

Communion in the clinic

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She pulled out a plastic container from her child's bag, took out a cookie, and handed it to her daughter on her lap, who was sobbing from the vaccinations she had just received in both legs.

As a medical resident on a pediatrics rotation in a community clinic, I was there along with my preceptor. Today, he'd been my partner as we tried to minimize the trauma for the young girl. Two simultaneous vaccinations, lasting less than 5 seconds, and yet the wails filled our room and the waiting room right beside it, warning all of the children there not to be betrayed by my smile and warm welcome.

I always find it interesting to watch parents after their child is vaccinated. Although unspoken, I've come to recognize what I think is an internal struggle within parents about willfully allowing their child to experience the pain of vaccination (and possibly having to aid in holding them down) in order to prevent an unknown, often abstract, medical condition.

Today, instead of oscillating between states of consolation and quickly hurrying along the conversation so that she could take her child away to comfort, our patient's young mother took out 3 more cookies and graciously offered one first to my preceptor, then to me, and then finally had one herself. "Here," she smiled gently, looking at us. "I know how hard you work. You must be hungry."

As I reached out to accept the cookie, my mind flashed back to a decade prior, back to my small hometown of Kapuskasing, and specifically back to the evangelical church I used to belong to. There was something about this setting, with our chairs in a quasi-circle and sharing food that reminded me of communion.

My parents had left Catholicism prior to my birth and became Protestants, a significant exception in my small town in French northern Ontario. Like many converts, their faith was devout. It was routine for us to attend church 3 times a week—twice on Sundays—and much of our routine was based around religion. The most important ritual of the church was Sunday-morning communion, where bread was broken and passed around, then wine.

Dr Kancir's story is the winning story of the 2018 Mimi Divinsky Award for History and Narrative in Family Medicine sponsored by the Foundation for Advancing Family Medicine of the College of Family Physicians of Canada. This award is named in memory of the late Dr Mimi Divinsky for her role as a pioneer in narrative medicine in Canada. It recognizes the best submitted narrative account of experiences in family medicine.

I hadn't thought of communion for years. In 2008, I had been swiftly and decisively excommunicated from my church. I had been struggling with sexual identity for a long time, first with simply accepting that I was gay, and then with trying to reconcile my different identities. These couldn't coexist, I had come to conclude, and I had first tried to self-administer conversion therapy through a torturous, repressive, and damaging dismissal of a core part of my identity. The details are too personal and hard to share, but remain some of my darkest moments. Once I realized the inseparability of my sexual identity from the rest of my identity, and that accepting these would be critical to continue living, I met to discuss with the leaders of my church.

My excommunication immediately ended community for me. Family friends, whose tables had for decades offered Sunday-afternoon lunches, would now only briefly acknowledge me in town. Socially, I had to reconstruct myself, and that also meant deconstructing so much of how I understood the world. In that process, I found the practice of medicine. My journey into the profession is more layered, but this initial loss of community created a vacuum in me, and part of my desire to practise medicine was to fill this emptiness, to have a sense of purpose, to serve a healing profession that I believed was morally good.

That afternoon back in the community clinic, this young woman had no idea what her gesture could have meant to me. We sat in silence for a moment, enjoying a chocolate chip cookie. Rather than bread broken as a ritual of shared devotion, the act of sitting together carried the same weight of fellowship. There were no prayers, only routine acts of public health. And we were a comedic congregation, really: my preceptor, a Jew; the woman, a burka-wearing Muslim; and me, an excommunicated Christian with no religious affiliation.

As my preceptor finished up our patient encounter, my mind wandered again and I thought about primary care. I had never appreciated it as deeply before, but I caught a glimpse of what family practice offered as community institution. I've always appreciated the specialty as a community resource; it makes me proud to be Canadian and know that the diversity of our population has universal access to primary care services. And I've always appreciated knowing that I could spend an entire day in a clinic and every new patient might represent the culture and history of a different people. But I had never appreciated before that the clinic is a physical

gathering place instrumental in creating a space for the public, regardless of any other affiliation. The beauty of realizing that my future clinic would be a place of acceptance and welcome for everyone still moves me every time I think about it.

As she was leaving the clinic room with her daughter still sniffling in her arms, the woman asked to use a separate clinic room, as it was coming up on one of her prayer times. I showed her an empty room she could use, and we politely said our goodbyes as she closed the door.

Before heading back to see my next patient, I stepped into one of the clinical exam rooms, turned my back, and cried. But it wasn't because of the memory of my past pain or my struggle. Rather, simply sharing some

time and space in my primary clinic had given me a sense of community that day that I had been missing for many years. It allowed me to look back on my life with gratitude, seeing the privilege of medical practice as something that would allow me to fulfil my initial goal to serve, and to create a shared safe space in my community. And, perhaps most important, medicine has become the place where, with all of my scars and struggles, I too have come to heal and find peace. 

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