

Being a Doctor These Days

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What is it like to be a doctor?

The news likes to paint a grim picture for healthcare, scaring us all into a spell of doom, gloom, and hopelessness about the system, its providers, and the patients. Words like “burnout” are tossed around, and “wellness” thrown back in response. Even in our first year of medical school, it quickly became apparent that we had committed ourselves to a line of work with certain hazardous working conditions, unlike those regulated by OSHA. It made me wonder whether or not a physician’s worker’s compensation could cover psychological services, judging by the amount of moral trauma that occurs on a daily basis. It made a lot of us wonder why we wanted to become physicians.

But being a doctor is so much more than the lifelong learning, the endless charting, and the frustrating negotiations with insurance. Physicians enjoy a position of prestigious self-sacrifice, with its respected status warranting a vast amount of accountability. So we take the abuse, going through the motions, happy as long as the patient keeps moving forward.

My summer at SHRP has been with many family practice physicians, supported by Union Health in this mission to care for the people who feed our nation and stock our grocery stores, enabled by the government as Federally Qualified Health Centers, a surprisingly effective model of healthcare which one of my peers described as “superior to private practice.” Though it’s far from perfect, I was witness to the heart and start of healthcare for many patients—the primary care setting.

I found that these rural family practice physicians are the superlative of doctor—that is, Latin for teacher. Taking an emphasis of preventative medicine and wellness, the physicians I followed demonstrated an articulate method of pedagogy at the bedside, always motivated by the patient’s best interest and safety. Even if it took 30 minutes to convince a farmer with post-concussion syndrome to do *absolutely nothing but brain-rest* during sowing season, one physician would do it with a smile on her face, eyebrows turned down in compassion, reassuring positive outcomes while managing expectations.

It’s a skill to persuade without pushing too far. It’s a talent to say what needs to be heard. It’s a vocation to say it over and over, oftentimes to the same person. It’s the virtue of being a doctor that drives us to be patient for our patients, even if they might be more stubborn than we are.

Many physicians experience “burnout” today, and some might attribute it to the complexity of their patients. Each patient has their own curriculum of health, a delicate regimen to treat a complex pathology. All patients need a certain level of understanding to increase their ability to not only comply in treating their disease, but to *actively participate in their wellness*. It is in the primary care setting where a majority of education reaches the patient. Thankfully, it is the patient-physician interaction that continues to rejuvenate many doctors’ passion for medicine.

Let me reassure you, the situation is far from bleak. During my summer with SHRP, I was lucky to work with so many hardworking, kind, cheerful people who've shown me that change comes to those who want it, whether it is at the legislative, administrative, or clinical level. Change comes to those who want it—and *when* I become a doctor, I will be thankful for the privilege of teaching my patients how to achieve the transformation they need.