

## Of filial obligations in medicine

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"The delicate balance of mentoring someone is not creating them in your own image, but giving them the opportunity to create themselves"

- Steven Spielberg

For the many years that I have been a medical teacher, I've understood that I have to help students learn. However, teachers can have many other roles to play. The two anecdotes I share demonstrate a unique responsibility – one that parents could have fulfilled better had a conflict of interest not arisen between parent and child.

A few months ago, a strange situation unfolded. It was pleasant though quite unexpected. A final year medical student from another city was in Delhi, and wished to discuss something with me. Their teacher in Pathology had been a postgraduate student of ours and had mentioned my name in the context of his dilemma. Apparently, their teacher had said, I could generally be relied upon to give good advice.

I wasn't too sure if that was entirely true, but agreed to meet the student. The student claimed his quandary was regarding his future prospects: should he or should he not pursue a postgraduate degree in Gynecology? It was the specialty that he wanted to make a career of.

The question that arose was whether his gender would disadvantage him and prevent him from achieving the goal of with gynecological helpina women problems. His background was rural. His father was a farmer who owned land in the hinterland. The father was willing to open a hospital for him, near their family home, so that he could practice his skills there. His mother on the other hand preferred that her only child pursue his passion in a place of his choice. He could settle wherever he wanted, she assured him.

The farm land his father owned was in an extremely backward area and he would have to give up his dream of practicing Gynecology. The social conditions were such that a male gynecologist would be out of the question. Patients were unlikely to come to his clinic, no matter how brilliant he was. Thus, in order to pursue a subject of his choice he would be forced to live away from home, in a large modern city, and thereby disappoint his father. If, on the other hand, he decided to please his father, he would

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have to study his second preference which did not enthuse him even half as much. This is what was bothering him: whether to follow his passion or give it up so as to live up to his father's expectations. It was a difficult choice to make, and he wanted to get the reaction of a senior faculty on the matter.

I told him it was not my place to advise on such a delicate matter, but if I had to, I would vote in favor of passion. If the specialty that you're keen to train in is available to you, then, come what may, that is what you should pursue. To be able to do what you really enjoy is likely to bring you satisfaction and success in the long run. As I saw him off, I told him that I could only advice, but that he would be the one who had to bite the bullet, whichever way he ultimately decided.

I mulled on it later. In my opinion, a happy child makes a happy parent, but sometimes the parent is intractable and the child gives up his dream to please the parent. That, in my experience, is the path to regret, disappointment, and remorse. It brought back memories of another troubled student.

Decades ago, I asked a fourth year medical student, who was performing poorly in Pathology, to come for a discussion about what was going on with him. He had come unprepared to the tutorials on more than one occasion, and I was keen to address the issue. When I asked him if anything was troubling him, his answer was both interesting and unexpected.

After finishing his twelfth boards, he said, he casually went along with what his school mates were doing: preparing for the University of Delhi's medical entrance examination. He had been unclear as to what he wanted to do with his life at the time, so it had been simpler to just follow his friends. Besides, his parents had encouraged him to pursue medicine, so here he was. I had met other students like him over the years, students who were swept along with the tide into making career decisions based on what their peers were doing, or under pressure from their parents.

He told me that it was only after the first professional examination that he realized he was in the wrong place. He wanted to be a writer. Patient care was not his forte. He felt he should be studying for a degree in journalism since he had a flair for writing. He was desperate to change professions but his parents did not support this decision. and so his frustration was sky-high. When we talked, he was only three months from his second professional examination and seemed to be under considerable stress.

In a twisted desire to show his parents how unfit he was for medicine, he planned either to not appear in the university examination, or to intentionally fail. I tried to rationalize with him. By failing the examination or not appearing in it, I protested, he would be punishing himself. He would ultimately be called upon to reappear in the examination, and would be six months behind the rest of the class. Since his peers had indirectly motivated him to study medicine in the first place, it made little sense, I told him, to lag behind them.

For his level of intelligence, wouldn't failing be a defeat? I reasoned that completing his medical degree would make him eminently suitable for medical journalism. Having studied all the basics in medicine, he would be in a good position to write knowledgeably about medical topics, much better than the lay journalist. He left my room in a huff, saying that I was no different from his parents.

Thankfully, he returned two days later.

Having thought it over, he agreed with me that taking up journalism later was a better way to go. He felt he would benefit experience of from the studvina medicine, and was only postponing his passion by a few years. He went on to of the appear in all remaining professional examinations and did reasonably well. After his internship, he followed his dream and wrote medical articles for various news papers, on both medical and social issues. I lost touch thereafter.

Having shared these anecdotes, I must go back to something I said at the beginning of the narrative. It is about one of the roles that teachers can effectively play in a learning environment as stressful as a medical school: that of mentor. Undergraduate students require mentoring from the moment they join medical college, and several times during the course of their studies. This is a daunting task for mentors as the total numbers of students is usually large in Indian medical colleges. It would mean ten to fifteen students per faculty, but the faculty could be assisted in the mentoring by students from the senior years.

The advantages are many: this form of

communication can go a long way in solving students' problems and facilitating learning, besides reducing stress. An alternative to this could be that faculty members look for informal opportunities to mentor durina all forms of undergraduate teaching. particularly during tutorials or clinics when the student batches are smaller. The faculty can directly interact with the students in a given batch, initially building trust, and later. where necessary. solving problems.

Postgraduate students are inherently much more fortunate, since their numbers are small, and the system automatically allots supervisors to them for their thesis, who then go on to become their mentors.

Both these cases highlight conflict between the dreams of students and the expectations of parents. Internalizing the problem was stressful for them, but they balked at discussing it with an important stakeholder: the parent. Chronic stress can change how we learn and can impact how we make decisions. A perspective from a person who has no vested interest in the outcome can sometimes make all the difference.