Medicine & the Black Mind - Part 1 Transcript

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Introduction and Sponsor Message

This is Dr. Greg Hall once again with Better Black Health brought to you by Genetic Sequence Multivitamins, the only multivitamins designed to address the unique nutritional needs of African-American men, women, and men and women over 50. It's been sold in all 50 states.

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We've got a treat today. We are talking about medicine and the black mine with Dr. Tim Gohler. He's a sociologist, educator, public scholar whose work explores how structural racism, intergenerational stress, and life course changes shape the mental and emotional well-being of our community.

I've known Tim almost his entire life. He grew up in Cleveland, attended Cleveland Public Schools as I did as well. went on to earn degrees at both Cleveland State University and Case Western Reserve University.

He's a veteran of the United States Marine Corps. That's a whole nother interview, I bet, isn't it? And he now serves as professor of sociology and urban affairs and the director of research at the Center for African-American Public Policy at Norfolk State University.

Dr. Tim Gohler's Background and Mission

His work bridges academic research, community practice, and a focus on mental clarity, which I need, self-determination, and culturally grounded approaches to wellness.

Welcome, welcome, Dr. Gohler. Thank you, thank you, thank you. I appreciate this. I appreciate it. So it's great to have you. How are things in Norfolk?

uh, sunny, uh, it is beautiful, the beautiful day, you know, so, uh, we, we cannot complain except for the fact that, uh, we got attacks on our people right now.

So we do have attacks on our people. So, so, you know, as you guys know, I'm a physician or to go as a sociologist, we kind of come to health at different ways.

And so kind of when, when medicine meets mental and emotional and spiritual realities, that are our realities, realities related to being black in America.

How do you think we're doing with that right now? Well, let me just say this, first of all, before I jump into that. I want to just thank you for having me on.

You not only know me for a big portion of my entire life, But I appreciate you having me on because of who you are and what you represent in our community.

And you've been on the front lines of Black health for a long time. So I'm honored to have this conversation with you. And so I also appreciate the opportunity because to answer your question, in my opinion, the mind is the foundation of everything, right?

really different from any other ethnic and racial group in America is the black mind. I mean, and why do I say that? I say because black folks beyond every racial and ethnic group in America have a distinctly different and uniquely established origins in the United States.

Black History, Slavery, and Time

You know, let me say that one more time because I'm saying in a different way. I can say it another way. right? Black folks, you know, beyond any other racial and ethnic group in America have a distinctly different and uniquely established origins in the United States.

So that's why, you know, having this conversation today with you about medicine in the black mind is so important. You know, we're not just asking about kind of how the body gets treated, but we're also talking about how we're going to show up.

out here whole and stable, you know, so I appreciate it. Yeah, so when you talk about that unique difference, and so I, you know, I'm older than you. And so I recently found out that African Americans have been here 400 years.

So what white people came in 1607 and we came in 1619, a mere 12 years. So they were here 12 years and said, you know, we're gonna need some help. And initially, it went and brought the first African slaves to New England 400 years ago.

And I always felt like we were more recent immigrants. But we still, even at that point when we came, we came in a different way. We weren't, didn't we?

I mean, you're a historian. And so that experience from the beginning, and then the whole time, after being here the whole time, still being made to feel like you just got here, right?

Yeah. Yeah. I mean, you know, what's interesting is what you're saying is this idea of time, right? I mean, one of the reasons I live down here in Norfolk, I mean, I'm at Norfolk state, but I live in Hampton, you know, from Cleveland, but I live in Hampton and Hampton.

This is the place where when we were enslaved, we were brought to in August 19th, 1619. It was right here. Like I live about about five miles from the marker where, where we were brought to and in everything far as our conditions spawn out of this place, right where I am right now.

So it's a, it's an interesting feeling to be in a place where we began. And so, but I want you to, I want to talk about this context in terms of time, right?

So 1619, right? It seems like a long time ago, but 1619 to, so we were enslaved till 1865, right? That's when they had this, the Emancipation Proclamation, right?

almost 300-some years. So all this time that we were under this slavery condition in America from 1619 to 1865, that's slavery. That's slavery. That's chattel slavery.

And here's what I want you to understand. Check this out. From 1865 to nineteen sixty-five when I was born. Right. That ain't nothing but a hundred years.

Mm hmm. I mean, my grandma, grandma Mildred, my grandma Ethel, who you probably knew, lived on 95th of St. Clair. Right. She died when she was ninety-six and her grandmother died when she was a hundred and four grandma Rose who I kissed on her face.

Get out of here. You see what I'm once slavery's over 1865, not over, because we can get into that, right? Right. 1865. And then from that point, we had maybe just a little 12 years, what they call reconstruction, right?

That was when HBCUs and all this other stuff popped up. And there was this period of kind of black progress at that moment, because they were trying to figure out, Well, what are we going to do with all these Negroes now that we let millions of these Negroes free, if you will, and as civilized?

Well, we got to civilize them. We need to educate them. So he came up with, you know, forms of education, right?

HBCUs were part of that, right? Which I'm at one right now.

So, but from that time until For the next 99 years, we were under what is called Jim Crow.

Medicine, Trauma, and the Black Mind

That means we virtually had no rights. We didn't get rights until when you were born with no rights. Right. Isn't that crazy? I mean, think about that.

Right, right, right. Think about our families living under those conditions of oppressive conditions and how stressful that was. You know what I mean?

And so, and then coming into a society where it's not meant for you, right? So this conversation about the medicine and the mind, black minds is so crucial because we can't separate those conditions from our health.

You know, we've come a long way. Don't get me wrong. Let me just say this. We've come a long way in addressing health in our community, in large part because of people like yourself.

You know what I mean? You out here been fighting for the longest trying to deal with these disparities. I mean, you was my doctor at one time, right? And helped me, really helped me get on the right path of losing weight and lessening my diabetes and my hypertension, which I'm still on Metformin, but I'm trying to get off of that right now.

Different show, different show. But we've got more screenings, we got more services, we got more initiatives aimed at closing the gap, but still there's something missing.

There's still significant missing. And I can just jump in a second. So the life expectancy of a black male in 1960, I was born in 61, you were born in 65, 1960 was 58. That was a life expectancy.

And so now it's not great, it's 72. But that's a difference that just at the time of, in my lifetime, how we've been able to, and that's medicine for blood pressure, medicine for diabetes, dialysis, transplants, and understand, and Medicare, Medicaid, insurance, right?

Being able to be in those, so those things, I've done it, but what's been curious and well, not curious to us, but curious to other people is that, but there's always that disparity.

There's always been that gap that we've never been able to close. And that's where we are kind of in this discussion. And so you're saying that as medicine has not really addressed the trauma that we superficially think is in the distant past, when in reality, you kissed a woman on the face who was a slave.

You know what I'm saying, right? My grandma rose. That was my great-grandmother's mother. So it's like, that's how close in reality it was. In the time of the world, it just happened.

And traditional medicine is not addressing that trauma at all. This is why this conversation is Crucially important. Crucially important. Because you can't separate this conversation, right?

I mean, we can hand someone a prescription. We can give them diagnosis. We can even build brand new clinics. But if people are walking around with foggy minds and heavy spirits and no real connection to who they are, then nothing's going to stick.

we don't never really talk about what's happening inside our people. Like, and I'm not talking about biology, right? I'm not talking about what sits, you know, I'm really talking about kind of, you know, kind of what sits behind folks' eyes, if you will.

You know, the grief that we carry, the mistrust we inherit, the shame we never name, the confusion We normalize, right? And that confusion, here's the point, that confusion isn't random.

I contend that it's constructed. We've been handed negative images of ourselves since birth, our skin, our voice, our presence. has always been treated like it's a problem.

And I'm not talking about racism. I'm not talking about racism. I'm talking about it's an attack on our ego, on our identity, on the identity of black people.

It breaks down how we see ourselves before we even know who we are. So there's this brother I love. His name is Dr. Wade Nobles. And he coined this term called, he called it conceptual incarceration.

He says, he called it conceptual, conceptual incarceration. It's a, it's a, it's a mental prison built not with bars, but with ideas.

Conceptual Incarceration and Unlearning

He, he, he contends that he says it's the result of what unwitting the unwitting, um, adoption of erroneous concepts and ideas and views and opinions and theories about ourselves as black people, as African people, and even about, you know, white folks and Europeans in the world, all these, you know, we've adopted false concepts and false ideas.

Remember what I just said, we were just talking about, right, we were enslaved for all this time, then we're under Jim Crow up until my, you were born in Jim Crow.

I was born at 65 when we just got, I mean, it's all still relevant. That's what I'm trying to say, right? And so, you know, the problem is once we let all these ideas, these false ideas, because of what we've been taught, how we've been conditioned in this society, we think, because I have a PhD from Case Western Reserve University in sociology, that I am supposed to know something.

But it depends on if I own those concepts and beliefs and ideas about what I was trained. I could be worthless to our people. based on your education, right?

Right. But this happens from kindergarten all the way through, right? And that's the power of education, because you have the ability to shape someone's mind all day, every day.

Why do you think they banning books? Right, right. But Tim, it's always like you paint a dark color, but a dark picture. Is it hopeless? Oh, no, it's not.

It's not. It's definitely not hopeless. You know, it's definitely not hopeless. You know, we have to begin to have these kind of conversations and we need to do the internal work, you know, of I heard somebody say one time, maybe the journey isn't so much about becoming anything.

Maybe it's about unbecoming everything that really isn't you, right? So that you can be who you were meant to be in the first place, right? I think one of the most underrepresented utilized tools in our toolkit is our ability to unlearn things.

That's a very powerful, but yet greatly underused tool. The ability to unlearn things. Unlearn dysfunctional thoughts. Exactly. Right. I thought we just got here, and now I find out we've been here the whole time.

And it's really been empowering, right? But they keep that secret, don't they? Yeah, but it's really incumbent upon us because to be able to do the work of, and I call it internal reconstruction, if you will.

It's not therapy. It's not some kind of new trend. It's the quiet, often unseen process of restoring ourselves, regaining alignment and getting the distortions out of our mind.

You know, how do we, how do we, but Tim, how, what's the first step in that? I mean, you say this conversation is the first step, but it's not really a first step.

So someone's listening. What's their first task? Well, I think, I think, you know, uh, there, there can be processes that can help us. And I think one of the first process, and as I just mentioned is, is to challenge yourself to unlearn or to sit with yourself and to unlearn some of the things that, you know, um, I mean, begin to ask questions.

You know what's right and wrong. I mean, what I'm saying is we have to become aware. And the only way I think part of the awareness is we, like yourself and me and other people, have to change the narratives.

We have to control our narratives. speak truth and speak clearly so that people can go, oh, I didn't know that. What do I do? Right. So I do think these kinds of conversations are, are, are, are desperately needed.

And I think our people, once they hear them, these kinds of conversations, they go, aha. Right. So it's almost like there are a number of people who are in whatever situation that they're in, and they have no idea that they are being profoundly oppressed.

Naming Stress and Rebuilding Self-Awareness

Exactly. Profoundly oppressed, right? And that their energy and their insomnia and their obesity and their blood pressure and all of that is manifesting through that?

Is that what you would contend? Yes, I would contend. I mean, because if the inside ain't right, nothing on the outside is going to hold, right? And I think that that's exactly right.

You know what I mean? You can tell me all day long. You say, you know, I mean, you did it to me. You're like, you need to do these things. And I just didn't stick.

And not until I got to a different place, Right. So, but the thing is, is that we have to figure out, so if you're being oppressed, and this driving up thing, because I've had a whole other talk about how stress chemically causes cortisol, which leads to diabetes, causes epinephrine, which causes hypertension and heart failure and all that stuff.

Chronic stress, chronic oppression is directly causing a lot of that, right? And so you're really getting to the core of how do I reduce my blood pressure?

How do I reduce this stress that's causing me to gain weight and eat things that I shouldn't be eating? And some of this really, I had a previous episode on bioenergy.

The person said, he said, every problem we have is right up here between your ears. It's all in your brain. If you get control of that, you can get control of everything else.

There it is. I mean, he said it. I mean, you know, but I think part of our job is a lot of people don't know how to name things, right? They may feel things, right?

I feel this, but I'm not sure what… I mean, I grew up not understanding what stress was. I mean, I was under it. Right. But I didn't know, I didn't have a name for it.

I didn't know what anxiety was. I didn't know what depression, I mean, you see, you knew how we grew up or how, you know, I didn't, that wasn't part of my language in my house.

Right. You know, we didn't talk about, you know, any, there was no name for nothing mental, except for crazy or. Right. right lunatic or what i don't know but it wasn't no medical terms or something right right so i think i think one is we have to help people with the language so i help them identify their emotions and feelings right i think we have to help people know how to ask questions because a lot of people i mean and that's what i'm saying some of this is not rocket science it's just If you know how to ask the right question, you can get to the answer.

If you know how to name something, you can identify how you feel, you know what I mean? Like, you know, what

are some beliefs, like, you know, what are some beliefs or behaviors that I carried, you know, or I carried that, you know, kept me safe or, you know, I mean, you know, what does survival look like?

in my life today. Well, I frequently quote my father who says, something wrong with me, if I die, good. You know, right? Like, isn't that the craziest thing?

It's like, if I die, good. Well, it's like, well, what if you have a stroke and don't die? What if you have a heart attack and don't die? You know, and you suffer.

Oh, then I had those injuries. But he didn't even worry about, we were, you know, if we died, ain't no problem. You know, I mean, that's a dysfunction.

We should be, we should try to preserve, right? But what you're saying is this emotional trauma, this multi-generational trauma that's not that far away in our past, we think we're further from it than we are.

And that memory, that cultural memory is shaping how our overall health and modern medicine as I practice it ignores it completely.

Community, Unity, and Closing Reflections

Yes, and we are not taking… So part of this too is, okay, there's this medical lane that you own, right? And there's this mental lane that we're talking about right now, right?

But where in all that mix are we taking in consideration the social forces that are impinging on us? I mean, where's that conversation, right? And how is that conversation being played into our health, right?

And it's not even in my training. I'm not even trained to do that. I wouldn't even know how to do that because I've been trained to do that. But that's where, again, we have to kind of step outside of our training.

If I just did what, based on the training I got as a doctor of sociology, I wouldn't have, I wouldn't be having these conversations with you. Right. Good point.

It was like on the job training. Well, I mean, you have to take what we, you got to take the skillset that we, that we gain and use it as a tool to figure out what you're doing, what we're doing to try to figure out how to help.

So I'm saying that to say, yes, you want to train. And it's something I'm not, I haven't been trained to do, but That's again why we have to come up with our different paradigms.

That's why I say in the beginning of this conversation, there's nobody like us. That's why you wrote the books that you wrote, because that's why you have vitamins that's specific to black people.

Because we can't use the same of processes and the same tools to be able to mitigate these issues that we have. We got to bring, we got to figure out ways to do just what we're doing right now.

Otherwise, it's just spinning the wheels. I think we're just, you'll do the best you can. I'll do the best I can. But it's going to be hard to really help our people fully and close these gaps because the problem is, Our people are fractured.

So we're plugging holes and not really feeling, you know, helping a person be whole. How much is the lost community? I mean, you know, it's like in Africa, there was a big tribal community raising children and we've lost a lot of that community.

And maybe that's where that history comes from. That's where the examples come from. Um, yeah, but you know, but how do we do that? How do we, how do we say everything?

I mean, listen, what you, what you hit on is the, is the nut of it all, right? It's, it's our conditioning, the, what we, we, we, If you think about what's going on in society right now, all this attacks on us and as a people in every sphere, and there's no pushback, there's no leadership, there's nothing that's really…

That's why the most important thing to me in this is that if we turn this kind of pressure forces us to turn inward and that's the most important place to be.

And once we spend that time strengthening ourselves as individuals and as a people and cleaning out this clutter and this fall, then we're able to see much more clearly about what we need to do, how we need to survive and what we will die for.

So it's absolutely impossible to do that, in my opinion, any other way, because then you're just operating with shales of people that may have degrees and titles and money, but we have no sense of unity, no sense of community, no sense of who we are as a people and why we exist.

Amazing, amazing. This is Dr. Tim Goehler, sociologist, educator, and public health scholar who's been talking to us for the last 30 minutes about ways to improve the black experience and ways to really address the emotional scarring that the last 400 years has put upon us and a way to think about ways to go forward.

Well, Dr. Gohler, we're gonna, we're gonna, we're gonna come back and talk again about this. I mean, this, this by no means is this over. This will be a series.

Yeah, Edison and the Black Mind with Dr. Tim Gohler. Thanks so much for joining us. Much appreciated. Thank you so much. We'll talk some more. Okay.