



## *Perspectives*

# Lessons of a child

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**P**ity. It's something I used to feel for many of society's underdogs that I helped care for in free clinics. Recent immigrants with low paying jobs, asylum seekers dehumanized at the hands of torturers, children with AIDS—these people affected me deeply. Pity seemed a natural emotion for me to feel. How bad these people had it, casualties of such unfortunate circumstances! Before long, though, I realized that pity made me see these people as victims, as powerless, as wounded. True, I could see them as somehow disadvantaged, but I also needed to learn to see them as strong individuals. Someday they would be stronger than I. They were not in the clinic to be treated for their pitiful circumstances. They were there as patients.

My best teacher was a seven-year-old boy named TJ, and 4H fairs, basketball courts, and canoeing down the C&O canal in Washington, DC, were my classroom. TJ had been born with HIV, vertically infected by his mother who was addicted to IV drugs. He had been taking antiretroviral medicines since he was about three years old.

Being a big brother in a “little brother, big brother” program was something I had always wanted to do: such a program for children with HIV was even better. I met TJ and his mother one afternoon after work on their front porch. I could hear conversations and occasional yelling from inside the house and wondered why we didn't go inside. I saw several people pass

on the street and make eye contact with TJ's mom, then keep walking. I saw trash scattered in the small overgrown front yard. But I also saw TJ smile the entire time I was there, move from his mom's lap to mine, and start calling me "brother."

Over the next two years, TJ and I went out nearly every week. We did things that he had never done before. Eating seasoned crawfish while watching planes take off and land at the airport was something he loved to do. But the activity that trumped all else was bike riding. We would often drive thirty minutes outside the city to some wooded area with trails, and ride bikes "off-road," all the better when other kids were there. TJ regularly became the leader of the group, and whenever anyone would fall off his bike, he was always the first to jump off his to help. Although I had explained a hundred times over that I worked in a research lab with no patients, he would without fail tell the child that his "brother" was a doctor and everything would be okay.

Taking TJ home was always easy. He slept the whole ride home every time. Dropping him off was never easy. I knew he was returning to a home with a poorly-working refrigerator, that frequently lacked electricity, and routinely had illegal drugs. As I found out over the years, these details, coupled with an endless love for his mother, defined his home life.

I'm not sure when it actually happened, but sometime in the two years we spent together I eventually stopped feeling pity for TJ and his mother. What started as a commitment based on feelings of sorrow for my little brother turned into an experience that forever changed us both. It made me see beyond the disease, his mother, and his home. TJ was a boy who, despite life's circumstances, still radiated love, happiness, and innocence. Even though his small body harbored a rapidly multiplying virus, he was first and foremost human—as were the patients I had initially pitied in the clinic.

I no longer treat any patient with pity. I have replaced it with heightened levels of empathy, understanding, kindness, compassion, and above all, solidarity. For a long time, though, I questioned myself about this. Was I right in doing so? Doesn't pity have a role in medicine? Certainly the less fortunate could benefit from pity!

A few years ago I sat in the Haitian countryside with some of the poorest people in the Western hemisphere. I often ask patients what advice they would give me as a medical student so that I can become a better doctor, a better person. When asked what advice he would give doctors wanting to come to Haiti, one of the men said, "We, as poor people, want your help. We do not want, nor do we need, your pity. Pity will not help us."

TJ is now thirteen.

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# Discharged to the streets: Who cares?

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Recall the face of the poorest and the weakest man whom you may have seen, and ask yourself if the step you contemplate is going to be of any use to him. Will he gain anything by it? Will it restore him to a control over his own life and destiny?

Mohandas K. Gandhi<sup>1</sup>

**M**r. Ruiz was well known to me from previous psychiatric hospitalizations. This time, however, he was only partially clothed and covered in feces. His rambling speech was so disjointed it was incoherent. The police had brought him to the emergency department after coaxing him from a rain-soaked box leaning against a dumpster behind an abandoned restaurant. In his early forties, Mr. Ruiz looked decades older.

From what I could gather, he had been living in his cardboard shell for nearly ten days following his release from a local inpatient psychiatric facility. When I spoke with the