The Black Doctors Talk Podcast with Dr. Keyonda Smith

Intro: Welcome to the Black Doctors Talk Podcast! I am Dr. Christopher Holmes, host for this n episode and member of the Black Doctoral Network. Today, I am joined by Dr. Keyonda Smith, who is an academic practitioner, researcher, and digital accessibility and health consultant.

Welcome Dr. Keyonda Smith.

First, I would like for you to start by telling our viewers and listeners a little about your background.

Where does it all begin for you? I’ll try not to make this too long…. I’m originally from Camden NJ, and as a kid of the ’80s, I always wanted to be an attorney, most likely due to my exposure to Shows like *Ally McBeal*, *L.A. Law,* and, of course, *Law and Order*. They made being a lawyer look suspenseful and even glamorous. With their High-rise offices, mysterious fact patterns, and intraoffice dramas. This was enough to get me to commit to the answer of “lawyer” when asked what I wanted to be when I grew up.

Although I always envisioned lawyers as extremely busy, the prime-time episodes I watched did not show the grittiness and poverty of being a lawyer, the exhausting law school experience, the excessive student loans, and never making enough to pay them back, the mundane internships, or the employer frustrations. Honestly, at the time, I had little idea as to what being a lawyer entailed. Growing up, I did not know any lawyers. My mom was trained as an accountant and my dad has always worked at Campbell Soup, so to me, becoming a lawyer — was making it big. *That* was the ultimate sign of success.

However, being impressionable, I was also a product of the inner city environment. I am unfortunately, but fortunately a part of the negative statistics and had miraculously found myself pregnant at the age of 15. My daughter is 25 now, so I’m in the clear. But that didn’t deter me, it just made my path a little bit more challenging. A college degree was normal in my family. My mom and dad are both college graduates and I’m not the first doctor. However, I would’ve been the first lawyer, so that was my aim.

After fumbling through high school with a 2 year old daughter, I enrolled at Virginia Union university, during my sophomore year, I got married (the first one), and ended up completing my B.S. at the Naval air station in Jacksonville FL. Whew…. now that hurdle was over. Time for law school, right? Yep, was very excited, studied hard for the LSAT, and was accepted into Law school…. then, I stayed for one semester…….And quit.

After understanding the reality of being a solicitor, I realized, that wasn’t going to work for me. So I went back to base, started teaching high school math and science with Teach for America, finished my masters, and I learned about a professional doctorate in health and wellness in Indiana. I completed that program. While on residency, I realized that I’m physically lazy, however, but still needed to make money. One of my professors explained how a PhD could help me with this conundrum. So, I went back on base and started the journey to earning my Ph.D. I completed my PhD and I was ready to start my career in training future doctors.

1. What sparked your interest in the digital world? My accessibility career break initiated when I first entered graduate higher education and the industry steered my focus onto the digital side of learning and recognizing the gaps were in our lack of universal design for learning and educational equity to measure advanced graduate competencies.

2. How do you define and describe digital health? Digital health, in the domain of post graduate higher education, is where I’m able to train medical and healthcare professionals using digital technology, machine learning, and artificial intelligence to execute and measure post graduate learning.

3. Talk a little about why technology is so important to learner engagement? There is an overabundance of empirical research that indicates how the use of technology results in:

* 1. Students expressing that the technology increased knowledge attainment and they were more interested in the lesson.
  2. They felt highly engaged when they received immediate feedback during course session.
  3. How using technology positively impacted the outcomes of English language learners.
  4. And lastly, that by integrating technology with instruction positively impacted affective learner behavior.

That alone is a significant selling point.

4. Why does your work focus on working with guiding leaders? Unfortunately, accessibility may require additional fiscal resources and human resources. Selling the ideology to leadership is where I typically start, as I want to make certain that it’s feasible and if not, figure out workarounds. Top leadership is where to initiate this conversation. Then once a plan is in place, we must sell it to management and individual contributors. The benefit to this top-down approach is:

* The reality that most of the employees are used to this style of management anyway
* And top leadership are inclined to understand the organizational and institutional goals and objectives. So, they seek to align with those.
* They’re also where to go to globally communicate upcoming expectations
* And that’s what they are there for. No one else has time to make these types of decisions.

Unfortunately, there are drawback to top-down leadership, such as:

* The Employees might feel like they don’t have a voice and therefore no connection to the overall mission
* The few bad apples out there who practice ineffective leadership may lead to bad decision-making and negative employee perceptions
* And this approach lacks the ability to leverage any creative ideas and thought diversity that we get from management and contributors.

5. Why is your work important to lay people who may not fully understand what you do? Because it’s federally mandated. That’s why its important. I recently read a study that indicated the number of U.S. lawsuits alleging that websites, apps and digital videos were inaccessible to people with disabilities rose 64% in the first half of 2021 when compared to 2020. And I always revert to explaining that Digital inclusion is about including, not only those who are differently abled, but EVERYONE using digital technology to learn. Therefore, it’s vital for holistic participation, diversity, and it’s a civil rights issue.

6. We have seen the lack of equitable digital access in education since the pandemic, how has this manifested in the healthcare world? I can primarily speak to healthcare education and training, and it’s the same. My professional doctorate focused on food deserts. My PhD focused on the digital desert or digital gap (I just made up that word digital desert, I think I’ll use that and coin it as a term.) Nevertheless, not everyone has a computer or laptop or stable and consistent internet access. This is a part of digital accessibility, ACCESS, so the technology used to train our future healthcare professionals, must be device agnostic and operate on and offline. Those are parts most often forgotten about.

7. With work in government and corporate healthcare and health technology sectors, what makes your work challenging? Once again, I’ll try to keep this short. The institutional landscape that comprises of various key stakeholders who undertake positive steps towards accessibility, they may fall short in some ways due to red tape.

Organizations that advocate for accessibility, then put forth genuine efforts to make digital accessibility a reality but perceive lower profits simply due to a relatively narrow market eventually diminishing their overall efforts.

Lastly, some may inadvertently slow down the overall process due to the extent that their organization or institution having multiple stakeholders with dichotomous agendas, objectives, and goals. Here, a novel digital accessibility effort can encounter dualisms such as profit versus human rights, market share versus accessibility, competition versus inclusion. Oh the list goes on …. too bad we don’t have enough time.

8. Who has had a tremendous impact on you in your career field? The User experience. Without this insight, then what is all of this for.

9. What is one thing you wish you had known earlier in your career? I learned from a very wise person to not spend major time on minor things.

I define Major Time as A block of time that is uninterrupted, fully concentrated on completing, analyzing, and thinking about a task. The best way I can classify Major time is when completing this task, I’ve advanced the dial on the quality of my life that corresponds with upward mobility.

Next, I define Minor Time as A block of time that is full of interruptions (checking social media, checking personal email, and checking the news, also unnecessary meetings about a meeting and meetings that should have been an email), where I am partially concentrated on analyzing, and/or thinking about the task at hand.

Lastly I've also wish I knew that it is not normal to set myself on fire to keep others warm. Over the years, I’ve learned not to get my value from how much I give to others, and to focus on how much I give to myself. In other words, I’ve learned how to help others without sacrifice myself.

10. What advice would you give to someone wanting to pursue a similar career? Earn a post graduate degree, certifications, and training, go to conferences, build a strong portfolio, and join several digital accessibility organizations

11. How do you stay abreast of current trends in your field? I attend and present regularly at large industry conferences, I publish in peer reviewed journal, and I sit on several accessibility professional boards.

12. What is your biggest accomplishment to date? For a long time, it was completing high school with a 2 year old. Now that she’s 100 years old – that’s no longer impressive. So, I’ll say that my biggest accomplishment to date is Completing my 2nd doctorate before age 35.

13. What skills would you say have helped you be successful? The ability to work independently without supervision, my self-efficacy, and my internal, unwavering motivation.

14. What are you most proud of in your career? I’m most proud when I introduce accessibility to an organization and when that mental light turns on - it the highlight of my life. When leadership, even Corporate Attorneys, express that they’ve never considered digital accessibility, yet it's a federal law. Or when I share the civil rights litigation statistics and demonstrate how we can make accessibility happen for them, and they get on board and start selling it to everyone else it is the best feeling in the world.

15. Where do you see yourself going from here? I plan to focus more heavily on accessible advanced technologies. Currently, I'm developing an introduction that centers on accessible virtual reality and gamification for postgraduate learners. In the future, I absolutely plan on conducting introductions and peer-reviewed research grounded on healthcare faculty professional and curriculum development, and methods on how to incorporate accessible advanced technologies for healthcare learners.

16. How has your affiliation with the Black Doctoral Network enhanced your career? It has been a blast. I have been able to participate in several activities and build my professional portfolio based on some of the sponsored activities over the last year or so. My affiliation and membership with the black doctoral network is a significant resource for my professional development and relationships.

17. Where can the listeners find you: www.kmsmithphd.com