



## Linda Brodsky Memorial Journal

### **Diversity in Healthcare: A Personal Narrative of Cultivating Compassion and Cultural Competence**

*Delmarie M. Rivera Rodríguez*

I once had a friend who suspected he had skin cancer. His skin was peeling, an unfamiliar and painful experience. The first dermatologist he consulted reinforced his fears, suggesting cancer. When seeking a second opinion, the new dermatologist laughed and asked if he had been outdoors without sunscreen for a while. It turned out that what he thought was skin cancer was, in fact, a common sunburn. A crucial detail in this anecdote is that my friend is black, and so was the second dermatologist, highlighting the vital role of diversity and cultural competence in healthcare.

From this encounter, I not only recognized the significance of diversity among healthcare workers but also the imperative to cultivate cultural competence. At the time I had no medical knowledge, but I knew how to recognize a sunburn. I would have probably not recognized his. This hit me like a bag of bricks and opened the way for deep introspection. As a first-generation,

Spanish-speaking Latina woman in medicine, I embody multiple minority groups. However, my intersectionality doesn't exempt me; it propels me toward developing cultural competency—a responsibility I wholeheartedly embrace.

In pursuit of cultural understanding, I engaged in an initiative targeting the community of Gualey, Dominican Republic. There, I was humbled to know that the journey toward cultural competence is perpetual. Our multi-institutional team comprised doctors and medical students from the mainland U.S., Puerto Rico, and the Dominican Republic. This culturally diverse team served as more than healthcare providers; we became agents of change. By interacting with the community in their homes and offering medical services, we not only treated ailments but also broke down barriers, fostering a sense of trust and understanding.

Connecting with this community through shared language (Spanish) and providing healthcare in their homes proved immensely gratifying. The impact of this initiative reached beyond immediate

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healthcare provision. It instilled in the minds of young children the belief that they too could pursue careers in medicine. The clinic targeted the community's pressing health needs, where young girls, victims of sexual assault, were provided the HPV vaccine free of cost. Additionally, the team worked together to identify and treat common infections and paved the way towards making healthcare more accessible. This initiative not only underscored the urgency of addressing health disparities but also emphasized the cultural nuances that shape healthcare accessibility.

Determined to continue making healthcare accessible, I joined *Medicina Urbana*, a student organization conducting clinics and health fairs in rural areas of Puerto Rico. Services in these clinics have included COVID-19 vaccinations, complete physical examinations, blood sugar and pressure readings, and sometimes included medical specialists who volunteered to help. Our student-run clinics aimed not only to fill this void but also to address the broader issue of healthcare disparities. Beyond vaccinations and physical examinations, we delved into the social determinants of health, recognizing the interconnectedness of healthcare and socio-economic factors.

As an active participant in *Clínicas Padre Vernard*, a student-run clinic in Old

San Juan, I have honed my ability to provide direct patient care while fostering mutual teaching moments with peers. The doors of the clinic are open to all. We mostly serve the homeless and uninsured population of Old San Juan. My most meaningful experience was with a patient who had an infected wound from a prior accident and the stitches were adhering to his skin.

In this encounter, aside from attending to his immediate needs, we discovered multiple underlying comorbidities. This encounter highlighted the intricate interplay between healthcare, socio-economic factors, and cultural contexts that dictate access to care. Furthermore, it instilled in me a sense of responsibility to aid in any way that I could. Observing the abundance of addiction in homeless populations uncovered a lack of outreach.

Following up on this realization, I decided to lead the Harm Reduction and Addiction Medicine (HRAM) Interest Group at my institution. Through HRAM, we conducted workshops on administering naloxone, initiated a needle exchange program, and are working towards sustaining these efforts. Cultural competency remains central to proper care for this patient population. As a rising physician, I actively aim to reduce the

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stigma regarding addiction with the hopes of making healthcare equitable for those who suffer from addiction.

Committed to understanding the unique challenges faced by patients led me to the RARE Compassion Program. This initiative from Global Genes aims to increase comprehension and equitable care for those patients who struggle with rare diseases. In this program, I met with four incredible rare disease patients who would share their stories of navigating their disease in a system that often overlooks them. Through direct patient contact, I have developed a deeper empathy for those battling rare diseases, broadening my perspective on the physician's role in providing equitable care to this population.

These experiences extend beyond clinical settings. I have consistently sought to bridge cultural gaps and provide compassionate care to individuals from various backgrounds. However, I have a long way to go. The battle against unequal care is vast, and my commitment to reducing disparities remains steadfast. My diverse experiences have taught me that cultural competence and self-awareness are not merely buzzwords in healthcare but indispensable tools for providing equitable and effective care. These encounters have shaped my approach to patient interactions,

emphasizing the need for personalized, culturally sensitive healthcare strategies.

As I continue my medical journey, I am committed to cultivating these qualities to ensure that every patient receives care that respects their unique cultural context. In conclusion, my journey has not only equipped me with the skills to address immediate health concerns but has also instilled in me a profound sense of responsibility—a commitment to advocating for a healthcare system that recognizes and addresses the diverse needs of all individuals.

### Biography



Delmarie M. Rivera Rodríguez is a third-year medical student at Universidad Central del Caribe School of Medicine in

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Puerto Rico. She earned a Bachelor of Science in Human Biology with a minor in Biotechnology from the University of Puerto Rico, Bayamón Campus in 2021. Delmarie has consistently demonstrated a deep commitment to her community, actively participating in student-run free clinics that impact diverse patient populations in Puerto Rico.

Her dedication to healthcare equality extends beyond clinical settings. Delmarie has been involved in cancer research since 2019, contributing to important advancements in the field. She further expanded her knowledge and expertise through two participations in the Pediatric Hematology Oncology Summer Program at St. Jude Children's Research Hospital.

As the president of the Harm Reduction and Addiction Medicine Interest Group at her institution, Delmarie leads initiatives to address healthcare disparities. Additionally, she actively mentors undergraduates interested in pursuing careers in medicine, contributing to the empowerment of future women in the field.