



The Bravest Woman I've Ever Met

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(Fam Med. 2022;54(2):147-8.)

doi: 10.22454/FamMed.2022.603388

On this busy office day, I am working with Julia, a smart and eager medical student. She has an advanced level of Spanish, which is a relief on this day as most of my patients are Latinas. I am the only Latina physician in our office and am proud of how my panel of patients has grown. Many women tell me they are more comfortable talking to me about medically and culturally sensitive topics than talking to my colleagues.

Over the years I have learned many hard truths about the population I serve. I have learned that socioeconomic factors often dictate my patients' health and treatment outcomes. I have learned more about laws regarding intimate partner violence and deportation than I ever thought I would need. Unfortunately, more than one in three Latinas report being a victim of intimate partner sexual or physical violence, and these violent acts are on the rise during the COVID-19 pandemic.

Several cultural issues impact abused Latinas, including religious beliefs, *marianismo* (female submission and passivity), *machismo* (male privilege and dominance), the lack of Spanish-language resources, limited financial aid, and fear of deportation. I am grateful for the support services available to our patients, in particular, the intimate partner violence program, an initiative for the prevention of intimate violence

against women, where psychological and legal assistance are provided to immigrant and undocumented women under the Violence Against Women Act. Despite my previous experience working with this program, I am not prepared for my encounter with Sonia, the bravest woman I've ever known.

On this busy day, Monica, a victim advocate, asks if I can add a patient to my schedule for suture removal. I agree, assuming Julia would be happy to remove sutures. Monica goes on to tell me that my patient, Sonia, was recently attacked by her husband. Sonia was originally from Mexico and, hoping for a better future, she moved to the United States with her husband and their two children. Since they were undocumented, Sonia didn't work and she didn't have any family, only a couple of friends. Lately, the abuse had worsened and she didn't feel safe anymore. She left with her children and moved in with a friend. The following week, her husband asked to see the children. Sonia agreed and met him at her friend's house. During the visit, he became violent, grabbed a kitchen knife and started slicing her face. She was forced to use her arms as a shield. Her friend called 911 immediately. He was arrested and Sonia was taken to the nearest ER. Fortunately, she had not suffered any major injuries and Monica was providing her psychological

assistance. As I listen to Monica, I feel a cold wave go through my body. This is my first time facing a case like this and I can feel myself getting upset.

Julia and I walk into the room. Sonia is sitting quietly on the exam table. She has lacerations on her face, arms, and hands. I start the conversation in Spanish. As I introduce myself, I can see from her facial expression that she is in physical pain. It is difficult for her to smile due to the lacerations on her cheeks, but her eyes tell me her pain goes deeper. I want to make the encounter as comfortable as possible, but the air feels heavy; Sonia seems tense. I take a deep breath. I let her know I talked to Monica. I look into her eyes and offer my hand. I tell her how sorry I am that she had to go through this experience. I tell her she can trust me. I ask her where she is from, and she replies, "Mexico City."

I respond with a smile, "Me too!" She smiles weakly back.

Julia and I begin to remove the sutures. Sonia cries after every one. She claims it doesn't hurt but her voice tells me she is suffering. When we finish, she states, "My face will be marked forever."

With tears in my eyes, I ask if I can give her a hug, and she nods. I

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tell her that the wounds on her face will heal, the pain will improve, and her scars will only be visible enough to remind her how brave she is. Julia also gives her a hug. I call Monica in to let her know that Sonia is ready for her therapy and Julia and I go to my office.

As a teacher, I know it is important to discuss this case with Julia. We talk about important aspects of intimate partner violence in the Latin community and available resources to help victims. I ask Julia how she is feeling. She is sad and angry at the same time. We discuss the importance of debriefing and sharing emotions after difficult encounters. I ask if I can give her a hug, she agrees and we both end up crying. Weeks later I find out that Sonia and her kids are safe. They are receiving psychological and legal assistance to avoid deportation.

When I think about this day, I think about what Julia and I learned from this encounter. Julia not only learned about the physical and psychological effects of intimate partner violence, but also that as physicians, we are allowed to share our feelings with our patients. It is not a sign of weakness but a sign of compassion and empathy. I learned how important it is to address intimate partner violence with my patients. I now make it a priority to ask about this important topic every time I meet a new female patient.

Although I only saw Sonia once, I frequently think about her, and how powerful bonds can happen quickly and meaningfully across language and culture. I will be forever thankful to her for the learning opportunity and the trust she put in me during such a vulnerable time.

She was, without a doubt, the bravest woman I've ever met.

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References

1. Smith SG, Chen J, Basile KC, et al. The National Intimate Partner and Sexual Violence Survey (NISVS): 2010-2012 State Report. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention; 2017. Accessed August 12, 2021. <https://www.cdc.gov/violenceprevention/pdf/nisvs-statereportbook.pdf>
2. Marrs Fuchsel CL, Brummett A. Intimate partner violence prevention and intervention group-format programs for immigrant latinas: a systematic review. *J Fam Violence*. 2020;36:209-221. doi:10.1007/s10896-020-00160-6