Confronting Racism:

Applying VitalTalk talking maps to racist comments and microaggressions

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VitalTalk has recently outlined valuable communication skills for bridging inequity during clinical interactions (https://www.vitaltalk.org/guides/bridging-inequity/):

1. Watch for behaviors that's signal mistrust
2. Probe for experiences of racism
3. Acknowledge harms that occurred from prior care
4. Offer to partner in the way the patient wants
5. Invite the patient to bring in important people from their community.

Do these communication skills apply outside the clinical setting, and if so, how? Although whites have the privilege to ignore racist comments and microaggressions targeting Blacks, failure to confront them perpetuates racism in our society. Blacks may fear the immediate consequences of confronting them or doubt that it will change the aggressor's behavior in the future, but the long-term negative effects on their mental and physical health can be cumulative and serious. Responding effectively in the moment can be difficult, and unplanned defensiveness, anger, or hostility may be counterproductive. Appealing to fairness has been shown to be more effective.

There are parallels from these non-clinical interactions to the challenges that health providers face when giving serious or unwanted news. Because of this, the same tools (talking maps GUIDE and NURSE) may be useful, and their application may benefit from practice in a simulation setting.

Get ready: Often you have only a few seconds to prepare a response to racist comments or microaggressions, but those few seconds can be used to take a deep breath, to consider whether the setting is safe for responding, and to develop a realistic goal for the encounter.

Understand: Buy some time by asking questions and exploring the motives of the aggressor. "I'm sorry—could you say that again? I want to make sure that I heard you correctly." "Could you share with me what you meant when you said . . .?"

Inform: Ask permission to determine whether this is a teachable moment. "May I respond to what you said?" If the answer is no, it is time to stop—you have probably already accomplished the goal of pointing out to the aggressor and bystanders the inappropriateness of the racist comment or microaggression. If yes, give a headline with both information and meaning, e.g. "That joke you told was racist, and I was hurt." Wait for a response. Expect emotion.

Deepen by responding to emotion: Use the NURSE acronym to respond empathetically (even though you might not feel like being empathetic):

    Naming: "You seem upset that I told you the joke was racist."

    Understanding: "I imagine that you were hoping that comment would help you make friends. It is natural to want to make friends."

Respecting: "I can see how much this circle of friends means to you."

Supporting: "I can tell that you're a good person who doesn't mean to hurt others or be unfair."

Exploring: "Have you had experiences like this before? Have others said things that hurt you?"

Equip: Does it appear that the aggressor learned anything about racism and microaggressions? Or that bystanders learned how to respectively confront and change antiracist behavior? Do you sense that they might be open to learning more? If so, are you willing and prepared to recommend how they can continue their anti-racist journey?

Clinical providers who are already familiar with the GUIDE and NURSE talking maps when giving serious or unwanted news may wish to practice using them for racist statements and microaggressions directed at themselves or those around them. Ideally this will be done in a brave environment with BIPOC colleagues who are willing to share their experiences to create brief scenarios and join in simulation exercises. Byrd (2018) has described a role-playing workshop for responding to microaggressions that could be adapted to include responses from VitalTalk's talking maps rather than the eight she suggests (some of which align with VitalTalk principles and some of which don't). After reviewing the definition and adverse impact of microaggressions, she recommends that the learners break into groups of three in the alternating roles of aggressor, target, and bystander in brief scenarios (this could also be done virtually with breakout rooms). Byrd states that "research remains to be done on the effectiveness of different responses and on how best to teach targets and bystanders to respond." Data collected from workshop participants on which responses to microaggressions are the most effective would be a valuable contribution to the literature on anti-racism.

Byrd CM. Microaggressions self-defense: a role-playing workshop for responding to microaggressions. Social Sciences. 2018. https://www.mdpi.com/2076-0760/7/6/96/htm