A Fortunate Woman: A Country Doctor’s Story

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Book Title: A Fortunate Woman: A Country Doctor’s Story
Author: Polly Morland (Richard Baker, photographer)
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In her book *A Fortunate Woman*, Polly Morland describes the life and work of the woman general practitioner (GP) who lives in the same community as the GP in John Berger’s memorable book *A Fortunate Man*. Berger calls his physician John Sassal. Morland does not name the person at the center of her book, but she does a wonderful job reflecting on patient stories as well as the experiences of her doctor’s decades in the village.

Morland came across Berger’s book as she was cleaning out her mother’s home. Looking at the photographs by Jean Mohr, Morland recognized that she grew up in the community where the book is set. She found that a woman GP was practicing in the same village where the physician featured in *A Fortunate Man* practiced. Morland set out to understand how Dr Sassal and the woman doctor connected with her own memories of the region. In doing so, she discovered that the two GPs shared a profound commitment to service and to being present with neighbors, providing a sense of safety for all in the valleys.

With remarkable insight, Morland writes about a woman GP whose journey to the village is long and complex. After coming a bit late to medicine and after initial discouragement, the young doctor stays because her student GP trainer gave her *A Fortunate Man* to read, which made her realize that she wanted to have the same strong relationships and to be a part of a similar community as Dr Sassal. After years of exposure to arrogant professors and the competitive soul-searing training, she feels trapped in an exhausting type of hospital medicine. She happily finds her way to general practice training in communities where she feels she can breathe again.

Being drawn to the region of valleys and woods in the West of England, she and her husband buy a cottage there after she completes her training. She hears of a part-time job with a soon-to-retire GP who happens to be the former partner of Dr Sassal. She finds that she loves the work, loves the community and finds the practice “an opportunity to mesh work and life together” (p. x). Then, by chance, she rereads *A Fortunate Man* and is stunned to realize that she is living and working in the same practice as Dr Sassal.

Morland’s description of the physician’s growth, through training, early practice, and motherhood, is rich and timely. The book chronicles the life stages of the GP, her growth of confidence and reinforcement that she is where she is supposed to be. Knowing how and why she finally finds “her country” helps readers, particularly those of us whose lives have not been straight lines, to see themselves in the doctor’s life. Her arrival in the valleys feels like an accident, but it is not. She is part of the historical continuity of generalism that has endured throughout history. Priests, healers, shamans, and doctors are a part of every culture, every community, every part of history. And she is part of that continuum, just as “Dr John” was before her.

Morland describes moments of joy and triumph, and near misses that the doctor keeps to herself. She describes the litany of patients of all kinds that are her responsibility. She engages in “a contemplative audit of what went right and what went wrong” (p. 127). The timeless quality of the hills and rivers in the valley are being changed by new people who bring money to buy second houses and ride bicycles on the country roads. The only eternal in rural communities is the complex relationships among those who live there. The
relationships comprise old hurts and old dependencies in places where everyone is known.

The Richard Baker photos in this book are like an uncaptioned Rorschach test for readers. Black and white and placed perfectly, they are an homage to the brilliant Jean Mohr photos in *A Fortunate Man*. Morland’s concluding section reflects on all the woman doctor has seen over the year she spent with the male doctor. As narrator of the GP’s life, Morland makes her main character and her partner aware of what is being lost as these practices are being closed. She uses words like “continuity,” “comprehensive care,” and others, which are the stuff of health policy research as well as gratification. But seeing what is being lost in modern medicine makes her feel that “there is something in these stories to fight for” (p. 229). There certainly is. Separated by more than 50 years, the two books are remarkable in their descriptions of the people, the country, and the relationship of the doctor with a sense of place. The books deserve to be side by side on our bookshelves. Morland’s enormously satisfying book is a classic that will join another classic about that village and that practice.

**REFERENCES**