



The toxic brew of sexism & racism in American medicine

Featuring
Diljeet K. Singh, MD, DrPH

This time on Code WACK!

Why is it that infant mortality rates in America differ by race? Why are some American babies more likely to be born premature or underweight? *And how could single-payer health care help?*

To find out, we spoke with **Dr. Diljeet Singh**, a women's health advocate and integrative gynecologic oncologist who has practiced for nearly 25 years. She's also the vice president of [Physicians for a National Health Program](#), which advocates for Medicare for All.

SHOW NOTES

WE DISCUSS

Let's start with the recent study by the National Bureau of Economic Research, which showed that in California, the richest Black mothers and their babies are twice as likely to die as the richest White mothers and their babies.

"... it was a really interesting study in a lot of ways, but I do want to point out the number one piece was, they were **comparing women in Sweden and ... in America ... all the people having kids do worse in America no matter what their income, no matter what their race**, which is kind of shocking considering we spend twice as much on every single person in America as they do in most of the rest of the world ..." - **Dr. Singh**

What is the connection between race and bad health outcomes?

"... the data is saying to us, it's about racism and how that manifests is really complicated, right?

"So there's the chronic stressors for people who experience racism. There's the unconscious bias of healthcare providers and how they take care of people of different races and gender... we know if a woman shows up pregnant or not pregnant in an emergency room and she's in pain, she's going to wait longer than a man would wait. She's less likely to get pain medicine. She's less likely to get any kind of test to evaluate the pain, and she's more likely to be given an antidepressant, right, which that's all kind of crazy-making if you think about it.

"And...Black women are kind of literally at the intersection of that, right? They're getting all the negative impact of being a woman, of being female, and then they're getting all the negative impact of race and racism..." - **Dr. Singh**

So could single payer, Medicare for All affect the high rates of infant and maternal mortality among women, especially Black women, in America and if so, how?

"...I think everybody having access to the same basic level of health care, ... not having to make choices about what work you do in order to have insurance, absolutely could make dramatic changes. And there's a lot of well-spoken, well thought of policy advocates who say, you know, universal health care could be the most pro-women anti-racist policy we could move forward and I 1000% agree that if you automatically had access to care and the care was the same for everybody, right?

"...how do New Zealand and Sweden and Canada and Denmark and the UK and Germany have maternal mortality rates that are, you know, five versus 50 for Black women. Right? How do they do that? Well, everybody gets health care and most people get care within the same system and they get access to everything long before they become pregnant and cared for long after." - **Dr. Singh**

Helpful Links

[Childbirth Is Deadlier for Black Families Even When They're Rich, Expansive Study Finds](#), *New York Times*

[Maternal and Infant Health Inequality: New Evidence From Linked Administrative Data](#), *National Bureau of Economic Research*

[Evaluation of All-Cause and Cause-Specific Mortality by Race and Ethnicity Among Pregnant and Recently Pregnant Women in the US, 2019 to 2022](#), *Journal of American Medicine*

[Why doesn't the United States have universal health care? The answer has everything to do with race](#), *The New York Times*

[The 1619 Project Episode 4: How the Bad Blood Started](#), *The New York Times*

[Medical Racism from 1619 to the Present: History Matters](#), *Harvard Radcliffe Institute*

[Under the Skin, The Hidden Toll of Racism on Health in America](#), *Linda Villarosa*

[The 'Father of Modern Gynecology' Performed Shocking Experiments on Enslaved Women](#), *History.com*

Episode Transcript

Read the full [episode transcript](#).

Biography: Diljeet K. Singh, MD, DrPH

My name is Diljeet K. Singh and I am a women's health advocate using she/her pronouns. I am an integrative gynecologic oncologist and I've been in practice since 1999. I work with women who have ovarian, endometrial, cervical, vulvar, or vaginal cancer or have symptoms or a test that suggests there's a possibility of one of these cancers or have a genetic risk for getting one of these cancers.

I love my calling which is fulfilling and inspiring; however, the work has shown me the catastrophic shortcomings of our healthcare system and the pernicious effects of racism, classism, sexism and misogyny in medicine and their harmful impact on the health of our society as individuals and collectively.

The innumerable stories of the people I have cared for compel me to give them voice and to use their experiences to advocate for equity and access to opportunities for best health for all.

I currently work with Virginia Oncology Associates in Norfolk, VA. I received my medical degree from Northwestern University and master's degree from the Harvard School of Public Health. I completed an obstetrics and gynecology residency at the Johns Hopkins Hospital and a gynecologic oncology fellowship at the MD Anderson Cancer Center.

I completed a doctoral degree in public health on cost analysis at the University of Texas School of Public Health and an associate fellowship in integrative medicine at the University of Arizona. I am vice president of [Physicians for a National Health Program](#) working to achieve universal health care.

Get Involved / Take Action

[Join Physicians for a National Health Program](#) *(You don't need to be a doctor to join, you can join as an ally!)*

[Subscribe to Code WACK!](#) *to catch all our weekly podcast episodes.*

[Subscribe to HEAL California](#) *for health policy news with a California focus*

[Join Healthy California Now](#) *- a coalition working toward a California single-payer system. Individual and organizational memberships available.*

[Join the CalCare Campaign](#) *to win single-payer in California, sponsored by National Nurses United/California Nurses Association.*