



[Aron King] Being an African American male, I'm at this intersection of two underrepresented groups in nursing. So although I had a great experience overall in my nursing program, there were times where I experienced some either microaggressions or some implicit bias from rotations in the hospital, or there's certain things that were said in the classroom. And this is not always things that are ... They're not direct attacks. It's just things that happen in conversation, and people ask certain questions that are a little bit offensive. It's just not always something that people intentionally decide to do, or they sometimes just come up in conversation, and it's something you repeatedly hear.

[Welcome to Season 2 of *A Nurse First*. This is Aron King, telling his own *A Nurse First* story.]

[Aron King] Being a Black male in nursing, everybody wants to like, "How did you get here? Why are you here?" I'm a pretty big guy—I'm 6'3", I'm 280 pounds, so I don't fit the typical mold of a nurse. And so a lot of those come up from patients, nurses, doctors, family members. That hasn't really changed for me as a nurse leader. When they ask to speak to the manager, and I walk in, then it's like, "Whoa! Okay, who's this guy?" Right?

[When it came time for Aron to decide what to focus his master's research on, the microaggressions he's experienced his whole life weighed heavily on his mind. Finding a mentor on his campus who specialized in working with marginalized communities sealed the deal. Interest quickly grew in the data he had collected, and an opportunity to present on a global stage landed in his inbox.]

[Aron King] So my first opportunity to present internationally was at the Sigma Conference in Scotland. I presented alongside with my mentor and my thesis chair, Dr. Kupiri Ackerman-Barger, on the research that we're doing on microaggressions among health profession students. And so we looked at the impact on depression and their satisfaction with the program.

Oh my goodness, I was so nervous! Oh my goodness! So first of all, I am speaking alongside Dr. Kupiri Ackerman-Barger, which I have so much respect, who's spoke everywhere. She's been on panels with Dr. Grant from AMA, she's spoke at campuses all over the country. And she's a professor, she's very well-spoken, she's published. And so here I am speaking next to her. And I had the opportunity to speak on the topic so many times, but I think there are some people that can relate. With Covid-19, all that was in the comfort of my office or my room or wherever it may be. And so here I am standing in front of all these professors and deans and all these people in research at an international conference. I was like, "Okay, I got to review, I got to review, I got to read. I know the questions are going to come. There could be some other experts on the topic that want to talk." And that was what made me the most nervous, is the unknown.

So I did a lot of time reading and just kind of refreshing myself. And that's what I did to kind of like alleviate some of the stress, is just to make sure that I was on my Ps and Qs.

The data really highlight that the students that experienced the most microaggressions had the highest symptoms of depression and that wasn't just students of color, that was across the board. So any student, the more microaggressions that you experienced, they reported higher symptoms of depression and also less satisfaction with their overall education. And so people really weren't, first of all, seeing the numbers and seeing when you look at the racial differences, when you looked at the students of color and the non-Latino white students, but then also looking at the breakdown of what we categorize as nursing students of color. So our Black or African American students, our Hispanic students, our Asian Pacific Islander students and what they experienced, their experience of microaggressions, the number that they experienced. And then you start to look at the depression, symptoms of depression, satisfaction with their overall program. And so that was very important, that it's something that people ... They just think like, "Oh, you may have said something that offended someone. So what?" Well, understand they are students in nursing school there. It's not easy, nursing school's not easy, and the last thing you need to do is have these comments or statements that make you feel that you don't deserve to be here.

So now that we know this is an issue, what do we do? Dr. Kupiri Ackerman-Barger has also published an [educational toolkit on addressing microaggressions](#). And so that's using the triangle model, which really educates any students and individuals how to address microaggressions. And it really targets the community and what I mean by community is the classroom, the community of the classroom, the community of the campus. And it's like basically says, "Microaggressions happen, we understand that they're not always intentional, but how do we address them?" Right? So if you're a recipient of a microaggression, or you're a source of a microaggression, or maybe you're a bystander, how do you function in that scenario? In that moment, what do you do?

And I think the most important thing is to be receptive to the feedback as a source. And I tell people all the time, like I've been the source of microaggressions. We know more often than not that microaggressions target racial and gender, so whether you're African American or Hispanic or a female or a trans student, you're going to be likely the recipient, but sometimes you're the source. And I share that, and I share my experiences being the source of a microaggression and how I address that.

But the most important role, I think, is the bystander because people will not always speak up when these happen. Because there's several things that occur when you're a recipient of a microaggression, is you don't want to be that person that's labeled as sensitive. Right? You don't want to be the person that blows things out of the water. And I think that's often what goes through your head is, "How do I address this?" And other students, or your peers, are not always the source. Sometimes it comes from faculty and staff, sometimes it comes from ... It could be your preceptor. And you have to think about your position as a student, the power dynamics there. And so sometimes a bystander can help. First of all, acknowledge the experience that you had and also be the middle person to possibly speak to the professor. And it was great that that article was already published, and we were able to provide that resource for the people that watched our presentation.

So if you have the opportunity to attend a Sigma event, I think it's an amazing experience to be surrounded by researchers and nursing professionals that are content experts. You have the opportunity to network with others, you also have the opportunity to maybe get some inspiration on a topic if you're a student. I think it's a good opportunity to see and connect with other professionals on social media

and kind of follow their careers. I think the biggest is to find someone that are content experts in something that you're studying. I know that when I spoke at Sigma, there are a couple people approached me and was like, "Hey, I would like to know more," and so we were able to share links to the published study.

It is a very important step in your career to attend a Sigma conference and connect with these people outside of your immediate area.

[Insight from his master's research and new connections inspired Aron to continue his education toward a PhD in order to gain access to more resources and deliver them to the community. His dissertation topic reflects his desire to be a leader for change.]

[Aron King] I never thought I would ever go back to school. It crossed my mind that, "Hey, maybe I should continue on with my PhD." I really loved all the research that I did in my master's program, and I had a good opportunity to present and disseminate information from the study, so I threw my hat in the ring and applied for the PhD program, and that's where I am today.

My dissertation is going to focus on interventions through the Barbershop Health Talks. I'm an executive member for the [Capitol City Black Nurses Association](#). And one of the interventions that we do in the community is Barbershop Health Talks, and that focuses on targeted education in ... among Black males in the community by way of the barbershop. The specific topic that I'm going to focus on is tissue and organ donation, which in African American community is definitely a hot topic, just because of the traditional mistrust in medicine and some cultural and religious connections there.

Historically, barbershop interventions have been going on since the '80s, and I had some experience with a barbershop intervention while in my undergrad program while living at Redding. And my partner, Carter Todd, he actually did his master's thesis on the perceptions of the nursing profession amongst Black males. And so when we got together, we partnered up to create this Barbershop Health Talks. It's a partnership with the [Greater New York Black Nurses Association](#). And we've pretty much had a couple events, one being a live event targeting different topics such as manhood, fatherhood, Covid-19, mental health and that was a live event that we did and shared a stream.

This year we had an opportunity to record a ... do a prerecorded intervention which was more targeted on gun violence prevention. So we had a couple different guests on that we interviewed one on one, one being a trauma surgeon, our trauma attending at [UC Davis](#), who champions the Turnaround Program, which is social services and assistance for those involved in trauma. The other guest was a club promoter. Sacramento had a mass shooting at the beginning of the year, this gentleman worked ... He was the promoter at the club or manager, and so he came and talked about the experience of the shooting and what he's done to be there for his staff and just to overall talk about the experience. And the third guest was a mental health professional that talked about trauma-informed care.

And so I love doing that kind of work. And the program that we have has pretty much been pretty well received in the community and amongst other professions. And our partners, we partnered with a couple different groups, [TRAPMedicine](#), some local community groups. And so for my dissertation, I wanted to really focus on those kind of interventions.

So the barbershop interventions have always traditionally been held where you go into barbershops, and you educate the men about hypertension, maybe do blood pressures or diabetes, you do some blood sugars. Well, Covid-19 really set a barrier for us. And so we wanted to do something where you could cast a wider net and that we weren't in the barbershop, and where we're supposed to be promoting social distancing, and we wanted to reach a larger audience.

So during our live event, what we did was we partnered with some of the local barbershops. And every barbershop has a television, and most televisions are smart televisions, so having a live event, we were able to stream onto LinkedIn, Facebook, and YouTube. They could kind of watch what was going on. They could hear the conversations, and these conversations were just meant to spark other conversations, right? And a lot of this started to come up. We had our nurses, two nurses stationed at each of these partnering barbershops, and they were able to connect with some of the gentlemen in the barbershop. They were... We were able to collect some surveys about what they thought about the episode.

It's been well received; it's had a lot of amazing feedback. One of the comments that we got in the survey was, "You really changed the image of what a healthcare professional or what a doctor looked like." All of our guests were men of color. To have someone sitting there in jeans and Nikes and a T-shirt like a regular person you would sit next to in a barbershop or run into at the mall or a coffee shop or just a regular person, just in a casual setting. We don't have people on stage in white coats and scrubs. When they asked what to wear, I said, "Oh, just come comfortable." I mean, so that was one of the biggest takeaways, is people saying, "You really changed the image of what I thought about healthcare professionals." Because we have this, just like you have an image of a nurse or a doctor, and that image may not look like me, and that's okay. But for people to understand that there's other people out there that are healthcare professionals are knowledgeable on these topics is great.

One of the gentlemen that we had was a neurosurgeon. He was on there, a young guy. I think Dr. Edwin is ... He might be in his 30s. A young guy, you wouldn't know, you would just think he's just another guy. Maybe he's in college, I don't know. And he's up there talking, he's like, "Yeah, I'm a neurosurgeon, I'm over at UC Davis," just talking. And I think everyone was kind of blown away, like how many Black male neurosurgeons do you know? And he's just a normal guy just talking about regular things. There's so many topics that we can cover and so I think that's one of the reasons why choosing as my dissertation will definitely give it wings, because I will have dedicated time to spend, and I will also get resources to help me support in the goal of validating this intervention for the community.

[You are a coauthor of a book that recently published. What is the book about? And what did you learn from this writing experience?]

[Aron King] The book that I was a part of was [*The Diaries of a Resilient Black Nurse*](#) and so this was a book that was published last year. It was another opportunity that came through networking. They were wanting to share stories about nurses of color and their experiences. You could share any story. You could share the story of your career, you could share the story of your childhood, how you got to where you are now, experiences that really shaped who you are. And so I was able to speak a lot about my childhood and growing up. My brother and I grew up with my mother. It's not something that's vastly unique. We did a lot of moving, and I just really talked about the experiences that I had along my journey, things that could have knocked me down.

In high school I was in remedial classes. My reading and writing was way behind. There, their, they're, oh, that was like a date... That was a... That was... That was end game for me!

People who told me that I couldn't or I shouldn't, I used those experiences as stepping stones to jump higher. So who would have thought that I, from an underperforming high school, would be traveling to Scotland to present? We all feel like we don't belong here and that somehow there was some mistake that we got brought into this space, right? And I think that that often happens in nursing, where you feel that our profession doesn't deserve a seat at the table. So when we're working in communities or sitting on boards, especially if it's interdisciplinary, we're like, "Well, I'm just a nurse," you know? And you just kind of down shadow. Enter the space and own it. You're supposed to be here. Just own it, just own the space.

[I also want to make sure we talk about the 40 Under 40 award you received from the National Black Nurses Association. Congratulations! What an honor.]

[Aron King] It was definitely an honor. And I think that oftentimes when we talk about organizations like NBNA or the BET Awards ... why do we have these organizations that specifically target the Black audience? But I think that oftentimes the work that we do is not always recognized or appreciated. And so I think the highest honor would be to be recognized by your own community. And so that's why the experience of receiving the Under 40 Award was so important to me, is that others, not only in Sacramento, but nationally at the NBNA were recognizing the work that I was doing in the community and the programs that I was creating. And so it was just amazing experience.

I definitely am working just to make sure that if there's ever an opportunity to nominate someone that I know that's doing impactful work, to definitely recognize what they're doing, and to honor them. And I understand that not everyone's doing it for these reasons, but think it's definitely an amazing experience to recognize someone and so I was really appreciative of that.

[Thank you for listening to *A Nurse First* from Sigma. If you loved this episode, do us a favor and subscribe, rate, and leave us a review. It is very much appreciated. For more information about *A Nurse First* and Sigma, visit sigmanursing.org. Until next time.]