



Linda Brodsky Memorial Journal

From Scraped Elbows to Scrappy Advocacy

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“Alles gut?” I look up from the sidewalk, mumbling, “Ja,” as I assess my bleeding elbow. Ten days into my Fulbright research grant, I think, “Just a little scrape.” In the ER they tell me I need a full cast, and I laugh aloud, certain something is being lost in translation. Plunging down the German sidewalk helps me recognize the vulnerability inherent in medical care, particularly across cultural barriers. Enhanced awareness reinforces my commitment to a career in medicine focused on supporting patients through their challenges and vulnerabilities.

Cultural awareness and willingness to listen and learn are key components to providing equitable care to diverse patient populations. I grew up enjoying a diverse friend group, learning Chinese greetings from a friend’s grandmother, hunting for gelatin-free marshmallows with Muslim friends, and performing in theatre alongside LGBTQIA friends. At Luther College,

during a course on wealth and poverty, I learned to better discuss differing views on sensitive matters. Through a project leading my Islamophobia class, I grew as a collaborator and leader, learning how to use questions to guide discussion, and how to navigate contentious topics. Studying in Ghana, I learned about the role of Christianity in slavery, and the challenges of identity and history. In Argentina, I improved my Spanish, but sometimes struggled to adapt to the rhythms of my host family’s life. As I attempted to communicate in a foreign language, I realized that spoken eloquence – particularly outside one’s native tongue – is a poor gauge of intelligence and creativity. During my Fulbright in Germany, I adapted to cultural norms, improved my language skills, and learned about humility and self-awareness in intercultural interactions, and always being open to learning.

In medical school, I have begun using cultural competence to advocate for more equitable care for patients. On my surgery rotation, I watched my resident examine a

non-English speaking patient without saying anything or calling a translator. “Can I call a translator?” I asked with some concern. The resident was dismissive, stating the patient spoke a dialect none of the translators could interpret. The patient attempted to say something to the resident, who ignored her, so I decided to try anyways. I worked with another resident on the team to determine that the patient spoke Nigerian Pidgin, a relatively common language based on English, which many Nigerian translators speak. We called a translator. Listening to patients is vitally important to diagnose and treat them and involve them in their care plan – even (perhaps especially) when extra effort is required.

Cultural competence, self-awareness, and humility are all integral to equitable medicine. Through my career, I hope to continually learn and strive for better, leaving a legacy of leadership through patient care, research, mentorship, and advocacy that aims to better serve patients’ needs. As I begin this collaborative journey of listening to and working with patients, I intend to support them in living the fullest lives they can, whether by offering medical treatment, a hand to hold, or some intercultural sympathy after a clumsy tumble down the sidewalk in a new country.

Making Space for Spirits and Stories

In *The Spirit Catches You And You Fall Down*, Anne Fadiman chronicles the true story of a Hmong refugee family struggling to care for their daughter, who has a severe form of epilepsy. Cultural and language divides between the family and the medical system lead to miscommunication, and eventually, tragedy. During my first year of medical school, this book reminded me that medicine is more than facts, medications, and treatments. Medicine has real human impact; it can change the course of lives. The book speaks to the importance of cultural competence in medicine. While the doctors in the book mean well, they initially make no effort to understand the family and their worldview, or to collaborate with them on a treatment course. Had they, the story might have turned out differently.

This book helped me to discern the kind of physician I want to be; one who never makes assumptions about patients, and is prepared to listen to and learn from them. Fadiman’s book reminded me about our common humanity and our ability to connect, even across differences. Both the family and the doctors want the best for their daughter; they simply differ in what that looks like. By the end of the book, the doctors make efforts to accommodate the family’s beliefs, and I found myself

wistfully wondering why that could not have happened sooner. As a physician, I hope to learn from this book, and seek respectful understanding from the beginning. When my patient walks in, I hope to care for them, and to also create a safe space for them to share their understanding of their illness and what might help them heal. I hope to make my patients feel cared for not just as patients, but as people – people with stories, families, values, and plans. Even if my patients and I see the world differently, we can and should find the best path forward by collaborating in selecting diagnostic and treatment options.

I thought about this book on my gynecology rotation, as I watched a resident spend an hour with one patient and a translator in a preoperative visit to get a permission form signed. There was no translated copy, and the resident and translator read through the entire form with the patient twice until she felt comfortable signing it, the resident patiently making clear that she respected the patient's concerns. I admired that patient's questions and self-advocacy, and I also admired the resident's equanimity and understanding of the patient's position. While it may not be always possible to spend an hour with a patient, I hope to always remember that each patient is entitled to understand their

situation and their treatment plan. And in those tough situations on long days, I also hope to embody that resident's calmness, kindness, and grace.

As a physician, I hope to constantly learn and listen, coming to understand my patients' perspectives, and standing up to advocate for their needs. Through policy work, mentorship, and personal practice, I hope to make a larger impact on medicine focused on increasing equity of access to quality care. And as *The Spirit Catches You And You Fall Down* taught me, I hope to remember that each patient has a story to tell. However different my background might seem from that of my patients or colleagues, our common human experience connects us on a deeper level; collaboration across differences is not only possible, but a goal that is ever-worth seeking.