons learned by developing and being able to sustain a nonprofit is everything that you need in leadership. You need to understand fiscal management. You need to be able to stick with the mission. You need to fundraise. You need to be able to think about creative ways and partnerships to bring in money. And that lesson from 97, 1997 onwards. Now, 25 years later, I think is is what has allowed me to be successful in my academic career. The ability to work with people, the ability to follow a mission and an uncompromising dedication to thinking about quality research, training, advocacy.

Speaker 2 [00:08:17] Yeah.

Speaker 1 [00:08:18] Wow.

Speaker 3 [00:08:20] Mm hmm. And I should just add that nonprofit in 2015, it became clear that the goal of this nonprofit was to support community based organizations in their capacity. We were beginning to compete against them for the same pots of gold with limited funding. And so it became clear the area that we needed to expand is to really build research capacity. So the nonprofit organization Asian Health Coalition, plus the university, came together to form the Center for Asian Health Equity. And we're really the only true academic community partnership in the institution. And the university is the sole proprietor of the Asian Health Coalition. And we have grown by leaps and bounds.

Speaker 1 [00:09:02] Wow. Wow.

Speaker 3 [00:09:03] I'm just going to say one other thing, and it's really not just about Asians taking care of Asians. It's about if you look at our center, my co-director is African-American. We have a very, very diverse staff. We are now up to almost 35 staff. We started 25 years ago with one. And it's about allyship. It's about supporting each other. It's about being creating an inclusive environment. And it's not really about what you look like. It's what you bring to the table in terms of your passion and your skill.

Speaker 2 [00:09:37] Absolutely. Yeah.

Speaker 1 [00:09:39] I just have so many wows building up in me. Thank you so much for being vulnerable with us and our listeners and also really tying DEI into kind of all aspects of your life. It's personal, it's professional, it's leadership, it's research. I think that's really powerful, that it can show up and does show up in different ways in different areas. Also, you pretty much just did the whole podcast, so it's a wrap.

Speaker 2 [00:10:08] Podcast done now.

Speaker 3 [00:10:10] But I'm I'm going to have to get to the dark side, if you don't mind. And I feel like it's an opportunity for listeners to learn a little bit more about some of the challenges of Asian health and the uphill battle, if that's okay.

Speaker 1 [00:10:23] Yeah, absolutely.
Speaker 3 [00:10:24] So I'm just going to say a few facts just because to me, they're really eye opening. If you look at funding for Asian health in this country, largely by federal agencies, let's just take the National Institutes of Health. So the NIH, which is really the gold standard for a lot of biomedical science research. If you look at the last two decades of funding for Asian health; 0.17% of the portfolio of the NIH focuses on Asian health. Are you kidding me? And if you look at the last ten years where we're the fastest growing population in the United States, you would think that if nothing else, as the population grows, the interest in understanding the health status and disparities in these emerging populations would be reflected in an increase in funding to support research and inquiry. It went up 0.06% during the decade of the fastest growth of this community. And recently, the National Science Foundation came up with a paper about their funding over the last decade. And it's so mind boggling of looking at which racial ethnic groups are getting funded, certainly among the African-American community, not equally funded compared to white researchers. But Asian population is funded so much less than any other racial ethnic group. It's unconscionable.

Speaker 2 [00:11:57] Yeah.

Speaker 3 [00:11:57] And so, you know, one of my favorite quotes is from Martin Luther King says, Our lives begin to end the moment we become silent about things that matter. Yeah, we matter. And it's important in when we think about diversity, equity, inclusion. I can tell you the scenario I most commonly face. And I'm an ally. And I strongly believe that in African-American health disparities they're rampant, they're unfortunate, they're preventable. And we need to continue to do so much to make sure that we keep our research focused on those really just populations that are so vulnerable. But I'm going to also say and I'm saying but maybe I should say and. And when we talk about diversity, equity and inclusion, it can be it can feel very exclusive. So whenever we talk about disparities, we think about, you know, African-American health disparities they're rampant, they're unfortunate, they're preventable. And we need to continue to do so much to make sure that we keep our research focused on those really just populations that are so vulnerable. But I'm going to also say and I'm saying but maybe I should say and. And when we talk about diversity, equity and inclusion, it can be it can feel very exclusive. So whenever we talk about disparities, we think about, you know, African-American health disparities, Latinx disparities. But sometimes when I speak about Asian disparities, it's as if it's sort of it's a competition between communities. And its inclusion usually means that you're including black and brown communities, which I completely agree with. But very rarely means that you include Asian communities. And so I think that we need to become a little bit more aware, particularly post-COVID. People think that post-COVID is when there were problems with Asians. But, you know, we were the first population to be excluded, the right to U.S. citizenship, even when we were born in this country. And so there's a long and storied history and, you know, so many myths, the model minority myth that somehow we're healthy, wealthy and wise and therefore we don't have problems. And many of these things are not backed up with data. And so, you know, the terms that we often hear are interchangeable Asians. I think that comes when you think about awards and prizes. People can't even remember your name. I remember one of the head search companies told me that, you know, we make up about 20% of US faculty and about 10% of chairs and less than 2% of deans in the country. And if you look at other racial, ethnic minority populations, they make up much higher percentage of deans. And I was asking a search person, you know, why is this? And she said to me, It's almost impossible to place an Asian-American into a dean's position, especially if they have an accent. And so my daughter calls this the absence of rage that we're not raging enough as a community to find our voice and to be able to really advocate.

Speaker 2 [00:14:40] Yeah.
Speaker 1 [00:14:40] Wow. You just dropped massive amounts of knowledge, data and, like, social knowledge, and your daughter sounds rad. So shout out to her.

Speaker 3 [00:14:52] Caitlin, I quoted you.

Speaker 2 [00:14:54] It, you know, it reminds me of, I think a few years back where there were several Asian women who were killed in Atlanta. And there was, you know, there was a press conference and all the folks came out to listen to. I think it was, I guess, the deputy or chief of police somewhere who was talking about the incident. Right. And the man had gone in and killed these women. And someone had asked what happened and they said, how could this racism happen? And the chief said, oh, it wasn't racism. Right. And what it reminded me of is that we have this limited imagination. And this is where I think intersectionality comes in people's vulnerabilities. Right. Because the idea that he could only understand racism as a product of black and white, he could not understand that there's a specific, unique social location in which these Asian women sat and they experience the perniciousness of racism. But he could not see that. He could not see that these narratives and cultural discourses about Asian women had been the reason why they were targeted. Right. And that that was a type of ism based on who they were based on their race. And so it was just one of those moments where I saw how within social justice circles, right, how we sometimes have to help people expand these conversations about what does it mean to be a vulnerable person? What does it mean to be someone who is oppressed and ostracized? Right. And think outside of the context that I think some people often put us in, which is to only focus on, you know, black, white, something like that.

Speaker 3 [00:16:31] It's definitely a problem. I think when when we have the discussion around race and isms, it often feels like it's a zero sum game. So if I take away from one community, I'm really taking away from that community. Right. And so we see this. We see this time again. We call ourselves often the invisible minority. And often we play that role. So our students sometimes struggle with trying to advocate for themselves because they feel they're not as bad off as other populations. And that's really a challenge they feel like they can't bring attention to their needs because their needs may not be perceived or real as great as other minority community needs. And that's actually a really sad story because we all need to lift this boat together. Right. And and sometimes that doesn't happen. I think recently with the Oscars, you see this you know, there were so many firsts during that Oscars. And some of the rhetoric that you're hearing afterwards is not about the celebration that we're part of the diversity, but that we robbed other racial, ethnic minority communities of their time for recognition. And to me, that's just a really tiring story.

Speaker 1 [00:17:51] It's tiring and it's tired. Like, I think to kind of wrap this whole question up, we've covered a lot of ground, but what I really hear you saying is that the oppression Olympics, as they're called, serve No one. They actually are detrimental to all underrepresented and underserved populations. It is really about coalition building and how can we exist in this quote unquote, post COVID world and rebuild those coalitions around racial justice?

Speaker 2 [00:18:24] Mm hmm.

Speaker 3 [00:18:24] Together.

Speaker 2 [00:18:25] Yeah. Yeah. And there's enough vulnerability to go around.

Speaker 1 [00:18:29] Truly.

Speaker 3 [00:18:30] There is. There is. I mean, we would love to put anyone else in our shoes, right? You know, Go ahead. Walk in them.

Speaker 2 [00:18:36] Yeah. It's so it's. It's almost like, you know, we don't have to be the worst off to recognize that someone is also vulnerable and needs us to be their ally and us to be, you know, someone who works with them as a comrade. So, yeah. Okay. So I think this is my question, right? Yeah. So it's about the south side, right? It's about where we are, right where this university is located and situated. And just the question about like, what does it mean for you to be here? Right. You talked about growing up on the other side of the midway. What does it mean to be here on the south side and do your work and be the vice provost at a university that, you know, is sometimes thought of as not in alignment with the community, but I think has been trying lately and has been succeeding in some ways.

Speaker 3 [00:19:31] Yeah, I think it's extremely important for me to be working at this institution in this location. First of all, it's home for me. I grew up here. But more importantly, the opportunities that this university can have on changing the life course and trajectory of young people's careers and lives and communities lives that can only happen here at the University of Chicago. And when I think about that and the big reason is that unlike, you know, I know some of our peer institutions are sort of doing a lot of their research on the South side, which is great. But but we're here, right? We're the mothership. And I think that we need to make sure that we are fully engaging with the community, which I know we're doing with the Urban Health Initiative. I know sometimes we don't get things right. We've taken a stutter stop step at our trauma center, which is really transforming the lives of the community. And for me, my research, my mindset, my mission, my life values are all focused on making sure that we are developing inclusive programs for racial, ethnic minority populations, sexual gender, minorities. Majority, and we can't do that without being where we're located. And and we have a huge obligation and responsibility to get it right. And I know that sometimes we don't. But I know with our new administration, we're thinking about an engaged university and we need to hold everyone. I think we need to just make sure that everyone is fully accountable and responsible for those words. And we need to work together and build coalitions to make sure that we can realize this engaged, inclusive university.

Speaker 2 [00:21:19] Yes, I can. Can you hear snaps? They can hear.

Speaker 3 [00:21:21] Snaps. I wish I could snap. I can't really quite.

Speaker 2 [00:21:24] I'm snapping for coalition building. Yes. Yes.

Speaker 1 [00:21:26] Snaps for coalition. Hmm. That's our new campaign.

Speaker 2 [00:21:29] Yes, that's for coalition.

Speaker 1 [00:21:31] So for this next question, I know you shared a little bit about your mom and her experience in a medical facility and how that changed your ideas and thoughts around DEI and how it influenced your work in your personal life. But I want to
Speaker 3 [00:21:58] So I remember a few things. So first of all, thank you for the opportunity to talk about this. I'm going to say that I grew up in a family that felt that with very strong lens of social mission and justice. So my mother was a graduate of the at the time the School of Social Work. I guess it's the Crown family. And I remember she was working in the Cabrini-Green complex and she used to take me models and this was these are some oppressed, oppressed, poor individuals that just really couldn't get anywhere, a leg up to to even engage in life, you know? And I remember we went to the store and bought some pillows and my mother wanted to give the kids in the apartment pillows because she thought, if you can't sleep, you can't really do anything. And this is really important. I remember she she told me that she almost was flunked in the course that that she was taking at that time during her masters degree, because her professor said, you're getting too engaged, You know, you're making this too personal. And so I just remember and she kept buying pillows. So I just remember from a young age the importance about giving back and how important that was. And so when my mother was faced with this, I mean, she died at 63, that's just way too young. She hadn't even been able to go to Europe. And, you know, everyone goes to Europe now. Right. But she just never because it was out, she was just always working. She developed all the social service special education programs for the Chicago Board of Education. She was the highest ranked Asian-American. She was the assistant superintendent for special education for the Board of Education. And she served on Mayor Washington Harold Washington's administration when he was the first black mayor of Chicago. You know, just so you know, this was really kind of the lens that I saw. My mother, she started all the Korean social service agencies because she had the capacity to do that for the city. And so she was like this celebrity rock star. I, on the other hand, grew up going to Chicago Public schools, was really almost the only non-African-American in my kind of formative years. And so this was my community. I didn't know I didn't care about being Asian. I never even thought about being Asian. I thought about working and having all my friends who are in the black community. And that was sort of for me, my community. those are my people in my mind growing up. And and so when she was diagnosed with hepatitis B, I was blown away. I'm like, Wait a minute, I treat this disease. How come no one told me that that half the population with this disease in the United States are Asian? Weren't we important enough? And so I like I told you, I started this nonprofit, but I knew nothing about being Asian. I knew nothing about Asian health. I could barely speak Korean. I had no idea what was going on except for it triggered this need to make a difference. and I fumbled my way through it. I asked the university. I was recruited here after fellowship because I had was doing some pretty kickass basic science research and they knew that I would go back to it. So they recruited me here after my fellowship and I convinced them to let me open up a clinic in Koreatown. I didn't know anything about being Korean, but they did that and I wrote for a Daily News, a newspaper for the Korean community. I had hired a secretary who is bilingual, Korean, and so she and I worked on this, and we did that for one year to try to gain buy in to the Asian community. They didn't know me. They knew my mother, but they didn't think twice about me. And so I had to spend a long time gaining trust. And it was through that process that I really started understanding the importance of coalition building engagement, you know, having a bigger vision, completely independent from my academic work. So at nighttime. I was writing grants for the coalition. At the daytime, I was doing like, I don't know what I was doing. I was doing some kind of research at the university, but because of this nonprofit, I got tapped in to start doing more work with the cancer center. And that kind of set me in that path. But thinking about my mother, I would never be doing this work. I think I would just be happily doing epithelial transport work. But I feel like that was her
parting gift to me to give me purpose, because I don't know that there's, you know, too many people who are engaged in this line of work and probably can do it with such a life passion and then have a university around them that actually has embraced that passion and allowed me to be me. And that's why I feel so grateful to this institution, because they have allowed me to express myself in many different ways.

Speaker 2 [00:26:42] Nice.

Speaker 1 [00:26:43] Wow. I am like I'm really emotional. I should mention that I'm, like, almost in tears. That is a beautiful story. Thank you. Like, and I truly mean that with all my heart. Not like the Wow, what a good story. But I could hear the passion and the drive in your voice even after you said after 25 years like you've been in the game.

Speaker 2 [00:27:03] Mm hmm.

Speaker 1 [00:27:04] And I think for me, what really resonated was that you can and should make mistakes, and that mistakes aren't inherently the worst thing that can happen, but potentially stopping and stopping the care, stopping the caring, the passion is what could be worse. And that mistakes help us learn and get better.

Speaker 2 [00:27:24] Yeah. Yeah. So I'm going to I, think you answered a little bit of our of our fifth question, so I'm just going to go to number six. Is that okay? And ask you about this idea of belonging. Right. I think, you know, we've been talking a lot about belonging. And I think it's it's really because President Ali Rosado has really brought that concept here. I think it's from Berkeley. Right. This concept of belonging. We've heard it, but it hasn't been so central here at UChicago, I think, until his leadership. And so one of the things Camila and I thought about when we were, you know, formulating this podcast is to ask people this question about what does it mean to belong somewhere? Right. So I wanted to ask you, Karen, what does it mean to belong and how does it feel for you when you belong somewhere?

Speaker 3 [00:28:10] I say personally, I'm not a big fan of belonging and the concept of belonging. I think it's like, who do you belong to or what is the framework with which you're trying to define being part of a belonged team. And so I find that language a little bit sort of colonial. And that's how it went. So when belonging became first became and I understand that it's it's an important framework for for thinking about do you feel included? But I'm just I'll have to say, I'm just not a fan of that language.

Speaker 2 [00:28:50] Yeah.

Speaker 3 [00:28:51] And for those reasons. But nonetheless, I think that we are an institution that I think can use some work around this sense of belonging, you know, defining what it means, how we want to measure it and implement it. Why is it important? and what is the reference with which you belong? Are you belonging to the university? So is it like a top down? And we're trying to fit you in? Mm hmm. Is it a little bit flat? And we're trying to figure out how everyone can have a piece of the pie. So I struggle with this. You can't tell. It's a word that I haven't fully embraced.

Speaker 2 [00:29:29] Yeah.

Speaker 3 [00:29:29] But I can say that the concept of feeling like you are fully valued and participate in the culture of an institution that's critically important. And I think it happens at
many different levels. One from an individual. You have to feel like you want to be part of an institution that you can either adapt their culture, that the institution is important to you. And I think that unless you have that framework, it's really hard to understand how you can feel included. I think from an institution perspective, we kind of need to peel the layers of the onions that says that there are opportunities for you to find your voice to contribute beyond just the work that you're doing. I think that this institution is great in the sense that I don't feel like there is a strong sense of competition between faculty or students and staff. But at the same time, I feel like it's because people are so engaged in their own work. And there are so many natural intersections that we don't see when we're so focused on our own work. And so the ability for interdisciplinarity is tremendous at this institution, the ability not only in research, but just across people. And understanding how we don't need to be so siloed is an institution. To me, that's the basis of what belonging means is that we break down these silos, that we reach out across kind of the street, across different units, and we figure out how it is that we may be telling the same story from a different perspective. That to me is what kind of this idea of belonging looks like, in my opinion.

**Speaker 2 [00:31:09]** Yeah. Yeah, it's interesting. You know, I want to go back to this piece where you started talking about interdisciplinarity, because one of the things I learned about UChicago, before I even got here, and then once I got here, is that the university really prides itself on being like the home to where these like disciplines were originated. Sociology, economics, anthropology. Right. And sometimes what happens is, is that when we are having these conversations about increasing the number of underrepresented faculty, whether that be black, brown, queer trans women, what we're learning is that so many new faculty, so many of the younger scholars coming up, embrace this interdisciplinarity in a way that I sometimes wonder, like how do we as a university become more like that? Right now? I know with the origination of the race diasporic indigeneity department, that is interdisciplinary right at its core, but so much and I think it speaks to that silo you talked about a little bit, right, where people are like, Well, this is the land I'm in, this is what I do, blah, blah, blah. But then we have doctors who are coming in saying, you know, what are they doing around gender in the humanities? What are they doing around film and how do we use film to educate people about blah, blah, blah. Right. Which sometimes breaks out of these conventions that we're so used to being in. And I guess this isn't a question, it's just an observation. But I do think that serving on these committees and working with people as we try to recruit folks, we have to do more to talk about and embrace this approach of interdisciplinary learning and teaching and pedagogy and all those things.

**Speaker 3 [00:32:52]** It really it really elevates everything that we do. We can get a different perspective on the same question. It really improves our world impact. There's, I think, no negativity. nothing negative about building stronger interdisciplinary team. I know that's the work that I'm doing in the Provost's office now. So maybe I'm patting myself on the back. But actually, when faculty get to work with other faculty they've never worked with, they feel energized.

**Speaker 2 [00:33:22]** Yeah, yeah, yeah.

**Speaker 1 [00:33:23]** And as Tobias said, our students are reflecting that. They are telling us we want more opportunities to connect with other students, other PhD students, other postdocs in different departments, different divisions, and they've got it.

**Speaker 3 [00:33:39]** So in our Center for Asian Health Equity, I would have to say that we work very closely with African immigrant communities as well. I'm sort of the community
version of what Interdisciplinarity looks like. And the reason is that actually many of the diseases of African immigrants are very similar to Asian immigrants. And since we've already gone down this path and developed the infrastructure in the African immigrant communities, a much younger community, we're like, Let's work on this together and let's let you help build your capacity to do this work. And I think we've learned so much of coal learning capacity building by directionality. That's been really, really exciting.

Speaker 2 [00:34:16] Yeah, Nice. That's awesome.

Speaker 1 [00:34:19] So as we wrap up our podcast episode today, is there anything that you'd like to share with our listeners, maybe like a little tidbit of advice, an actionable item, something you want our listeners to know that maybe we didn't get to cover today?

Speaker 3 [00:34:35] I would just say that find your voice and use it for good. I think too often we see things that shouldn't happen and we don't say anything. We witness an injustice and we're too worried if we're an institution where you can't bring up injustices and problems that you see without the fear of repercussion or retaliation, then we failed as an institution. So we need to develop a culture of voices. I think that's incredibly important, and I'm hoping that someone calls me out on things when I do something wrong. It's my expectation and hopefully we build a leadership team and an administrative team among all of our units that allow people to feel respected and to find a voice when they're not feeling that way. And that's what I'm always hoping to work in an institution like that.

Speaker 1 [00:35:27] Thank you.

Speaker 3 [00:35:29] Well, thanks for this opportunity.

Speaker 1 [00:35:31] Yeah. Thank you so much, Dr. Kim, for joining Tobias and I today. I know I learned a lot personally about you, and I think that our listeners will really appreciate that.

Speaker 2 [00:35:41] Yeah.

Speaker 3 [00:35:42] Thank you. Thanks. Have a great day, everyone.

Speaker 2 [00:35:44] Over in, out. We want to thank our guests today and all our listeners for tuning in to this episode of D&I Diaries. We hope you learned a little bit more about our colleagues and DEI practices at work. Remember to stay in contact with us through our website, our listserv, Instagram, Facebook and Twitter to receive updates about new episodes and how to engage with our podcast.

Speaker 1 [00:36:08] You can find us on all platforms where you listen to podcasts and we drop a new episode the third Tuesday of every month. So join us next time for a conversation with another BSD colleague as they share their DEI journey and truths. Until then, be safe and have a great day.