“The world is getting so boring... we can't say anything anymore!”: an autoethnographic essay about the “mimimis” that insist on bothering medical training

Perhaps, at various times in your life, you have not questioned yourself about your sexuality and the way in which it can interact with discourses of domination and stigmatization, as well as with other intersectionalities such as race/ethnicity and gender. Our bodies seem to have a biological order pre-defined by culture, but we forget that all processes are culturally constructed. What social norms are we talking about? Who elaborated and continues to reiterate these norms? Me? You? .... Without seeking to immediately answer these questions, this autoethnographic text in the debate format of the article entitled “Are we preparing future physicians to handle situations of violence related to gender and non-heterosexual sexualities? Report of a diagnostic educational ‘experience’” invites you to think about which society we are willing to build.

2011. Clerkship, or also known as Compulsory Supervised Clerkship in the Medical Course’s, in the Internal Medicine area. Stage of “Infectious Diseases” (ID). During the various bedside activities and discussions of clinical cases of patients hospitalized in the ID, I was taught to improve my clinical knowledge in relation to infectious and parasitic diseases.

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On another ordinary day of this process, laughter echoed from the “Doctors’ Room”. As I approached, the “joke” was related to the fastest way to know if a person was gay. Obviously, I, as a gay white cisgender man, recoil in fear of being outed. I enter. The answer to the “joke” or “clinical knowledge” of a case on the ward was directly, for those (mostly heterosexual white cis men) who laughed, laid bare in the result of a urinalysis. “He can only be gay, because those who have intestinal bacteria in this test are those who have anal sex”. “Laughter”, again. For me, one more alert. My fear: suffering violence and/or as a friend of mine later translated it, social death.

The manifestation of whiteness guarantees privileges to whites and exposes their neutrality in situations of ethnic-racial conflict. To be white is to be a universal reference of human normality. (p. 153)

Upon hearing this stated from a professor nationally known as a reference in the field of Infectious Diseases, doubts about a person’s sexuality cease to exist, depending on the result of an exam. The exposure is not only about being gay, but there is also a pejorative exposition. One moment... how did you learn about sex, sexuality and gender?

For many cisgender white men, sex is taught and learned, for the most part, in the “whorehouse”. It is the “initiation ritual of many men”. For my older cousins, sex is taught and learned, mostly, in pornographic materials. As an object, the hegemonic perspective of machismo on women is reiterated, through this “teaching of sexuality”.

And what does all this have to do with what I experienced in my medical training? The reiteration of disobedience from the “norm”. Hegemonic “norm” that in a historical and cultural way is reiterated by men, whites, cisgenders, heterosexuals, in the majority. Reproducing a colonial logic of domination, my professor taught me and my colleagues to reproduce in our practice a conduct considered “professionally appropriate”. By keeping other existential possibilities in place of the comic or reiterating the comfortable position of “I didn’t learn anything from that”, violence is reiterated, in which LGBTQIA+phobia presents itself as an expression of the guardian of the borders of hegemonic sexuality.

The notion of homophobia articulates a general form of hostility to deviant/disobedience behavior from pre-established socioeconomic roles. (p. 21)

2022. Remote meeting of a group of university professors. I wait for other people to come in so we can start the meeting. A colleague beside me comments:

— Gustavo, did you hear about that professor?
— No. What there was?
— He said to a group of residents [men, mostly]: ‘the world is getting so boring... there’s nothing more to say!’
— Hmm?!
— He said that the medical residents [white cisgender women, mostly] of Gynecology and Obstetrics keep questioning his conduct. They talked about the way...
he treats patients but he said: ‘as if I treated women badly, I love them’ and added: ‘everything is mimimi!’...

[...]

“It is not possible to think of true gender equality in the face of a scenario of violation of all types of women’s rights, [...], we believe that we move even further away from the end of gender and racial oppression when we insist on “rights” of a universal woman. With regard to black women, there is at least an intersection of two axes: race and gender”. (p. 4916)

2023. According to Rosangela Malachias, it is understandable that the term “mimimi” is used by certain people belonging, normally, to hegemonic groups to refer to other subjects who “whin” and “victimize” themselves by problematizing ethnic, racial, and gender inequalities and vulnerabilities. When remembering the tears shed in my existence in the face of the various wound suffered by being a gay man (even if cisgender and white), I cannot ignore the pain I experienced and experience when hearing the “mimimi”. It is inadmissible to assume the comfortable position of neutrality and believe that it is “all right” in speeches and actions that reiterate a hegemonic power over bodies. Cruz et al., invite us to think about an “institutionalized training policy” which, in my view, represents the systematic and intersectional study and practice of Human Rights, which can compose a set of compensatory and/or reparation public policies. In this sense, we need to question the “universal subject” (heterosexual cisgender white man) of our practices in order to break with the duality that establishes a “standard/norm” and a “non-standard/norm”. We need to reflect on which society we want to build. If we understand that it is necessary to expand existential possibilities based on the logic of respect for diversity and the right to live, on an intersectional basis, we have to name the multiple forms of violence that we experience and/or reproduce in our society in order to transform our existence. It is necessary to feel the discomfort, to think of a transgressive education that has empathy and compassion, as mentioned by Cruz et al.

The classroom, with all its limitations, remains an environment of possibilities. In this field of possibilities, we have the opportunity to work for freedom, to demand from ourselves and from our comrades an openness of mind and heart that allows us to face reality at the same time that, collectively, we imagine schemes to cross borders, to transgress. This is education as a practice of freedom. (p. 273)
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All authors actively participated in all stages of preparing the manuscript.

Conflict of interest
The authors have no conflict of interest to declare.

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