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The Right Question for Medical Professionals

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In the book *The Spirit Catches You and You Fall Down*, Lia suffers from continuously escalating and worsening medical conditions surrounding her epilepsy. Throughout the story, blame seemingly kept shifting between the cold and rigid doctors and the non-compliant parents of Lia. However, the real conflict that influenced Lia’s fate was the inability for two different cultures to come to an understanding and collaboration. This conflict is common in almost every health care setting in the world, even in present day. Cultural differences, however, can be overcome with the up-taking of an outlook that focuses on accepting the other individual. Such outlook can be applied in every health-care setting as pointed out by the author of the story. The author chose to include a quote from William Osler who poses the alternative point of view that would resolve the conflict and tension that providers experience when treating culturally different patients – “ask not what disease the person has, but rather what person the disease has” (Fadiman, 1997, pg. 275) If this philosophy was followed universally in the medical professions, all physicians who encountered the Lia and the Lees would have taken into consideration their historical context and approach treating Lia with more cultural sensitivity and inclusion.

Throughout the book, it’s been made clear that Nao Kao and Foua do not trust their doctors or Western medicine. Besides it just being very different from their Hmong healing practices, the doctors never convinced the Lee’s that their efforts were to treat Lia herself, but rather, to treat her symptoms and seizures. Even from the beginning of the story, “[Nao Kao] had become more and more reluctant to give medications at all because he feels that the medicines are causing the seizures and also the fever” (Fadiman, 1997, pg. 50). The constant changes in medications on the physician’s side was an attempt to figure out what combination of drugs would contain Lia’s condition. However, the Lee’s perceived it as a very impersonal method of treatment. It was as if the doctors were simply working on solving the epilepsy but did not take
into account that Lia was suffering from the side-effects of their project. As a result, when Lia was in her critical state of brain damage at the end of the story, “they wanted Lia to be peaceful and not be persecuted anymore” (Fadiman, 1997, pg. 176).

By asking what person is affected by the disease, rather than what disease a person has, a physician would be in the mindset to consider what the patient is suffering from beyond the disease that they are battling. Robert Center, a professor from University of Alabama, elaborated on William Osler’s dictum saying, “each patient represents a story. That story includes their diseases, their new problem, their social situation, and their beliefs.” (Centor, 2007). In this book, instead of treating the Hmong patients, the physicians treated the disease and identified the Hmong as the problem. The reality is, they failed to view the Hmong as the people affected by a disease and who were facing more problems beyond just the disease. This was shown in the description the narrator provided of the refugee camps in which the Lees came from. The medical providers working in the refugee camps did not see “the Hmong as struggling within a constraining context historical, political, and economic forces that have reduced them from proud, independent, mountain people of landless refugees, the Hmong are blamed for their miserable condition” (Fadiman, 1997, pg. 166). This similar view was how the doctors handled Lia’s situation. They did not sympathize for the historical, political, and economic forces that were weighing on the Lee’s that influenced how tightly they held onto their cultural views and beliefs, especially when it came to what they thought her condition was and how she should be healed. Had the doctors not looked at Foua and Nao Kao as a part of the problem to the epilepsy, they would’ve found ways to cross-culturally collaborate with Lia’s parents on finding a suitable treatment for Lia.
Had the doctors focused on treating their patient instead of simply finding a solution for the disease, they would have taken time to understand the history that the Hmong have experienced and acted more culturally sensitive with Lia’s family. After war was lost in southeast Asia, the Hmong refugees in Laos faced great dangers and persecution. If they didn’t agree with the Pathet Lao and their orders, the would have been sentenced to death. The Pathet Lao “separated Hmong families… [sending] the kids far away from the parents” (Fadiman, 1997, pg. 157). The historical implications behind children being separated from their parents was not taken into account when the doctors and social workers took Lia away from her parents. Doctors should have taken time to try understanding the detriment of separating the Lee family, later on in the story “they continued to fear that their daughter might once again be made government property” (Fadiman, 1997, pg. 215). Furthermore, the doctors rebuked the Lee’s for not accepting the treatment and medication that they prescribed for Lia. They acted as if western medicine was superior to the healing practices the Hmong have always believed in. The medical professionals did not realize that the more they tried to get the Lee’s to abandon their practices to follow the western medical regiment, they were only working against their goal. The Hmong have faced years and years of their culture, beliefs, and healing practices being reproached by others. But neither the Chinese nor Laos government could force the Hmong to assimilate into their culture. The western doctors therefore could have predicted they would have not been successful in undermining the Hmong culture as well and criticizing their healing practices. A more effective approach would have been to work with their patient and find a suitting combination of both practices that was acceptable to the Hmong as well as the western doctors.

The history repeats itself throughout the story in different settings and times. The Hmong repeatedly have been treated inequitably and without compassion due to health care or service
providers not viewing them as people. They did not try to understand the historical damages that Hmong were facing with beyond their physical state. The Hmong could not trust themselves and their loved ones to the care of Western physicians because they were too impersonal and viewed the disease as the center of treatment procedures, not the individual.

Doctor Neil and Peggy thought their choice to work with more culturally diverse patients “was morally satisfying, but whenever [the Lee’s] crossed the compliance line, thus sabotaging their ability to be optimally effective doctors, cultural diversity ceased being a delicious spice, but a disagreeable obstacle (Fadiman, 1997, pg. 265). In a world where medical professionals asked who their patient was, rather than what the disease was, the Lee’s would not be viewed as an obstacle to Lia’s treatment, but the key to her treatment. Viewing the parents as a central part of who she was as a young individual would have encouraged the doctors to find common ground and respectable boundaries with the Lees. This would have prevented the conflict that resulted in Lia having inconsistent medication doses being removed from her parent’s care.

If all medical professionals realized that “[their] view of reality is only a view, not reality itself,” (Fadiman, 1997, pg. 276) the quality of care would significantly be better universally. In my eyes, I would be able to trust and admire a humble medical professional who was open to learning from others instead of approaching me or anyone I know with an ethnocentric mindset. I believe the treating a patient is more than just solving the problem of their disease, treatment comes with holistic care. To understand the needs of a patient, medical professionals need to see that one of the most important part of their job is to get to know who they are caring for. In modern society, many people accuse medical professionals of being impersonal and simply doing the job for the prestige or money. If universally, medical professionals practice patient centered care – more people would be attracted to the career path and desire to find a part in it.
Culture itself is not as big of a concept as two people from different parts of the world. Differences in culture exist in the different generations within our own nation. The youth of our society grow up in a very different culture than I, or my parents, have grown up in. When approaching our youth and finding ways to help them with their development and mental health, it would be most effective if we didn’t ask “what’s wrong with them” first, but rather, “who are these kids, and what is their ‘cultural context’”? William Osler’s statement is applicable in many different settings and situations. I believe such a mindset would not only bring medical progress, but also societal and global progress.
References
