

Name: Elizabeth F. Minsky

Medical School: Albert Einstein College of Medicine

Year in School: M2 (Class of 2028)

First year of national AMWA Membership: 2025

Bio: Elizabeth F. Minsky is currently a second-year medical student at Albert Einstein College of Medicine in the Bronx, New York. Before medical school, she worked as a civil engineer, and she is interested in how the natural and built environment shape individual and public health. She is from Connecticut.

Essay Title: A Plant in Every Pot

### *A Plant in Every Pot*

In the late summer after my first year of medical school, I got off the waitlist for a plot in my apartment building's community garden. It was already August, but my Google search history quickly grew littered with lists of plants that could sprout before the first frost: radishes, Swiss chard, carrots, and kale could be mine by November. The fruits of this labor would only require my attention.

My dad used to compliment my interest in a myriad of hobbies and academic pursuits. Somehow, I had never spread myself too thin until medical school. My attention was suddenly demanded by a hundred pulling seeds: research, academics, volunteering. Cleaning the bathroom. Having a social life. The doom spiral of social media algorithms. When I started medical school, the flurry to do-it-all swept me in. That seemed to be the only way to succeed: the only way to match, the only way to get the job I wanted where I wanted it. Like the rest of the first-year medical students, I sent out a flurry of emails to research mentors to get involved early into a dozen projects. I focused on everything. I focused on nothing.

But my garden plot was only four feet by two feet. So it is to grow plants in New York City. And so it seems in medicine. My vision for gender equity focuses on this word: attention.

In a world of pass-fail medical school classes, it's easy to get sucked away. Halfway through the fall semester, I realized I was devoting hours to things that I didn't think would make me a good doctor, and worse, that I didn't really care about. I sat at an empty computer screen before research meetings and dreaded the work that would move them forward. All that it got me was more stress. Maybe this was what it was to be a medical student.

That spring, I attended a nationwide project design competition, which I loved. I stepped away from several of my extracurriculars and started a similar competition at my school with several

of my classmates. I wasn't doing it all, but I was doing some of it better. When I nourished them with a more limited focus, the projects I was proud of were beginning to sprout.

\*\*\*

Attention has another meaning. It is the act of observation: of watching and of listening. At my school, we start our clinical exposure early. We are supposed to be learning to build rapport with our future patients.

The 65-year-old I was tasked with interviewing on one of my first encounters to the emergency room had what I would later learn was an exacerbation of her rheumatoid arthritis, although we wouldn't cover the musculoskeletal system until almost a year later. She told me about her elbow pain and shortness of breath. I asked about her support system.

In my note, I wrote that the patient's separation from her husband appeared to weigh heavily on her. That didn't seem to capture the barely-there tremor in her quiet words when she said she hadn't told any of her children or friends about the separation. She held my gaze from the hospital bed as she told me about her guilt over a second failed marriage. Somehow, I was the first person she wasn't scared to tell. Somehow, I, the medical student, had encouraged her to tell her support system. That day I learned that while we tend to our patients' physical ailments, we also attend to their stories.

Female doctors spend longer with patients than male peers. It's hard to know why. There are certainly negative consequences for female physicians to do so when compensation is linked to productivity. Studies suggest that female doctors, were they to spend less time with their patients, would not compromise their satisfaction scores and could reduce the gender pay gap. Maybe we should. Yet, if we are pushed to do this, how will that affect how we attend to our patients?

AAMC data also suggests that female physicians work part time at greater rates than male peers. Probably, the industry of medicine should work to provide better support for families, caring for whom often falls to even high earning women. When we work long hours, how do we attend to our families?

\*\*\*

The etymology of this word is from Latin, one more subject I took and adored when I had seemingly endless time. *To stretch toward*. Where we place our attention is who we become.

My mother-in-law, a pediatrician, once lamented that the gender disparity had decreased much less in surgical specialties. At the time, I wondered if my specialty choice might let down some nameless collective of women. Now I see female friends interested in neurosurgery and orthopedics and general surgery who love every hour they spend shadowing and researching. They are becoming the people they want to be. So must I.

My bok choy grew. My basil floundered. I planted more bok choy in my coveted space in the garden and ginger on my thin apartment windowsill. If I couldn't have it all, I wanted a hearty stew.

We can see our limited attention as a curse: to run fewer extracurriculars, to pick between longer visit times and more compensation, to make hard decisions about hours worked and the time we spend on family. I hope that this choice can also be a blessing; that without fear of judgement, women in healthcare can stretch toward the people and the doctors we want to become. Only once we know what we want can we get the jobs we hope for. Only once we realize we can't be everything can we realize what we deserve. As I struggled with new projects and harder challenges, I learned that I help decide what will flower.

### *References*

<https://pmc.ncbi.nlm.nih.gov/articles/PMC9572933/>

<https://www.nejm.org/doi/pdf/10.1056/NEJMsa2013804?listPDF=true>

<https://www.aamc.org/news/women-are-changing-face-medicine-america>