MEET THE FELLOWS

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I graduated from Georgetown University with a degree in English in 2009 and moved to New York shortly thereafter. I spent two and a half years working in marketing for a small publishing company, and while it was a wonderful job and I enjoyed my experience, I never felt passionate about the work. I realized that I wanted to be involved in a career—really, a calling—where I felt passionate and dedicated every single day. I had always had an interest in the helping professions, and in people, and realized that social work was a way that I could both blend these interests and make an impact on my larger environment.

I had limited experience with social work at this point, and almost none with palliative care. The experience I did have, however, was amazingly positive, and amazingly inspiring. Over a period of time during which my grandmother’s health was declining, my family had the good fortune to be supported by several wonderful social workers—dedicated, competent professionals who also had immense compassion for us, and for all of their clients. I could tell that their work was extremely challenging, but they never showed strain, and we never felt like less than their primary concern.

I reflected on this when the opportunity to apply for the Palliative Care Fellowship arose, and realized that those social workers embodied the passion I was looking to find—and opportunity to explore the specialty was something I could not miss. I see my placement at Montefiore Medical Center as such an opportunity to grow—learning not just from other social workers, but from the doctors, nurse practitioners, and other caregivers with whom I interact on a daily basis. The wide breadth of expertise that my colleagues carry is astounding, and my goal every day is to absorb something new and be open to the differing perspectives of everyone on my team. I also know that this experience is rare—I have the luxury of time to spend with all of my clients, and I plan to use this wisely, really strengthening my skills in developing the all-important therapeutic relationships.

As I stated previously, my primary career goal is to feel passionate and dedicated every single day, and I have begun to find that in the palliative care setting. I care deeply for my clients and their families, and even in the more difficult situations, find myself continually absorbed in my practice. I see such a need in the palliative care field—the clients I serve are so vulnerable, and in very difficult situations, and I feel honored to be able to support them in these times of greatest need. I would love to continue this work beyond my internship, and practice in the palliative care field once I graduate this May.
My interest in palliative care social work grew into a definitive commitment as a result of my transformative internship at an HIV/AIDS clinic in Brooklyn during my foundation year at Fordham. The challenges of managing a life-threatening chronic illness, including treatment fatigue, pain (both physical and psychological), occupational and relational stress, all set in the context of persistent declining health, compelled me to develop a response system that combined problem-solving and empathy in equal measure. With each client, I learned to focus in on the core difficulties and help devise action plans, all while keeping a keen ear to the individual’s personal/cultural values and aspirations. Living with HIV disease appeared to me as a crucible in which the existential questions (who am I? why am I here? what will I leave behind?) are amplified by the negative pressure on the lifespan time frame—I found myself inspired and greatly rewarded by the work with this population.

Exploring the origins of my interest in end-of-life problem-solving, I reflect back on my early experience growing up with a diabetic mother whose life ended when she was 53 years old, a wheelchair bound, bilateral amputee. She taught me to appreciate the power of the small spaces where intimate communication transpires—these moments of being known and understood become the foundation on which a life’s worth can be weighed. The pain of losing her left me, for a time, averse to inhabiting those spaces and lead me along a more solitary professional path in the arts, but something kept calling me toward social work, where my fluency with deep human exchange could be put to good use. Recently, my appreciation of palliative care social work was amplified on the receiving end as my father’s emphysema advanced and finally took his life last July. More than ever, I want to be part of the social mechanism for helping guide families through their loved ones final passage. The Fellowship has provided me with the means to begin to do so by facilitating my training on the palliative care team at New York Presbyterian Weill Cornell Medical Center and I am very grateful for the opportunity.