

## Idai's Story

"Idai, Idai. You have to come see this." Dr. Michael calls to me.

"Yes?" I respond.

"Just come," he says. It has been a relatively slow night filled with typical, mundane ailments: a few coughs, someone with back pain, and an allergic reaction. No major accidents, no blood, no excitement. But that is pretty standard for a private hospital emergency room.

I follow Dr. Michael across the ER. An uncomfortable warmth, along with the faint smell of rubbing alcohol, still hangs in the heavy air, a reminder of the long-gone sunny afternoon. The harsh lighting intensifies each object around me, except the monochrome off-white floors and walls, which seem to blur into one another until they are nearly indistinguishable. All I can hear is crying. My stomach tightens.

"Idai, this is Tino." Dr. Michael gestures to the small boy crumpled on the sterile, white cot. He looks about three years old, but with all of his bones crushed in on each other, it's hard to tell. He doesn't scream, or yell for help. He just sits there, helplessly folded over, calling for his mom between whimpers.

I stand by the bed, watching, waiting. Dr. Michael must have asked me to come with him so I could help put in the IV. Or set a brace. I look around me, creating a mental map of the on-hand supplies. The gauze and suture kits are stored under the bed and tourniquets are stashed in a cabinet across the room. I am already planning step-by-step how I will stabilize this boy.

I turn to Dr. Michael. "So what should we do first?" I ask. He just stands there, staring at his feet. "What first?" I repeat.

He glances up at me, "Nothing." I'm sure I misheard.

"What?" I ask again.

"I'm sorry, my hands are tied," Dr. Michael replies, his frown deepening.

I turn to the family. The mother's eyes are wide. Her breaths are ragged and her face is flushed. "Do something!" she implores between sobs. I just look at her. I don't know what to say. She speaks in Shona. I am the only person working in the ER who speaks Shona, which means I have to be the one to tell her that her son is going to die. I have to be the one to tell her that her son is going to die not because we don't have the resources to save him, not because our doctors don't have the proper training, but because of something utterly out of this boy's control: money.

South African law dictates that private hospitals can only operate on patients who are unable to pay if they are dying precisely at that moment. It isn't enough that this boy fell three stories off a balcony. It isn't enough that he broke all his limbs and desperately needs scans to check for brain damage. It isn't enough that his parents drove for over an hour to get him to the hospital. None of that warrants us saving him, all because in this exact moment, he technically is not immediately dying, and his family doesn't have the money to compensate for that fact.

I don't know how to tell his parents that their son's life isn't worth as much as other people's, that society values those with means over those in need. So we do what we can. I give him medicine. Dr. Michael gives him stitches. And then we slot him and his parents into an ambulance, close the doors, and ship them off to the nearest public hospital. A hospital where his parents will sit in

agony, watching their son suffer. A hospital where he will need to wait three days before receiving any care. A hospital where he will die.