

Growths

By Cecile Yama

Initially, it wasn't an intentional act—I woke up blunted and achy from my nightshift and couldn't find myself willing to do anything but stick my hands in dirt and try to make something grow. Sitting at my desk in my grey living room on a rainy day off, I started to unpack small envelopes of seeds left over from last year. I germinated them between layers of moist paper towels, pushed them into soil, and braced them under bright lights. They started to grow, and like a proud mother, I posted pictures of their slight evolutions on social media. Messages poured in, congratulating me, and asking questions.

We were one week deep into social isolation, and I had been shuttling myself back and forth from the hospital daily, through the new revolving door of our alternate reality. For weeks I crossed no streets aside from the one between my apartment building and the hospital where I work. I was suppressing trauma daily: children and adults, wheeled into our pediatric ICU, tubes already in their throats—or about to be—faces filled with terror that I could not alleviate, people receiving the diagnosis they feared most, an hourly rerun of the same horror story.

We'd communicate with family members on the phone, steeling ourselves against their wails as we went over the advanced directives of their children. I asked the parent of a twenty-year-old, through a Spanish interpreter and an invisible tangle of telephone signal, what she wanted me to do if her son's heart stopped. A conversation so intimate, so unexpected, was now suspended in static, due to the miles of contaminated air between us.

Back in the confines of my apartment, I laid down torn-out sheets from medical journals on my desk as a barrier, and scooped cupfuls of soil into empty egg cartons. My endless internal dialogue, where I would inspect my failures, the massive death toll, systemic racism, quieted. I focused on lifting delicate growths with tweezers and relocating them to nutritive new homes. I filled watery cold basins and syringed droplets of water onto the base of young stems so as not to topple their precarious balance. It was a solace. I was not alone in the embrace of a new hobby—my feed was filled with creative pursuits of the homeridden. I reached out to people who had posted flour-dusted loaves, or emerging greens. Gardening and baking seemed to be the most popular—I think we all needed to see something rise during a time when it felt like so much was falling, failing. The question we all had for one another was

swapped back and forth in videochats, messages, and photos exchanged as the sun rose on the end of our shifts—what are you doing to cope? I felt committed to the idea that it was possible for there to be positive consequences to this pandemic. Frankly, I needed there to be.

As a field, medicine is not the obvious choice of creatives, or those who seek sound mental health and good work-life balance. These are not things that we avoid, but rather concepts that actively forgo consideration. We pride ourselves in our science—hard-earned—sitting long hours in front of books and cadavers. This is a delicate recipe of self-sacrifice and masochism. Any ounce of creativity is usually pounded out of us in medical school, or re-directed, and we start to learn that our time does not belong to us; it belongs to our careers, to our patients. A friend of mine who had been a competitive dancer since she could walk told me recently that she stopped dancing in medical school. Then she stopped watching movies with dancing in them because it made her too sad that she had stopped dancing. I stopped drawing. I would carry water-color sets with me on vacation. But I opened them less. Every time I considered painting, I also considered what new research I may be missing. Medicine does not typically reward its dancers, artists, gardeners. The closest our medical education comes to embracing our humanity is a test of our people skills where we comfort actor-patients in order to be accepted into residency.

In the first year of residency, I fought the pressure to sink myself wholly into medicine and signed up for a ceramics class. I missed so many classes due to late nights at the hospital that I couldn't bring myself to pay for it again on our modest salary. Over the course of the year, I teetered into a depression, which required professional help. But what helped me more than anything was starting a garden on my small terrace: a gracious pittance of my hospital-subsidized housing. I killed a lot of plants, fought gnats, and spent nearly as much money on soil and pots as I did on food. It was worthwhile. Because those afternoons spent in the half-sun during the spring of my intern year were my lifeline. I survived—nay, escaped—intern year, whole, because of a crop of tomatoes, basil, and mint. (The hardest plants to kill.)

Now, as we faced a pandemic, I have started to garden more intently than ever before. Hospital shifts are bracketed by hours spent at my 'gardening station' née desk. I had planned to start a gardening club to bring medical residents and neighbors in our community closer together, but our initial event had been indefinitely delayed as we could no longer gather in groups to plant seedlings. Instead, I bought seeds whose names I could barely pronounce, from shiny catalogues bursting with colors, broke the arms off my succulents and propagated them into baby cacti. I gave plants and "planting kits" to neighbors who were self-isolating. I wasn't the only one that needed hope.

In our conversations about coping, I found that medical colleagues of mine were allowing other hobbies back into their lives as well, ironically when our work was

more grueling than ever. A friend from medical school whom I had lost touch with—now working as an anesthesiologist in California—had started to sew small felted food items with facial expressions, one per shift during her downtime from managing critically ill patients in the same ICU where her mother had died. She bought the kit in the pediatric hospital gift shop. Another colleague—in quarantine—had started to crochet animals for her soon to be born baby, after watching a YouTube video. My friend who had stopped dancing, started choreographing in her basement, until she contracted coronavirus and her lungs couldn't handle it. A social worker who'd never gardened before, was starting to grow indigenous plants from her native country of Peru to supplement her other new hobby, cooking her home cuisine.

In these acts, we were all insisting on something more beautiful than the lives we were living. We were disconnecting from our pain, which was necessary. We saw it in one another's eyes. We were trying not to shut off, but at the same time, not to feel anything too much. The residency program started to notice we needed this break as well. Our chief residents, the "moms" of our program, started coming around to do easy origami on short breaks throughout the day. By the end of the worst month of coronavirus, which pushed our hospital into near overflow, I had learned more about how to manage a ventilator, but I had also folded a variety of small boxes with sharp corners, made out of decorative paper.

My garden survived the summer, and it has remained one of my main motivators to wake up on tough mornings. I head outside to inspect any new growth, examining slender cucumbers and cherubic tomatoes in progress. I've started my gardening club digitally, to teach other urban gardeners how to help seedlings survive in this tough city. My gardening is messy; it is not the work of perfection but of experiment—a safe place to learn and fail, where stakes are low, and every miniscule victory yields joy. A series of pests have plagued my garden again this year, reminding me that nothing is sacred. The work of building initiatives that invite wellness into our residency programs feels equally experimental but necessary. These initiatives are a series of trials set up by people who have been told that that the arts are an afterthought, now realizing the current environment is dangerous to our mental health. The work of recovering from the impact of this pandemic is sinusoidal, and there are days when multiple anxieties are contagious. I waver between a feeling of near normalcy to a state of armored self-assurance, preparing for what might be to come. Of my garden however, I am certain. We need to be supported in our individual ways of healing.

Cecile Yama is a pediatric resident in the Bronx. She is interested in how to make medicine more equitable, interdisciplinary and humanistic through engagement with the built environment. She is the co-founder of Garden Stories, a digital community gardening effort started during Coronavirus, beginning in a multi-story building in the Bronx.