

Lessons on



Becoming **Viral**

Migrant **Justice**



Activist **Burnout**



Text by Dr Sudesna Roy Chowdhury

I am part of the infamous National University of Singapore Yong Loo Lin School of Medicine batch that took MBBS amid COVID-19. This meant being questioned about whether the MBBS is valid if real patients were not examined, as well as “who posted that NUS Whispers post?”. But of course, the most unsettling part was starting work against the backdrop of a global pandemic.

Early April saw a sharp increase in cases among foreign workers, starting with a Mustafa Centre cluster. Interestingly, as reminded during Prof Thambyah’s speech, there was already a foreign worker cluster at Seletar Aerospace Heights earlier in February that was well-contained. But the new cluster proved to be different. Due to the sharp increase in cases among this demographic, including Bangladeshis, I was approached by volunteers at the Expo community isolation facility to translate informative documents into Bengali, as part of their efforts towards a self-monitoring telemedicine system. I roped in family and friends, Singaporean-Bengali women with hyphenated identities like myself, to translate with me on an informal basis.

A spark ignited

13 April was the watershed day. It was the day the migrant worker health crisis became a tide too late to turn.

I stayed up for the Gov.sg Telegram message on daily case count. At 11.58 pm the long-awaited message came: 280 out of 386 cases came from the dormitories – the first day with a migrant worker supermajority – largely disproportionate to their census in our population. This was devastating. The only image in my mind was that with a 2% mortality rate (the data was too scant for a more accurate prediction), we would be sending 400 dead bodies back to their respective home countries – families receiving their son’s remains instead of the usual monthly remittance – if 20,000 migrant workers were to be infected. There was no sitting around. After a quick Google search, I built a site supporting English to Bengali medical history-taking, with phone numbers to reach a live Bengali interpreter. It was a passion project that started at 3 am the night of the Telegram message and by 11 am, I sent out the link to eight friends in healthcare. It was time-sensitive because medical officers were going into the dormitories that very day to swab asymptomatic residents, many of whom are Bangladeshi.

These eight friends shared the link on Facebook walls and WhatsApp groups, and the medical community showed me the spirit of this fraternity that I have newly joined. I received tremendous support that broke the

hierarchy we otherwise follow in the hospital – it is heart-warming when a professor speaks to a house officer so candidly about social issues. It spoke to me of the amount of hope that a small effort from my bedroom generated in a time of poor morale. In a beautiful coincidence, Tuesday was also the Bengali New Year. That Friday morning, a Channel NewsAsia journalist Christy Yap, a 24-year-old like myself, published an article about my site, which became her most successful article to date. It felt powerful to have two young ladies trigger a wave of support across the nation. Both our President and Prime Minister reposted her article on their Facebook pages by Friday evening. Not four days had passed since that Telegram message.

The group of 13 childhood friends grew into a volunteer network of over 100 Bengalis – we branched out into phone interpretation, translating documents, managing mental health and daily dinner distribution. The website covidbengali quickly reproduced into covidtamil, covidmalayalam, covidhindi, and more. A 22-year-old male software engineer co-opted the site for ten other local languages, and another 24-year-old female entrepreneur co-opted it for a more international version with 30 languages, from French to Nepali. Power to the youth,

especially to the women in technology who are often undermined. This is community-empowered social work. Tell me again that the youth do not care or are apathetic to the issues surrounding us, and I will personally show you the work being done on the ground to fight the status quo.

Shining a spotlight on migrant workers

“Migrant workers” quickly became a buzzword that everyone jumped on, from businesses to social media influencers to genuine volunteers. My prediction of 20,000 cases in eight weeks was off; we had over 40,000 total cases, which is not criticism because Singapore also had high testing rates. Yet, it took a crisis of this magnitude for the vulnerable in society to receive nationwide attention, be it migrant bodies, the homeless or elder suicides. This was one positive side effect, if anything. A harsh spotlight on a system that prioritises profit margin over human welfare, such that the elite become more elite and we pit the poor against the poorer – for example, who provides the cheapest labour or would put up with the worst living conditions in a dormitory system that parallels a for-profit prison model.

In retrospect, I wish we had done better to ride on our momentum – people were moved to use their resources for a social good. As the crisis stabilised and volunteers lost steam, I cannot help but think of how the impact could have been amplified if we were smarter about this. I wanted to keep the movement grassroots and apolitical, yet for long term advocacy that would continue beyond the hype, maybe being organised and political should have been the way to go. I particularly stood at an interesting crossroad between becoming an overnight leader of a movement I never intended to lead, and the pressure of starting and surviving housemanship.

Burning out

I love what I do as a houseman – no pre-call blues either. We give our best at the hospital, and like every other houseman, I am wiped out after work. Yet the intensity of the humanitarian crisis does not alleviate because housemanship began; thus started weeks of inadequate rest, being a houseman by day and an activist by night. I spent many nights thinking of the people let down because I was too exhausted to reply to the new partners I want to create social change with. Occasionally, we hear horrible stories, like dormitory suicides, and I ruminate – if we had worked harder on that collaboration with our partners, could we have prevented that? Are our efforts not adequately translated into an impact for these workers? Should we write to our ministers so that they can address these atrocities? Wait, did I suspend aspirin for the new patient on admission?

Weeks of these circling thoughts led to what I learnt is activist burnout. According to Maslach and Gomes,¹ primary symptoms of this include:

1. Exhaustion: feeling emotionally and physically drained
2. Cynicism: Having negative associations with the work that once seemed so important
3. Inefficacy: Doubting self-worth and lack of activist achievement

Growing up in capitalism meant attaching my self-worth to the amount of work I produced instead of my inherent human value. The aforementioned inefficacy led to a vicious cycle of self-hating for being unproductive, procrastinating work even further, and going deeper into reflections of the people I was not physically able to help. I believed that my plate was never full – I simply needed a bigger plate. More weeks of this rabbit hole later came an acceptance that I too am human and social work was a full-time job. I read

about this on the Internet: “No single person is the one hero. This is a long haul. Remember, generations before you have worked to fight systems of oppression and generations after you will continue. Treat it as a marathon, not a sprint.”² It was a beautiful piece of advice.

All in all, the past three months of starting housemanship and catapulting myself into larger social issues has gifted me with lessons that I have tried to crystallise in this article, within a word count that I struggled to adhere to. With no formal writing training, this article, just like that website, is yet another attempt at coming out of comfort zones. If you ever receive a blue letter or phone consult from me, please do not scold me because sometimes, we housemen really cannot remember what that patient’s ejection fraction is or the time of his last meal. Here is to more community-empowered work, fighting the good fight, and sustaining energy to work in a healthy manner, be it within or outside of Ministry of Health Holdings prescribed duties. ♦

References

1. Maslach C, Gomes ME. Overcoming burnout. In: Macnair R, ed. *Working for Peace: A Handbook of Practical Psychology and Other Tools*. Atascadero, CA. Impact Publishers; 2006. p. 43-9.
2. Lesley University. Avoid activist burnout and sustain your commitment to community. Available at: <https://bit.ly/2DuPVZl>.

Dr Sudesna recently joined the healthcare workforce in April 2020 as a house officer in a SingHealth hospital. As a young doctor, she has varied aspirations – pursue obstetrics & gynaecology, do international aid work in developing countries or be a local health advocate for vulnerable groups in society, be it migrant workers, teenage mothers or LGBTQIA+ patients.

