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The John Foy & Associates Strong Arm Leukemia Scholarship

Essay Topic: How has living with your or your loved one's leukemia affected your education?

In the year 1998, when I was a toddler, my fifteen-year-old brother was diagnosed with Acute Lymphatic Leukemia. He was the younger of two identical twin boys who were the first-born and only sons in a family of seven children. Our mom worked extra hours each week so that she could take one day off every week to take my brother to Riley's Hospital for Children in Indianapolis, Indiana. That was a weekly six-hour round trip car ride for an eight-hour blood transfusion, and they took me with them. In a recent rare conversation regarding my brother's illness and passing, my mom told me that I served as a source of comfort for my brother during his transfusions during which we watched movies, shared McDonald's meals, and shared laughs together. Before I knew of my role during his treatments, I had decided to give back to the cancer community. Prior, I thought that the main reason for wanting to become a medical social worker, specializing in Psychosocial Oncology, was solely the result of not being able to remember the good parts of the end of my brother's life. I thought that I wanted to encourage families to hold onto memories of their loved ones before the only memories they had were attached to a hospital bed. However, after learning that I have known how to temporarily ease the pain of a cancer patient and his mother from the age of two-and-a-half years, my career objectives not only made sense, but they were given a deeper meaning.

After my brother passed away, I spent more than a decade trying to recover old memories only to find through my Introduction to Psychology course that the memories I had been uncovering were likely either partially or wholly false. During the course of that decade, I was emotionally tormented and envious of my older siblings who were old enough throughout my

brother's cancer to have more accurate memories. I turned to writing as a source of personal therapy because discussions surrounding my brother were scarce and difficult, and I believed that if I could sort out my thoughts and memories on paper that I would be able to find the memories of my brother as a healthy teenager. I decided that a career in copy editing would allow me the time to work on this project while also helping other writers to achieve their own dreams of becoming published writers. About midway through my first semester in college, I became frustrated when I hit a roadblock in forming these memories, which likely did not exist in the first place. I abandoned my goal of becoming a copy editor after taking an immense interest in topics covered in my first psychology course.

If I could not recall memories of my brother before he was diagnosed with cancer, I was determined to help pediatric cancer patients' families cope with a cancer diagnosis in such a way that they would be less compelled to torture themselves after the possible death of the patient. I decided that I wanted to conduct therapy with the cancer patients and their families in order to ease their psychological suffering while the patient was still alive. I wanted them to have the opportunity to make good memories with their loved ones. What's more? For the families who lost their loved one, I wanted to be able to demonstrate to them that despite the inevitable pain, there is life after loss.

My desire to conduct therapy in the cancer community took me to Spain where I had the opportunity to complete a short practicum in a local hospital. Despite my desire to work in the field of medical social work, I worked alongside a clinical psychologist. Due to the healthcare system in Spain being completely public, there is less need for social workers in their hospitals; therefore, the role of medical social workers in the United States is fulfilled by the clinical psychologists. In another difference between the two healthcare systems, there are less privacy

protections for patients in Spain than in the United States. While we have HIPPA regulations in the United States, the healthcare professionals in Spain follow a much more open protocol. It was because of these differences that I was able to be present and participate in interviews and therapy with patients as well as offer insight on their psychological well-being despite only being a student. I learned how to communicate sensitively with members of the cancer community in a non-native language amidst members of a culture that was not my own.

My experience with my mom and brother and my much later experience in Spain were only the beginning of realizing my capabilities of working among members of the community who I have come to know through my own lifetime of pain. Each day that I wake up is one more day closer to my graduation from my undergraduate program in psychology at the University of Indiana and the beginning of my master's program in social work. I plan to attend the University of Louisville's Kent School of Social Work where I can specialize in Psychosocial Oncology and push toward my goal of helping others who face a similar situation that my family faced all those years ago. I have the potential to use my former experience in such a way that I can encourage families to embrace the time that their chronically ill family member has, whether that time is short or long. I no longer blame myself for taking my brother's existence for granted; I was only four years old when he passed away, and for all I knew, he would live forever. Now it is my turn to care for the people who currently suffer. There is work to be done.