

OU BME podcast interview by Katherine Jegede
Dr. Jenny Douglas

Jenny Douglas, Katherine Jegede:

KATHERINE JEGEDE: Hello, and welcome. You are listening to the BME Network Podcast. I'm your host Katherine Jegede, and our producer in the studio is Claudia Torres. We are joined today by a very special guest. One of the things we want to do on this podcast is showcase research and academic talent, and I'm thrilled to be joined by the wonderful Dr. Jenny Douglas. I'll be calling you Jenny, if that's OK throughout the podcast, but welcome to the podcast, Jenny. It's so wonderful to have you.

JENNY DOUGLAS: Thank you, Katherine. I'm delighted to be here.

KATHERINE JEGEDE: Fantastic. We're going to talk about a range of things, but I thought it would be great, Jenny, if you could start by letting our listeners know a bit about what you do, your academic work, your research, and also other projects that you're involved in here at the OU and beyond.

JENNY DOUGLAS: OK, great. OK, so I'm a senior lecturer in health promotion, and I'm in the faculty of Wellbeing, Education, and Language Studies. And I'm in the Department of Wellbeing, Health and Social Care. And my role, my main role, is in relation to health promotion and public health. So, I've been involved in the public health and health promotion courses, and at the moment we are updating our existing-- or, the module that we have on public health and producing a new module, which will be called Public Health, Health Promotion, and Health Security that will go live in October of 2022.

As part of my work in public health, I've always had an interest-- an academic interest and a personal interest-- in inequalities in health. And so, I've been looking at inequalities that are caused by socioeconomic circumstances, race, gender, kind of disability. And that has been incorporated in the work that I do. And I've really focused on the health inequities as well as health inequalities experienced by Black women, because Black women often are-- get the-- Black women often get the, sorry, I can't say this.

Black women receive the poorest of services, and Black women also have very high inequities in health and have poorer health for a whole range of reasons.

KATHERINE JEGEDE: That's really important. It's one of those sorts of contemporary issues that we're hearing about, particularly right now at the time of recording this. We have come out or are coming out of the COVID pandemic. People are trying to navigate new normals for themselves, and so on. So, I do want to touch on that issue about Black women's health a little bit later on in the conversation, Jenny, but just in terms of what we're all going through now, the issues around health and wellbeing, it's very much on everybody's mind. What would you say are the main issues that we should be thinking about or focusing on at the moment?

JENNY DOUGLAS: At the moment, I think we should all be focusing on our wellbeing, because I think it's been an awful 18 months. Everybody is worried about COVID. Whenever you go out, you think, gosh, am I at risk of COVID? I recently went to a book festival, which I really enjoyed, and then I got back, and I thought, oh gosh, should I have gone to the book festival? There were all those people.

So, I think that we have to recognize that we are living with COVID, and we have to do things as safely as we can. I am an advocate for people continuing to wear masks and to use hand sanitizer and to keep a social distance because COVID is with us, and COVID is going to stay with us for a long time, I think, unless we actually adopt those measures. And I'm also an advocate of vaccination. I think it's really important that we protect ourselves as best we can, and vaccination is one of the ways in which we can try and protect ourselves.

KATHERINE JEGEDE: I think, you wouldn't find many people who would disagree with you there, Jenny. But just on this issue of wellbeing, and I like what you said about that kind of sense of should I have done that? Was that the right thing to do? Should I have gone to that event or what have you? And this really is taking a toll on the mental well-being of so many people. How do people take care of themselves in practical terms?

JENNY DOUGLAS: Yeah, I think in practical terms, one of the things is about doing things that you enjoy doing and perhaps doing some things which you may not have enjoyed in the past, but which you can start to enjoy now. So, for example, I've started walking a lot more. Because I find myself at a screen for much longer periods of time than I used to. So I try and make sure that I take regular walks. And that's-- and it's funny, because I went out the other day and it was raining, and I hate rain. And then as I was walking, I'll think, actually, this isn't too bad. And then I thought actually, I'm quite enjoying it. It's quite nice being in the outdoors, and particularly now, choosing times when you can go when it's light and it's bright, because the days are kind of closing in.

I think it's also really important to make sure that you maintain connections with friends and family. And because, again, because we're not seeing people as often as we used to see them, it's really important that we do talk to people, and we do make-- connect with people to make sure they're OK. Because I think a lot of people are feeling the strain of the pandemic in lots of different ways. And we must do what we can both to look after ourselves but also to check in with other people.

KATHERINE JEGEDE: That's really excellent advice, and the good thing is that it's something that most of us can do. And thinking about this idea of the things that most of us can do, you mentioned earlier on that there are inequities and inequalities in health care, for example. And you said that Black women, for example, are on the receiving end of the inequality. What does that look like? Why should we, as a wider society, care about that?

JENNY DOUGLAS: Well, one of the things that where we can see the extremities of how Black women are experiencing poor health is around maternal mortality. And we know that Black women are four to five times more likely to die in pregnancy and childbirth, and this is an appalling statistic. And I kind of feel shocked every time I say it, even though I have now been saying it for years. And although we're starting to raise awareness of this issue, it's still not widely understood why this should be the case.

Speaking to Black women and Black women in a number of communities, one of the key things is that Black women are not listened to. Health professionals don't hear Black women. They don't believe Black women. And they don't necessarily respect Black women. So that when Black women say that they're in pain or that they're-- something doesn't feel right, often, health professionals will pass that off. And when-- and often, when we're in pain, we don't get appropriate pain relief. And that's just the tip of the iceberg, the number of deaths, although it's a small number of deaths.

You know, comparatively speaking, when we take saying it's four or five times more than white women, that's an appalling disparity. But that's the tip of the iceberg. And beneath that iceberg, there's a whole range of morbidity or poor health. These are the women who haven't died during pregnancy and childbirth, but still have actually experienced something which affects their health and their later life.

KATHERINE JEGEDE: OK, and so do these sorts of disparities have an impact on other people who are not a part of that demographic?

JENNY DOUGLAS: Yeah, I think-- well, if we just stick with that demographic, it has an impact on the individuals, it has an impact on their families, it has an impact on their wider

communities. If we were to get it right, if we were to get services right for Black women, then I think that would improve services for all women.

KATHERINE JEGEDE: That's really good to know. Now thinking about these sorts of ideas within the context of education, how do educational institutions like the Open University, excuse me, create frameworks that make it possible for people like Black women to be heard when they're talking about these kinds of issues, they face in health care?

JENNY DOUGLAS: I think that at the Open University over the last sort of 18 months to two years, we have started addressing both health inequalities and educational inequalities. And one of the things that we've done at the Open University is to appoint a Dean and Professor of Equality, Diversity, Inclusion, Professor Marcia Wilson. And I think that's a really important appointment, because it demonstrates that the Open University as an institution is committed to effecting change. It demonstrates that there is support from the highest level from the vice chancellor's office. Marcia works in the vice chancellor's office and is accountable to the vice chancellor.

And I think if we want to have change in organizations, we've got to have that senior-level support. We've got to have the person at the top who is accountable to the University Council saying, yes, I support this. And by having that person at the top supporting it, it sends a message throughout the organization. It sends a message to senior managers, middle managers, heads of departments that says, we will not tolerate racial discrimination in our institution.

KATHERINE JEGEDE: I think that's really fantastic. I think it's important, but this is a BME podcast, and we're talking about issues that are important to this community, but also for other people. And we have some really wonderful examples like yourself, like Professor Wilson. I suppose it's this idea of role models. I suppose for young people coming in or not just young people, people who perhaps want to enter into research. What do we mean by role models? I know it's a word that gets used often, but in terms of people, perhaps, thinking you know, well, I want to do this type of work. But I don't see myself represented at the higher levels. Why is it important to see people like yourself, Dr. Douglas, Professor Wilson and so on in these positions?

JENNY DOUGLAS: I think it's really important to have role models to be able to see people, Black and minority ethnic people, Black and minority ethnic women, in these senior positions. I was thinking about the interview and my role model when I was like, 16, 17, was Angela Davis. And she still is my role model, and I'm a lot older than 16, 17. So she's been my role model for decades. And it was just really, for me as a teenager, although Angela Davis wasn't

in the UK-- she was in the US-- it was really important for me to see somebody-- a Black woman-- standing up for social justice.

And so, I've kind of followed her career through the decades. And you know, and it's important to see that she was a Black woman professor in California, even though when she started out as an academic, the governor of California tried to stop her appointment. I think she'd actually been appointed, and he tried to stop her from continuing as an academic in California. And I think that's really relevant to here, to us here in the UK. Because here in the UK, we only have 35 Black women professors. This is out of thousands-- I think it's about 11,000 professors-- and there are 35 Black women professors.

Now that has an impact on the generation who are kind of coming forward. Because if Black women, for example, don't see examples of Black women professors, they may feel that it's not a role that they can aspire to. And I think it's really important that we can see people that we can aspire to. And it's really important within the UK and within the UK now, that we have more Black women coming into higher education, coming into the Academy, because we need to change the research agenda. I've talked about Black women and maternal mortality. We need to be able to do the research-- and authentic research-- so we need Black women to lead that research and to undertake that research. We need more Black women who can inspire people as professors and lecturers and senior lecturers.

KATHERINE JEGEDE: I mean, 35 is a staggeringly low number. So, I do to that point, and we're doing our little bit here on the podcast to raise the visibility of talent like yourself, Dr. Douglas. And I just think it's really wonderful, the work that you do. I know you do academic and research work, but you also do media projects as well. Could you say a little something about other things that you've been involved in?

JENNY DOUGLAS: Yes. I have been involved in media projects. I'm not somebody who actually likes being filmed, so-- but I've managed to overcome that. I was recently in a documentary produced by David Harewood for the BBC. And that was about asking the question, why is COVID killing people of colour? And that was a really useful experience, because it's really important that not only that we do research in higher education, but that we can reach out to the wider community. Because I think that it's really important that the wider community are aware of research that is going on in universities.

I've recently done a short film with the Open University on racial inequalities in health. And again, that was really important to actually look at how not just COVID, but wider racial inequalities in health are affecting Black and minority ethnic communities. And that short film will be available very shortly.

KATHERINE JEGEDE: Fantastic. I can't wait to watch it. I'm really looking forward to the documentary with David Harewood. He's a presenter I do enjoy watching, particularly his own story. So, Dr. Douglas, I wish we could talk to you all day. It's been so interesting. We've touched on some of the things that you do. And it's been absolutely fantastic to hear from you. And I'm sure you are an inspiration to many, but all I wanted to say is just thank you very much for being on the program today, and I hope we do get to speak to you again soon.

JENNY DOUGLAS: Thank you very much, Katherine. I've really enjoyed it. And I hope that it is beneficial.

KATHERINE JEGEDE: I'm sure it will be. Thank you, again.