

IN-TRAINING AND STUDENT MEMBER CATEGORY WINNER

Signposts



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There's just something about them. You know them, the patients you really don't wish to see. For

most of us, the difficult patients who drain our energy are very much in the minority of our full patient load. But we all have them. They are the patients who cause your heart to sink when they appear on your schedule, the patients you know will take more of your time than others, and the patients that end up making you question, well, everything. So imagine being told, all of the sudden, that you are now responsible to see only those patients one full day of every week for the next year. That's what happened to me, and that's where my story begins.

Part of the duties in my forensic psychiatry fellowship included providing mental health care at a remote women's prison. Although I welcomed the notion of matching wits with lawyers in the courtroom and debating medical-legal and diagnostic challenges with colleagues, the notion of practicing correctional psychiatry immediately filled me with dread. Can you imagine? I

had all the same preconceptions you may be having reading this right now ... criminals ... predators on society ... don't care about anyone else but themselves ... borderline women pushing the system and everyone in it to get what they want ... I'm going to be so miserable there! I thought the days would be long and empty of any real treatment or connection in either direction. I thought the whole environment would be cold and damp and hard. I thought I could make a real difference, just somewhere else.

My first day came like a funeral, but I had to face it and them. Much to my surprise, the full-time doc on the ward greeted me with a smile. She was a wonderful woman with an infectious spirit. I remember thinking to myself, "How in the world has she remained so upbeat HERE?" She kindly introduced me to the staff and took me for a tour. I don't know if she saw the apprehension I was experiencing, but if she did, she didn't show it. After orientation, she said nonchalantly that today would be a bit different, today the inmates and patients were putting on an annual show that I could attend if I so desired. My thought at the time, as embarrassed as I am now to admit it, was that sitting in the show would be easier and infinitely safer than any one-on-one work I would have to do that day.

As I walked to the prison auditorium, I was struck by a sense of separateness. I carefully stayed on my side of the walk, and each inmate, dressed exactly alike, stayed on her side. I sat down in the gym in the uncomfortable chair in the uncomfortable aisle in the uncomfortable room filled with inmates and officers, nurses and doctors, all of whom were strangers to me. It felt awkward, but it beat having to fake acting the caregiver.

Although I knew it was a show, I had no idea what to expect. Heck, even if someone had described it to me in detail I wouldn't have really known what to expect, not of them. What came to pass was the last thing I expected – empathy, deep-aching and heart-breaking empathy.

Looking back, the show was a blur. I don't remember who was first or second or 10th. All I remember are their stories, their tragic stories. I remember the tears, my tears through which I was straining to see more, straining to make sense of the human tragedy and the human kindness and the raw human emotion of their experiences, some of which I could relate to but most of which

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I didn't even dare to imagine because they were so terrifying. I was completely captivated by what they had to teach me.

Each of those brave women, and I mean brave beyond my ability to comprehend, stood up in front of all of those people and spoke or sang or danced or read the poetry that she had written about her life. Now keep in mind, I consider myself a fairly well-educated, fairly well-traveled and fairly tough woman. And yet that day, I was a timid voyeur of a world I didn't even really know existed. They courageously shared detailed, emotional and intimate stories of their childhoods (a term I use loosely because it represents only their age at the time, as no child should ever experience the brutality or the betrayal or the violence that inevitably each of these women experienced). They shared their crimes, their incarceration, their quiet regret and guilt and torment of having lived a life of which they were not proud. They cried and they danced and they sang and they shared and they cried some more. And they took me with them, every step and tear of the way. I lost myself in each of their stories. With each, I could think of a memory from the same time in my life, yet how different it was for me. I bet I thought a hundred times, "But for the grace of (whatever it is that explains these things), there go I." They were I and I was them, just luckier ... flesh and blood, feeling and thinking, honest and kind, regretful and strong. They were I and I was them, just luckier, so much luckier.

I drove home in a daze, still wiping away the tears. A signpost moment, I knew that's what it was. Although I had been a physician for only a short time, I had already become somewhat hardened to the people who needed me most, the difficult patients. But these women's stories were a powerful reminder that difficult patients, difficult humans, are difficult for a reason. I knew I was a changed woman and more importantly a changed

doctor. I saw my most un-favorite patient, my most un-favorite 15 minutes in a whole new light. But for the grace of ... there go I. Had I had any of their lives, any of their upbringings, any of their experiences in life, I would have been a completely different person than I am today. It was foundation-shaking. Who would I have been under their circumstances? Who would they have been under mine? They were the way they were for a reason, for many reasons, the vast majority of which were by no choice of their own, reasons I would not wish upon my worst enemy.

As luck would have it, I treated several of the women from the show and many others from the prison population. Nine months later, I know that I did not lose perspective that day. I continued to be aware that they were women in prison, doing time for whatever ill they had committed against society. But thanks to their honesty and strength and courage to share their stories, I gained a much deeper perspective that I will take with me and use with every patient I care for from now on. No longer did I first see them as criminals or as difficult patients. Instead I saw complicated beings more than worthy of my time and help. When I find it challenging to remain empathic and patient with someone now, all I have to do is to think back to their stories to ground myself once again.

Difficult patients are difficult for a reason. They are people first, with life stories that would likely shock me if only I knew. Caring for them requires first learning to care about them. Empathy is a must, and the more difficult the patient, the more necessary it is to find that empathy. But for the grace of ... there go I. **LM**

Note: A graduate of the Indiana University School of Law and the University of Louisville School of Medicine, Dr. Martin recently completed a fellowship in forensic psychiatry at Yale University. She will be working as the transplant psychiatrist at Jewish Hospital as well as building a private practice in forensic psychiatry.