

Hello Incoming MS1,

It is our honor to welcome you to the Social and Health Systems pillar of the curriculum. As an introduction, we, your peers, chose selections from the same book we read last year, Medical Apartheid, as a frame to an initial discussion. This book is an unflinching look at the abuse of black people in “non-therapeutic” research throughout American history, intended to prompt difficult reflection. We hope it serves a dual purpose. First, and most directly, it is a chance to confront an important legacy of medicine in this country, to reflect on past moral failings of our chosen profession and their echoes today. But while that message is paramount, this book is a start, not an end for learning. Second, it should open a door to consider how social structural forces shape both medicine and our patients, beyond bacteria floating in the breeze or ruptured clots blocking arteries. The book demonstrates the importance of seeing abuse in medical research not as a series of episodes, but as a historical pattern. It confronts directly one of these forces, race; but gender, class, sexuality, nationality and all the other things that make us up are subtext in this book’s narrative work.

Becoming a doctor means becoming a lifelong learner, gaining the capacity for self-study and to evaluate a source’s utility. In reading Medical Apartheid, we encourage you to take a similar approach. Harriet Washington is not a historian by training, and she openly states that she approaches the issues at play with a journalist’s training and an editorialist’s perspective. While reading consider the following questions to guide your analysis:

1. What is the author’s argument? How does she justify it?
2. What are the indisputable facts and what is analysis?
3. What are some alternate theses for the facts she presents?
4. How does the structure of the argument shape the argument itself? How would it change if it were a textbook? A scholarly historical monograph? A novel?
5. Do you disagree with the author’s style in presenting her argument?
6. Do you agree or disagree with the author’s arguments?

It is by choice a provocative book. If you feel yourself chafing against her arguments while reading, that is an opportunity for reflection and counterarguments. This is a starting point, not an end. Do your own research and come to class prepared to discuss alternative theses. The role of this class is not to teach you a dogma but to teach you how to engage in a critical discourse.

We’ve selected some sections, briefly summarized below, to guide your reading. While we encourage everyone to read the whole book, we remember the summer before medical school is a busy one. The selected chapters will frame our first discussion of *Medical Apartheid* and introduce some important themes for the year:

1. Introduction

The introduction provides an overview of the author’s motivation in approaching this subject and the perspective from which she writes. It is essential to understand these points, as it provides context for arguments the author presents throughout the book.

2. Chapter 2

Chapter 2 offers insight into medical experimentation on slaves in America. This chapter also contextualizes the need for protections for research participants in our current society. As you read this chapter, try to pick out the themes and assumptions through which unethical treatment of Black individuals originated.

3. Chapter 8

This chapter explores the topic of eugenics in America. This chapter was chosen because it is particularly relevant to the history of North Carolina. Involuntary sterilizations were frequent under the direction of the Eugenics Board of North Carolina, which operated until 1977. This directly resulted in the involuntary sterilization of thousands of Black individuals along with others judged unfit. This chapter explores the history of this topic and the lasting effects it continues to have today.

4. Chapter 13

Chapter 13 speaks about the ways in which illness has been experienced differently by Black individuals due to systemic practices. It also delves into the disparities that exist in applying public health measures to Black individuals. Washington accomplishes this by detailing public health measures implemented for diseases such as tuberculosis and AIDS.

5. Epilogue

As you read this section, consider how the historical mistreatment of Black individuals contributes to medical care today.

Again, this is only the first step in a longer journey. Our discussion of race will continue in many forms, both within SHS1 and SHS2, as well as in your broader medical education. The topic of race is of paramount importance when discussing social structural considerations in health and healthcare, both in itself and as a portal to consideration of other powerful (and intersecting) factors, such as economic class, occupation, education, gender, sexuality, and more. We're excited to have you here, to have your input into these weighty conversations. Welcome!

Sincerely,

Class of 2022 and SHS Faculty