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Clearing the Path

I used to believe that success was a product of privilege. I believed that growing up wealthy or a certain race or male is what put someone on the path to career success later in life. During my time in medical school, I have learned—amongst other things—that some success is not born from privilege, but rather from oppression and adversity.

As a woman who is brown, the daughter of immigrants, pursuing a career in medicine, and a feminist, I do not think I have had a single day in my adult life where I did not overcome adversity. Due to a complex number of social, cultural, and sadly legal reasons, women as a group in the United States do not have equal bodily integrity the way that men do. On a daily basis since this past November, I have read in the news that some political group or other is deciding on what I can and cannot do with my body, on what my future obstetrics & gynecology patients can and cannot do with their bodies, and on the extent to which I

"I am so proud of the community of women physicians that has plowed the road ahead for me, and I will pay this forward..." would, as a future Ob/Gyn, be able to help my patients reach fulfillment in their lives.

I walk down the streets of Manhattan to the hospital. To many, this may be a meaningless routine. To me, it means I am faced with my dose of street harassment for the day. The "Hey mama!" or "Why don't you let me touch you, sweetheart?" may seem like it is just an annoyance and that I should get over it. That argument may almost hold its ground, but sometimes these men follow me to the hospital door and indeed attempt to touch me. Amazingly, because my medical school trains us at a public hospital, these very men become patients I am taught to treat with respect and dedication. That is the adversity I have to overcome as soon as my day starts.

Next, at the hospital, my validity as a professional is routinely questioned—how could that big curly mess of hair, that sand beige brown skin, and those hard eyes belong to a physician-in-training? As most female doctors will relate, the number of times I have been called a nurse or told I should become a nurse and not a doctor is astounding. I am also offered a front row seat to the Land of Very Little to No Representation, where most of the department chairs are men. It really is a feat of great courage that any woman has risen to a position in which she had no role models. Given the self-doubt that society has systematically socialized in us as soon as we are born, there is always that little voice inside my head that tells me that I would never be able to be a medical school dean or program director or department chair. Rising up every

day and going to work to aim for that goal regardless is overcoming adversity.

I cannot thank my medical school enough for teaching me so well. What I have gained are transferable skills. These skills are mine—no one will ever be able to snatch them away from me. I graduate this May and will become an obstetrician & gynecologist. I exist at the intersection of several of the great problems of our time: sexism, racism, and cultural bigotry. All my life, the one problem that has caused people around me the most angst is my being female and hoping to ascend to the highest ranks of my profession while lifting up the fellow women who will be my patients.

Yes, I face a lot of adversity—every day is a fight for integrity of existence—but I have and will continue to channel this adversity into my work. Even if the majority of people did not believe in me, I take comfort in the fact that I will be responsible for using science and medicine to help my patients attain healthy and fulfilling lives.

In the past three years, I have found another great outlet to fight against this adversity and prove that my existence is valuable and worthy: scientific research. I fell in love with my research, which involves clinical and bioethical work with women who are survivors of female genital mutilation. There are many different ways to perform this work, but I have decided my focus will be educating fellow Women's Health providers in the care of these patients. If even one woman who has gone through this procedure receives more sensitive, comprehensive health care because the provider attended one of my talks or poster sessions, then I have succeeded.

While I educate current and future clinical providers on the care of these patients, I also mentor current student researchers on the study of these patients and others who have survived gendered violence at a lab so fittingly called the "EMPOWER lab."

We, as women in medicine, overcome adversity every day. We rise up and continue to go to the hospital and office to see our patients and to the lab to do our research. We do not let adversity take away from the sanctity and necessity of our work, but rather, we use these obstacles as another motivation to challenge ourselves and stand strong for those women who are more oppressed than we are. I am so proud of the community of women physicians that has plowed the road ahead for me, and I will pay this forward by plowing the road ahead for those yet to come.