

My name is Isabel Bazan. I am a second-year pulmonary critical care fellow.

The research that I'm doing now has to do with pulmonary vascular disease and I'm actually finding gender differences in the diseases and the pathophysiology of what I'm working on.

That at least brings back a little bit of, like, not just viewing people and patients as one group of people with a disease but really focusing on who they are as individuals and really taking into account things that I think are often brushed under the table such as gender or race, which I think are things that I'll continue to include as I go further in the research that I'm doing.

I think diversity is incredibly important. When I was interviewed for fellowship programs or residency programs at other places, I definitely noticed when there is a lack of diversity. The collaboration that you can have with other people and it's really important to have different viewpoints and so, that and of itself I think is very important not just from a social standpoint but also from just the academic stand-point of people coming from different places, having different training, different cultural backgrounds and academic backgrounds.

I think it gives you a fuller experience and so I was very happy when I came here at Yale that I found that in residency and continue to find that in the pulmonary critical care section.

It's very important for me to work with a diverse patient population. I've done a lot of research before coming here to residency with underserved communities and I speak Spanish and so having not just diverse patients but also patients that are not English-proficient is very important to me and I want to continue to be able to serve those communities.

I definitely feel that when I have a Spanish-speaking patient, usually they start talking to me in English and struggle and look really worried and as soon as I start speaking to them in Spanish, just saying 'hey, by the way, I speak Spanish too if you need.' There's just like a sense of relief, of like 'oh thank goodness! I can finally communicate with you.'

I'm able to identify, even just by their accent like, 'hey, you're from Argentina, aren't you?' and they get like really excited that they recognize or they might be from, my family's from Peru, so they might be from Peru as well and we can bond over that.

I think it's an additional, sort of moment where we can connect with patients. It really alters the way that you view patients and you change your care and I think you see a different type of pathophysiology as well in those types of patients, which is really important for training.