

Global Health Reflective Piece – Eilidh Farquhar

One of my major reasons for choosing medicine as a career was the opportunities I would have to work and travel abroad, and to have the ability to make a real and lasting impact on people's lives. Therefore, for me, picking global health for my medical humanities module was an obvious choice, in order to learn about different cultures and medicine across the globe. However, I discovered early on in the course, that global health is more about a way of thinking rather than just lists of facts about the world. It is about thinking outside the box, always having a back-up plan when situations get out of hand and, most of all, it is about thinking about things in more than just the usual clinical context. It is about seeing the individuals and not the disease – thinking about the circumstances which led to the situation presented in front of you – from analysing any social factors to thinking about political policies – and then working out ways that the situation could be improved upon or rectified, from an individual basis to the population as a whole, not just in the UK but worldwide. While I am well aware that one person alone cannot change the world, I do believe that we each can make an impact on a much smaller scale.

Even when it came to my own research topic of Ebola, I soon realised that there was much more to the disease than the scare-mongering which is often shown in the media. To be honest when we were allocated our topics I was a little bit gutted. Ebola had been my third choice and had been quite a spur-of-the-moment decision since I thought it was unlikely that I would get my last option. As awful as it sounds, I had sort of become despondent when hearing about Ebola constantly on the news. I think that there is something about human nature which makes us only be interested in hearing bad news if we know that there is something being done to help the situation. Quite bluntly that did not seem to be the case with Ebola – incidence was sky-rocketing and death rates were rising by the day. There was not enough action and the world was not moving fast enough to tackle the disease. I'll be honest and say that I was beginning to switch off to the issue – I just felt like there was nothing that I could do and so I stopped really listening. I even became almost immune to the horrendous mortality rates and the mounting death toll. They were just numbers, just statistics – alone they meant very little to me at all – without seeing the people behind the number, this shocking disease washed over me like every other news story.

It was really when I watched the BBC panorama programme on Ebola part of the way through the course that my passion reignited for this topic. It really brought the issue home to me. It let you see the people instead of just the numbers, and not only did it illustrate their extreme suffering, I also established an instant connection with the situation. It followed a family, not all that different from

my own, who were torn apart from the disease – both the mother and father died and the 11 month old baby girl, named Warrah, survived after spending 4 weeks in the treatment centre, only to be left an orphan of Ebola. Evidently it is considerably harder to brush away an issue when you have seen the people worst affected – the face of baby Warrah will stick with me for much longer than any statistic which I've read on the topic, and this for me highlights one issue we must face when pursuing a career in Global Health. Looking at things globally is obviously an important way to compare countries and to get an idea of the larger picture, in order to change policies and enact health improvements on a large scale. However I think it is essential not to forget the individuals, the unique backstory of every single patient. Clearly it is still important to maintain a professional distance, but I believe that if we start to see patients as cases instead of as human beings, then we will lose the passion required to fuel our motivation to change a situation. This ability to empathise with patients is something which I never want to lose, because without this skill I feel that I would have lost track of the reason that I wanted to be a doctor in the first place – to care for and improve people's health and quality of life.

I feel that a major skill which I have gained from this course is the confidence to speak up and voice my point of view. In normal medical lectures we are generally spoken at, we are given a list of facts which we are asked to learn and we are occasionally quizzed on what we know. The thought of speaking out in front of everyone, on the first day of humanities, about my personal experiences abroad was, quite frankly, terrifying. I wasn't used to my opinions being heard by my peers and it had been years since I'd last had to present anything to anyone. It took me out of my comfort zone, and even though it was difficult at first, I really found that, with time, the experience became a lot less nerve-wracking.

Despite having enjoyed communication skills in university, and generally being quite a confident and talkative person, I have always had a fear of public speaking. Even as far back as primary school, I would be the child who would talk all the way through class but then would be silent as soon as the teacher asked a question. I think I always worried that I would say something stupid or that I would mess up and I also believed that nobody would really be interested in what I had to say. As this course has progressed I have become much more comfortable with speaking and contributing my thoughts to group discussions – I have realised that my point of view matters just as much as anybody else's and I have gained the confidence to share my opinion when necessary.

I believe that communication is one of the single most crucial elements which is required in order to implement change, whether that be on a global scale, in a social situation, a political situation or

even just when it comes to discussing the care of a single patient. It is essential that all health professionals feel confident and assertive enough to express their opinions, especially if a patient's life or quality of life is at risk if they remain silent. On a larger scale, communication and education are indispensable when dealing with major national and international issues.

I'm the type of person who, when giving presentations in the past, has stood at the front of a room with uncontrollably shaking legs and a myriad of thoughts rushing through my head, whilst really wishing that I could only remember what on earth I was meant to be talking about in the first place. The thought of standing in front of everybody to do my PechuKucha presentation was an extremely intimidating prospect – especially since I aimed to do it without the use of prompt cards. It felt extremely scary to be plunged into the deep end, without even the safety net of prompts, and it was, without a doubt, the aspect of the course which I initially dreaded the most. The time constraints of this type of presentation means that it had to be very well rehearsed and organised – which left little room for any mistakes caused by nerves. My trepidation grew as I found very little relevant information on the topic at first, and I began to really worry that I might not find anything to talk about. However as my passion for my subject increased, I found that the prospect of speaking in front of everyone was a lot less scary. I knew that I had sufficient knowledge about Ebola, and my interest in it meant that I was excited to share what I had learned in the hope of fostering enthusiasm in my colleagues.

Over the past six weeks, my passion for global health has been ignited and I hope that this interest will continue well into the future and can be incorporated into my career as a doctor. If nothing else then I have learnt to be eternally grateful for the NHS and for all the incredible opportunities and resources which are available to us in the Western World. I hope that one day these huge health inequities will be a thing of the past, and I would like to play any role that I can, however minor, in helping to pave the way to a fairer future.

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