

**GLOBAL FEMINISMS
COMPARATIVE CASE STUDIES OF
WOMEN'S AND GENDER ACTIVISM
AND SCHOLARSHIP**

SITE: UNITED STATES

**Transcript of Dona Murphey
Interviewer: Abigail Dumes**

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Dona Murphey is a neurologist, neuroscientist, historian of science, and community organizer. She has navigated local, state, federal, and international partnerships across academia, government, and health tech sectors in rapid response and strategic mobilizations at the intersections of race, poverty, and immigration. Her belief in the foundational democratic rights to health, migration, public education, and voting have informed her extensive grassroots activism and nonprofit advocacy and a run for her local school board in Texas. Her current project is a public benefit start-up that marries her scientific and clinical expertise with a community organizing ethos to develop a digital diagnostic tied to culturally and language specific content and community health worker access to help eliminate racialized health disparities in dementia.

Abigail Dumes is a medical and cultural anthropologist and an assistant professor in the Department of Women's and Gender Studies at the University of Michigan. Dumes received her PhD in sociocultural anthropology from Yale University, and her first book, *Divided Bodies: Lyme Disease, Contested Illness, and Evidence-Based Medicine*, was published by Duke University Press (2020). Her ongoing research explores the relationship among gender, contested illness, infectious disease, and environmental risk in the United States; she is working on a new project on Long COVID.

Abigail Dumes: Hi! My name is Abby Dumes. My pronouns are she/her. I'm a white woman with brown hair in a braid. I have on a blue and brown floral print shirt, with turquoise earrings. Over my left shoulder is a red framed painting, and to my right are bookshelves. Oh, for some reason, Dona, your sound isn't working.

Dona Murphey: I'm Dona Kim Murphey. My pronouns are she/her/ella and I am a Korean American woman, with brown hair—some blonde highlights. I'm wearing an orange shirt, and in the background is a bookcase with many colorful books.

AD: Thank you so much, and Dr. Murphey thank you so much for being here and being willing to share your story with the Global Feminisms Project. I'm going to briefly introduce you and then we'll move on to our questions.

Dr. Dona Murphey is a neurologist, neuroscientist, historian of science, and community organizer. She has navigated local, state, federal and international partnerships across academia, government, and health sectors and rapid response and strategic mobilizations at the intersection of race, poverty, and immigration. Her belief in the foundational democratic rights to health, migration, public education and voting have informed her extensive grassroots activism¹ and nonprofit advocacy, and a run for her local school board in Texas. Her current project is a public benefit startup that marries her scientific and clinical expertise with a community organizing ethos, to develop a digital diagnostic tie to culturally and language specific content and community health worker access, to help eliminate racialized health disparities in dementia.²

So I thought we would start a little bit with where your story begins. You know—as you think about where you are today, and the work that you're doing—how would you depict the journey that brought you to where you are?

DM: So I think that many things in my life have informed that journey. I'm a second-generation Korean American. Grew up in a household with two working parents. Was raised in good part by a series of Central American nannies who lived with us. Speak Spanish and English fluently, have some rudimentary Korean language skills. I grew up in Houston, Texas, which is one of the most diverse cities in the country. Ended up going to—

¹ Grassroots activism is defined by activism at the local level. This refers to people in specific communities who work together to kickstart change at a local, federal, or even national level through their efforts. ("Grassroots." Wikipedia.

<https://en.wikipedia.org/wiki/Grassroots#:~:text=A%20grassroots%20movement%20is%20one,regional%2C%20national%20or%20international%20level>. Accessed 15 September 2022.)

² Dementia refers to the loss of memory and neurological capabilities. Dementia can be mild or very severe, to the point where an individual may not be able to perform basic motor functions. ("Dementia." Mayo Clinic. <https://www.mayoclinic.org/diseases-conditions/dementia/symptoms-causes/syc-20352013>. Accessed 15 September 2022.)

Well, I guess one of the formative events in my life, I think, was my participation in a program called Amigos de las Americas³ when I was a high school student. In which I went—a program in which I went to Ecuador.⁴ It was kind of involvement in a public health project there as well as cultural exchange, youth leadership development, and yeah, I think that really kind of opened my eyes up to life in other parts of the world. And came back—went to Harvard⁵ undergrad, was a history of science major. Ended up going into medicine with the intent at that time—when I began—to go into public health policy or health policy. Ended up getting distracted for about a decade in science. Ended up, you know, kind of in the MD/PHD program at Baylor College of Medicine⁶ in Houston.⁷ And yeah, did training there for eight years in the combined degree program in neuroscience. Did a residency in neurology and fellowship in neurophysiology. Ended up working for a startup company in Southern California for six years after graduating—or not graduating, but completing all of my academic training. Was really unhappy with kind of values misalignment with that company. Ended up part of the great resignation or great reevaluation post-- like the initiation of the COVID⁸ pandemic, and in 2021 left that position. Was really struggling about where to go next—but had spent actually, during that time that I was with that company—probably a second or third job's worth-- in advocacy in the topics that you mentioned, or the areas' issues that you mentioned earlier in my bio, and decided that I needed to—whatever was next—I needed to be able to combine all of those extracurricular activities, which were my passions, right? with what I was doing for a living. And ended up deciding to start my own company. Which is something that very much incorporates all of my values in the dementia space, caregiving space.

AD: And this was to 2021? Is that when?

DM: Yes, that's when I left my prior company.

³ Amigos de las Americas is an organization in which volunteers participate in service projects in different countries, tackling community-level issues such as health and disease. (“Why AMIGOS? International Volunteer Programs.” Amigos. <https://amigosinternational.org/volunteeropportunities/>. Accessed 15 September 2022.)

⁴ Ecuador is a country located in Western South America and is known for its Galápagos Islands. (“Ecuador.” Wikipedia. <https://en.wikipedia.org/wiki/Ecuador>. Accessed 15 September 2022.)

⁵ Harvard is a private university located in Massachusetts. It is well known for being an Ivy League school and its academic prestige. (“Harvard University.” Wikipedia. https://en.wikipedia.org/wiki/Harvard_University. Accessed 15 September 2022.)

⁶ The MD/PHD program at Baylor college of medicine allows students to train in both clinical medicine and research. (“Curriculum.” Baylor College of Medicine. <https://www.bcm.edu/education/education-programs/md-phd-program/curriculum>. Accessed 15 September 2022.)

⁷ Houston is a city located in the state of Texas near the Gulf of Mexico. It is one of the most populated cities in the state. (“Houston.” Wikipedia. <https://en.wikipedia.org/wiki/Houston>. Accessed 15 September 2022.)

⁸ COVID, also known as Coronavirus, is a disease that targets the respiratory system and can trigger many long-lasting and severe effects in some individuals. (“Coronavirus.” World Health Organization. https://www.who.int/health-topics/coronavirus#tab=tab_1. Accessed 15 September 2022.)

AD: And the previous company that you were working for, was that medical in nature? Or had you?

DM: Yes, it was an EEG⁹ diagnostics company, EEGs, or like brainwave studies that we perform clinically. Yeah.

AD: So, I guess the next question would be thinking a little bit about sort of the background to your work. And—what drew you to the work initially. You know, we can either talk about what the work that you're doing now, or the work that you have done and synthesize some of that. And how some of this work has been shaped by experiences from your own life, which you've mentioned a bit. And whether any of these parts of your career journey has been a result of your engagement in feminist activism.

DM: Sure. So, I guess one thing that is important that I failed to explicitly mention is that during the 2016 election I became a lot more explicitly politically involved. Prior to that, I mean decades prior, I had been very civically engaged. I had started like a youth. What was it—a youth program in—Yeah, it was basically a civic engagement. It was kind of understanding the issues that your community is forced to navigate, basically. And it involved youth. So, it was kind of peer-to-peer civic education. And I started that after graduating college, and I asked actually to take a year off between college and starting medical school in order to grow that program which ran in like 13 area high schools in the Houston area.

AD: Oh, wow.

DM: Yeah, for several years, with me intentionally like leading that. After that it may have gone—It might have persisted in in the high schools where it was, but I did not continue to run it. Yeah. And I actually got a scholarship to Baylor College of Medicine, like the Medical School part of my training there before I joined the combined degree program which is actually paid by the federal government because of that work, and so I was involved. I was also really involved with the Harvard Club of Houston,¹⁰ and we were doing work with first-generation college goers and outreach to—you know—kind of young,

⁹ An EEG, or electroencephalogram, is a medical test administered by attaching electrodes to an individual's scalp that record electrical impulses in the brain. ("EEG (electroencephalogram)." Mayo Clinic. <https://www.mayoclinic.org/tests-procedures/eeg/about/pac-20393875>. Accessed 15 September 2022.)

¹⁰ The Harvard Club of Houston is a club consisting of Harvard alumni living in Houston, Texas. This club holds events for alumni and is involved in community outreach programs in Houston as well. ("Our Mission." Harvard University Club of Houston. <https://hchouston.clubs.harvard.edu/mission.html>. Accessed 15 September 2022.)

promising students from communities of color, predominantly. But again, I had never tied that very explicitly to power and systems. And then, when the 2016 election was happening, I kind of just ended up in this position where I had created this digital community that exploded in size on Facebook. And there were—I mean almost 30,000 people in that space overnight. And it was a very, very active space. I think, for Texas especially, there were many people who were not in predominantly blue areas, and even those of us who were, who felt very alone. And it was a way of connecting, right? Like this digital platform was a way for us to connect with one another in that, and this was actually prior to Trump winning that election. And I thought at that time—I mean, it was kind of amazing to me what happened so quickly with that digital space. I thought at that time—

AD: —name of that digital space?

DM: It was—We called it ultimately “Pantsuit Republic.”¹¹

AD: Ah-hah.

DM: And it was one of these state groups that came out of a very huge group nationally called Pantsuit Nation.

AD: Right.

DM: Which is now part of a super majority. So, yes, I started the Texas group for that. And I knew that—I knew that, you know, a Clinton¹² victory would still be super problematic for many communities. And so I figured, if we had this digital space with so many people who had gathered in it, who did see eye to eye on a lot of these issues, that we could advance some of those issues during a Clinton Presidency, right? And then what happened is that she did not win, right? And then there was just that much more energy, right?

AD: Mm-hmm.

DM: And that space became an organizing space for things to start happening all over Texas, and it was very much rooted in feminism and women, right? And there was a lot of—

¹¹ Pantsuit Republic, also known as Pantsuit Nation is a group of Hillary Clinton supporters from the 2016 Presidential election. Now, this group advocates for reform, justice for marginalized groups like immigrants, reproductive rights, and more. (“Pantsuit Nation.” Wikipedia. https://en.wikipedia.org/wiki/Pantsuit_Nation. Accessed 16 September 2022.)

¹² Hillary Clinton is a politician and wife of former president Bill Clinton. She was the First Lady of the United States from 1993-2001, Senator of New York from 2001-2009, and secretary of state from 2009-2013. She was also the Democratic representative for the presidential election in 2016. (“Hillary Clinton.” Wikipedia. https://en.wikipedia.org/wiki/Hillary_Clinton. Accessed 16 September 2022.)

it was very interesting because I didn't know a lot about feminism, actually, at that time. But kind of was forced to contend with it, because there were arguments that would come up in the space between, you know, cis-women and trans-women, or within white women and women of color. And so I had a lot of learning, right? Like a lot of political education that I had to do. And also, I think, used that opportunity to pull people along with me, right? Who were also not politically educated in the same ways. So yeah, we actually filed for corporate status for that group.

AD: Oh [nods head up and down]

DM: We did—Actually, a lot of our state affiliate, sorry, city affiliates, wanted to do all kinds of activities—advocacy activities, activist, you know, like campaigns. So we wanted to kind of protect ourselves to give ourselves an identity. We filed for corporate status with the idea that that would give us the greatest flexibility in anything that we wanted to do and would protect us. Not because we were trying to make a profit off of something. We didn't do any profit-making activities at all. Ultimately. But yeah. So, I started that organization, and I think from there became very, very involved. Very deliberately in immigration, because I knew that was a huge issue in Texas as a border state. It had been for a long time, and that we were very anti-immigrant. And as an immigrant I felt that—you know, I wanted to be active in that in that advocacy. Again, did not know very much about it at all, and involved myself in the beginning. And I continue to involve myself in organizations that are like impacted community-led. At that time I joined the youth-led—undocumented youth-led organization called, United We Dream¹³—this the shirt that I'm wearing right now that says, "here to stay." Umm—yeah. And then, yeah, I got involved in immigration advocacy. Realized that it very much intersected with criminal justice advocacy, racial justice, gender justice—many, many different areas of advocacy. Realized also that as I got out there in the community and began speaking with the communities with whom I was doing that work, that for better or worse, the fact that I have the pedigree, the credentials that I have, that people heard me more than they heard people who were more directly impacted by these very anti-immigrant policies.

AD: Mm-hmm.

DM: And so I started thinking more about how I could leverage that in service to people who are not being heard. And how I could actually use that opportunity to create space for people to be heard themselves, right? And ideally to not be speaking for them.

¹³ United We Dream is an organization consisting of young immigrants who are passionate about and advocate for immigrant rights. ("Who We Are." United We Dream. <https://unitedwedream.org/who-we-are/>. Accessed 16 September 2022.)

There is a group called Doctors for Camp Closure,¹⁴ which is a group of activist physicians. They're not—it's not actually even an organization, and if—we thought about whether to make it some official organization, or to keep it what it is, and decided on the latter. Yeah, I don't know if I should stop there, maybe?

AD: No, this is wonderful. So what do your activities in those organizations look like? Are they daily? Or are they sort of periodic throughout the year depending on what campaigns you're running?

DM: Yeah. So from 2016 through 2020—As I said, I probably spent about 40 to 60 hours a week on those activities.

AD: Wow.

DM: That's above and beyond the job that I had [laughs].

AD: Right [smiles].

DM:—the paid labor that I had. It was all of my unpaid labor. But my passions. So I pursued them. After 2020 I got sick with COVID. Ended up having Long COVID.¹⁵ Which really, I think, impacted my ability to be *that* engaged, and really started to had to—I started having to think about how to be more strategic, I guess? In where I was spending my time. And also wanting to just find the kind of political homes that were more aligned with my values.

AD: Right.

DM: So after 2020 it's probably been more like. I don't know—15 hours a week? Something like that. Yeah.

AD: Maybe we could talk a little bit about your COVID experience; when in 2020 was that? And maybe—Yeah.

DM: So I got COVID at the very beginning of the pandemic. In March 2020. So, actually before, or *as* the national emergency, or whatever it was—was declared. *That's* when I got

¹⁴ Doctors for Camp Closure, also known as D4CC, is an organization of health professionals advocating for better healthcare and treatment of immigrants at the border. (“Who is D4CC?” Doctors for Camp Closure. <https://d4cc.squarespace.com/who-is-d4cc>. Accessed 16 September 2022.)

¹⁵ Long COVID is a term that refers to when an individual has residual effects or symptoms from COVID-19 and can last weeks to months and potentially longer after initially testing positive. (“Long COVID or Post-COVID Conditions.” CDC. <https://www.cdc.gov/coronavirus/2019-ncov/long-term-effects/index.html>. Accessed 16 September 2022.)

COVID and—yeah, it was it was pretty rough for a month, but I was actually still able to work during the time that I was acutely ill. And then I ended up having, like, a secondary bacterial infection. I ended up having a lot of cognitive and kind of psychiatric issues that were persistent.

AD: Mm-hmm.

DM: And yeah—So I really, really struggled with it for like 18 months, actually.

AD: Wow.

DM: Got involved very early with the Long COVID community. I actually, at the beginning of the pandemic prior to getting sick, I was already doing advocacy around COVID.

AD: Mm [nods head up and down].

DM: So I held, like the first community conversation on COVID in the greater Houston area in my community.

AD: Wow.

DM: And that was in February, Yeah.

AD: So this was in February? Uh-huh.

DM: Actually I put—I started planning it in February, and then I actually hosted the event on March fifth, or sixth.

AD: Wow.

DM: And then ended up getting sick almost immediately thereafter. But yeah, I mean that was—that was a very interesting time. I didn't intend to get so involved in that advocacy, but always have been doing things in my community. As I mentioned to you, I had run for school board, and had always been involved in ways to, you know, kind of leverage my medical and scientific background. Also just my identity as a parent in the district; as a person of color in the district, to do advocacy where I felt like it was needed. And this was one of those places where I felt like it was needed, because something was coming, and nobody was talking about it in our community. So—

AD: What was the response at that March fifth or sixth meeting?

DM: I think people didn't really know what to make of it at that point. They—the attendance there was pretty low—like the people who showed up in person. And that may have also been because people were a little bit concerned about showing up in person, but I think that most of it, given my knowledge of this community, was that they just didn't think it was a big deal yet. Didn't know what to think of it. I did have like 3 different like local media stations, including a Spanish language station, come out and cover it. We worked with Brazoria County NAACP¹⁶ to make sure that we were reaching communities of color here. Yeah. So a lot of the things that ultimately became super problematic in the pandemic, right? How like certain communities were disproportionately impacted: I was already thinking about those things like in February. And yeah. And then COVID happened, and I was not able to be as active as I was. Although, even while I was ill, at the beginning of my illness, I was like running—like immigration like actions at immigration detention centers. I went while I was sick, you know, pretty confident that I was not gonna give the illness to anyone at that point, because I was like a month, or months out from the acute symptoms.

AD: And at that point was it fatigue? And the cognitive? And?

DM: That was mostly it. Yes.

AD: —that you were experiencing?

DM: And I ended up like doing a lot of like national advocacy around this, too, because I was, like I say that I was in involved very early with this community of people who were gathering because they didn't know what to do with their symptoms that were prolonged, and I've continued to be very active with that community. So, I served on as an external advisor to a PCORI grant,¹⁷ which is a Patient-Centered Outcomes Research Institute grant, to a group called Body Politic.¹⁸ And also, they had invited me recently to be a part of the committee of people who are evaluating grant applications for up to 5 million dollars of private money, actually, coming from a donor.

¹⁶ The Brazoria County NAACP, or National Association for the Advancement of Colored People, is a specific branch of the national NAACP organization in Brazoria county, Texas that fights for the equality of African Americans. ("Our Mission." NAACP Brazoria County Branch. <https://www.brazoriacountynaacp.com/>. Accessed 16 September 2022.)

¹⁷ The PCORI grant, or Patient-Centered Outcomes Research Institute grant, funds research projects that investigate diseases that affect marginalized populations like women and individuals who live in rural areas. ("What & Who We Fund." PCORI. <https://www.pcori.org/funding-opportunities/what-who-we-fund>. Accessed 16 September 2022.)

¹⁸ Body Politic is an organization of healthcare professionals and people who have been affected by COVID-19. This organization works to create a community and provide resources to people suffering with this disease. ("Our Story." Body Politic. <https://www.wearebodypolitic.com/about-body-politic>. Accessed 16 September 2022.)

AD: Wow.

DM: So I'm involved as a patient; as a community organizer; as a physician scientist. In all of those capacities really, I think, to inform you know how we decide who gets this money to research this problem.

AD: Mm-hmm. In the conversations that I've had with Long COVID patients and advocates the theme of resting and pacing has been quite salient. As you think about your experience of being sick and continuing to work: do you have any thoughts/reflections about resting and pacing?

DM: And yeah, I've always had issues with this [snickers]. I would—you know—lose sleep chronically. I think, throughout my life I've been this way, right? I am always doing too many things.

AD: Uh-huh [nods head up and down].

DM: And I think I had that expectation of myself, and I think because I am just this way—people around me also end up, I think, having that expectation of me. That I'm like extremely productive, that I get like, you know, 3 people's jobs done, right? [chuckles] like at the same time.

AD: Right.

DM: And so it was really hard, I think, when I was not able to do that. And it was really clear that I *could* not do that, or I would physically pay for it. And it took a lot of adjustment. I had to get a therapist to like work through that, and like my own—like, perception of myself and self-worth. Yeah, it was—it was really challenging. And I think I still struggle with it a bit, and I'm still, you know. Now that I'm feeling better, I've kind of reverted to my old ways, and I do notice that I pay for it, right? Like I start having those symptoms again, and I know the consequences too, right? I'm a neuroscientist, I'm a neurologist. I know the acute and the chronic consequences of sleep deprivation.

AD: Right.

DM: And I still do it it's just—it's really—it's bad. It's a habit. And because now I'm not consistently with this Long COVID symptoms—I'm reverting to those bad habits again unfortunately; I have to try to hold myself accountable.

AD: Yeah, yeah, that was going to be another question, I had was experiencing something as a patient that was within your realm of expertise as a scientist—

DM: Yeah. That's been really interesting. I mean, like in some ways I feel very grateful, because I understand what is happening to me, and I don't dismiss my own symptoms, right? And I think that people who don't actually have that understanding: they question whether their own symptoms are like things to be concerned about. And when they do then feel ultimately, "Yes, this is something that bothers me. This is definitely a change from where I was before," and they seek counsel, a lot of people were reporting that their concerns were being erased by physicians, right? And that really was pretty tragic to me. Because I—again, I have this privileged understanding of the brain. And so, for me, I can validate my own symptoms.

AD: Mm-hmm.

DM: Yeah, I mean. So, I tried to make myself available through Body Politic and otherwise on Facebook whenever I would post about this, and people would reach out to answer people's concerns, right? And to validate their symptoms, because I found so often that they were unfortunately talking to physicians who were very dismissive, and I think some of that was probably because physicians didn't know what to do with it. Right? To be fair. Especially earlier on in this disease where we didn't even know that it—well, I mean I knew because I intimately experienced it. And also I read about the—you know. I *read* the stuff coming out of Wuhan¹⁹ and Lombardy,²⁰ and like *avidly* read that stuff. And so: they were talking very early about neurological symptoms. So I knew, but like most of my colleagues didn't know. I'm sure because they were actually dealing with COVID and patients, and I don't actually see patients. I read brainwave studies. So actually *dealing* with the reality of that, and how insane that was for my colleagues, I understand how they couldn't keep up with all of that information.

AD: Right.

DM: And you know—they didn't know what to do with it, and usually patients are seeking answers, right? To their concerns. But they are also seeking validation, I have to say—not

¹⁹ Wuhan is the largest city and capital of the Hubei Province, China and is known for being a busy trading and port city. Coronavirus is known to have originated from Wuhan in the beginning of 2020. ("Wuhan." Wikipedia. <https://en.wikipedia.org/wiki/Wuhan>. Accessed 16 September 2022.)

²⁰ Lombardy is a region of Italy. In relation to the COVID-19 Pandemic, Lombardy was the first area outside of Asia to have an individual test positive for COVID-19. There was a rapid uptick in cases, which ultimately resulted in a very strict lockdown. ("The early phase of the COVID-19 epidemic in Lombardy, Italy." Science Direct. <https://www.sciencedirect.com/science/article/pii/S1755436521000724>. Accessed 16 September 2022.)

even necessarily a solution—but at the very least, they're seeking validation of their symptoms. And I think what a lot of physicians were doing, is that because they couldn't provide an answer, they just kind of erased the concerns, which was unfortunate. But I think that's changing now, which is good.

AD: Yeah, were you able to find validation in clinical spaces for yourself? Was there a journey for you trying to find help? And what was that like?

DM: Yeah, I mean, that was interesting because I spoke to colleagues and friends, who are colleagues, about my symptoms. And I did feel that some of the time—it was—it was not very common, but some of the time people would try to kind of minimize what I was experiencing. For instance, I was like, and remain quite convinced that I had some small strokes right from the clinical description of the experience. And I would say this to people, and I would sometimes get pushback from neurology colleagues, right? And they're like, “Well, maybe there's another explanation,” and, “That sounds a little bit weird,” and you know. So—but you know they wouldn't have a better explanation actually. And I would be like, “Well, here are some of the alternatives in terms of like differential diagnoses, and those don't match. So I really think this is the only thing it could be.” So there was that. But I do think that again, because I'm a physician, and because I'm a scientist also, I will say, and many of my colleagues are not, when I gave them like a well-reasoned argument, they actually deferred to me, right? And I don't think, again, that that's because I am a patient. I think it's because I am a physician and a scientist, and specifically a neurologist, right? And my symptoms were predominantly brain symptoms. Yeah.

AD: Do you have any thoughts about sort of intersectional clinical experiences? I mean a lot of what we've just talked about hinges on being able to have some authority in the clinical space, and maybe bring in intersectional lens to that and think about sort of gender, race, class, disability, and—

DM: Yeah, I mean, so Long COVID is disproportionate. It disproportionately impacts women. The studies that were done early on, and, you know, they were likely biased by like how we sampled, who we are able to reach, I think, with those surveys: they suggested that it wasn't necessarily disproportionately people of color. It did seem to be that it was just disproportionately women, which is consistent with what we know about autoimmune illness, and we think that this is probably autoimmune. But the impact, nonetheless, for women of color, I think, was disproportionate, in terms of, I think, how devastating it was to like face the erasure that they faced. Yeah, I think really early on I was actually doing a lot of media with Black women colleagues, I mean colleagues in that we were in this together not that they were in medicine or in science. But—Yeah, the stories that they had to tell, I just—I mean I was shocked, and I guess also not shocked, right? Because I do a lot

of advocacy in spaces that intersect. So—But yeah, it was—it was just maddening to me. It made me upset to hear those stories. And yet, I know that that's like the reality, right? And I continue to work on trying to fix that reality in the ways that I can. Yeah.

AD: So do you still identify as a Long COVID patient, or do you feel like you've sort of have had a milestone moment where it's—umm. I guess, yeah—

DM: Right.

AD: What's that relationship between present and past tense?

DM: Yeah, yeah, I mean, I do, in that I occasionally, like I said, when I'm not taking care of myself, these symptoms like recrudescence or re-emerge. I do also, in the sense that I think all of us probably think a bit about what the long term consequences are of this illness, right?

AD: Mm-hmm. It's also future. It's not just past, present but future.

DM: Right, and I think a lot about that, because, you know—I know what you put yourself at risk for when you have concussions, when you have brain infections, right? When you have chronic sleep deprivation, like I know. And so, it really it does concern me. Yeah. And I still feel very connected to people who are struggling with it at present, right? More so than I am. Cause I don't actively struggle with it. I do when I'm not taking care of myself. Yeah. So, I still feel like a part of that community in that way. Yeah.

AD: Has it changed the way that you think about self-care? I guess, because that seems so related to how you experience it now when you—

DM: Oh, absolutely like, you know [laughs], before I got sick, you know, I had done things like yoga, like on and off, right? Meditation—I had really thought a lot about. I have a lot of friends who are into silent meditation, and they'd go on retreats like episodically. I thought a lot about it, but never made the time for it. Well, with the exception of like, there were like discrete moments in my life where I did yoga for a little bit, for like health reasons.

AD: Mm-hmm.

DM: But yeah, I think since getting sick, I've been a lot more attentive to just like regular exercise. Being more conscious of like what I eat. I mean I was pretty decent before, but like I try to be, I think that I'm better—I'm better now. Because I also noticed that, like I if I eat certain things after having COVID and Long COVID that it makes me feel bad, you know, and maybe that's age. Maybe it has nothing to do with COVID, I don't know, but I did notice that

there was a difference, and so I do think that I'm a lot more cognizant of like the choices that I make; and I've always had a lot of say about the health of other people in my family. And so I feel more, and that's also been very true during COVID, you know, like make sure that you're wearing your mask. Make sure that you have your booster shot, you know, like, and so I, and also making the other like kind of health, good health choices. I feel like I need to also live that myself. So yeah, I've tried to be better at self-care. I think in the work that I do also interestingly like in kind of movement building work that I do as a community organizer, I think a lot about how we integrate those practices into healing justice frameworks.

AD: Yeah. Yeah. Talk a little bit more about that. I recently listened to an interview with Adrienne Maree Brown,²¹ who also spoke about how those things go together

DM: Yeah, I mean it's been so fascinating to me, because I was never aware it never really thought about how our experience in the world is so very much rooted in our bodies, right? And how injustice has actually become embodied, right? How we internalize things in very physical ways and—Yeah. I think I recently got more—so one of these organizations where I've decided like I'm gonna spend more of my time here is a very progressive organization that's actually national, but we're a local affiliate called NAKASEC.²² So, they do a lot of like, you know, citizenship, citizenship justice, voting rights, kind of advocacy. We also do a lot of language access, language justice, work in Houston, Greater Houston. That group often will show up like that. We just celebrated our first year being like an official organization. We will show up to protests with our Korean drums,²³ and this is something called Pungmul²⁴ and it's been used historically it was used by farmers in kind of celebration and other kind of cultural rituals. And in—I don't remember now when it was: farmers started using those—that drumming—in protest. And so, organizations in the United States, particularly in NAKASEC. I don't know if there are other Korean American organizations who do this—and we will show up to protest with our drums, and it's very notable, right? And it's very, I think, uniting. And I never really thought before about the importance of that kind of

²¹ Adrienne Maree Brown is a writer, a feminist activist, doula, and co-founder of the United States League of Young Voters. ("Adrienne Maree Brown." Wikipedia. https://en.wikipedia.org/wiki/Adrienne_Maree_Brown#Books_and_contributions_to_books. Accessed 16 September 2022.)

²² NAKASEC, or the National Korean American Service & Education Consortium, is an organization dedicated to uplifting Asian American immigrant youth. ("Our Mission." NAKASEC. <https://nakasec.org/mission>. Accessed 16 September 2022.)

²³ Korean drums come in many different shapes and sizes. They are an integral part of traditional Korean music and are made of leather. ("Korean drum." Wikipedia. https://en.wikipedia.org/wiki/Korean_drum. Accessed 16 September 2022.)

²⁴ Pungmul is a Korean tradition that originated from farm work and rural holidays. This tradition consists of drumming, dancing, and singing. ("Pungmul." Wikipedia. <https://en.wikipedia.org/wiki/Pungmul>. Accessed 16 September 2022.)

movement and chanting—and yet, like the opportunities that I’ve had to do things like, you know, Adrian Maree Brown talks about, I think, generative somatics,²⁵ right? And Public Health Awakened²⁶ is a group that actually held a healing justice workshop for a bunch of people who consider themselves healers, right? Whether you're a social worker, or you know, an advanced practice provider, or a physician, or whatever you are—for those who feel like we are engaged in healing work—they provided this workshop for us to engage with that kind of somatic work. And I was like, “You know, this is actually what we do, but kind of implicitly with drumming.” And I wanted to actually connect those things more explicitly for us in, Woori Juntos,²⁷ which is this organization which is kind of like also, even though it's Korean American for the moment, we are—our physical location is in an area that is both Korean American, and very heavily Latine. And so we and I have a very particular connection to that community, because I am like Spanish speaking. And have traveled extensively also in Latin America.²⁸ So I—yeah, I really would like to bring this practice to kind of our multi-racial, multi-ethnic organizing that we do here in Houston, which again, as I said, is very diverse. Yeah.

AD: It sounds really powerful, and it sounds like one sort of concrete material antidote to, you know, the tension in--particularly in this case, it's not in the context of Long COVID, which even more is even more pronounced where you're tired and having to—navigate.

DM: Right.

AD: But you had to replenish the self—

DM: Right.

AD: —while fighting, so that’s—a really great example.

DM: [chuckles]

²⁵ Generative somatics is an organization that helps movements by bringing change to movement leaders. This is done by helping leaders overcome their trauma and inspire creativity and liberation. (“About Us.” Generative Somatics. <https://generativesomatics.org/about-us/>. Accessed 16 September 2022.)

²⁶ Public Health Awakened is an organization of individuals in the public health field who work to advocate for fair and equal healthcare for all. (“About Us.” Public Health Awakened. <https://publichealthawakened.org/about/>. Accessed 16 September 2022.)

²⁷ Woori Juntos is an organization that is dedicated to fighting for equality of all immigrants and Asian Americans. (“Our Story.” Woori Juntos. <https://www.woorijuntos.org/ourstory>. Accessed 16 September 2022.)

²⁸ Latin America refers to all countries in North and South America that speak Latin, Spanish, Portuguese, or French. This usually consists of Mexico, Central America, and South America. (“Latin America.” Wikipedia. https://en.wikipedia.org/wiki/Latin_America. Accessed 16 September 2022.)

AD: So this kind of goes back a little bit to something that you said earlier about when you founded Pantsuit Republic. And so, like at the time you didn't you know a lot about feminism, but sort of learned on the ground. My question would be, how you now understand the term “feminism,” and whether you consider yourself a feminist, and maybe how that changed through that work?

DM: Yes. I definitely see feminism as intersectional. I see it as irreducible. Embodied. *Can* be soft, but can also be fierce. I think, often misunderstood and maligned. Rooted in relationship as much as it is in self-determination. And I definitely identify as a feminist, although, as I said, because it often gets misunderstood, I don't necessarily, you know, use that word all the time, right?

AD: I love that emphasis on relationship.

DM: Yeah, definitely, that. Yeah.

AD: That captures so much in one word. I'm also curious: with the work that you've done, and then your personal experience with COVID, maybe if you can describe a little bit what it was like to be Korean American, to be part of a Korean American community in the context of COVID.

DM: Right.

AD: And things that happened.

DM: Yeah. So—that has been super interesting. I mean, like what has happened specifically with Korean Americans. We had the Atlanta shootings.²⁹ We've had things in Texas also, and that didn't necessarily make national headlines. Actually—maybe they did also, but, they were not the kind of—they were not as—I don't know how to say this, like, I don't want to say impactful. It's not necessarily that. But they didn't get as much visibility as what happened to Atlanta, right? Yeah, I mean that—that has—it concerns me a lot. Because I think that there is obviously like real demonstrated risk that there's all of this kind of anti-Asian like violence that has happened during the pandemic. I certainly felt a little bit of that at the very beginning of the pandemic in my own community, which can be

²⁹ The Atlanta shootings refers to a shooting spree at 3 different spas in Atlanta in 2021. This resulted in 8 deaths, 6 of which were Asian Americans. This shooting helped bring awareness to Asian American hate, which escalated after the start of the COVID-19 pandemic. (“2021 Atlanta spa shootings.” Wikipedia. https://en.wikipedia.org/wiki/2021_Atlanta_spa_shootings#Anti-Asian_sentiment. Accessed 16 September 2022.)

very racist. And I wasn't sure if I was misinterpreting it, because at that time not a lot of people were like super aware of what COVID was, but did feel that I was getting some looks like if I was coughing in public, or something like that, right?

AD: Mm-hmm. Mm-hmm.

DM: And yeah, so I was—I don't know if I was actually super fearful that something would happen here in terms of like real life, like physical, fear of like assault, or something like that. I mean, I did sadly like see that it was happening all over the country in other places.

AD: Mm-hmm. Mm-hmm.

DM: Houston is a really interesting place, and so is Pearland³⁰ where I actually am, in a suburb south of Houston, and I didn't actually fear that I would be physically at risk. But was, you know, not happy, obviously, with kind of the discriminatory attitudes that people had. And that was true here, too. Yeah. The other thing that came up for me with respect to like my Asian American identity or Korean American identity during the pandemic, was the conversations that emerged around anti-Blackness and anti-Asian, you know, like, hatred. And I think that there are so many things there that remain unresolved, and that require actually a lot of very intentional discourse within our communities and between our communities. And that's something that I tried to engage in, like: as things were happening like when we had this incident we had a Korean beauty store actually in part of Houston, situated in a neighborhood that was predominantly Black. There was an incident where a few young Black women came in, and they were patrons of the store. They were going to buy something, and they—what they say in retrospect—is that they felt that they were being discriminated against, by the looks from the store owner. And you know that—and the store owners were speaking in Korean, because that is their tongue, right? I don't know what they were saying. I don't know what kinds of looks they were giving, but generally, I trust the experience of the person who reports that there was discrimination happening, right? Generally speaking. But this ended up in a violent like, you know, interaction. And you know our community leaders in the Korean American community instantly like, went to the Houston Police Department to have the police chief talk about safety. And it would—that was such—to me, that was such a lost opportunity to have a larger conversation of, “what public—what safety is?” What *is* public safety actually, right?

AD: Right.

³⁰ Pearland is a city in Texas that is a part of Brazoria County. Over the past couple years, Pearland has been determined as one of the fastest growing cities in the country. (“Pearland, Texas.” Wikipedia. https://en.wikipedia.org/wiki/Pearland,_Texas#Government_and_infrastructure. Accessed 16 September 2022.)

DM: And whose safety?

AD: Right.

DM: And those conversations I *still* think are like so lacking and so necessary. And so we're—I mean—we're actively working on that. Like we just decided that we're going to screen this documentary that talks about the LA (Los Angeles) Riots,³¹ and like Black-Korean tensions that have, you know, actually evolved in LA, and I think in other places. Like this is certainly true for the multi-racial coalition building that we do-- multi-ethnic coalition building that we do in Houston. I know that it's happened—happening—in Atlanta. But yeah, I think that's encouraging to me, that that is happening. I think that we also have to kind of very deliberately, like, move that forward, also, *everywhere* we are, because there is just so much, I think, work that still remains to be done in that domain. There's a lot that our community doesn't understand, actually, about the history of people who are Black in this country, right? And also how that is situated in kind of global anti-Blackness. Which is actually also true in Korea, right? There are a lot of anti-Black attitudes in Korea, even though we don't really have many Black people in Korea.

AD: Mm-hmm. Mm-hmm.

DM: But they do--they certainly do have opinions about people who are Black. And also, there's colorism³² there, right? So not just people who are Black, but people who have darker skin within Korean Americans, and also outside of Korean Americans--or sorry, Korean people there. Yeah. So.

AD: That's really interesting. I'm curious about I mean you mentioned your run for the school board, and I'm guessing that was in 2021; was that the last?

DM: I ran in 2019 and I actually remained then very involved in advocacy in the district after my run, because I didn't win. And I didn't expect to win quite frankly. But I thought it was important to run, because those seats were going to go unchallenged and the incumbents, you know, were maybe not themselves necessarily intrinsically terrible. But

³¹ The LA Riots occurred in 1992 in response to the acquittal of 4 police officers who brutally beat and killed Rodney King. For the next week, many people participated in these riots, and Koreatown was damaged extensively. ("1992 Los Angeles riots." Wikipedia. https://en.wikipedia.org/wiki/1992_Los_Angeles_riots. Accessed 16 September 2022.)

³² Colorism is discrimination or prejudice of individuals depending on how 'light' or 'dark' their skin is. ("Colorism." NCCJ. <https://www.nccj.org/colorism-0>. Accessed 16 September 2022.)

they were not holding a really pretty terrible superintendent accountable for some of his actions, which were making national headlines like I mean super anti-trans, anti-Muslim.

AD: Mm-hmm.

DM: Yeah. So, I ran and I think it was a really good decision, because it got me personally more invested in my own local community. I was very active in Houston, and also in Texas at large, and also nationally on a lot of issues, particularly in immigration or things related to immigration, but I wasn't actually very active in my own community, right? And I think getting more involved in my own local community made me realize even more. And I already knew this kind of conceptually, right? Or theoretically, that politics are local, right?

AD: Mm-hmm.

DM: Right? [laughs] Like I mean, if you can't get things in order in your own house, right? Like you're gonna have problems, right? And Adriene Maree Brown also talks about this a lot, right? In terms of like, what happens at different scales, right? And those things have to mirror each other, right?

AD: Right.

DM: They do, and I mean, I kind of knew this in my head. Which is why, early on, I was much more interested in local and state level political change when I started that group, Pantsuit Republic, than I was to paying attention to what Trump was doing, right? I only ever paid attention to what he was doing insofar as it had implications that were *very* real at that state and local level.

AD: Right.

DM: And also, if I felt like I could mitigate the harm through those levels of government. So I knew, I *knew* that it was important to be involved locally, but I wasn't doing that work until 2019, until I ran for school board and realized in knocking on like a 1,000 doors. And we called, I think, our campaign called maybe, called, texted, whatever—reached out to like 26,000 people. I realized, like, *this* is what we have to do. All of us, actually, have to know intimately what is happening in our own communities. So that we change *that* first. Yeah.

AD: That's really interesting, and it doesn't seem like a coincidence that school boards have increasingly become these, you know, a nexus for conversations about COVID, about critical race theory, about masks.

DM: Right.

AD: They all come together in some ways that feel, you know, oblique, but are actually pretty, it seems like, intimately connected.

DM: Yeah, absolutely. And you know, I knew that from like studying how the Republican party has moved over the last several decades, and they have been *very* intentional about investing in local races, and building a bench, right?

AD: Mm-hmm. Mm-hmm.

DM: And that, frankly, even though I disagree with almost everything else about the Republican party, is actually the right way, right? You should start local. People should fundamentally understand these systems at a local level, and how to engage with them, how to build power, how to protect our communities—

AD: Right.

DM: —through those systems, right? And challenging those systems, also, to evolve. I mean this is so important, and it's something that we have not historically invested in. I think in the Democratic party, often there is this cult of celebrity around federal offices: President, Congress, right?

AD: Mm-hmm. Mm-hmm.

DM: AOC [laughs], and yet, people don't know who serves on their school board.

AD: Right.

DM: And this was a real problem during COVID, where so much started to happen, where people realized your school board actually has *tremendous* power. In the *destiny* of your community, right? *Truly* the destiny, when it's like, "Oh, there are a lot of people who physically gather at schools," right? They have the propensity to spread this illness very quickly.

AD: Mm-hmm. Mm-hmm.

DM: So you have to make the right decisions in that context. And the people who were holding the power to make those decisions often, unfortunately, were not the right people. Yeah. So then I think people started waking up, like, "Oh, maybe we should actually devote

some efforts here.” So, I started, actually, a super PAC (Political Action Committee),³³ called Doctors in Politics,³⁴ and we work with 314 Action.³⁵ We've worked with Run for Something,³⁶ which are a Democratic PAC and a political non-profit as well as, I think, also an educational services non-profit-- Run for Something is. But they all are aiming to get more people who are kind of politically to the left of center—into office. And Doctors in Politics, similarly, we are looking to get patient-centered justice and equity-oriented positions rather than like guild-centered or for-profit physicians into political office. And our intention, you know, at the beginning, the people who the guy who started Doctors in Politics and I was—he recruited me almost immediately, and he was very interested in getting doctors into Congress, and I pushed back like pretty hard, and I said, “Like we have to invest in local and state level offices.” And so, we started doing that, and now we're *really* developing that effort, because what we realized very quickly is that there is *so* much lack of political consciousness and political education among our colleagues, that we have to start more local. Like, it's not realistic to say that we can have physicians run for political office at the federal level with any, like, viability, right? Like they're not gonna win when they haven't even consistently voted, right? They've never showed up for their School Board election. So, they don't understand how these systems work, and it's not practical to think like we can actually make change immediately like that. But we *can* make change at a local level, getting people plugged into it, running for school board, or running for a small city council, or something like that. Yeah. So.

AD: Wow! That's really interesting, and that ties in so well, because I was going to sort of wrap up with questions about sort of ideas and reflections on health equity going forward in the context of COVID more broadly. This sounds like it might be one of the things you might add to the list.

DM: Yeah, no, I have gotten a lot more involved in health equity work and explicitly through the this like public-benefit startup that I'm involved in now. Yeah, I mean I'm very excited to finally be able to say like that medical racism is a thing. That it's very clear from what

³³ A PAC, or political action committee, is a committee that is meant to raise money to help defeat opposing candidates and put favorable candidates in office. (“What Is a PAC?” Open Secrets. <https://www.opensecrets.org/political-action-committees-pacs/what-is-a-pac>. Accessed 16 September 2022.)

³⁴ Doctors in Politics is an organization that supports doctors and healthcare workers to run for office to induce change in health policy. (“About Us.” Doctors in Politics. <https://doctorsinpolitics.org/our-work>. Accessed 16 September 2022.)

³⁵ 314 Action is an organization that works to put more doctors and individuals in the science field in office to bring change to problems like healthcare and climate change in the United States. (“About Us.” 3.14 Action. <https://314action.org/about-us/>. Accessed 16 September 2022.)

³⁶ Run for Something is an organization that supports new and emerging politicians who have progressive ideals. (“How We Help.” Run For Something. <https://runforsomething.net/how-we-help/>. Accessed 16 September 2022.)

happened during COVID and examining things that were happening before COVID. Right? Like, I mean we have this maternal mortality problem in Texas that's awful, right? That's like: Black women in Texas are dying at the rates that they die in like the develop—the developing world. And that people didn't care about that *before* is just astounding to me. Hopefully, COVID has really like brought more light to the fact that this is not an isolated finding, right? Everywhere you look in medicine, like, and actually even in society at large, right? You see these very racialized disparities, and I think that that is really important to explicitly address. And I'm hoping that this crisis has actually--I mean just like when somebody comes in with a stroke or a heart attack--that's like the moment that they decide that now maybe they ought to start exercising and eating right. Like it takes the crisis for them to actually pivot. I'm really hopeful that that's at least *one* thing that is positive that will come out of this pandemic.

AD: Mm-hmm. Mm-hmm.

DM: Is a real focus on transforming those disparities to where we don't have them anymore.

AD: Yeah, is there anything else that you had wanted to mention that I didn't get to?

DM: I don't think so. We did a whole like survey. [laughs]

AD: Yeah. We covered a lot of ground, and I loved how things overlap and fit together. So, this was such an honor to get to interview you, and your story's inspirational, and we're all grateful to have it as part of the Global Feminisms Project. So thanks so much for—

DM: Yeah, of course.

AD: —being with us today. Yeah.

DM: Thank you very much for having me.

AD: Our pleasure. Take care.