

At the Back of Your Mind
S01E06: Akeem

[00:00:00] **Juliette:** Hello, and welcome to *At the Back of Your Mind*, the *Inspire the Mind* podcast that brings you the sciences on mental health, with a no-nonsense attitude. I'm one of your hosts, Juliette, together with my scientist friends, Carolina, and Maryam. We're often joined by fabulous guests, so grab a cup of tea and let's dive into what's exactly at the back of your mind today.

[00:00:31] **Melisa:** Hey everyone, I just wanted to give you a quick heads up about some of the topics touched upon that some listeners may find triggering. So, trigger warning for discussions about suicidal thoughts and behaviour and self-harm. Take care of yourselves while listening and enjoy the episode.

[00:00:45] **Akeem:** Hey, it's your boy, Akeem Sule. Dr Akeem Sule!

I'm basically a psychiatrist. I work as a local consultant psychiatrist with the Essex Partnership University NHS Foundation Trust. I'm a co-founder of HipHopPsych, which I co-founded with Dr Becky Inkster. I'm also an Honorary Visiting Research Associate with the Department of Psychiatry, Cambridge University, and also a Wolfson College Research Associate.

Yeah, so that's, yeah, that's me.

[00:01:12] **Maryam:** Absolutely incredible.

[00:01:13] **Juliette:** Nice. Well, welcome to our podcast.

[00:01:17] **Akeem:** I'm excited. Let's do this. I'm really excited, you know. I feel like *Rocky Balboa*.

[00:01:23] **Maryam:** Maybe tell us a bit about HipHopPsych, what that's all about. Like, you know, what is it and how it came to be?

[00:01:31] **Akeem:** So, the way I like to look at HipHopPsych is it's like a crew. You know, those rap crews, whether it's *Rakim & Eric B.*, whether it's *Wu-Tang Clan*, it's a crew. So, it consists of myself, and it also consists of Dr Becky Inkster.

Now basically, in terms of what it's about, it's basically about me, a psychiatrist, and Becky being a neuroscientist amongst other things we do, and basically what we do is we analyse hip-hop lyrics, and we basically look for themes related to mental health. And that could be in terms of vulnerability or in terms of resilience. And also, we can have some, you know, other discussions about anti-stigma campaigns. Now we've got four main objectives. One of the objectives is that we want to do public mental health education, so to the public. Two is we also want to look at research. Three, we want to look at making psychotherapies available to people who normally wouldn't access it. So those would be people of colour and young folk really.

In terms of how it started, I'm sure you want to know how it started. So basically, I've always been into hip-hop. So, I've been in hip-hop since 1979. That shows you how old I am. Um, and basically listening to hip-hop, I began to notice a number of themes. So, when I was doing my rotational scheme psychiatric scheme in Oxford, I used to engage with the medical students. Now, what you might not know is that most medical students don't want to go into psychiatry. They want to be glorious physicians and glorious surgeons. But I found out that when I taught using, um, hip-hop themes, it got them more interested. So, I've been do- I've been doing it for some time. So, after I've been doing it

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for some time, I'm getting results. When I then moved to start lecturing in Cambridge, the Cambridge Psychiatry Society invited me, and these are medical students interested in doing psychiatry. And I told Becky, I'm like, because I'd met Becky in Oxford, I'm like, '*Becky, yo, I'm doing this thing. Would you join me? This is why I do this, how I do it*'. Becky came, brought a neuroscience theme and the rest is history.

So, we've done talks across the world, Canada, we've done talks in nightclubs. We recently did a talk in Romania. When we did our talk in Canada, we called it the 'Straight out of Cambridge' talk after the *N.W.A*, you know, '*Straight Outta Compton*'. Now, I guess, if you don't mind me going on, you know me, I can talk for days to days.

[00:03:59] **Carolina:** The stage is yours, Akeem.

[00:04:01] **Akeem:** One of the questions they always ask us is why hip-hop? You understand? Now, for you to appreciate why, what hip-hop has to do with mental health, we need to look at the origins of hip-hop, and this is really important.

So where did hip hop start from? Most of you would've heard that traditional view that it started from South Bronx, say 70s to the 80s. But I'm here to tell you that that is a lie on the pits of hell.

[00:04:26] **Akeem:** Because when you look back, no, true, true, true fact.

Let's look at centuries before that in West Africa, they had the 'griots'. That would be where Senegal and Gambia is. Now, the 'griots' were basically poets. They would say poems, they would talk about oral tradition. They would basically talk about politics through a poetic

form, not dissimilar from what we have today. Where I come from, I'm Nigerian, I'm Yoruba, and we have this thing called 'oríkì', and 'oríkì' is basically oral tradition. And in my 'oríkì', for example, my great-grandfather, there's this stuff where he talks about where we came from. And there's something very interesting because in our 'oríkì' he- he basically talks about how he, he's sexy to some of the women because of his large eyeballs.

Now, I know it sounds sexist, but I'm just giving you an example that this didn't, um, how- how this thing came about. So, let's look at that transition through slavery. Let's think about the trauma of the Trans-Atlantic slavery and also it went to Jamaica. But then when we look at North America, it was at, the movement was actually started by a pioneer called *DJ Kool Herc*. And DJ Kool Herc was a 16-year-old kid who lived in South Bronx, who developed the 'breaks' and used to throw these block parties, and he found out that if you play the most exciting part on both records, you could actually prolong the loop, and that's how they 'break'. You understand?

[00:05:53] **Carolina:** Right.

[00:05:53] **Akeem:** Now with hip-hop, there are five elements. You know, we think about graffiti, DJing, breakdancing, MCing. But guess what the fifth element is, it's knowledge.

[00:06:04] **Carolina:** Okay.

[00:06:04] **Akeem:** Very, very important. So now we're in South Bronx. It's the 70s. What's happening in- in- in the Bronx? So, we have 70s to 80s. We have the heroin epidemic, the crack [cocaine] epidemic,

and it's decimating black and Latino communities who are the origins of this culture.

So that's one. Also, let's think about it. You have the decimation of the *Black Panthers*, you have, prior to that, you had the assassination of black leaders. So, it's basically chaos. But through hip-hop, you- you understand, if you therefore listen to the music, it will basically give you a narrative of the vulnerabilities that lead to mental health. But hip-hop was also a way of bringing the communities together and let's look at where it is now. It's a multi-billion industry. We have people like *Rihanna* out there. You know, she- she- she, she's a billionaire- about to be a billionaire. *Virgil Abloh* who passed away, um, you know, the Louis Vuitton creative director, I mean he's as much hip-hop as anyone else.

So, we see both the vulnerabilities for mental health problems, but also the resilience. And therefore, if you comb the lyrics, you can see elements of both. And that is what's so exciting about hip-hop. So, what Becky and I do both being hip-hop lovers, we comb the lyrics, analyse it, and basically begin to have these conversations.

[00:07:26] **Carolina:** Wow, and then you-you travel across the world, and you deliver these talks on- on what- what you have perceived of these lyrics...

[00:07:34] **Akeem:** Yes.

[00:07:34] **Carolina:** ...and how they can be used to- to help local communities and people to, what is it? Is it to address issues that the

community might have? Is it to empower them, put words into feelings that they might be experiencing?

What's the end goal?

[00:07:48] **Akeem:** It's all those things, because like I said, you can look at lyrics in hip-hop, and it can be for public mental health education because you know, there's a lot of stigma with mental health and in- in certain communities...

[00:08:01] **Maryam:** Mm-hmm.

[00:08:02] **Akeem:** ...it's difficult, but once you comb the lyrics, so I'll give you an example.

Let's say an artist like *2Pac. Tupac Shakur's* lyrics, '*Shed So Many Tears*', he says:

"...Back in elementary, I thrived on misery..."

And it's basically talking about what it's like growing up in a community where you have a death sentence by 25. In some of these communities, due to what's going on, you know what it's like for a black man, they- they die very early. It might be due to violence. It might be to growing up in socioeconomic deprived circumstances, which we know is due to structural racism and things like that. You understand? And *Tupac* says things like:

"...I grew up amongst a dyin' breed..."

And by combing the lyrics, you get a sense of how desperate he is. Two ways. Looking at the lyrics itself, one, and also how he says it. So, there's this thing called prosodic intonation. So, when he goes:

"...Back in elementa-RY..."

There's an angst there, you know...

[00:08:57] **Carolina:** Mm-hmm.

[00:08:58] **Akeem:** ...which you can feel it. So, if you're talking to a young person who can express themselves, if they listen to *Tupac*, say, '*Did you feel like that?*' That's called emotional anchoring. Or you can basically show them the lyrics. I'll give you another example. Some of you might know *Eminem*. *Eminem* is one of the dopest lyricists. You look at a- a track like '*Stan*', and when you look at, um, a- a track like '*Stan*', there's a very interesting part. I will just take some, a- a very important thing he says.

Uh, he talks about:

...Sometimes I even cut myself to see how much it bleeds...

...It's like adrenaline...

So, you take a bar like that. So, this '*stan*' deals with a fan who is very obsessed. He talks about his growing up. You see things that there might be problems with his attachment. He talks about self-harm.

What do we know about self-harm neurobiologically? You are scientists. Well, one of the theories about why people self-harm is

there's- there's chronic dysphoria. Why is there chronic dysphoria? Because people don't have enough endorphins. What are endorphins? Endo- endorphins are a natural heroin. Now, if you don't have enough endorphins, what happens is the neuroadaptation, so there's an upregulation of those new receptors.

So, when you are having chronic dysphoria, that can be due to abuse, due to problems with oxytocin, due to attachment, your endorphin levels are low. When people self-harm, what happens is there's a release of beta-endorphins. And by that time, because there's an upregulation, that gives you a feeling of wellbeing. And it's interesting. So, I will quote that lyric again because Eminem basically say, you know, in terms- in terms of that lyric, he says:

...Sometimes I even cut myself to see how much it bleeds...

...It's like adrenaline, the pain is such a sudden rush for me...

And so, we get a sense about why people self-harm.

So, I remember we were having this talk and talking about it. Obviously, I don't want the listeners to be triggered. But on one of the talks we did, this lady walk- walked up to us and said, '*Now I understand why I self-harm*'. And so, you begin to open up these particular conversations. And I think that's really a- a really dope thing to do, really.

And the good thing is we're not just talking about young folk. We've done a talk in Wales and in Wales, it was an older group. Now these guys don't listen to *Eminem* or *Kendrick Lamar*. But what was interesting was Becky came up with this idea of telling them that

Eminem was no different from one of their poets who spoke about nihilistic themes.

[00:11:28] **Maryam:** Yeah.

[00:11:28] **Akeem:** And immediately we did that they began to open up and they started arguing with us. Like, '*Oh, well in my opinion Eminem meant this*'. I'm like, '*Oh, so you're now a hip-hop fan*'. You know. And I think that's what's dope about hip-hop. You can have those things. And we've spoken about vulnerability. What about resilience?

So, there's a rapper called *Maino*. *Maino* has this song, '*All the Above*'. And we actually-we actually published this. But in '*All the Above*', he talks about:

"...*When- when I'm feeling down [When I think that I can't], I envision Obama, [...] I envision Ferrari's...*"

What's that? That is called positive visual imagery. So, have you noticed that rappers, when they rap about things, what do they do?

They rap about the models they haven't yet dated. They rap about the cars they haven't yet ridden. They talk about the champagne they haven't yet popped. What are they doing? They're building a rich visual imagery of what they aspire to be...

[00:12:20] **Maryam:** It's like a mood board.

[00:12:21] **Akeem:** ...and that helps them to navigate very, very difficult urban environments.

So that can help with-with resilience. So just by having these kinds of conversations, we're having talks on vulnerabilities as well as resilience. It just goes on and on.

[00:12:39] **Maryam:** I feel like that's like what you've highlighted, you know, that element of storytelling in hip-hop, it's so unique...

[00:12:45] **Akeem:** Absolutely.

[00:12:45] **Maryam:** ...to hip-hop. Like you get storytelling in other genres too, but it's got its own niche.

[00:12:50] **Akeem:** Definitely.

[00:12:50] **Maryam:** And like you say, like it can be translated in so many different ways and allow us to open communication. So, I think it's- it's a really valuable-valuable way of doing it.

[00:12:59] **Akeem:** So, some of you might have heard about emo hip-hop. So, emo hip-hop is like, hip-hop by you- you have artists like *Lil Peep*, you understand, and you know, *XXXTentacion* to mention a few. So there, there's always been the fear that if they're talking about suicide and depression, can it be negative? Well, sometimes you can have these conversations, but also there's also the risk that could there be a contagion effect. So *Machine Gun Kelly* spoke about how some of these artists, he didn't name names, that they, they're commodifying depression, but at least you be, it begins to unpack those conversations, and Becky and I, we wrote about this in a British Medical Journal paper, which is entitled 'How hip-hop's progressive narratives are helping to tackle mental health stigma'. So, we spoke about the positive and also

possibilities, some of the- the- the accusations levelled against hip-hop basically to- to- to- to give a balanced picture.

[00:14:02] **Carolina:** It's not that you're trying to reach hard-to-reach communities.

[00:14:05] **Akeem:** Mm-hmm.

[00:14:05] **Carolina:** You are opening up a conversation and perhaps letting certain voices that haven't been heard, they certainly haven't been heard in the medical space. You know, all these rappers, you're probably starting a new- a new stream, a new- a new way of bringing, you know, a form of cultural psychiatry to the mainstream.

[00:14:24] **Akeem:** No, yeah.

[00:14:25] **Carolina:** And my question to you is, what's- what's your view in- in cultural or transcultural psychiatry and also how these then interplay with communities in- in- in our society that don't have a place that- that...

[00:14:39] **Akeem:** No, no, definitely.

[00:14:39] **Carolina:** ...are silenced.

[00:14:41] **Akeem:** Definitely. So, I think it's really important. If we look at the stats, for example, we find people of African and Caribbean origin, they're more likely to be admitted when they're into hospital, more likely when you look at, compared to white folk, more likely to, you know, to have a disproportionately be diagnosed with psychosis

when they're admitted, they're more likely to come through either being sectioned or through...

[00:15:07] **Carolina:** Mm-hmm.

[00:15:07] **Akeem:** ...the prison services. So that tells you something about what's basically going on. And obviously our communities, and I say communities as a black man given, we sometimes at least find it difficult to trust people in authority. I can give you examples of encounters I've had with the police where the police are barged through my door in a hotel and accused me of sex trafficking...

[00:15:31] **Maryam:** Bloody hell.

[00:15:32] **Akeem:** ...and going trafficking, you understand? So, I know what it's like. Yeah. So, I know what it's like to- to have that. Now, that being said we have to have those conversations. Hip-hop has basically done this for years, even in the so-called like gangster [rap] era. Like I, I've given you the example of *Tupac Shakur*. Geto Boys:

"...My mind is playin' tricks on me..."

They're clearly talking about hallucinations, they're about paranoia, you know, and having these kinds of conversations. And so, the ability to take what something in someone's community and begin to have that conversation then becomes very, very important. And the thing to remember is with hip-hop, hip-hop is the dominant pop culture.

So, I don't care whether, even taking it beyond difficult reach, whether you are black, white, as I've given you the example, no one, I don't care

whether you are 50, you're touched in some way by hip-hop, you understand?

[00:16:29] **Carolina:** Mm-hmm.

[00:16:29] **Akeem:** It's the dominant culture. So, I would argue even beyond transcultural psychiatry, it has a relevance in pop culture. So, if you're interested in pop culture, hip-hop begins, and I'm not saying you have to be interested in hip-hop, but just be observant in what's happening in your environment. And if that's a tool to open conversations, then you basically can have the conversations in terms of discussing mental health, discussing treatment, and also let's look at things like psychotherapies.

Why is that people, black folk aren't referred for, you know, cognitive behavioural therapy or stuff like that? Is there something to be said about how interventions can be done? So, we work with a guy called Raphael Travis, and he does like hip-hop therapy. And that is basically making, whether it's psychodynamic psychotherapy or CBT, but making it hip-hop culture-informed because hip-hop culture is dominant, is- is the dominant pop culture.

And as long as you make it, you might begin to reach groups that you won't reach. Becky will probably talk, tell you about some of the work we are doing like with- with a record label for example. You know, we've done talks in prisons and what you observe, these guys like in- in prisons, you know, these guys are really open to discussing with mental health when you come with the right tools.

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[00:17:45] **Juliette:** I think it's so interesting that you come with this approach with hip-hop as the way to- to reach communities. Um, and I'd never heard of that, but I think it's- it's really cool to have like kind of a hip-hop like cantered therapy to kind of, you know, kind of tailor it to- to use something that is actually going to reach people and allow you to- to do the work that needs to be done. Because I- I think, I dunno if it's perhaps inquiries in some communities, but I find that, let's say classic therapy like you know, CBT or even more like psychoanalytic approaches, it doesn't work with everyone. I always give like the example of my grandfather who's in his 70s, he could never do psychotherapy like that.

[00:18:32] **Akeem:** Mm-hmm.

[00:18:33] **Juliette:** You'd need to like trick him into it. And I think it is quite a clever way to, to approach people through- through music, which is something that, you know...

[00:18:42] **Maryam:** Everyone likes music.

[00:18:43] **Juliette:** Yeah.

[00:18:44] **Akeem:** But I'll give you an example. I know we've spoken about psychotherapy and how you use it but also in like everyday interaction. So irrespective of whether they're into hip-hop or country music or you know, Billie Eilish...

[00:18:58] **Carolina:** Mm-hmm.

[00:18:58] **Akeem:** ...Or whatever, you know. But I can- I can think of a- a- a patient I saw when I was with a doctor. I was asking him

questions. He found it very difficult to answer because he suffered with psychosis, and I just noticed he was wearing some like real hip-hop gear. He had on a hoodie white. He had on some very dope sneakers without the laces, and I- I- I just made a guess. I said, '*Are you in hip-hop?*' He said, '*Yes*'. And then before we know, we got started talking about music and he basically rapped his mental state examination.

[00:19:31] **Carolina:** Wow.

[00:19:31] **Akeem:** I just needed to listen. And it was really good 'cause he rapped about his problems and his difficulties.

And here was someone I was actually trying to communicate and there was a roadblock. It might have been the hierarchy. But immediately we opened a conversation on a hip-hop level. We became equals, and it was able to open by rap. Now, I'm not saying everyone would be able to open by rap. It could be anything. It could be country, it could be a movie they've watched. It could be a piece of art, but I'm just saying hip-hop is yet a form. Why hip-hop becomes important is, again, as I said, is the predominant pop culture really, and that's really important. I think it's really important that we don't judge people from this culture.

We can think, for example, the Tottenham riots that happened years ago and how communities mostly of colour got judged, you understand? We can look at things like the 'Levelling Up' agenda. They've made it a North-South divide. Forgetting that in inner city London areas, this so-called 'rich London', are these people in these communities often people of colour, black folk, are they getting this la jess that happens in London? You understand? We need to have these kinds of

conversations. We need to understand these people's world and take it from there, really.

[00:20:57] **Carolina:** So, you trained in Nigeria...

[00:20:58] **Akeem:** Yep.

[00:20:59] **Carolina:** ...but you also trained in the UK?

[00:21:01] **Akeem:** Yes.

[00:21:01] **Carolina:** And I think going back to transcultural psychiatry, and this is something that I- I find really interesting. I was talking to one of- one of our colleagues actually, who works in the Amazon, uh, in Peru, and- and Brazil, and he, I think he also done, has done some work in Uganda and his- his work focuses on how diagnosis...

[00:21:21] **Akeem:** Mm-hmm.

[00:21:21] **Carolina:** ...can differ from culture to culture.

[00:21:23] **Akeem:** Mm-hmm.

[00:21:24] **Carolina:** How in the UK certain presentations or you know, might be diagnosed a certain way...

[00:21:29] **Akeem:** Mm-hmm.

[00:21:29] **Carolina:** ...but maybe in other parts of the world would be more embedded in the way that the society functions, and it wouldn't be

a diagnosis in itself, and it would sort of be supported by the community and things would be dealt with differently.

I wanted to know because I'm curious because you had such a training...

[00:21:44] **Akeem:** Mm-hmm.

[00:21:44] **Carolina:** ...in such different cultures, how you see that?

[00:21:47] **Akeem:** No, you are- you are right. I mean, for example, I'm Yoruba and there's no word for depression. You have things like '*mu ronnu*' so where I say that is when people would describe depression in different ways, like '*mu ronnu*', that is when you are thinking too much, which would be rumination, you understand?

[00:22:06] **Carolina:** Mm-hmm.

[00:22:06] **Akeem:** Or people tend to somatise, you know. So, you might have heard for example, in Bradford where they've got a lot of people who are South Asian, Pakistani Indian communities, and the likes. They basically have a 'Bradford Depression Inventory' where they score a lot of somatic symptoms, whether that be headache or back pain or stuff.

So, in communities such as where I come from, they- they, we don't have a word for being depressed. It might be, you know, it might be stuff like, you know, I'm not happy. So, it's a negative how you describe, not the absence of joy rather than depression itself.

[00:22:42] **Maryam:** Mm-hmm.

[00:22:43] **Akeem:** And so, learning the language of people, learning their culture also, examines, for example, someone talking about witches. There's a belief in witches.

[00:22:52] **Maryam:** Yep.

[00:22:53] **Akeem:** A belief in the supernatural. And how is that interpreted, really? Yeah, so definitely all these things come into play, like I remember when I was in Nigeria and in medical school, that's where I got interested in psychiatry by seeing like the different presentations and seeing how the families come together, but also looking at things like stigma as well.

The family can take care of someone with mental health problems. That can be both a blessing and a curse.

[00:23:20] **Carolina:** Mm-hmm.

[00:23:21] **Akeem:** A blessing in the sense that someone with psychosis in the early stage might get married off, you understand. And basically, would have children, the- the people support. But the problem is if the- if the person gets more and more severe and they're taken to religious leaders, they get more severe, when they become really- really- really psychotic, then if you're not careful, because of the stigma, then it's hands off from everyone.

So, I- I wish I could tell you that everything is honky-dory where I come from, but there are both positives and negatives, you know, and I guess in every culture, there are positives are negatives.

[00:23:57] **Juliette:** Stigma differs across culture. Like if you see, you know, major differences across cultures or if it just kind of at the end of the day boils down to the same thing, then maybe, Maryam, you may have some insights in that as well. But you know, is it very different types of stigma, or is it at the end of the day that there's just this stigma that if you're, you know, 'unwell in your head' is just problematic and you're going to be, you know, like ashamed and you're just going to be put aside?

[00:24:28] **Akeem:** I mean, generally, I- I think it's different. Yeah, they have some commonalities, but it's things in the culture that makes stigma either worse or better. And I like to think in every culture you've got both good and bad. I've given you the example in my culture really about how these things and also how it is interpreted. So, I- I know in some cultures they will work with traditional healers and I- I can't remember where this place, but they were getting traditional healers to know when to refer, you understand, in terms of like mental health. And apparently, they found these traditional healers, they- they basically had different categories. Maybe it didn't map onto ICD-10 criteria, but they had some understanding and so they reached an understanding of when a traditional healer could refer, you know.

Imagine a traditional healer writing a referral letter, you know, or whatever.

So, it's, like I said, it's basically having those conversations, being able to work with churches, mosques or...

[00:25:27] **Carolina:** Mm-hmm.

[00:25:28] **Akeem:** ...Hindu temples or synagogues, you know, the likes.

[00:25:31] **Carolina:** But, you know, that reminds me of this, I think it was a podcast that I- I listened to about how in India there are lots of traditional healers that work with communities, and they are more affordable than traditional Western medicine. So, a lot of people go to them. So instead of trying to eradicate them, what they tried to do was to train these traditional healers in more Western Allopathic medicine, and they worked together, and they reached these communities that otherwise would have not gotten to Western medicine. So they would have treated, I don't know, um, a dog bite potential rabies with, with some local herb, I don't know, formulation that wouldn't necessarily be the most indicated for that case, but because they were all embedded in the same healthcare system, a lot more people ended up being in the system that way, and I think that can be a really powerful way of working with local / alternative people that are already embedded in the communities and they have a very immense reach and- and very good work that they do.

[00:26:31] **Maryam:** I think trust is a huge part. As you mentioned earlier, Akeem, you know, there's a lack of trust in the services and authorities here. Um, and then having someone who's already embedded within the culture that you, you know, you can go to...

[00:26:44] **Akeem:** Yes.

[00:26:45] **Maryam:** ...is another- is another way in.

[00:26:46] **Akeem:** And sometimes it- it works like, for example, in mental health acts assessments, when people aren't opening up, and this is where knowing the culture comes in. Where someone is you- you- you say something. So sometimes like you meet someone from an urban era and you just throw in a slang. Sometimes it's hypothesis and like they look at you different. And I've seen that with some mental health acts assessment. Like maybe you've used the words like, *'Do you have any problems from hubs?'*

[00:27:16] **Maryam:** Greet them with a 'wagwan'.

[00:27:18] **Akeem:** You throw in like 'ends'.

Exactly. So no, and I'm not saying, for me, I won't force it really. But sometimes when you mention those things, they look at you and then there's this moment of, *'Okay, this guy understands my world'*, and they open up. I've certainly seen it because you're, and again, I'm not saying you force it because obviously not everyone will be able to do that, but because you understand some things in their culture, you might be able to discuss it. But also, there's some people from- from your culture that are on a whole different tip and also being able to respect that as well, really, you know, because, you know, black folk, people of colour are different. We have had different upbringings. The experience of say an African might be different from someone from the Caribbean and some who define themselves as black British, you know. So, yeah.

[00:28:08] **Juliette:** That really links back to this- this idea that you just need to find sometimes the right-the right therapist, the right, like healthcare professional to help you and to understand you. Because I think we're always told, you know, *'Oh, you need to find the'*, you know,

'the right therapist to work with you, you need to find somebody that you click with'. And I guess that's why it's so important to have representation in medicine across, you know, the, like the background that you can, that the health professionals can have because it means you're gonna click with different types of patients across the board. I think I remember reading a lot of people saying, I think it was around the time of, uh, George Floyd, but a look, a lot of black people searching for therapists and saying, 'I want a black therapist, because they understand the level of stress...'

[00:28:54] **Akeem:** Mm-hmm.

[00:28:55] **Juliette:** *'...of- of what's happening now that somebody who's white just, you just won't get it'.*

[00:29:00] **Maryam:** Yeah. Representation is so key. It's so key.

[00:29:03] **Akeem:** No, definitely, definitely.

[00:29:04] **Maryam:** To speak to someone who's from a similar background or looks like you, makes you more comfortable already. My friend Panez, she- she actually wrote a blog about, a very recent one actually, about mental health of ethnic minorities. She works for this non-profit, oh, she co-founded it actually, um, non-profit organisation called 'Identity International'.

And it's a really interesting blog, I've sent in the chat, and we'll link it, we'll link it for our listeners as well, but definitely worth a read. But yeah, they- they- they interviewed quite a few people of colour about it, and they- they expressed those views that they wanted to speak to

someone who understood, you know, just understood their experience a bit better.

I wanted to quickly share this with you 'cause I think it's something you might appreciate, and I was talking to the girls about this before.

[00:29:51] **Akeem:** Yeah.

[00:29:51] **Maryam:** So basically, I attended this, um, I was doing some mentoring for some Master students who were doing the course that I did. Um, and it was specifically for women of colour and, um, it was run by a lovely woman called Diana, Diana Osagie. I might be saying her name wrong, but yep.

[00:30:07] **Akeem:** Yes. Osagie, that's Nigerian. Repping!

[00:30:10] **Maryam:** Yep, she was- she was absolutely wicked. She did, um, some sessions with us and taught us some different tools and skills and ways of looking at ourselves in a different way...

[00:30:18] **Akeem:** Mm-hmm.

[00:30:19] **Maryam:** ...um, as women of colour. And she taught us about this terminology, which I've taken forward with me since that moment, and I share it with people I come across all the time, and it's that instead of, you know, the terminology like BAME, like ethnic minority, and there's like almost like inherent like, it's got negative connotations to the word minority, almost like you know, lesser, smaller. Even if it's not intentional, it's there. You become like a marginalized group kind of thing. Instead of using that, she used 'People

of Majority Background'. Because people of colour make up 80% of the world's population roughly. So now I've started going around saying...

[00:31:01] **Akeem:** I love that. I love that.

[00:31:01] **Maryam:** Person of majority background.

Yeah, it is empowering. Like it feels, it feels better, um, than saying, oh, I'm BAME. But yeah, I thought I would share it with you just 'cause it's a really fun...

[00:31:13] **Akeem:** I like that. I like that.

[00:31:14] **Maryam:** ...way of looking.

[00:31:15] **Akeem:** I might bite that. I know in hip-hop you're not supposed to bite things, but I might just bite that.

[00:31:27] **Juliette:** So, our main question that we have to ask everyone due to the name of the podcast obviously, is Akeem right this minute, what's at the back of your mind?

[00:31:37] **Akeem:** What's at the back of my mind?

[00:31:39] **Juliette:** Yep.

[00:31:39] **Akeem:** Nan- Nando's.

[00:31:43] **Akeem:** Next.

[00:31:43] **Maryam:** Okay, what- what's the standard Nando's order though? What's the- what's the order you get?

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[00:31:49] **Akeem:** I'm going to Nando's. Sorry. This isn't a shameless plug for Nando's, even though you can get your 20% discount with the NHS. But I'm just saying-

[00:31:58] **Maryam:** You sponsored. Sponsor please!

[00:31:58] **Akeem:** Nando's, for me it's, you know, the Peri Peri Chicken, and let's not deal with stereotypes. I just like chicken. I just happen to be black and like chicken. So, you know, let's keep like David Chappelle, let's keep, but when they ask me how hot I want it, I say, "punish me" and I stick my tongue out.

But then people thought I was weird, so I stopped sticking my tongue out. But I'm like, punish me hot, you know. And I will get that black card at Nando's. Next.

[00:32:27] **Maryam:** The journey to the black card.

[00:32:28] **Akeem:** Absolutely.

[00:32:29] **Maryam:** Love it. You've gotta keep us updated.

[00:32:31] **Akeem:** I know.

[00:32:32] **Maryam:** We could all go for a Nando's date. What would you say that you are a self-proclaimed expert in? And it can be anything, like absolutely anything.

[00:32:42] **Akeem:** Oh man, the pressure man. I've never been tongue-tied.

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[00:32:47] **Akeem:** Self-proclaimed expert in. Hmm. I think it is, and I know it always boils down to food. I know how to conquer any buffet.

[00:32:58] **Juliette:** That's a very good skill.

[00:33:00] **Akeem:** I approach every buffet strategically. That's all I'm going to say.

[00:33:05] **Maryam:** He's got the straps. He's got the straps going in.

[00:33:07] **Akeem:** I don't just walk into a buffet. It's planned.

[00:33:12] **Juliette:** We won't ask you for your secrets.

[00:33:15] **Akeem:** No, I can't. You gotta pay for that.

[00:33:17] **Maryam:** You can't spill those on- on the podcast. Fine. Thank you so much...

[00:33:23] **Carolina:** Thank you.

[00:33:23] **Maryam:** ...for being a guest with us today.

[00:33:25] **Juliette:** It was lovely.

[00:33:26] **Maryam:** It's been incredible talking to you. And finding out more about what you do.

[00:33:29] **Carolina:** Thank you so much.

[00:33:39] **Giulia:** Hi everyone, it's Giulia. This episode of *At the Back of Your Mind* was recorded on the 8th of June 2022, featuring our hosts

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Maryam, Carolina, and Juliette with special guest Dr Akeem Sule. You can find Akeem more about his work over on Twitter @hiphopsych.

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And of course, thanks to you for listening. See you next time.