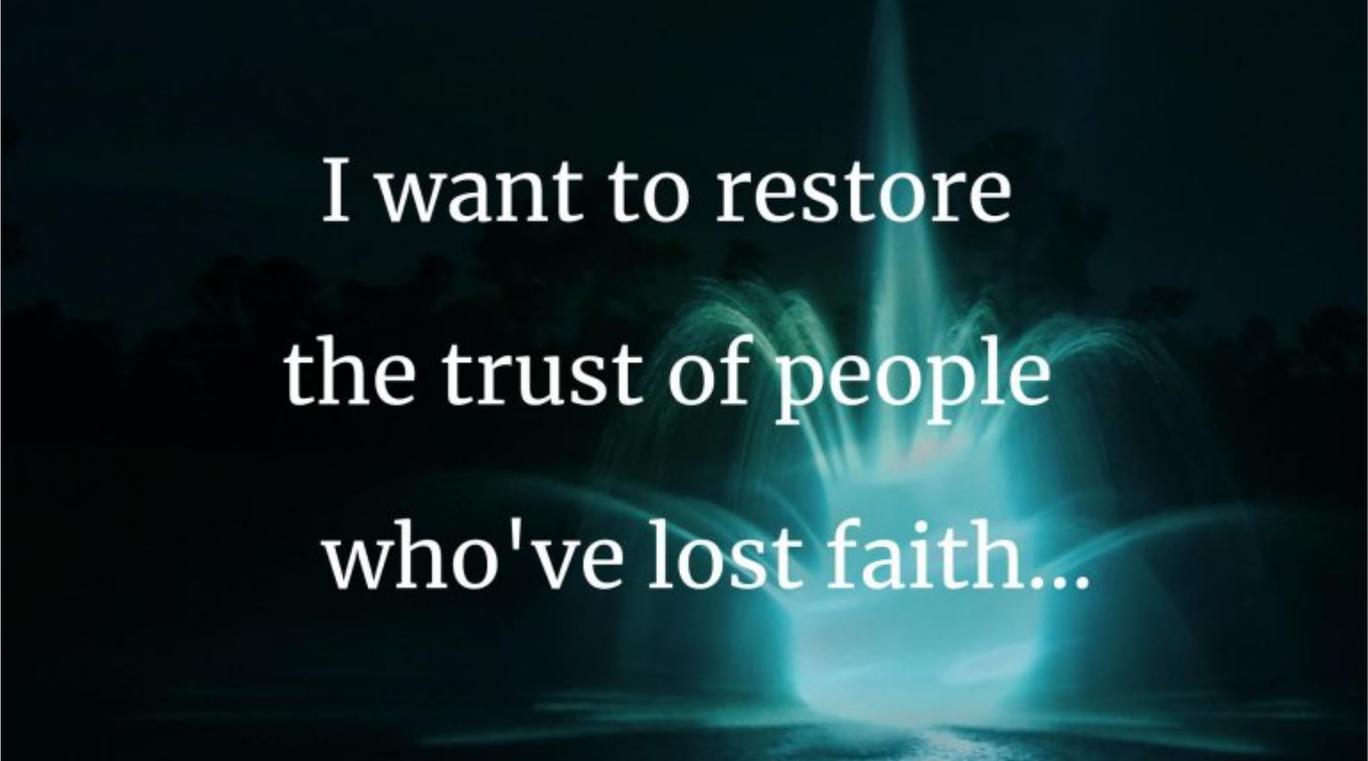


# Being Different: My Struggle and My Motivation

Category: New Voices

written by Mariama Joazard | February 20, 2024



I want to restore  
the trust of people  
who've lost faith...

*Editor's Note: This piece was a finalist in the Pulse writing contest, "On Being Different."*

When I was in elementary school, I was bullied by my peers into believing that being different was bad.

I grew up thinking that speaking my mind was undesirable if my thoughts didn't mirror those of others. To my peers, liking the "strange" foods of my parents' Haitian cuisine, such as tripe or oxtail, was weird. I wore my older brothers' hand-me-downs, which led to incessant teasing at school.

Although I grew up in Brockton, Massachusetts—a mostly Black, Haitian and Cape Verdean town—much of this negativity came from kids who looked like me. Sometimes that's what felt most hurtful. Looking back, I attribute these interactions to internalized racism among my peers and to the old adage "Hurt people hurt people."

Over time, I learned to become quieter, to automatically agree with others and to avoid speaking up, even when I thought something wasn't right. This pattern of fading into the background persisted throughout my adolescence and young adulthood. But despite my efforts to assimilate by acting like my peers or trying to be interested in what they liked, the one thing I could never change was my skin color.

No matter how well I blended in on other levels, my Blackness seemed to define how others saw me. My skin was too dark, my braids were an oddity to some, and my using words like “dope” or “aight” made me seem illiterate to peers who didn’t understand slang.

The issue of race was a constant strain, but it also eventually motivated me to become a nurse.

When I was in elementary school, my grandmother was diagnosed with kidney disease. My grandmother spoke no English, and my mother had an accent; accompanying them to the dialysis clinic or hospital, I heard some staff members addressing them in the slow, careful tones used with children. Maybe this was an effort to be gentle, but hearing it, even at that young age, made me feel small. When my grandmother died, a few months later, my mom, speaking from a place of hurt, told me that she’d died because of bad doctors: “They don’t care about people like us.”

Experiences like this spurred me to take nursing classes at Brockton High. I did well and enjoyed practicing my skills on the mannequins and on my classmates. This encouraged me to continue to a higher level of training.

Studying nursing in college was a huge departure from my earlier experiences, though. I’d begun my training not knowing that the profession is predominantly white.

My nursing school was a private Catholic institution in Weston—one of the state’s ten richest towns. The school is a “PWI” (predominately white institution), as I realized early on, looking around my classes.

Over the next four years, I often wondered if I’d chosen the wrong school. The other students’ glances made me uneasy, and I felt constantly judged by how I acted or looked.

“Wow, I wouldn’t think you’d like that song!”...“You’re the first Black person I’ve ever met.”...“Maybe the camera isn’t picking you up because of the lighting.”

My classmates didn’t realize how hurtful their words were, and I was afraid to speak up—afraid of singling myself out further, given that I was one of only a handful of darker-skinned students.

It felt like elementary school all over again. I was either too Black or not Black enough; I couldn’t just be me.

Throughout college, I never escaped that feeling—even in the hospital where I completed my clinical rotations. I was used to hearing my peers commenting on my appearance, but I wasn’t prepared to hear my patients do so too.

As I put on my jacket one afternoon, a patient said sympathetically, “You must be used to warmer climates.” I remember her look of shock when I answered, “I was born in New England.”

Another patient happily told me about her travels while I fed her. As soon as

she mentioned Africa, I knew where the conversation was headed:

“How was Africa? Did you like living there?”

It felt as if all the taunts of the past were returning to haunt me.

“I’ve never been,” I told her with a tight smile, “but I hear it’s beautiful.”

I tried to make excuses for these patients: *They’re from an earlier era; maybe they don’t understand the impact of their words. Maybe they’re so used to having white nurses that seeing a Black student nurse is genuinely a shock for them.*

As uncomfortable as these interactions felt, what really got under my skin were my fellow nurses’ comments. A white male nurse asked why I put “those things” in my hair, referring to the gold filigree tubes around my braids. It took great effort to maintain a professional demeanor and simply say, “Because I like it. I think they look nice.”

In stark contrast, Black patients and staff members offered encouragement and helped me to remember who, and what, I was truly working for.

My patients of color were elated when I told them I was in nursing school—“You’ll be a great nurse!”—and said how nice it would be to have someone who looked like them involved in their care. The Black nursing aides expressed pride in me, saying, “If anyone can get that degree, you can!” On evening shifts, some would answer my patients’ call lights so that I could finish my assignments or study for an exam.

Reflecting on these experiences, I noticed that the majority of nursing aides in my hospital were Haitian or Cape Verdean, but nearly all of the nurses were white. This epiphany made me think about my parents, who didn’t have the opportunity to go to college, but made sure that their kids did. I realized that if I succeed, so will they; my success will also be a victory for all those who’ve felt let down by the healthcare system.

As I’ve gotten older, I’ve reached the conclusion that being different doesn’t make me strange.

Different backgrounds and experiences are invaluable to a team. People *should* have differing opinions and thoughts, so they can bounce ideas off one another to come up with solutions. So what if I’m different? Any of my patients who also feel different deserve someone who will represent them and help them to feel seen.

This awareness has inspired me to work in community nursing. I want to care for unhoused patients—those without insurance, who are on long waitlists for treatment in clinics. I want to restore the trust of people who’ve lost faith in nurses and doctors because of experiences like my grandmother’s. And because I didn’t have a diverse healthcare staff to look up to during my doctor appointments or nursing-school studies, being able to inspire others like me feels so vital.

Everyone deserves access to health care—and even more importantly, all human beings deserve to be respected.