

Transforming Race Conversations: A Healing Guide for Us All

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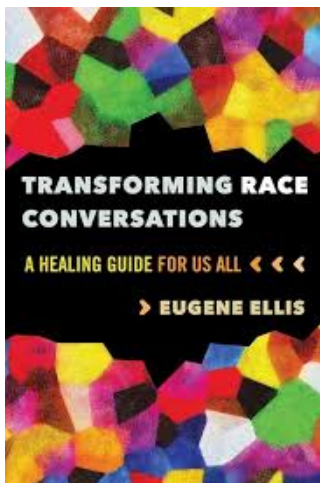
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Title: Transforming Race Conversations: A Healing Guide for Us All

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Transforming Race Conversations addresses the way conversations around race happen all the time in our current world, usually as the result or cause of suffering and harm. Family physicians who are skilled in race conversations are positioned to mitigate much of the physical, mental, and emotional harm that racism is known to cause.

Eugene Ellis, a behavioralist in the United Kingdom, is the director and founder of the Black, African, and Asian Therapy Network.¹ He identifies as a Black immigrant male from Jamaica whose family experienced generations of slavery. He shares insights into how family physicians can transform racial conversations that advance health equity while also helping us better manage the stress that such efforts cause.

For educators, Ellis provides deep knowledge of the historical etiologies for the magnitude of racism, its roots as a social construct without biological justification, and some evidence-based antidotes available for our affected learners, patients, and communities (and perhaps more importantly, for ourselves).

The book starts with everyday racism, the historic horror and brutality of it all, and then moves to the tragic continued awakening after George Floyd’s murder in 2020, and finally addresses multiple other perspectives that build a powerful platform from which we can learn and teach. What is most evident about how Ellis’ writings so strongly relate to our current needs is that this 2024 edition was in follow-up to his original publication in 2021, to which he was asked to provide continued follow-through. He does so with potent chapters: “Being Color Conscious,” “Toward a Trauma-Informed Understanding of Race,” “Witnessing the Wound,” “Inside the Racial Construct,” “Being With Race,” “Finding Your Voice,” “Becoming Race-Construct Aware,” and “Feeling It—Not Being It.”

The book offers many take-home messages for educators in family medicine, including an in-depth review of the historical aspects of slavery and racism. The author writes in a way that helps the reader integrate such knowledge into present day efforts to optimize the health and well-being for our patients, our learners, and ourselves. Ellis highlights that regardless of the role we may be playing at the moment—whatever race, gender, ethnicity, and the like—race conversations deeply affect us all, hence the critical need to knowledgeably engage in transforming such inescapable conversations.

Beyond helping us understand more deeply what goes into racial conversations, external and internal, Ellis provides practical means to manage such through a race-aware paradigm. He specifically recommends mindfulness practices with a special nuance about bodyfulness practices, which relate to ways physicians and learners could provide specific tools to address the many adverse health outcomes that racism in medicine can cause if not recognized and skillfully addressed.

Ellis integrates the science of race conversations’ psychophysiology, which effectively transforms such conversations. In addition, he provides many truly relevant stories as concrete examples, some of the best about peer mentoring amongst a wide variety of

behavioralists whose dialogues clearly emulate the precepts of us all being master adaptive learners. By knowing the current scientific insights and suggested ways we can role model best practices in clinical care and teaching, family medicine educators can engage in educating our next generation of family physicians.

Family medicine educators in the United States will note that Ellis' focus is clearly on Black and Asian groups in the United Kingdom. However, we recognize the need to transform racial conversations with a much broader community of underserved (eg, Latinx and LGBTQ+) who we engage with our emerging equity lens. Another missing link for us is the focus on behavioralists; while very appropriate given our emphasis on integrated behavioral health, some of the behaviorist material may not cross the ocean quite as clearly to our physician educators and learners.

This book could be an asset to our many efforts to integrate diversity, equity, inclusion, and accessibility into all aspects of our medical education.

REFERENCES

1. Black, African, and Asian Therapy Network. . <https://www.baatn.org.uk>.