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Perspective

Gilbert Ruiz[1]

"What is medical humanities?" they ask with a puzzled look. It is a reasonable question; there are not many staffers on Capitol Hill with a degree in Medical Humanities. I have recently settled on a favorite answer: "It's exactly what it sounds like." One part medical and one part humanities, the discipline works to bridge a burgeoning gap between rapidly advancing health science and the ability to translate that into meaningful care. The break-neck pace of medical research has urged healthcare providers to keep up with the quality of their delivery. What good is a Ferrari if you're going to keep it in the driveway? Medical Humanities is about maximizing the potential of the monumental advances in healthcare.

I took courses as a pre-med student in Medical Humanities that I could not have taken with a traditional hard science major. I was in my "Philosophy of Science" course, for example, when conversations about paradigms and science, truth and fact, and invention and discovery stimulated a newfound sense of wonder. In my "Death and Dying" course, my ethical and spiritual beliefs about medicine were challenged in new and exciting ways. My "US Healthcare Systems" course taught me how it is a minor miracle that we have a healthcare system at all. The content of these classes was robust and important. The true value, however, came from the critical, yet pragmatic attitude I developed towards these multifaceted issues. The exposure made me realize that, in healthcare, there is no ideal philosophy; there is no such thing as a perfect machine.

This experience puts me in a unique position working on Capitol Hill. I can comfortably talk about the broad ideas surrounding healthcare because I am familiar with the small parts that compose them. I know what is economically, socially, and philosophically required to argue that, "health care is(n't) a right." I have led premedical organizations, shadowed physicians, worked in genetics labs, founded a health fair, and yes, even wrestled with organic chemistry, too. While medical school training and experience can never ever be substituted, my time as a pre-med Medical Humanities student primed and equipped me to make the far-reaching impact I believe I can make on American healthcare policy.

Ultimately, I did not end up going to medical school, but the preparation exposed me to critically important elements of the field. Clinical internship experience with the Cleveland

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Clinic, observing surgeries, and running PCR gels in the lab gave me hands on experience with science I was only reading about. Weekly volunteering with hospice and founding a local health fair got me up close and personal with how that science was impacting diverse groups of people. While I'll never boast the breadth of technical knowledge of an M.D., or fully tussle with the daily trials and tribulations of a healthcare provider, I *can* say that I have strived (and continue to strive) to observe healthcare and its policies critically and objectively. I can say I have witnessed firsthand how difficult it is to translate theory into reality. I am prepared to take advantage of my special position as an arbiter between healthcare and policy.

Medicine and healthcare are nuanced and complex. My Medical Humanities degree will continue to serve me as I play my role in improving healthcare policy. It's my license to think optimistically, idealistically, and even romantically about the future of healthcare. Medical Humanities spawned and fueled a passion of which I am proud. I would be doing a disservice to my country if I were not channeling that passion to work toward healthcare's greater good.

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