

Lessons From Our Learners

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Encouragement and Elevation

José E. Rodríguez, MD; Richard A. Aballay, MD

I first met Richard, a freshman at my undergraduate campus, as I was just finishing. We thought we had many things in common at that time, but our personalities did not match up well. I thought that I would never see him again, and I probably gave him the impression that I would rather not see him again. When I was heading off for medical school, he told me that he would be serving as a missionary in the same place that I had served 4 years before. He also mentioned that he wanted to be a medical doctor. I was happy for him but secretly doubted that our paths would ever cross again.

During my family medicine residency, I learned that Richard had enrolled in the medical school affiliated with my residency. I arranged a meeting, and we did some catching up. As time went on, I

made more of an effort to reach out to Richard because I was changing. I had recently recognized the difference that a good mentor made in my life, so I continually offered Richard my support. Those meetings happened during the first years of his medical career. Later, after I had completed residency and had begun practice, he was assigned to my office as a third-year family medicine clerk. At the time, I was working on a community medicine project called Health Not Cosmetics, which was designed to help patients lose weight, as well as to provide family medicine students with the tools to counsel patients in weight loss. Richard has many gifts; fortunately for me, among them are his talents in Web design. He developed our Web site (www.healthnotcosmetics.org), which we then used to help my obese and overweight patients change their lifestyles. It also serves as a resource for medical students and providers where community-specific tools for weight management are available. Richard spent countless hours on this project, and for many

months afterward we continued to work together. His senior thesis was also based on our work together in Health Not Cosmetics.

Richard and I then presented our work at five different national conferences, including the 2005 STFM Predoctoral Education Conference in Albuquerque. Our relationship had been changing rapidly. We evolved from being acquaintances to student and teacher to colleagues and finally friends. During this time, I shared some of the tools that were helpful to me in medical school, and some of those tools served him as well. While I enjoyed and continue to enjoy our relationship, I did not realize what it meant to him until Albuquerque.

At the Predoctoral Education Conference, we shared our work in a presentation: "Bronx Medical Students Attack the Obesity Epidemic: Health Not Cosmetics." Richard and I had worked extensively on the presentation; we were excited and admittedly nervous. Richard was going to present the medical student perspective and specifically speak about his work

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on the Web site. Minutes before the presentation, Richard asked to go over the slides one last time and made a modification that I would not see until the presentation.

After presenting his work on the Web site, he presented the last: "Successful medical student participation in community-based projects like Health Not Cosmetics requires:

C-Commitment

A-Anticipation

R-Release

E-Encouragement and Elevation."

He then said to the audience, "Do you know why I worked so hard on this? Because Dr Rodríguez cares."

In my first year of medical school, I can remember many of my teachers saying "Patients don't care how much you know until they

know how much you care." My clinical experience has taught me that while working with patients, this is true. Richard, however, taught me that it is true for our interactions with students as well. To show that I care, I now connect frequently with students in informal venues, sharing with them my most valuable resource—time. I am interested in their families, their careers, their lives. I ask and listen when they want to share. I invite them to present with me at virtually every opportunity that is available. This work also gives me countless opportunities to mentor and learn from the students. I have highlighted their role in my own work, to motivate and recognize them; mostly, they are the lead authors. I am invested in their future—even if it is not in family medicine. My mother, who is a high

school teacher, taught me how to do this. Her countless hours spent on "her own time and on her own dime" to encourage and elevate her students has been an example to me. The biggest change that I have made is the realization that my efforts to reach out to the students are the measurement of success. The investment in the future of medicine is its own reward. Even if other students do not show appreciation as Richard did, my example will influence how they treat patients and other students. Showing students that I care is now a priority. After they know that, they will want to learn what I have to teach.

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