

Medical School Admission Essay

Tim is a 15 year-old boy struggling with depression. Our paths crossed because he had swallowed a handful of Tylenol pills. While we talk, he lowers his head, avoiding eye contact. As I question him about the events that brought him in, he offers few details, but allows me to follow the bread crumbs. Though he answers with “I don’t know” a few times, his candor shines through despite his difficulty expressing his thoughts and emotions. He displays honesty and vulnerability that I see in adults. Though Tim lacked the vocabulary or insight to fully express himself, he made the effort to answer my questions. A large part of wanting to work with children is their willingness to consider things about themselves and their innocent motivation. Without years of experience in life, they present candidness and simplicity that is refreshing.

Children are in a constant flux of development and vulnerability that presents an opportunity to effect a positive change before certain behaviors or characterological traits solidify. Facilitating positive change is what being a psychiatrist is about and something I have experience with. My primary reason for joining Teach For America was to make a change in my students’ lives. Although my job was to teach them biology and not to treat mental health, I also attempted to teach my students a good work ethic and lay the foundation for success in their endeavors. As a Menninger educator for the adolescents’ school hours, I tutored them in their school work while they received intensive therapy. This was to impart that mental illness does not preclude one from continuing with daily life. Children have such resilience and capacity for change, that the trajectory of their lives can be altered greatly. This inspires me to work with patients early in their development, as I have seen all too many times adults greatly impacted by early trauma. Initial therapy and/or medication management could have transformed their course in life.

Treating children is not a stand-alone endeavor and requires familial support to be successful. Families provide a different perspective on the situation and assist in implementing change. While at Menninger and Texas Children’s Hospital, I watched parents struggle to find the meaning of why their child attempted suicide or why they were different than their peers. I witnessed how powerless they felt, and I strived to help them through this process. This year, I have felt that same sense of powerlessness while working in children’s outpatient clinics. In order to educate parents about their child’s condition and treatment plan, I need additional training. With fellowship training, I can gain expertise about the patient population, diagnostic and treatment options, and I hope to learn more about family therapy and individual therapy to best serve my patients. Residency presented far too few opportunities to work with children and their families, and I would like to broaden my experience in this field during fellowship.

Even with good training, funding is also an important aspect of mental healthcare that can affect the treatment plan. It is gratifying to see that children have a wide variety of resources available to them, whether that be early interventional services, school services, or health plans. I realized just how powerful these resources are when I rotated on a developmental pediatrics clinic. Children with Down’s syndrome and autism were able to receive physical and speech therapy through a multitude of community programs and governmental services. Here, the kids displayed their abilities the best they could while we attempted to match them with outpatient services. Tracking the child’s progress, counseling parents, and linking them to community resources is extremely rewarding. It’s satisfying to work towards a common goal with families because over time you witness considerable growth. The developmental piece of the puzzle and its variations are where my interests lie and I hope to learn more about that in fellowship in addition to becoming adept at the use of local services for the benefit of my patients.

My desire to work with children and adolescents has been my driving force throughout my career. I would like to think that my time with Teach for America helped my students’ achieve their goals. I now hope to teach my patients and their families how to cope during critical periods in their lives so that they may overcome their obstacles and live normal lives. Hopefully, the time I spent with Tim had some impact, or at least allowed him to consider that it is time for a change.

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