

HUMANISM IN MEDICINE • VOL.03

A GLOBAL PERSPECTIVE ON HUMANISTIC MEDICINE

NYITCOM CHAPTER OF THE GOLD HUMANISM HONOR SOCIETY



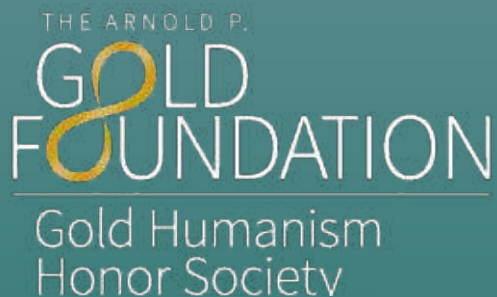
THE ARNOLD P.
GOLD
FOUNDATION
Gold Humanism
Honor Society

**NEW YORK INSTITUTE
OF TECHNOLOGY**

College of Osteopathic
Medicine

HUMANISM IN MEDICINE • VOL.03
A Global Perspective on Humanistic Medicine

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A LETTER FROM THE EDITORS:

Welcome to our annual edition of NYITCOM's Gold Humanism Honor Society Newsletter! As we continue our journey through the ever-evolving field of medicine, we're excited to present a theme that truly resonates in today's interconnected world: A Global Perspective on Medicine.

In this issue, we explore how healthcare transcends borders—how global challenges, innovations, and insights shape the way we approach patient care, research, and medical education. The world is becoming more interconnected than ever, and as healthcare professionals, understanding international approaches, cultural diversities, and collaborative efforts can inspire new solutions and improve outcomes in our local communities.

We hope to highlight the intercultural nature of a humanistic approach to medicine, while incorporating how our own multicultural backgrounds play into who we are as physicians. As we look beyond our own borders, we are reminded that medicine is a universal language—a force that unites us all in the pursuit of better health and a healthier world. We hope this issue encourages you to think globally and act locally, finding inspiration and purpose in the diverse ways we can impact the lives of our patients, wherever they may be.

We would like to thank our authors for their thoughtful contributions, and Adil Ansari for his assistance with the graphics. We thank our amazing faculty advisor Dr. Karen Sheflin and the whole NYITCOM ATG department for their assistance bringing this newsletter to print.

Sincerely,

Therese Anne Limbaña, Jeri Ann Ramilo, and Adeline Fleitz
Editors

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From Refugee Camp to Inner City ED:

By Joan Krickellas

SOCIAL INJUSTICE is often viewed through the lens of large-scale movements—crowds protesting, massive social media campaigns. These well-publicized social upheavals are vital in eventually driving systemic change. To physicians, however, social injustice is seen through the lens of their own eyes, quietly, one patient at a time. No loud crowds, no mass notifications from Instagram, just a person before them in an exam room in need, be it medical or psychological, who seeks help within a system that purposefully may not be structured to provide it. My experiences before medical school and now as a medical student have given me the opportunity to witness and, in turn, recognize social injustice, and I've been thinking about it a lot. *I've been thinking, what can I do about it in the world of medicine?*

My first encounter with social injustice on a grand scale occurred when I spent a summer during college, then another, volunteering at a Syrian refugee camp in Kyllini, Greece. Civil war in Syria had denied people basic rights—housing, food, education, and healthcare. Embedded within this denial was the grave social injustice of being stripped of their capacity to empower themselves and sustain their communities. The refugees

that found their way to this camp were provided the essentials—food, water, shelter—but there was little psychological support. While organizing activities for the women and children, however, I witnessed moments of resilience and flashes of the human spirit. This moved me to return the following summer, determined to offer more meaningful psychological support the second time around. During my final days the second summer, the other female volunteers and I organized a “Ladies Night.” Gathered in a room with the curtains drawn, the refugee women removed their hijabs and shared with us secret fears they could otherwise not express—about their future, their children's future, for their marriages, and even gynecologic concerns. The room was filled with hushed voices, laughter, and tears.



In that intimate setting, they were able to share a rare moment of privacy and vulnerability, openly

expressing their fears and hopes in an atmosphere of trust and solidarity, even if just for a night. As I sat with these women, I realized the connection that can be felt by just listening to someone who is trying to be heard as they battle wrongs of society that have been thrust upon them. While the gathering didn't solve their problems, that night gave them a brief sense of empowerment, just because someone was listening to them. That night, I saw what it meant to listen to people who are vulnerable, to offer them empathy and give them an opportunity to trust.

I carried that lesson with me into my OB/GYN clerkship at South Brooklyn Health/Coney Island Hospital, where I met a pregnant 19-year-old Uzbek woman in the Emergency Department who had been in the country for just a few months. With limited English and no Uzbek-speaking translators to help, she struggled to communicate what worried her to the medical staff, escalating her fears for her pregnancy. What I later learned added another layer of complexity: she had an abusive husband at home, making her vulnerable not only as an immigrant navigating a foreign system but also as a woman with limited options to seek help or safety. To me, she was

Listening to Patients Traumatized by Social Injustice

By Joan Krickellas

experiencing perhaps the most unjust social injustice there is: to be unable to live as an individual without fear of suffering life-threatening violence at the hands of a partner. And it's a social injustice witnessed by doctors all the time. In the case of this 19-year-old woman, she wanted someone to hear her, and resorted to going to the medical community. No protests or demonstrations help to solve this social injustice—only a reliance on the empathy and oath-bound sense of responsibility of a doctor to help her and her unborn baby in an unjust situation which threatened her freedom, and possibly even her and her baby's life. As I sat with her and the attending physician in the exam room, compelled to place a reassuring hand on her shoulder, I realized how crucial it is for physicians to address underlying social dynamics and act on them if and when they can, with as much rigor and a sense of duty as they do with medical problems. There is often a life-changing impact of a

doctor's attention and action.

While I always seek to lend my voice to causes that strive to effect positive change in our society, mine is but one voice—but among many, I know. It will take many voices like mine and others', emanating over and over again from city streets, to help eventually force change where the likes of empathy, fairness, and equality become the “establishment”. What I'll have in my power as one doctor, however, is more far-reaching and immediate. With my actions—first, by listening and deciding to care—I can help change the lives of people, one person at a time, right now. While I may not, as one doctor, be able to correct every problem faced by each disadvantaged patient I encounter in our healthcare system, as I mature in my profession I can learn what more I can do each time. Social injustice isn't just combatted by shouting from the streets; it is also alleviated in the quiet moments of connection and care in an exam room, starting by listening to the voices of those that ask for help.

My piece embodies the theme by linking experiences both abroad and at home, how they have shaped my perspective as a future physician and global citizen in medicine. Through my time volunteering at a Syrian refugee camp, I witnessed the impact of listening to vulnerable individuals and providing them with a safe space to share their fears and challenges. These experiences exposed me to the resilience of individuals facing systemic inequities on a global scale, and for when I'm a doctor, underscored the importance of empathy and connection in addressing their needs. Now, as a medical student, I have carried these lessons with me into my clinical interactions, applying the same humanistic approach to patients in my community. I explain how physicians can serve as advocates and allies for vulnerable populations, relating my experience in interacting with an immigrant pregnant patient in the emergency department. My role extends beyond addressing medical issues, as I aim to expand upon my role to create an inclusive and supportive environment where patients feel heard and empowered.



Joan Krickellas is a fourth-year medical student committed to advocating for vulnerable populations. Before medical school, she volunteered at a refugee camp, where she witnessed the challenges faced by women and children, deeply influencing her approach to patient care during clinical rotations. Joan also holds an Advanced Graduate Certificate in General Public Health and plans to pursue a Master of Public Health to further her expertise in reproductive, maternal, child, and global health.

After the Mangroves —

Mixed Media Oil Painting

By Molly Eileen Helie



After the Mangroves I

THE SERIES *After the Mangroves* is a reflection on the time I spent in La Comunidad Olmedo on the northwest coast of Ecuador. The community is nestled at the threshold of Reserva Majagual, the tallest mangrove forest in the world. With their intricate network of roots growing above the shallows of coastline, the mangroves are uniquely equipped to harbor diverse lifeforms, store carbon, and hold the land in place. The mangroves are as vulnerable as they are strong— shrimp farming, pollution, and rising sea levels threaten the existence of the mangroves and the communities living in their embrace. The mangroves are emblematic of nature's exquisite design and are a symbol of the irreconcilable losses that have occurred at the expense of human driven climate change.

After the Mangroves I & II were created by piecing together torn pages of newspaper to construct the patchwork of corrugated metal, tarps, and wooden beams captured in my travel snapshots. After arranging the collage, I used oil paint to detail the vivid greens of the tropical landscape, the sepia of mud and rust, and the saturated tones of painted concrete. These scenes mirror the neighboring forest— structures balanced on stilts like the exposed roots of the mangroves, protecting from and inviting in the natural landscape. These works express the ways in which my understanding of the complexities and interconnectedness of human life as it is intertwined with the natural world has been totally transformed after my experience in the mangroves.



After the Mangroves II



Molly Helie, OMS-III, graduated from Loyola University New Orleans with a degree in Studio Art and completed post-baccalaureate pre-medical coursework at Notre Dame of Maryland University. Originally from Baltimore, Maryland, Molly is passionate about integrating art and medicine, teaching, advocacy, and environmental sustainability. At NYITCOM, she served as a teaching assistant in the OMM department and as president of ARTery, the art in medicine student organization. Additionally, Molly is a Second Lieutenant in the U.S. Army, commissioned through the Health Professions Scholarship Program.

Changed for Good

By Averí Walker

WHILE SITTING ON THE PATIO, debriefing after our last day of clinic in the Dominican Republic, the song “For Good” from Wicked resonated in my mind. Flashbacks of all the patients we served during our 10-day medical mission trip and images of my past global health experiences flooded in as the lyrics resounded “But because I knew you, I have been changed for good.” Each person or patient I have interacted with, whether in clinics or not, had their own story that I will always remember. During medical school, some days are harder than others, but during those hard days I will use these memories/stories as motivation to keep going in order to accomplish my dream. I truly believe my global health experiences and the patients/people I have met along the way have changed my life for good.

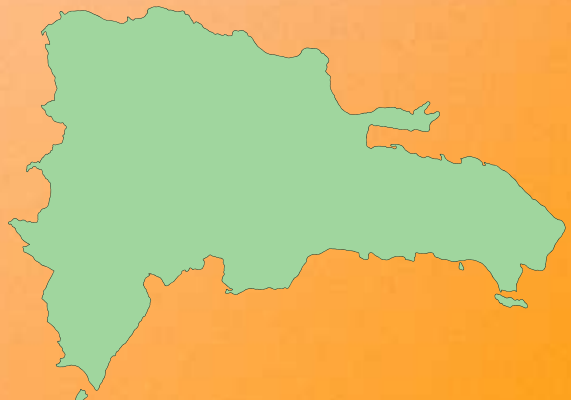
After graduating from college in May of 2018, I went on a medical mission trip to the Dominican Republic where we traveled each day to remote areas around Bani. Through medical clinics and volunteering with the local church, we shined a light on the people of Bani. In the clinics, I worked in triage taking vital signs. As I took blood pressure after blood pressure, the desperate need for care in the patients’ faces was eye opening. It was normal in their culture to not have access to medications for hypertension, infections, diseases, or other treatable conditions. I began to realize the effect of poverty on these people in desperate need of care. The compassion I felt for these families, who were beyond grateful to be receiving the food and care, was overwhelming. Seeing firsthand the way medicine brought hope and love to others and improved the lives of those suffering, brought about a passion for a new side of medicine I had not witnessed before.

While handing out shoes, I noticed a girl looking for my size. I handed her the tennis shoes I was wearing and will never forget the smile that came

across her face. This experience touched my heart, realizing the true power in giving back to the less fortunate and the endless opportunities medicine holds to help others.

Inspired to improve health on a global scale where hunger and poverty threatens the lives/health of millions, I traveled to Cuba in January 2020 as part of a mission team. We visited multiple feeding centers and planned future mission opportunities in an effort to rescue children from the grip of poverty.

The summer after my first year of medical school in June 2023, I had another amazing opportunity to return to serve the people of the Dominican Republic. One day we performed home healthcare visits. My group, which consisted of a doctor, translator, and 4 medical students, entered into the home of an elderly man that had been diagnosed with Parkinson’s. As we all gathered on his front patio, he walked out with his walker and sat down in a chair. His hands had noticeable tremors. As we began to take his history, he asked us why he was still having symptoms even though he was taking his medication. As we gathered more information about his medication usage, we realized he was only taking ½ of the dose he was prescribed. He began to explain to us that his insurance did not cover the medication and the monthly stipend he was living off of from the government only allowed him to pay for half of his medications.



Changed for Good

By Averí Walker

As I took his blood pressure, the Dominican doctor in our group began to explain to him the need to switch insurances. She told him he was a candidate for another type of insurance that would cover more of the medications so he could take the full dose. She also explained that his symptoms were due to him only taking half of his medications and once he is able to take the full prescribed amount his symptoms should get better. I relayed to him that his blood pressure was normal. We finished up our exam and gave him parasite medicine and adult vitamins. We had medications to treat bacterial infections, fungal infections, parasites, high blood pressure, lice, scabies, and pain. We did not have any of his Parkinson's medications to give him. He thanked all of us and as we left, I felt a sense of incompleteness as we were unable to offer him complete care. There was still the medication switch and insurance change that needed to take place as well as a resolution for the transportation issue. We offered him all of the resources we had at the time and the clinic planned to follow up with him soon.

Through my global health experiences, I discovered a way to combine my passions for medicine, faith, and helping others. Each patient I have encountered has taken a small piece of my heart. Their lives and stories made me realize to never lose sight of the bigger picture.

You never know what a patient is going through or what struggles they may be having behind the scenes. I truly found what I want my future to consist of. Whether serving at home or overseas, I look forward to transforming lives and bringing healing to those in need. At last, I will say not goodbye to all the people in the Dominican Republic, but "You'll be with me like a handprint on my heart."

"Seeing through the eyes of a global physician as a medical student while on my global health journey so far has been one of the most rewarding experiences of my life. I'm sharing my experiences interacting with patients, learning about other cultures, and being part of the team while on missions in other countries. Gaining a new perspective each day along my global health journey as I work towards becoming an emergency medicine physician with a fellowship in global health."



Averí Walker is a third-year medical student at the New York Institute of Technology College of Osteopathic Medicine in Jonesboro, AR. She received a bachelor's degree in biology from Southwest Baptist University. Her interest in global health blossomed shortly after college graduation when she attended a medical mission trip to the Dominican Republic and discovered a way to combine her passions for medicine, faith, and helping others. She has continued in her global health journey throughout medical school by being involved with the NYIT center for global health and receiving a certificate in global health. She is currently working towards her dream of becoming an emergency medicine physician with a fellowship in global health.

LUB DUB

Prismacolor Pencil on 9in x 12in drawing paper

By Wint Khant Khine



Artist Note: *"This abstract Prismacolor pencil artwork depicts a heart with several exaggerated ECG waveforms that decorate the background. As a future physician, I would definitely encourage my colleagues and students to engage in the arts and think outside the box. This artwork represents my abstract thinking and creativity which are important elements in medicine. It is also meant to demonstrate the importance of enjoying one's hobbies and engaging in them to promote well-being."*

Beans and Pyramid

Prismacolor Pencil on 9in x 12in drawing paper

By Wint Khant Khine



Artist Note: *This abstract Prismacolor pencil artwork depicts kidneys in the shape of beans. To represent the 'renal pyramids', I incorporated diagonal lines in the shape of a pyramid that crisscross the artwork. As an aspiring physician, I would encourage my peers and colleagues to participate in the arts and engage in abstract thinking.*



Wint Khant Khine is a third year medical student at NYITCOM. He grew up in Yangon, Myanmar, and attended Franklin & Marshall College in Lancaster, PA, where he graduated with a degree in Chemistry. Outside of the hospital, Wint is a dedicated New York Cares volunteer—he rescues perishable food items and delivers them to shelters throughout NYC. He began drawing abstract art when he was in high school, and took up the hobby again after enrolling in the Narrative Medicine Course at NYITCOM in the summer of 2023.

I Am the Translator

By Nikita Patel

I am the translator

Explaining the location of my grandmother's back pain,

I am the translator

Finding the English names for herbs in her homemade paste.

I am the translator

Explaining the difference between Apple ID and iCloud,

I am the translator

Deciphering teen slang for the older pediatrician.

I am the translator

Breaking down the radiology report into simpler terms,

I am the translator

Connecting medical pathology with the medicine it calls for.

I am the translator

Understanding how social stigma shapes your health choices,

I am the translator

Connecting cultural norms to your approach to care.

I am the translator

The nodding of understanding
Relaxation of the furrowed brows
A small smile creeping across a face
Needs no translation at all.

In the fast-paced world of medicine, it's easy to fall into autopilot, checking off tasks without fully engaging with the person in front of us. The poem "I Am the Translator" captures the essence of a humanistic physician's role: not just conveying medical information, but also translating the broader context of each patient's life. Every patient brings a unique set of experiences—cultural, social, and personal—that shape how they approach their health. As physicians, we must not only translate medical terms but also understand the patient as a whole person, beyond just the diagnosis. This "translation" isn't limited to language barriers; it applies to every patient, whether simplifying medical jargon, demonstrating technology to an elderly patient, or understanding how cultural beliefs influence care. By slowing down and recognizing the full picture of a patient's life, we honor their humanity and provide more personalized care. This approach strengthens our connection with the patient, helping them feel seen and understood. In turn, it fosters trust and compassion—values at the heart of a humanistic physician.



Nikita Patel is a third year medical student

Sunrise at The Hospital

Digital Art

By Tien Pham



Artist Note: *"When creating this piece, I wanted to capture the joy, and relief, of a patient who was eagerly awaiting a doctor to round on them. I also wanted the piece to exude the warmth one could feel from looking at the sunrise. A patient's stay can feel like or be an eternity. Patients can get brief solace in knowing their care team is checking up on them and hopefully providing them with some good news. Patients place great care into a care team they barely know. We all come from different backgrounds and cultures. We expect patients to take who they are given and go beyond their comfort zones to trust people who may not share the same skin color, gender, or language. As providers we need to value that trust given to us by patients, and make sure we care for patients effectively. Whether communicating with the patient, or others in the care team, it's important we stay positive to ensure the best care for patients."*



Tien Pham is a first-year medical student in the 2028 class at NYITCOM. "I was a patient care technician before coming to NYITCOM, serving my community in Syracuse, NY for more than two years. I am currently a first-year representative for the ARTery organization. I have drawn traditionally for as long as I can remember but picked up painting and digital art later. I love sharing my art with others, and love being able to incorporate medicine into my art."

Familiarizing the Unfamiliar

By Mishal Rahman

"Thank you, beta,"

Said the elderly patient as I gave her a glass of water.

"Your voice reminds me of my youngest daughter."

With those words, I could not help but smile.

"Thank you for helping me find the radiology room,"

A scared young patient whispered.

"You helped me just like my older sister."

With those words, I could not help but smile.

"Papa, you have to take your medications on time, like I told you."

I urged my father after his stroke.

"You remind me of myself at that age," the nurse helping him joked.

And again, with those words, I could not help but smile.

Traversing between hospital corridors, meandering up and down hallways,
I observed medicine silently seeking to forge connections between strangers who cross
paths. Using familiar relationships to make sense of the unknown.

A friendly face, a compassionate smile, a reassuring nod,

Invisible strings, entangling as interwoven bonds.

At home, huddled with family members, socializing over tea,

I use my hands to relieve the tension in my grandmother's legs and feet,

Unknowingly practicing Dr. Andrew Still's same century-old osteopathic philosophy that I do

in the lab. Similar structures and relationships, like on a cadaver

but delivering unique social outlooks.

Like in class, memorizing cranial nerve VII used for smiling, so laboriously,

But using the same anatomical landmarks to offer a smile so effortlessly.

Centuries of medical concepts disseminated in a moment's conversation,

An interconnectedness between one's body, mind, and spirit,

As well as the peculiar intertwining of the simple and exceptional aspects of medicine.

In every setting, I am reminded of what it means,

To be a physician,

To bridge what it means to be human and what is humanity.

Familiarizing the Unfamiliar

By Mishal Rahman

As I am called a daughter, an older sister, a caregiver,
There forms a connection between familiarity and unfamiliarity,
A stage aligning a lifetime of learning
and a growing culmination of social understanding,



Again, I am reminded of what it means
To be a physician.
And once again, with these words, I could not help but smile.

"When traversing through uncharted waters and territories, it is human nature to seek out familiarities in our environment in order to make sense of the unknown. Similarly, as a volunteer in the emergency room of New York Queens Presbyterian Hospital, I observed this unique pattern embedded in the foundations of healthcare: the ability of strangers to create a sense of community when faced with unfamiliarity. Although we all arrive from different walks of life, we find similarities in diverse settings that allow us to form meaningful connections. As a result, it becomes increasingly imperative for physicians and healthcare providers to serve as mediators between knowledge and uncertainty. Furthermore, in every medical setting, there are glimpses of both the medical and social aspects of medicine intricately interwoven, so much so that one cannot exist meaningfully without the other. The ability of medical providers to ensure the balance of social understanding and scientific knowledge facilitates the delivery of holistic care, equitable treatments, and a greater sense of community. As a medical student, I hope to honor this unique interconnection by serving as a mediator between what it means to be a physician and what it means to be a human."



Mishal Rahman is a first-year medical student at NYITCOM (Old Westbury). In May 2022, she graduated from CUNY Queens College, where she received a Bachelor of Arts in Biology. "I also completed a minor in Anthropology and Health Sciences to further explore the history of human behavior both scientifically and socially. She is a first-generation immigrant from Pakistan; however, she has lived in Queens, New York City, her entire life. She is also an avid fantasy book reader, especially long series like The Lord of the Rings, Harry Potter, and Shadow and Bones, and loves writing."

Healing Beyond Borders: A Humanistic Approach to Medicine

By Therese Anne Limbaña

In the pulse of the world, we hear a beat,
A rhythm of care where cultures meet.
From bustling cities to quiet plains,
A tapestry woven in joy and pain.

The healer steps forth, with hands that mend,
A global citizen, a patient's friend.
Not bound by borders, creed, or race,
They honor the human in every face.

Each culture brings its sacred lore,
Healing herbs, rituals, stories of yore.
In these traditions, wisdom lies,
A bridge of hope beneath shared skies.

The local physician, a trusted guide,
Knows the hearts of those who reside.
Their care is rooted, their empathy deep,
A bond with the land they vow to keep.

The global healer, a traveler of light,
Brings lessons of unity to the fight.
Through shared knowledge, through open hands,
They connect the world, linking distant lands.

Together they stand, a team so vast,
Breaking barriers, healing wounds of the past.
Physicians, nurses, all who strive,
In their compassion, humanity thrives.

For what makes us unique, also aligns,
The universal longing, the shared designs.
To ease the pain, to still the strife,
To honor the sanctity of life.

So here we stand, as one world, one kin,
Sharing the journey of medicine within.
Bound by our hearts, diverse yet the same,
In the art of healing, we write our name.

"As a Nurse for more than a decade in multiple specialties, and a former General Practitioner (GP) back in the far-flung areas of my home country, I have developed a broad understanding of resourceful, comprehensive care, in addition to a strong sense of service, the ability to work under pressure, and advocacy. Having all of these experiences gives me an opportunity to share my life and my relentless pursuit to medicine as a Global Physician."



Therese Anne Limbaña is a fourth year medical student who was born and raised in the Philippines. She emigrated to the US to work as a nurse and was a front-liner during the global pandemic. She worked in the Intensive Care Unit and Endoscopy Department at Albany Medical Center and the Memorial Sloan Kettering Cancer Center. Therese received a Bachelor's degree in Nursing, Cum Laude, from St. Paul University and her MD from West Visayas State University in the Philippines. Now, she is a fourth year medical student at New York Institute of Technology College of Osteopathic Medicine. Her goal is to live her life in service and life-long learning.

Through Patient's Eyes

By David Remyes

Waiting 'til they call my name,
As if in line for some sort of game.
The white coats come into view,
All asking the same, "How can we help you?"

My heart races, my tongue is tied—
Can't they see I'm petrified?
Amid this worry, amid this fear,
I wonder, Do they see? Do they hear?

My story's lost in a jargony blur,
A lack of translation leaves me unsure.
A chart, a scan, a number read,
Yet no assurance of what lies ahead.

Then—a stillness in the eye of the storm,
A softer gaze, a smile so warm,
A glimpse of hope, a voice in my ear,
A touch that says, "I see, I hear."

In that moment, no walls divide,
Language and culture set aside.
Human hearts and spirits collide,
Calling to each other, arms open wide.

Hearts aligned, a bond is formed,
A thread of trust that can't be torn.
Healing is more than numbers reveal—
It's understanding pain, the way patients feel.

Healing is a journey taken side by side,
More than pills or steel could ever provide.
Compassion speaking where silence lies,
It's seeing through the patient's eyes.

"Through Patient's Eyes' is centered around the patient's view of their care. Speaking through the view of a patient, I tried to address the key elements of humanistic medicine, including active listening, shared decision-making, and connection. Humanistic medicine is all about meeting your patients where they are, and treating them as more than a set of symptoms and scans. Regardless of patients' circumstances—past or present—our job as healthcare providers is to guide them along their journey of healing, and to support them through the process. It's about bridging the gaps and coming together to share that experience, and to grow together."



David Remyes is a second-year osteopathic medical student with passion for ophthalmology and medical mission work. "My experiences, from shadowing hospital and clinic ophthalmologists to serving on medical mission trips in Bolivia and Kenya, have taught me the importance of patient care and its roots in service. Beyond academics, much of my time to volunteering at my local church, where my faith strengthens my commitment to compassionate healing. Through this submission, I hope to offer a perspective that emphasizes the importance of treating the patient rather than the diagnosis. Medicine is not meant to be just rooted in knowledge, but also in empathy, faith, and vision."

More Than a Thousand Words

Digital Art

By Monique Westley



Artist Note: *"During my psych rotation, I met Ms. Beatrice*, an elderly and sweet patient whose preventable disease left her confused and lost most days. She didn't always know where she was or what she was doing, but her humanity showed in her attempts to connect through fragmented words and smiles. Despite her disorientation, she consistently called me the "nice girl" and her face would light up whenever I entered the room. One day, tears streamed down her face for reasons she couldn't articulate, so we sat together and colored quietly—an act of shared peace that transcended words. To gently remind Ms. Beatrice which room was hers, the nurses taped her artwork by her door, a small but profound gesture of dignity and care. When Ms. Beatrice was finally well enough to go home, she gave me her coloring page as a parting gift. I took it with gratitude, alongside the lessons she unknowingly taught me: the power of small acts of kindness and the importance of human connection. This rotation revealed the fragility of our shared humanity, yet also its incredible strength. From those fragile moments, I carry a sense of purpose as a global citizen in medicine, committed to making a difference—one smile, one coloring page, and one shared moment at a time."*

**pseudonym*



Dr. Monique Westley, a first-generation college graduate from New Orleans, holds a doctorate in pharmacy and has dedicated her early career to serving underserved communities, including the Navajo Nation during the pandemic. Currently pursuing a dual DO/MBA degree, Dr. Westley aspires to become a radiologist committed to delivering compassionate and equitable care to underserved populations. She has been recognized as the Best Medical Student by the Arkansas Medical Society and has earned multiple research awards for her academic contributions. Her journey is defined by a passion for service, innovation, and a steadfast commitment to health equity. Dr. Westley's unique blend of clinical expertise and leadership skills drives her mission to make a meaningful impact in medicine.

Bridging Barriers: A Medical Student's Pursuit for Healthcare Equity in New York City

By Caleb Sooknanan

ONE OF THE MOST notable issues in modern medicine involves the nationwide disparity in healthcare access and equity; I have noticed this especially in New York City, where several underprivileged patients face numerous barriers to accessing quality healthcare. As an aspiring medical professional, I am determined to leverage my skills, knowledge, and compassion to bridge the gap and ensure equitable healthcare for the underprivileged populations in New York City and throughout the United States.

To elaborate, I would use my medical degree to increase outreach and accessibility to health resources within my practice. This would entail the establishment of outreach programs that would aim to identify and connect with individuals who face financial, geographical, or cultural barriers to healthcare access. These programs would therefore involve collaborating with community organizations, setting up mobile clinics in underserved areas, and organizing health camps to provide basic medical services and health education. I would also utilize my role as a physician to encourage patient-driven decisions regarding their lifestyles and health habits, as I would direct

them to specific resources and websites to assist them with personal adjustments. Furthermore, I will strive to work closely with local government agencies, nonprofits, and healthcare institutions to develop strategies that reduce the administrative hurdles faced by underprivileged patients, such as complex paperwork, long waiting times, and limited appointment availability. I have been involved with this process already as a former medical scribe at CityMD; with this position, I worked with the available healthcare team at my clinic to develop more streamlined ways to connect with patients and provide the highest amount of care possible. By streamlining processes and implementing patient-centered policies, I would strive to ensure that healthcare services become more accessible and efficient for those in need.

Aside from this, I would also utilize my practice to promote cultural competence and awareness. Being from an Indo-Caribbean background, I have recognized that there are many instances when patients of color can be neglected within medical settings. As a physician, I will strive for cultural competency training for healthcare professionals to enhance their understanding and sensitivity towards different cultural

backgrounds and beliefs. By fostering an inclusive environment that respects and values cultural diversity, I will utilize my position to promote trust and encourage underprivileged patients to seek the care they need without fear of judgment or discrimination. Additionally, I would work with my healthcare team to actively promote the recruitment of a diverse healthcare workforce that reflects the communities it serves. I recognized this mentality previously as a member of my CityMD urgent care team; during my time there, I utilized my Spanish proficiency to connect with native speakers and cultivate higher levels of empathy with patients from Spanish-speaking backgrounds. I believe that diverse healthcare professionals can bridge cultural and linguistic gaps, ensuring better communication and understanding between patients and providers. This approach would contribute to more accurate diagnoses, improved treatment adherence, and overall patient satisfaction.

I will also be motivated as a physician to encourage preventative care and promote the holistic nature of medicine among my patients. As a medical professional, I hope to emphasize health education initiatives that empower patients to take charge of

Bridging Barriers: A Medical Student's Pursuit for Healthcare Equity in New York City

By Caleb Sooknanan

their own health and well-being. I would work with local communities to develop community workshops, awareness campaigns, and educational resources that are tailored to the specific needs of different populations, thereby allowing me to improve health literacy and promote preventive measures. By collaborating with local schools, community centers, and religious institutions in the New York City area to implement programs that address prevalent health issues — including obesity, diabetes, and substance abuse — I will create a more valuable space for patients to feel respected and heard. By promoting healthy lifestyles and preventive measures, I believe that I can mitigate the impact of these conditions on underprivileged communities and promote earlier interventional measures.

As a medical student, I have learned that my practice comes with many prices, many of which are not obvious to me. Healthcare equity is an area of medicine that deserves more attention among professional societies and settings, and while I strive to work in New York City after graduating, I hope to support its improvement among underprivileged communities within my area and throughout the country. By improving health resource accessibility and outreach, encouraging cultural competence, and increasing health education and preventive care measures, I know that a more effective and representative healthcare system is possible. I will utilize my role as a physician to make this happen and thereby help my patients live their healthiest lives.

"Some of the most noteworthy challenges in modern medicine involve the disparities in healthcare access and equity, which is particularly noticeable in underprivileged communities such as those in New York City. This year's theme for the Gold Humanism Honor Society newsletter resonates deeply with my goal to address these inequities as a physician by fostering better outreach, cultural competence, and patient empowerment. Drawing from my Indo-Caribbean heritage and prior experiences as a medical scribe, I have used my time as a medical student to recognize the transformative power of empathy, diversity, and patient-centered care as they apply towards creating a more inclusive healthcare system. Through my efforts, I hope to exemplify the humanistic importance of medicine and help build a stronger foundation for medical care that combines compassion with cultural awareness."

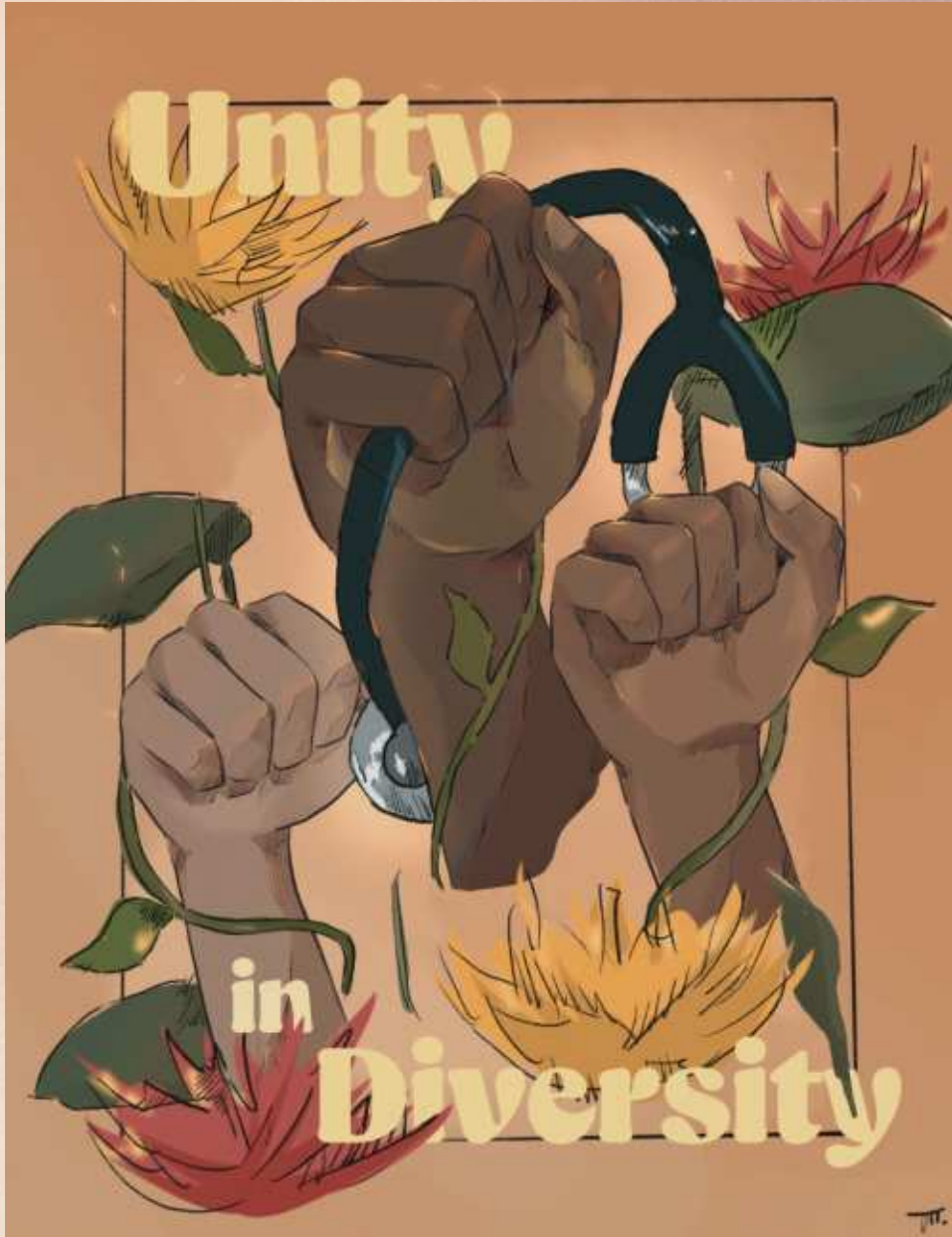


Caleb Sooknanan is a second-year student at the New York Institute of Technology College of Osteopathic Medicine in Old Westbury, New York. "I graduated from Stony Brook University in 2020 with a Bachelor's Degree in Biomedical Engineering with Honors, as well as a Bachelor's Degree in Applied Mathematics & Statistics. I am a first-generation medical student who is willing to break the boundaries of modern society through innovation and global awareness. I am pursuing medical school with an intended specialization in family medicine, internal medicine, pathology, or pediatrics. I am also interested in serving underrepresented communities and sharing the importance of preventative medicine among patients."

Unity in Diversity

Digital Art

By Tien Chau



Artist Note: *This artwork highlights the theme of global humanistic medicine by the representation of diverse races and ethnicities coming together regardless of our backgrounds in order to achieve better outcomes for our community. This is our culture: a celebration of diversity and how we are stronger and more understanding of one another because of it. To honor my own heritage, as a Vietnamese-American woman, I added lotus flowers, the national flower of Vietnam, in the background to symbolize strength through adversity. Just as the lotus blooms from the mud, I wanted to showcase that even in difficult conditions, humanity can come together to rise, thrive, and make a positive impact on the world through compassionate and unified medicine.*



Tien Chau is a third-year medical student with a lifelong passion for the arts. She was born and raised in Alabama before moving to Arkansas for medical school. While navigating pre-clinical and clinical years, Tien has continued to nurture her love for the arts, transitioning from traditional mediums to digital art. Art has become an important outlet for relaxation and stress relief, allowing her to find balance in her busy life as a student.

Still the Same Star

By Akila A. Goel



The day shifts, and the sun sets
Nightingale carries her lamp where pain persists - there is a need for
something to do.

No matter how it is said, every culture still wishes “get well soon”.

And we see everything is connected, and every story is one of healing
How a caring mix of home remedies and science can be done seamlessly
Antibiotics and Ayurveda, seeing traditions pair with technology

Qi, the life force, seen in the bounding thrum our pulses beget
Sparks of fire from centuries ago, are shaped now into electrical
rhythms
Yielding messages and maps and magnetic resonances turned to visions

An exchange of ideas, methods, and histories can be so revealing
Solutions and solvers both can travel swifter now, to share ways to mend
An integration of immunization with tradition - a hope of health for
every friend

Moonlight now illuminates the night; we reflect and then progress.

Like us, our ancestors once sat under the light of the same star
We carry on their work, building on to the studies of the past
A global need for the ways toward well-being, a primordial task

If we find our hands cannot carry the work, we then build new devices
With waves reaching even twenty thousand leagues deep, still we explore
To the heart of humanity, deep into our core

Still the Same Star

By Akila A. Goel

It is a mutual caring, a kindness, a hope that has travelled so far
Resolved, we revolve around the helical twists and turns of the genome
This planetary, extraordinary, revolutionary journey - is countless
centuries old

The night shifts, and the sun rises
The sayings and languages are different, but the message is still
understood

We share the same oath, to do no harm, to do good.

This poem celebrates the global blending of modern medicine and the traditional work done by our predecessors in the medical field around the world.



Akila A. Goel is a medical student at the NYITCOM campus in Jonesboro. Prior to medical school, she has a background in biomedical engineering. She enjoys poetry, creative writing, and tinkering with tech. She has a published poetry collection entitled "Memory Castle". Her family is from Punjab, India, and she's lived in a lot of places (New Hampshire, India, Iowa, Chicago, Missouri, Arkansas), and the experiences she's had in all of them influence her work.

Ghana Diaries

By Savanna Macchio, Alexander Giudice, Mackenzie Sivilli, Sumreen Khan, Hira Iftikhar, and Muskaandeep Kaur

6/12

IT WAS A HOT MORNING as we arrived at Hawa Memorial Saviour Hospital (HMSH) in rural Ghana. We rounded patients in the maternity ward with a physician assistant (PA) whose perpetual smile instilled confidence within me. Yet, unease washed over me as we entered the small, bustling ward - wondering if our presence might impose on the intimate space.

Fifteen of us gathered around our first patient - a young woman appearing tired yet welcoming. With a calm smile, the PA said, "This patient miscarried last night." My heart sank. Before I could process my sadness, we moved on, leaving me with a persistent ache.

Later, during our debrief, I learned miscarriage in this community wasn't seen as a loss to grieve but a missed opportunity - reflecting resilience and hopefulness of families who wished to bring forth new life. As I processed this new understanding, my heart widened with appreciation for this perspective.

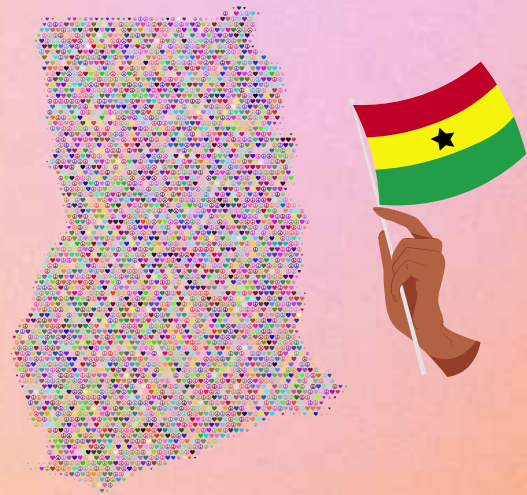
6/13

Our journey began with a warm welcome from a physician, his smile as radiant as the Ghanaian sun. Greeting us with a traditional "Akwaaba," he set the tone for our immersion into a world where English served as a bridge, but Twi was the heart of patient interactions. This language barrier posed challenges, requiring HMSH doctors to act as translators, gracefully guiding us through the complexities of healthcare in Ghana.

At times, we found ourselves without their reassuring presence. In those moments, translation fell to hospital staff and family members. Their eagerness to assist was heartening, but the language's nuances often led to misinterpretations. Patients, too polite to express confusion, would nod in agreement, leaving parts of their stories untold. My heart ached

to see these vibrant histories hidden behind a linguistic veil.

Yet, the tireless efforts of the hospital staff ensured patient care remained steadfast. Reflecting on this experience, I've learned that embracing diversity isn't just about recognizing differences - it's about navigating a shared dance of understanding, where each step deepens the caregiver-patient connection.



6/14

I was entering the pediatric ward with our team when a three-year-old girl caught my eye. Paler than the rest, she was yet the most playful. Her cheerful sparkle brightened my face, but learning her hemoglobin level was only 3.4 g/dL left me aghast. How was she so mischievous? As a sickle cell patient with chronic anemia, she had adapted to such low levels. I couldn't help but wonder: what are the consequences of her illness? Will she always have access to care during crises?

The next day, our faculty physician asked when her hemoglobin would be rechecked. Her provider pulled down the child's lower eyelid, inspected the conjunctiva, and quickly estimated her levels. I was astonished at this adaptive skill. In a world with limited resources, both the little girl and her provider embodied resilience. How often do we complain about our daily hassles or focus on what we lack? In just days, I had learned the value of cherishing what

Ghana Diaries

By Savanna Macchio, Alexander Giudice, Mackenzie Sivilli, Sumreen Khan, Hira Iftikhar, and Muskaandeep Kaur

you have, finding strength in adversity, and living different.
each moment with a smile.

6/18

The midwives masterfully run the prenatal department here. Meanwhile, back home, my sister just gave birth to her son. I can't help but compare my sister's experience to the women here. There were obvious contrasts. Yet, I witnessed a deeper commonality that transcended these differences: the experience of human life and maternal love.

I brought home a tribal painting of a woman holding her baby. When I see it, I think of the beauty of womanhood and motherhood. I want to remember the awe of witnessing my first c-section. I want to remember the profound feeling of love and community in church as women danced and celebrated new moms. I want to remember my sister's strength. I want to remember the Ghanaian culture - how men are the spirit of a family and women are the life and blood. Without the spirit there is no strength, but without life and blood there is absolutely nothing. Above all, I hope to see that painting and remember we are all connected far more than we are

6/17

I stood over the operating table, filled with excitement and curiosity, watching as the surgeon commenced my first surgery. Their dedication and passion reminded me why I chose this path. Here, I learned what global health meant: sharing knowledge, collaborating, and empowering one another. There the medical staff and support of my classmates, we delivered a beautiful baby girl. As I watched the newborn being cared for, I reflected on what her life would look like. During my week in rural Ghana, the reality of their circumstances became apparent. Despite being understaffed, lacking supplies, and battling malaria, I had hope. The staff of HMSH defined resiliency. There is much work to do in medicine, but my excitement grows daily, knowing the field is full of selfless, inspiring people. Here's to making a change for a better tomorrow.

During our time in Ghana, we witnessed firsthand how cultural diversity intertwines with humanistic medicine, shaping a deeper understanding of global health. From observing the resilience of a sickle cell patient with severe anemia to assisting in delivering a newborn, every moment challenged our perspectives and broadened our compassion. We learned that medicine transcends language and material resources - it thrives in the connections forged between caregivers and patients, even in the face of adversity. The dedication of Ghanaian healthcare providers, adapting to limited resources while exuding hope and passion, inspired us to embrace adaptability and humility in our practice.

Through these experiences, we came to understand that humanistic medicine is not just about addressing illness but appreciating the stories, cultures, and values of every individual. Whether bridging linguistic barriers or witnessing the shared joys and struggles of motherhood, we saw that the human experience unites us far more than it divides us. This transformative journey reaffirmed our commitment to becoming well-rounded, globally minded physicians who uplifts and empowers communities by fostering trust and mutual respect. Above all, it reinforced that while our cultures may differ, what binds us together is our shared humanity and the universal pursuit of health and dignity.

Ghana Diaries

By Savanna Macchio, Alexander Giudice, Mackenzie Sivilli, Sumreen Khan, Hira Iftikhar, and Muskaandeep Kaur

7/16

When asked “How was Ghana?” I find myself pausing, how do I explain one of the most profound and pivotal moments in my medical career in a short, conversational sentence? Ghana restructured me. Ghana forced me to molt my regimented ideas of medicine and formed me into a more observant and resilient student physician. Ghanaian doctors were remarkable surgeons, internists & pediatricians, all in one. The potential I had set for myself as a physician has shattered, and out has grown a yearning and dedication to be a physician that is incredibly well rounded. To understand the realms of medicine so well, and never be satisfied with what I know. My passion for medicine has always burned bright, but I am reignited with a greater perspective. If I were to give one sentence, I would say Ghana has given me the ability to set better expectations for myself, and truly believe I can become better than the day I was last.



Savanna Macchio, Alexander Giudice, Mackenzie Sivilli, Sumreen Khan, Hira Iftikhar, and Muskaandeep Kaur are medical students who, with their peers, embarked on a global health mission trip to Ghana in the summer of 2023. Over the course of two weeks, the students worked in a multidisciplinary healthcare team and engaged in various medical activities including participating in hospital rounds, assisting in surgeries, and contributing to preventative medicine in outpatient services. With a deep passion for global health, the students were committed to exploring cultural nuances in healthcare, reflecting on the resilience of patients and providers in resource-limited settings. This immersive experience has inspired these future physicians to grow as compassionate providers and has reinforced their commitment to practicing medicine with cultural humility, empathy, and a focus on patient-centered care.



Rainbow Arc

Photography

By Julie Ochs



Artist Note: *"While on campus, I strive to look for connections with students and community members. While working as a continuity committee representative at the NYIT free clinic, I have had the opportunity to serve members of our community from diverse backgrounds trying to build a better life for themselves and their families. This photograph of a rainbow was taken after a rainy afternoon at the NYIT campus on Long Island. The rainbow, a symbol of diversity and hope, reminded me that art can be a powerful medium to capture how our campus is united to our broader campuses and community members."*



Julie Ochs is a third-year medical student in the Academic Medicine Scholar class, and grew up in Westchester, New York. She completed her undergraduate degree at Skidmore College, where she majored in Biology and minored in Studio Art. "During my time in medical school, I have had the opportunity to serve as a continuity committee representative for the free clinic to assist with administrative tasks and ensure patients in our community receive care regardless of their insurance status. Beyond work on campus, I have volunteered in the New York area through various organizations including New York Cares, JASA (Jewish Association Serving the Aging), and the Long Island chapter of the Achilles International running group."

Life Is Everywhere —

Multimedia Painting

By Layla Elkoulily



WHILE CONTEMPLATING the theme, I reflected on healing, transformation, and the shared human experience that connects us across cultures and communities. My paintings feature lotus flowers in a serene pond, with a hospital in the background. At first glance, the scene appears tranquil and natural, but upon closer

examination, the lotus leaves resemble human organs—the brain, lungs, liver, kidneys, gallbladder, and spleen. The stems intertwining between the kidneys symbolize the abdominal aorta and inferior vena cava, while the petals abstractly represent smooth muscle cells. This fusion of anatomy and nature represents the intricate connection between humanity and the environment.

The hospital in the background is purposely made like a vague building. This signifies how health and illness are often hidden beneath the surface, reflecting how illness is not always visible—mental illness, for example, leaves no physical mark, but can have a profound impact on the lives of individuals. Conversely, obese individuals are often met with assumptions about their health on the basis of how they look. Physicians may overlook other conditions and the concerns of these individuals, because they are blinded by what they see. This invites us to look beyond what we see and embrace the deeper stories of our patients, fostering compassion and understanding.

The lotus anchors the piece. It grows from murky, muddy

waters, yet blooms with great beauty. In Ancient Egypt, the lotus represented resurrection. To some, it can seem like medicine brings the dead back to life when a Code is called. In other ways, medicine is a means of revitalizing the sick in our communities. The importance of medicine in rehabilitating the wellbeing of the sick, is indicative of the integral nature of the field. Furthermore, this resilience to care for oneself and others, mirrors the transformative journey of healing. Being sick is a universal human experience that transcends cultural boundaries. Although, medicine cannot prevent death. The role of the healthcare worker in navigating the uncertainty of illness and providing a means of comfort and support cannot be undermined.

As global citizens in medicine, we play a unique role in bridging cultural differences and celebrating what unites us: our shared humanity. My painting reflects this perspective, reminding us of the cyclic connection between life, death, and rebirth. It also symbolizes how healthcare workers rely on collaboration—locally and globally—to strengthen communities, care for patients, and promote well-being.



Inspired by my own experiences, the painting conveys the calm and grounding I found in nature while managing the stresses of studying. It reflects how, as healthcare workers, we draw strength from both science and humanity, working together to navigate murky waters and bring

healing to light. These pieces ultimately embody the theme of humanistic medicine by emphasizing the universal resilience, transformation, and interconnectedness that bind us together. There is much more to medicine and illness than what you see on the surface.



Layla Elkoulily completed her Masters in Narrative Medicine in 2022. After graduating, she started medical school where she started implementing the lessons she learned in her role as a medical student. She enjoys writing and reading.

Ghost and Bones

By Moyosore Onasoga

THE STREETS WERE QUIET at 3 a.m.; I was an EMT responding to a call for an elderly woman experiencing hallucinations. Julia* was someone I was meeting for the first time and I hadn't been prepared for the frail figure trembling in her small, dimly lit living room. She had silver hair, her trembling hands clutched at something invisible, her daughter trying to calm her and her cries filling the air as we entered the room.

"The ghost! They are there!" She cried, her voice shaking with fear. "The bones! They're doing like this!" Her bony fingers mimicked the motion of rattling skeletons and her wide eyes moved around the room as if she was being haunted by spirits that only she could see.

Julia did not like the hospital at all. The fluorescent lights and the many strangers made her fear grow, making her the perfectly polite woman to become an angry woman. It was almost as if going back to a place that was so foreign and empty would only bring back the ghosts that she already had in her mind. Her room was small and messy and as I turned around to find something to bring her back to the present I noticed a small crocheted pillow on a worn out chair in the corner of the room.



**Julia is a pseudonym for confidentiality purposes*

I knelt down before her and took her trembling hand and held it in mine. "Julia," I said softly, pointing to the pillow, "You made this? It's beautiful." Her panic was reduced, her eyes followed mine to the pillow. The ghosts disappeared as memories started to surface.

"Yes," she said, her voice was more confident. "I used to crochet, and I also used to sew; I sewed uniforms for the soldiers. During the war. And... And I made little bags for children too.... To carry candies and trinkets, anything to make them happy."

Her hands that had clung to me in fear now rested more calmly in my hands. Her eyes became kind, and while talking, it seemed like the years fell away and a younger Julia, a woman with a task and strength that came from it, emerged. I could see her sitting at a table, with quick movements stitching fabric carefully, surrounded by women engaged in the important work of supporting their family on the battlefield during the war.

I asked her more questions: What kind of fabric did she use? What colours were the uniforms? Did she remember what the children looked like when they got her handmade bags? Every reply provided a clear picture of the life I could almost step into. Her fear and anger melted away, replaced by pride and a sense of connection. In that moment it seemed as though we both got lost in another time – when she was young and vibrant, and full of life and will.

Her stories soothed not only her but me as well. It was quite comforting to be with her at that moment and to relive her memories with her. The ghosts of her hallucinations were replaced by the ghosts of her memories, bringing peace instead of fear.

When we finally transported her to the hospital, she was no longer the frightened, agitated woman we had first encountered.

Ghost and Bones

By Moyosore Onasoga

She was calm, her hand still resting in mine, her voice soft as she continued to reminisce.

That night, like so many others, reminded me of something profound: when medicine fails, humanity can still prevail by stepping beyond the clinical and into the personal, meeting patients where they are with empathy and connection. Julia's hallucinations couldn't be cured by antibiotics alone, but the simple act of listening, of holding her hand, and of stepping into her world, the world that brought her comfort and calmed the Ghost and Bones in ways that medicine alone couldn't.



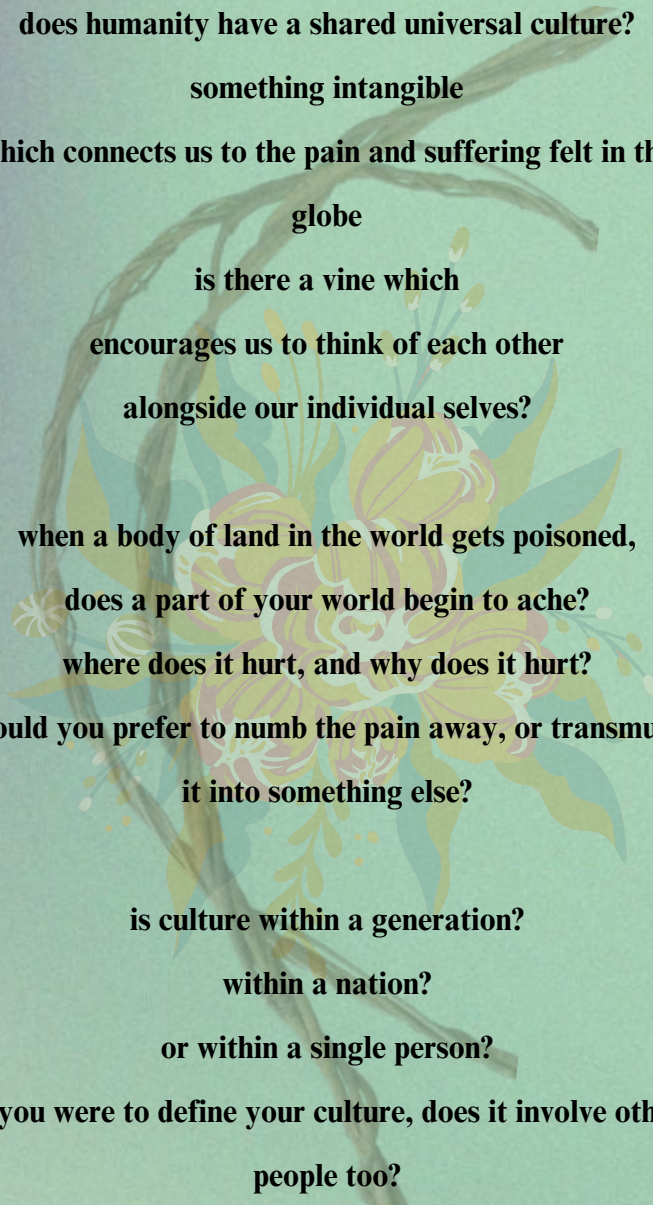
"This short story is a story about the role of the human connection in the field of medicine. As an EMT I met Julia, a elderly woman who was scared and seeing things. It was just by noticing she had a crocheted pillow and I asking her about it that I got her telling me about the things about herself. It was also that moment that the focus was no longer on her sickness, but on her, the human being. Her fears were eased by listening to her stories, and she didn't look like a patient who is afraid anymore, she looked like a woman who is brave. Now as a medical student, and I want to share this lesson with other students, that the art of healing is not complete without the understanding of the patient. Empathy does the job of bridging cultural, generational, and personal differences; this is what humanistic medicine truly is."



Moyosore Onasoga is a first year medical student with patient care background from being an EMT. "I have learned that compassion, listening and trust are important in healthcare from those experiences. I am determined to become a physician who values both the science and the humanity of medicine."

KAPWA

By Jeri Ann Ramilo



does humanity have a shared universal culture?
something intangible
which connects us to the pain and suffering felt in the
globe
is there a vine which
encourages us to think of each other
alongside our individual selves?
when a body of land in the world gets poisoned,
does a part of your world begin to ache?
where does it hurt, and why does it hurt?
would you prefer to numb the pain away, or transmute
it into something else?
is culture within a generation?
within a nation?
or within a single person?
if you were to define your culture, does it involve other
people too?

"This poem, titled 'Kapwa,' is the Filipino word for which there does not yet exist a word in English yet - but describes a feeling of interconnectedness, shared humanity, and is a Filipino cultural value. This poem encourages an individual exploration on what "culture" means to the reader regardless of their background - is it personal, at the group-level, linked to ethnicity/nationality, a combination of those qualities, or based on something else entirely? It also encourages the reader to consider their culture in their thinking patterns, perceptions of the world, and actions. It is written in lowercase to symbolize a quiet, humble questioning which focuses on the reader's internal thoughts and reflection. The poem serves as a call to action and encourages the reader to lean into their compassion to drive their work in medicine."

Cultural Revolution —

Photography

By Jeri Ann Ramilo



THIS PHOTOGRAPH of a mural at the University of the Philippines Diliman reads "Makabayan, Siyentipiko, Makamasang Kultura," or in English, "Patriotic, Scientist, Culture of the Masses." This mural was created during the Filipino cultural and scientific revolution, which was a response to the oppression instilled by the dominant, wealthy society. It was created during a time of stark income inequality between the upper class and other socioeconomic classes. The mural encouraged citizens to use science, education, and critical thinking to promote a more fair society which prioritizes freedom and autonomy. As a nation with a history of 300 years of colonial rule by Spain, then 50 years by the US, the art piece calls for Filipinos to embrace their independent regional cultural identities, and to abandon the colonial mentality whilst remaining ready to learn and accept foreign influence that is beneficial to the country. Finally, the mural encourages citizens to question and oppose escapism, ignorance, and consumerism, which endangers both individuals and the collective society by decreasing individuals' self-respect, self-reliance, and individual power.



Jeri Ann Ramilo is a fourth year medical student, musician, and music producer who was born in the Philippines and was taught English by their caregivers prior to moving to the US at the age of three. They completed their undergraduate degree at Stony Brook University, where they majored in Biochemistry and minored in Anthropology and Chemistry. This winter, they conducted an elective research rotation at the University of the Philippines Center for Ethnomusicology which was funded by the Edward Giuliano Global Fellowship, where they reconnected with their cultural heritage through exploring ethnomusicology, songwriting, music therapy, and researched methods for creating culturally-tailored therapeutic music treatment.

Domestic Violence:

By Bairavi Maheswaran

DOMESTIC VIOLENCE IS A prevalent issue within society, as a collective we should dedicate ourselves to raising awareness about the prevalence of domestic violence and supporting those affected by it. As a community, we need to highlight the importance of prevention, education, and advocacy of this issue -- to aid those who are unable to leave abusive environments, but more importantly, to be a voice. Many survivors of abuse have experienced different forms of trauma, it is vital to keep in mind that not all victims or survivors will react the same way. Hence, one must understand the varied responses of those who experienced domestic or intimate partner violence is key to providing proper support and ensuring that their individual needs are respected.

For many South Asian females, including my relatives, one aspect was marriage. With the pressure to get married during their early twenties, many of my younger cousins chose partners because their families told them to, without getting to know their significant other.

My cousins had to leave behind their careers and families, and when faced with any form of physical or sexual abuse- they were afraid to speak up. The fear stems from this value of losing one's family honor and this expectation that your life is "perfect" already, so why change it by talking about what is happening to you?

National Domestic Violence

Hotline:

1-800-799-7233 Text BEGIN to 88788

Local Shelters

The link below provides shelters and contact information per county:

<https://www.nyscadv.org/find-help/program-directory.html>

As a medical student and future physician, the one initiative I want to embrace is providing a place for domestic violence victims with the necessary resources and a supportive environment. Primarily, by talking about how numerous factors can impact domestic violence care, ranging from culture, socioeconomic status, and policy changes. However, the missing

factor is tailoring trainings to be trauma-based, especially in early pre-clinical years, and accessible resources in specific medical settings. With my medical education coupled with my master's in simulation, I aspire to provide new educational modules for medical students to allow them to gain exposure to this issue. At the same time, I will continue to speak to those impacted by domestic violence, and what determinants of health are causing barriers to their care.

But what can YOU do to help domestic violence victims? The first thing is to speak about the issue and encourage others to share their stories-- having one person speak up will allow hundreds more to share their voice. Aligning with educational communities about the signs of abuse, either through workshops or campaigns, and fostering open discussions will help reduce the stigma towards this issue and encourage those impacted to seek help. One of the most effective ways is by working or volunteering with shelters that cater to individuals impacted by domestic violence or creating drives to provide donations, since many

The Silent Pandemic

By Bairavi Maheswaran

survivors may not have the financial means after leaving their abuser. Further, educating oneself, through attending training, will allow one to understand the different warning signs of abuse and how to respond safely in these situations. Thus, as future physicians, let's be the voice of those who are unable to speak and bring the change we wish we saw in the communities we grew up in.

If you have any questions or want to help me bring awareness to this issue, you can contact me below:

Bairavi M.
bmaheswa@nyit.edu
347-853-4228

Below are a list of resources and numbers you can provide to those impacted by domestic violence:

National Domestic Violence Hotline

1-800-799-7233
Text BEGIN to 88788

Local Shelters

The link below provides shelters and contact information per county

<https://www.nyscadv.org/find-help/program-directory.html>

"As a South Asian, domestic violence is an issue that many are aware of but do not accept due to the stigma that abuse as well as mental health are inferior concepts. One aspect that I want to change as a physician is implementing more cultural awareness and care for those who experienced domestic violence. By using this mindset one can assess other barriers that patients are facing and cater to the patient's goals and treatments toward their next step of healing. As a community member, one way I and others can embody helping those who face domestic violence is by educating others by promoting awareness whether through events or speaking to patients who face abuse. One aspect is knowing that patients of abuse are still individuals and have their own interests/goals; and it's our vocation to integrate all aspects of their life to help them get through their trauma."



Bairavi Maheswaran is a fourth year medical student pursuing Psychiatry. At NYTICOM she decided to pursue a Masters in Medical and Health Care Simulation with a thesis dedicated to domestic violence awareness. As a future psychiatrist, she is interested in pursuing trauma-based care and will be pursuing a PhD in healthcare education to allow other healthcare professionals to learn more about interacting with patients who experience abuse. Other than academics, her favorite things to do are traveling, and Barnes and Noble.

Across the World

By Layla Elkoulily

Across the world your voice reaches me,
through the tiny world of my phone screen.

نورت (nawart)

You have lit up the room with your presence.
I hope my broken Arabic does not offend.

Heartbeats fill in the silence of the weight of your questions,
no, I am not a doctor— soon inshaAllah I will be.
I can't give you medical advice, but I will lend my ear.

Is studying hard?

Sometimes the stress suffocates me,
then I remember to breathe:

In

And

Out

To take things day by day.

Medicine is this—a story of resilience.

There will be days when you fall and feel all alone,
tethered to the world by the weight of your decisions.

Yet, despite the loneliness of it all,
we are like leaves in a vine wrapping around the tree of life,
connected piece by piece by piece.

The best I can do is listen,
so, I lay out my soul
and bear witness.

Across the hospital bed
it feels as though
we are worlds apart.

But I am here, tethered to the world,
ready to share your story
with the rest of the healthcare team.

We are not alone,
as isolating as medicine may be.

"As a second year medical student, my patient experience has been limited. That being said, this poem connects to my cultural and personal experiences with illness. The poem is from the perspective of a medical student, who still has a lot to learn. Ultimately, I believe the most powerful thing a physician can do is listen. As osteopathic medical students, we learn how to hear both the patient's story and the story their body has to tell. As isolating this journey can be at times, I wanted to reinforce this idea that we are not alone. From the patient to the doctor to the nurse, we have each other to rely on as we navigate the difficulty of illness. We connect to one another, forming a community that is fostered on the importance of communicating and listening."



Layla Elkoulily completed her Masters in Narrative Medicine in 2022. She currently attends NYITCOM-OW, and hopes to become a physician who provides humanistic patient-centered care.

The Dawn of Modern Medicine

Painting

By Samira Fazli



Artist Note: "As physicians, we care for people from all walks of life, all around the world. We do so with respect, compassion, integrity, and kindness that is expected from us as caregivers to the people that need us. When I think of global medicine, I think of a sunrise that is eliminating the darkness that is shadowing the lives of our patients. We, like the sun, help alleviate the burden of darkness from their lives, and work to strengthen our communities. This painting shows precisely this. The colors of the sunrise representing our diversity, and how we can cast light over the darkness with our skills and compassion. The intertwined branches of the symbolized trees show how we all work together to bring science and medicine into the lives of our patients as a means to better their lives and try to alleviate their problems. While we may not be able to fix everything, we can shine our light into their lives and give them the biggest gift of all - hope."



Samira Fazli is a fourth year medical student getting ready to pursue the field of emergency medicine. "Growing up, my family was heavily involved with our religious community, and were taught the importance of volunteering and dedicating our lives to helping others. This has inspired some of my paintings to symbolize the pluralistic views I have on helping those around me. Medicine has been a vehicle for me to make a difference in the lives of my patients, but I know that I will always work towards helping others in any capacity I can. This has been my drive and has been central focus to every decision I make and action I take."

A Tribute to Our Future Gen-Z Physicians

By Sofia Barlas

THE PRACTICE OF MEDICINE is obviously an altruistic one, with the hopes of bettering a patient's life with the knowledge we possess. The connection we share with patients is advancing our generation of doctors beyond that of our predecessors, as we recognize the lasting impact each individual patient can have on our global practice of medicine.

We live in a world where we have access to information regarding all public health and humanitarian crises across the globe. Social media especially has given us 24/7 coverage and even healthcare information from doctors in all regions. These doctors share all kinds of medical knowledge on their platforms. This includes warning signs of serious malignancies, trends in rising cancer rates, and even various researched treatment modalities with their outcomes. The important thing to note is that the patients that walk into our hospitals and clinics now too have access to that information. They are knowledgeable about their health and constantly doing their own personal research. This presents both advantages and challenges to the way us future physicians practice medicine.

Thankfully, these advancements in communication make us more culturally aware and observant of patients from certain backgrounds or socioeconomic situations, which will require a more sensitive and



different approach when it comes to physical exams, procedures, and even basic conversations.

Another thing to keep in mind is the rising sense of health anxiety amongst younger patients. With seeing a plethora of graphic content on social media, there is a range of mental health concerns that arise in the youth and an alternate set of fears amongst this generation. We as physicians must keep this in mind when approaching teenagers and young adults in medical settings, validating their concerns when applicable and making them feel heard.



All in all, social media is a strengthening tool by bringing issues to light without the censorship of major news networks. We have used this to raise awareness on wars, poverty, racial disparities, equality concerns, and of course, global pandemics.

Having faced the worldwide pandemic of Covid-19, the new class of doctors have a unique experience to channel when it comes to medical training. For

A Tribute to Our Future Gen-Z Physicians

By Sofia Barlas

example, seeing rises in viral cases that have much symptom overlap will raise a red flag for us and won't be a pattern unrecognized. Seeing the way a pandemic changed our medical education and the shift towards telehealth altered the path of medicine completely. Healthcare students have a constant concern of another pandemic occurring and that their education could be affected yet again. With this concern also comes experience, and a heightened sense of vigilance that we all have now when facing major issues like these. We know what it takes and the adequate measures that need to be instilled to overcome such a global health challenge. The pandemic created a group of resilient and selfless healthcare providers, knowing what it takes to save patient when the world around them seems crumbling.

It is clear that the new wave of up-and-coming physicians have a strong sense of unity. We have concern for issues not only locally, but beyond our borders. I am honored to be part of this generation of future doctors, who put their voice and concern for humanity in the forefront of all their professional endeavors.

"Being a child of an immigrant physician, I have been blessed to always view medicine in a global light. I know the care we provide isn't just to save one patient, it is to follow a path of compassionate care and improve healthcare outcomes in our communities and beyond. My passion to pursue medicine stemmed from wanting to assist the underserved and continues to be the goal of my journey. I strive to improve the lives of patients and learn from each of their stories, in the path of becoming a competent and emotionally intelligent doctor."



Sofia Barlas is a fourth-year medical student, born and raised in Long Island, New York. She earned her Bachelor of Science in Biology from Nova Southeastern University in 2021. With a strong passion for dermatology, Sofia has been conducting research in the field, focusing specifically on improving treatment for vitiligo through genetic analysis. She is also deeply engaged in the South Florida youth community, actively participating in mental health forums to promote awareness and open dialogue. In her free time, Sofia enjoys spending quality time with her family and traveling with her cousins. She aspires to be a compassionate physician who provides holistic care to ensure the physical and mental well-being of her patients.



The Roles We Play —

Multimedia

By Adil Ansari



Artist Note: *The artwork explores the transformation within the physician-patient encounter, emphasizing the shared human experience that binds us together across cultures. As medical students, we learn various techniques and behaviors to guide future interactions, but the transition from student to physician is a journey of growth shaped by our bedside encounters. The two figures in the piece are divided, symbolizing the nuances of both the physician and patient, yet they are united by the heart, a universal element of care and compassion. Across different healthcare systems and cultural backgrounds, the essence of humanistic medicine remains the same: to truly listen, understand, and connect. When physicians remove the masks of preconceptions and see each patient as an individual, they contribute to a stronger, more compassionate global community. This shared responsibility in medicine transcends borders, fostering collaboration and cultural understanding in healthcare. The physician's role is not merely to diagnose and treat but to engage with patients as fellow human beings, recognizing that healing is a partnership. Whether in local clinics or global health initiatives, meaningful connections between caregivers and patients strengthen our communities. Embracing this interconnectedness allows medicine to be both a science and an art, rooted in empathy and human connection.*



Adil Ansari is a second year medical student who obtained his undergraduate degree at Queens College, double majoring in Biology and Fine Arts with a minor in Chemistry. "In my art I like to explore the dichotomy between science and art and find novel connections with the use of interesting techniques."

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