

A QUESTION OF RESPECT

Timothy Walsh, Class of 2019

For my future patients, I hope never to be their disciplinarian, but their teacher that helps them discover their motivations.

Fresh out of college, I taught 9th grade biology in one of the most violent neighborhoods in Chicago. Although I hoped to change the lives of my students, things didn't go as planned. In the first month alone, two fights broke out. As I struggled to pry the students apart, it was only after another student helped me that the fight stopped. Not only had I failed those two students, I had lost the respect of my entire class.

While no students ever fought in my classroom again, my class was unruly, disinterested, and a few students even threw things at me. I was not the supportive teacher I hoped to become, but a disciplinarian imposing rules that did not resonate. After a fatal shooting of a student in our community, one of my students told me, “You teachers don't get it. You get in your cars and drive home at night.” I realized I had been so intent on prescribing my goals that I failed to respect them enough to understand what they were up against.

Things changed the next year. Instead of being prescriptive, I listened. I got to know my students. When one student had a baby over the summer, I went to the hospital and held her baby. When another was suspended for a week, I brought her homework to her on a Saturday morning, and in her living room, with her mom and younger sister, I learned why she brought a knife to school. In the classroom, I stopped being prescriptive and asked my students to write on a piece of paper the answer to the question: what is your goal?

I posted their goals in a word cloud on a giant poster that hung in the center of the room. Every day, I referred to this poster. When my students became disruptive or disinterested, I pointed to their goals and they understood. The poster served as a reminder that what we were working on in our class was intimately intertwined with what they hoped to achieve.

The question—what is your goal?—came to represent a question of respect. It marked the moment when I stopped prescribing and started listening. It was a medium through which I helped my students discover their motivations. I had become a student-centered teacher. Their goals became my goals and together we worked toward them.

Two years later, while an HIV research coordinator, I found these same



Goals from
Timothy Walsh's
class

principles of empathy and respect applied in the healthcare context. One participant, Chris, who had just been diagnosed with HIV, was taking his medication half of the time, and was smoking marijuana daily to cope with his diagnosis. As I marched through the survey, I noticed a parallel between this interview and my first year of teaching. Just as my students did not initially connect with the intricacies of DNA, Chris was not eager to discuss the intricacies of his diagnosis. At the end of the interview, I learned that the social worker, with whom Chris would meet next, could not see him for another 30 minutes. I took a risk. I sat down with Chris and asked him the question that transformed my classroom two years before: “What are your goals?” Chris laughed. It was the first time I had seen him smile. He shared that he wanted to be a chef. I picked up a dry erase marker, as I was accustomed to in my former classroom, and wrote his goal on the board. Together, we mapped out how he would get there, starting with his GED and culminating in owning multiple restaurants. As he took the marker from my hand, I watched him transform as he mapped out his own path to his hopes and dreams. At the end of our time together, we talked about how taking his HIV medication every day would allow him to be healthy enough to pursue his goals.

Nine months later, Chris was back in school and working. He was also taking his medication every day. By connecting his goals to the management of his illness, Chris reduced his viral load and was pursuing goals that gave his life meaning beyond his diagnosis.

In the first year of medical school, we learn how to take a patient history. We are taught that the history should uncover not just symptoms but the patient’s values. Yet, during my initial experiences in preceptorship, when time is limited, I find myself omitting the questions that have the best chance of evoking patient values. While I exhaust the history of present illness—“Can you show me where it hurts? Does the pain move?”—I often sacrifice the social history, hesitant to ask: In a time of need, who can you count on for support? What do you do for work, or even, what are your goals?

As a first year medical student, I imagine the temptation to sacrifice the social history will only grow. Yet, four years ago, if I had focused only on science with my high school students, I don’t know that they would be graduating this June, with many going on to be the first in their family to attend college. And if I had just focused on Chris’s diagnosis, I don’t know that he would have reduced his viral load. Only when I looked beyond my own knowledge base and elicited their goals did I learn to support them in their pursuit of a meaningful life. For my future patients, I hope never to be their disciplinarian, but their teacher that helps them discover their motivations. As I take more histories, I will seek to uncover the values of my patients so the plan we develop is one they are motivated to live out. And, if pressed for time, I won’t leave without asking some iteration of the question: what are your goals? ■