

## Perspective/Opinion

# Our ancestors' wildest dreams: From slave & immigrant families to Ivy League residents

By British Fields, MLS(ASCP), BMS, BS, and Adriana Perez, MSBS, BS

Our journey at MCW as two first-generation, underrepresented in medicine (URiM) students navigating a system that once didn't accept people that looked like us to creating a space of advocacy for patients and future generations of Black and Brown medical students...

"No, I'm not the interpreter. No, I'm not the cleaning staff. I'm a student doctor." These phrases became all too familiar to us as we embarked on the journey to becoming physicians. We had gone from being praised for being the first doctors in our families, to countless encounters with patients and medical staff assuming we weren't the student doctor because of the color of our skin.

#### **The Culture Shock**

Being first-generation medical students came with a lot more struggles than we anticipated. One of the hardest challenges to overcome was that of being financially disadvantaged. Who knew there would be a whole hidden curriculum requirement that included things like exam question banks, Sketchy, Pixorize, Pathoma, Boards & Beyond, Figs scrubs, Danskos, business casual/professional attire, and much more. Spending money to get on an equal footing seemed like an impossible task as our families didn't understand that there was much to becoming a doctor than what was taught in lectures.

We both soon realized we weren't in Kansas anymore. The rigor of medical school was something we did not fully grasp until we both failed the first MtC quiz after two weeks of nonstop studying. After many failed exams, we spiraled into four years of secret self-doubt, self-loathing, and imposter syndrome.

Although these feelings became ingrained in us, we knew that there was a bigger purpose at play here as our patients said "iSi se puede hermanita, necesitamos mas doctores como tu!" (You can do it little sister; we need more doctors like you!).

#### **Our Commitment to Changing Culture**

While we knew coming into medical school that we were not in the majority, the differences in our identities and background were further amplified. Although these feelings initially weighed us down, we learned to harness and use them as fuel to support each other and other students throughout our journey. We quickly became involved with different organizations at MCW that

shared goals of supporting students who are racially/ethnically and economically disadvantaged at the institution, in the community, and eventually at a national level through the Student National Medical Association (SNMA), Latinx Medical Student Association (LMSA), and White Coats for Black Lives (WC4BL).

It didn't always feel like we were having an impact, but we were reminded to continue our work when we heard comments like, "I saw you at the Bridging the Gap panel! Your story inspired me to take a gap year to retake the MCAT and apply next year!"

We were also privileged to receive the opportunity to help students at an institutional level through our Mitigating Implicit Bias in Clerkship Evaluations research project, which allowed us to show that there are differences in how students who are URiM are evaluated, compared to our non-URiM counterparts. We hope that our project has provided some background on this issue, and some tools for creating a more just and equitable learning environment.

Also, we sought ways to increase our involvement in caring for historically marginalized and vulnerable communities in Milwaukee.

Through the Saturday Clinic for the Uninsured (SCU) and Walker's Point Community Clinic (WPCC), we were reinvigorated to solidify our place in medicine as patients told us, "You're the first doctor I've had that looks like me." These were the times that inspired us to keep pushing in moments of self-doubt on patient rounds or failed exams.

### **Thank You to Our Champions**

None of this work would have been possible without the exceptional mentors we have been fortunate to find along the way! They may not know this, but they have rescued us from some of the darkest places with their words of encouragement, recommending us for numerous opportunities, and serving as the role models we never knew we needed.

We aspire to be as fearless as Drs. Earnestine Willis (Pediatrics) and Christina Diaz (Pediatric Anesthesiology).

We want to be as selfless as Jean Mallett (Office of Student Inclusion and Diversity) and Dr. Cassie Ferguson (Pediatric Emergency Medicine).

We strive to move change forward like Drs. Michael Levas (Pediatric Emergency Medicine), and Kris Saudek (Pediatrics).

We hope to treat all with kindness and empathy like Drs. Karen Carlson (Hematology/Oncology), Malika Siker (Radiation Oncology/OSID), Sarah Nickoloff (Palliative Care), Stacy Fairbanks (Anesthesiology), and Steven Murphy (Family Medicine).

We plan on being overall BOMB women physicians of color like Drs. Chelsea Willie (Pediatric Anesthesiology and Critical Care), Erica Arrington (Child and Adolescent Psychiatry), Camille Garrison (Family Medicine), and Callisia Clarke (Surgical Oncology).

#### The Light at the End of the Tunnel

At MCW, we found the things that we are most passionate about, mentors who believed in us, and served as role models. We gained the exposure and the tools necessary to continue to pursue our work in addressing healthcare disparities through research and within medical education through teaching and mentoring students at all levels of training.

No, we are not just future physicians. We are advocates, teachers, mentors, change agents, and hermanas (sisters).

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