Hector P. Garcia Essay

My father’s real name is Krishna Devaru Bhat, but that is not his official name. When my father became an American citizen in 1982, he changed his official name to “Kris Bhat” and henceforth advertised himself and his private practice clinic under that name.

My father had a few reasons to change his name. There was a lot of suspicion in America of Hare Krishnas who used to chant *mantras* in front of airports with their cult scandals. There were the doctors who complained that his name was too hard to say. “Can I just call you Kris?” doctors would ask. In Detroit, he had been thrown out of a bar for having a beard during the Iranian embassy hostage crisis. And after being told by patients in Dallas that they did not want to talk to any foreign doctors (“What kind of name is that? Were you born here? I want to speak to an American, not you. You wouldn't understand.”), how could he attract self-referred allergy patients with his foreign first name?

What’s in a name really? Krishna is only the most beloved God of Hinduism known forevermore for his divine lecture to the soldier Arjuna on the nature of reality, the meaning of life, *karma*, and duty just prior to battle on the fields of Kurukshetra. Kris, on the other hand, is the short form of the name “Christian” in Danish. A small change in letters but one that fundamentally changes character, culture, and religion at the drop of a syllable. All for the sake of pronunciation and convenience.

In that same year of 1982, my father moved to Beaumont, Texas. I do not need to belabor that point that my hometown in the early 1980s was hardly a bastion of tolerance and acceptance. Indians were viewed with suspicion, as foreigners seeking to make as
much money as possible in America to ship back to India. Despite my father's qualifications, the largest hospital in town repeatedly denied him privileges until he threatened to call a lawyer. To say the hospital lacked cultural tolerance would put it mildly. They got over it, but have we?

The America of tomorrow and the Texas of today can ill-afford to ignore cross-cultural competence in any field. In 2004, Texas became one of the few majority-minority states in the United States. It will take decades for the rest of America to become as diverse as Texas is now.

In college, we once had the state demographer speak to our sociology class on the future of the state. Nicknamed “The Prophet” by Texas Monthly, he forecasted our collective future. He came to us with a simple message: there are large and unacceptable gaps between the races in health and education. Without drastic action to close those gaps in our rapidly growing state, the state will see falling per capita income levels, polarization between rich and poor, increases in unemployment, welfare, crime, and the prison population. Not bridging those disparities between cultures would lead to certain disaster. “And as Texas goes, so will the nation,” he warned us. For better or worse, we are the nation's future.

But true cross-cultural competency will require more from us than simple declarations of tolerance. It requires us to look outward from our own communities and towards others to learn, accept, and sometimes challenge the values of other communities. We should not assume and expect racism from those from small towns nor
should we assume and expect anti-racism from people living in major metropolises. And we cannot pretend that only whites are guilty of racism and close-mindedness.

It may also require that we may have to become “ambassadors” of “our people” at any given moment and patiently accept the curious inquiries of others. In my personal life, I reacted to ignorant questions about India and Indians in anger. I realized that this did no one any favors. By explaining my culture to others, I had to learn more about my culture and why we did the things that we did. An informed defense led me to an enlightened understanding of culture as a statement of values rather than of a clinging to rote tradition. It lead to the questioning of both Indian and American society eventually leading me to choose (hopefully) the best values and traditions of both while leaving behind the indefensible ones.

Being a cultural ambassador is an undoubtedly a heavy burden but one more of us would need to take on if we minorities are to be understood instead of feared or ridiculed.

Dispelling myths with facts rather than anger when answering someone’s good faith attempt to learn about our culture would go further towards cross-cultural tolerance than any diversity seminar or essay competition. Walling ourselves off from the rest of America is not a solution.

Walking the walk matters too. In medical school, I applied for the Hispanic Health Care Track to improve my Spanish and understand Hispanic culture. I have worked abroad in clinics and hospitals in Nicaragua and Bolivia and have traveled down to Brownsville with Frontera de Salud to get a better feel for a people I was not exposed to as a child. And as an AMSA national officer, an amateur blog writer, and future physician, I advocate for health care for all on this planet to put action behind my ideal of
international and local goodwill between people. Building bridges is much easier when you have walked alongside those whom we have sworn to heal.

With Hispanics making up one-third of the population of Texas, I cannot fathom why many health professionals refuse to take an interest in medical Spanish or Mexican culture. The same goes for disinterest in African-American history or the Asian experience. We are already a rainbow state in a rainbow nation. If it is not a matter of tolerance, it becomes a matter of bad business and bad medicine.

Terms like diversity and cross-cultural tolerance should not be fuzzy words that we hang on shelves, post on mission statements, and vaguely celebrate because they are harmless and nice. These issues have dire consequences for us, our children, and the future of our country. Even 50 years after Brown v. Board of Education desegregated schools, where one lives still determines the quality of their education. When the courts have repeatedly ruled the state school system is so grossly unequal it violates the Fourteenth Amendment, we cannot afford to put tolerance “on the shelf.” And when study after study has repeatedly shown that a patient’s race negatively impacts their medical care from medical staff even after controlling for extent of disease and symptoms, we cannot keep cross-cultural competence as a mission statement value that no one really practices. When race has been shown to affect your chance of getting on a transplant list, cross-cultural competence becomes a matter of life and death.

If cultural ambassadorship seems vague and flimsy to you, I would like to give an example of what I think a successful effort would look like. Returning to anti-Indian sentiment in Beaumont, the Indian population organized into an India Association and moved proactively to counter their image. Rather than sink away into the recesses of
society, the India Association of Southeast Texas began a program called IndiaFest to celebrate Indian food, dance, culture, and art to all in the community. Since 1990, the annual program draws sponsors from major employers like hospitals and oil companies and draws local officials and congressmen. Having opened ourselves to the city, we integrated into the mainstream but without having to submerge our heritage. Now the same hospital that refused to give my father credentials would not survive without its Indian staff.

But we certainly did not do it on our own. Not without the giants on whose shoulders we stood on, to quote Sir Isaac Newton.

Dr. Hector Garcia was undoubtedly a great man, fighting for the rights of Mexican-Americans in segregation-era Texas. We Asians who came after the Civil Rights Movement and after the campaigns of the Dr. Garcia and Dr. Martin Luther King should never forget that their fights and struggle ended racist immigration policies that favored European immigration and banned immigration from the Third World. Without their work, most of us would not be here.

So rather than dismiss cultural competence as a nice and fluffy idea with no daily relevance, we should strive towards an understanding of others. If not for that knowledge’s intrinsic worth then for its healing power. A major roadblock inhibiting cultural competency is the fear of asking others questions. A fear of offending can lead to a failure of communication. And communication failures lead to misunderstandings and ill will. And ill will between colleagues and patients will lead to a poorer healing process for all of those involved.
A delicate balance should be struck, but a bias towards open inquiry, curiosity, and dialogue is the scientific method. We can ask no less of others than we do of our science.