



PHOTO: Artwork on the walls of Mrs Esther Moscovitch's hospital room.

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Honesty, not forgetting, and our fragile world

Linking ecological action and clinical encounters

Story by Sarah de Leeuw



Poet Maya Angelou once quoted social justice activist and writer Toni Bambara's famous lament: "Why are we pretending we have forgotten?"

When Dr Jean Zigby heard the quote, he committed to living by it: "I try as much as possible to not 'pretend I am forgetting.' I try to live by this. To remember," reflects Dr Zigby.

It is a mantra that inspired him to cofound the not-for-profit Synergie Santé Environnement, an agency helping health care facilities across Quebec tackle their massive environmental effects. It's a mantra Jean lives by as President of the Canadian Association of Physicians for the Environment, noting that "the practice of medicine is rooted in remembering: it is remembering what our patients have struggled through and what keeps them going. That gives us the strength and legitimacy as physicians to act."

Remembering the struggle of patients is embodied in one clear memory of Dr Zigby's: he once asked a young Sri Lankan-born mother of 3 children recently diagnosed with diabetes how much time her family spent outside. "It's not safe for my children to play outside," she lamented, "the cars are all over."

Despite her best intentions, the odds were stacked heavily against her: the pollution and physical danger of the neighbourhood, the cheap access to unhealthy food, the temptations of technology, the street-crossing-filled stretches to any green space. It was tempting for Jean just to say, "This medication is what you need," and leave it at that. But what she had accomplished so far—from immigrating to Canada to nursing her dying husband back to health, to raising her children with dignity despite the challenges of poverty—those things inspired Jean to help improve the chances for her children.

He linked the simple act of getting outside to the health of children.

It's not just children who call attention to how environment is linked to health. Jean thinks

PHOTO Mrs Esther Moscovitch shares the lessons she is learning in palliative care with Dr Zigby at the Jewish General Hospital in Montreal, Que.

COVER STORY

environmental health is also linked to mortality, to knowing our end is near, to entering palliative times, to turning back and recalling.

“In palliative care, 2 things have to happen. First, let go of the guilt. About the things you may or may not have done that may or may not have led to dying. Second, look at the amazing things you can still do.”

Some of those amazing things have to do with the planet: some of the amazing things have to do with letting go while still being honest. “Pollution and environmental degradation squeeze the system across the board, hospitals included, tragically limiting services for those at the end of life,” notes Jean. With climate change, he believes the cost will climb much higher. To him, it is an essential social justice issue.

His patients don’t just feel the injustice; they die from it.

“A lot of things people are dying from are ones from the environment. Think about asbestos in Quebec. People dying from asbestos-related mesothelioma are horrified to discover their government allowed the toxic mineral to continue being used decades after they knew it was so harmful. So often patients didn’t know they were exposed. Now, with a palliative diagnosis, some want to speak out. They feel it was so inappropriate that the Canadian government allowed that toxic mineral even though we all knew it was so harmful.”

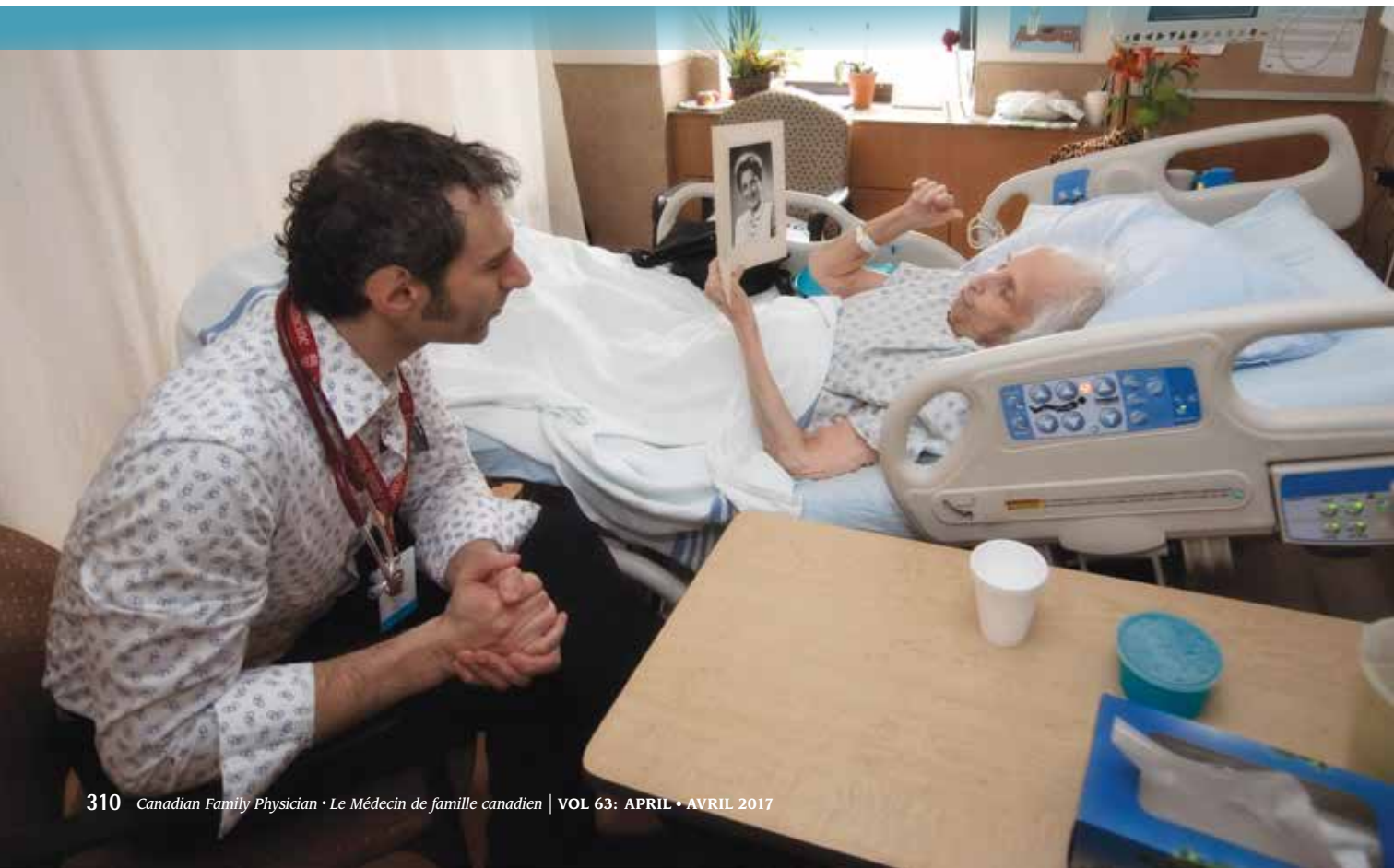
With this in mind, what Jean wants us all collectively to remember—to be honest about—is that our world

is in need of critical care. “Death and environmental degradation. Those are the 2 greatest human denials. We have to be honest about both. This might not always be rewarded, but to move forward, we have to acknowledge both, to be honest about both.”

Family physicians, argues Dr Zigby, are uniquely positioned to be honest, to not forget, and to see the interconnectivity between issues. “Positive change is happening all around us, even while so much is going wrong, with individuals, community organizations, and many local governments doing impressive work across Canada. Physicians can catalyze the adoption of solutions in their communities, institutions, and governments faster than anyone else,” offers Zigby.

“We have the attention of decision makers backed with the experiences of our patients. It’s a powerful combination. But it takes choosing a cause, scheduling some time into your schedule regularly, and finding partners who are doing great work already that you could help amplify. And remember your patients’ stories. They make the change happen.”

Still, Jean believes there also needs to be honesty about some of the limits surrounding primary care, surrounding the work and perspectives of family physicians. “Society projects onto doctors that we know what health is. That has not been my experience. We were trained in medical school to be ‘care’ professionals, to deal with sickness, not health. But we *can* learn to define it clearly, and bear witness to it, so that we can strive to increase





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it. I had to train myself to see my patients' resilience before I saw their illness.”

Dr Zigby attempts to incorporate ecology and the environment as determinants of human health into his daily practices. He teaches about it. He integrates it into clinical relationships. “Twenty years ago, I would talk to my patients about climate change, or about the environment, and they'd just look at me. Now patients are coming in and asking about the weather, about global

warming. At McGill [our medical faculty] has taken a hard turn toward understanding determinants of health. We are promoting advocacy and being an advocate in the curriculum. We need to advocate for the environment, for our planet. Advocacy skills are increasingly seen as a necessary part of medical training, whether it's for our patients or the world they depend on.”

“There's so many incredible opportunities,” offers Zigby. “Engage your patients, your peers, your administrators. Take care of yourself as an advocate. Build time into your practice so you feel you are really communicating. Live as small as you can. So you can live as deeply as you can. Don't work to live. We physicians are in the top 1% of wage earners. To say we're just making ends meet demonstrates a lack of insight and honesty. We have to be honest. We can live small. For the earth.”

Jean thinks there's reason to be hopeful. “By 2010 hospitals in Quebec had halved their energy consumption compared to the 1990s. I've seen hospitals adopt geothermal heating, build and run more sustainably, reduce and change the ways they treat waste. There are electrical charging stations in hospital parking lots. Hospital managers across Canada are trying hard to take up the challenge of sustainability. For those who say change isn't fast enough, I say it's faster than you think.”

Dr Zigby offers another analogy. “We are not *looking* at some kind of experiment. We are *living* the experiment. We can't know the outcome. As participants, we can and have to change the experiment itself. There was likely no generation who didn't feel like the world was going to end. It's always our job to get the next generation on a better footing.”

The planet we live on matters. It's a question of life and death—and we need to be honest about that.

“My favourite people,” laughs Jean in his happy pessimistic way, “are people who care for each other and for the planet. We cannot forget about each other or the planet.” 🌿

Dr Zigby is a family and palliative care physician practising in Montreal, Que; cofounder of the not-for-profit Synergie Santé Environnement, whose mission is to engage and guide health care institutions to improve their environmental effects; and President of the Canadian Association of Physicians for the Environment.

The Cover Project The Faces of Family Medicine project has evolved from individual faces of family medicine in Canada to portraits of physicians and communities across the country grappling with some of the inequities and challenges pervading society. It is our hope that over time this collection of covers and stories will help us to enhance our relationships with our patients in our own communities.

PHOTO LEFT Mrs Esther Moscovitch describing her experiences as a nurse in the 1950s.

PHOTOS RIGHT (Top down) Dr Zigby counseling 2 women about the care options for their dying mother on the palliative care unit. Dr Zigby and resident Dr Michèle Houde discussing cases on the palliative care ward. Marguerita Jean-Charles sharing her thoughts on a patient's needs in the palliative care unit.

PHOTOGRAPHER Andrée Lanthier, Longueuil, Que

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