

EXPERIENCE—ELLEN TALIAFERRO, DALLAS PHYSICIAN STRIVES FOR A VIOLENCE-FREE SOCIETY

Emergency physician Ellen Taliaferro founds the Violence and Intervention Prevention Center, which provides services for victims of violence.

Twelve-year-olds shooting each other for jean jackets?” Something inside me snapped one day as the paramedics rushed a gunshot victim into the San Francisco General Hospital Emergency Department. That was it—I had to take action.

A decade ago, I began to dedicate my life to violence prevention. As a faculty emergency physician, it made sense: Why spend all our time patching people up when we could prevent the damage in the first place? Shortly thereafter, Dr. Patricia Salber and I co-founded Physicians for a Violence-free Society, a national organization aimed at heightening awareness of victims of violence and developing leadership among healthcare providers. My official journey in the world of violence-prevention had begun.

When I moved to Dallas, I became a faculty member of the Division of Emergency Medicine in the Department of Surgery at the University of Texas Southwestern Medical School. There I worked in the Emergency Department at Parkland Memorial Hospital and continued to be active in PVS. Our PVS activities began to focus heavily in the area of domestic violence. In 1995, Dr. Salber and I wrote a book, *The Physicians Guide to Domestic Violence*, and spoke at many conferences on domestic violence.

In early 1996, I conceived the idea to create a Parkland Center that would exclusively take care of victims of violence. At most hospitals this new and seeming outrageous idea would have been immediately rejected. However, our CEO at Parkland Hospital, Dr. Ron Anderson, an enlightened and compassionate physician as well as a visionary, provided guidance about how to form such a unique center. A small group of fellow faculty members began to meet monthly to write a proposal for funding.

It was slow going and many obstacles popped up along the way. On most days, it seemed impossible. One major benefit came through. I had the opportunity to go to the Florida Nature and Culture Center in June 1996 to present SGI President Ikeda with an award from PVS. During this visit, I received encouragement from a senior in faith. I told her that my mission was to become employed full time in violence prevention and to establish the new center. But I was frustrated. I was working hard but getting nowhere. She encouraged me to earnestly continue chanting Nam-myoho-renge-kyo and “just persist, and little by little it will happen.”

I returned home to work again toward this mission. I proposed that we name our center the Violence Intervention Prevention Center. The name stuck. By mid-1997, the proposal was finished and approved. Finishing the proposal was a major milestone, but the reality was that no action could occur until major funding was secured. At the end of the summer in 1997, I took a vacation that ended in a long drive across the western United States. During this journey, I vowed to become fully engaged and employed in violence prevention within the next 12 months.

Once home, frustration and the feeling of “being stuck” set in again. The prospect of working full time in violence prevention seemed quite bleak. My division chairman was adamant that I had to work full time in the emergency department unless significant

funding could be obtained. No funding was forthcoming. The elation of finishing the proposal gave way to the reality of “no money, no mission.”

Much of my despair was from the frustration of knowing that funding for such a project could be obtained from various foundations and agencies in the Dallas area. However, faculty members are not allowed to approach these funding sources without approval from the development office. That approval was not forthcoming for many reasons. I was simply stuck. Chanting and persistence sounded good, but the reality was that I was getting nowhere

Once more I sought encouragement from another senior in faith, sharing with him the ensuing frustration of “getting stuck.” He remarked that my previous guidance was absolutely correct. What was missing was the understanding of converting chanting and persistence into the realization of my mission. The missing key, he said, was “bringing the Buddha to work.” Do this, he assured me, and it will happen.

I doubled my efforts and resolve. The major obstacle of no progress continued, but I persisted in focusing on bringing the Buddha to work by treating every person with the highest respect. One day, a phone call came from a social worker who worked with a local agency that helped survivors of human torture become legal citizens of the United States. Many of her clients arrived in this country with only their shattered lives. When they became sick, it was very difficult to get them taken care of. Someone had told her that I might be able to help her get her clients into the Parkland system.

We talked for a long time. I was impressed with her concern for her clients and her never-quit spirit. Still, every suggestion I had for her was met with the fact that she had already tried that route and had met frustration. She told me about finally getting a patient registered and then going through an all-day ordeal when the patient needed to have blood drawn for a laboratory test. Unfortunately, this particular patient had been previously tortured with needles and became hysterical when a needle was introduced to draw his blood. The health workers dealing with the patient became frustrated and demanding, which made the patient’s plight worse. When I heard this, I blurted out, “If only we can get the VIP Center open!” Here was a proposed center that could teach doctors and healthcare workers how to work with such patients.

She was immediately intrigued by the idea and asked many questions. “This is just what our clients need,” she said and requested information in writing about the project. She wanted to give it to her sister who was the executive director of their family foundation. A jolt of hope shot through me. My job prohibited faculty from approaching a foundation, but there was nothing in the rules to keep me from singing like a bird if approached by a foundation.

The information about the proposed VIP Center was quickly furnished, but once again, the drab reality of no activity ensued. The excitement faded. Two months crawled by. Time was running out for me to find the opportunity to make my dream come true in Dallas. Reality was reality. Perhaps I had the right idea in the wrong place?

I put my house up for sale and began to think about returning to San Francisco. I had mixed feelings about this. On the one hand, I was very homesick for northern California and my family. On the other hand, it was hard to let this magnificent opportunity to start a one-of-a-kind multidisciplinary major center slip away. A wise co-worker scoffed at me. “Ellen,” she said, “there are many people in San Francisco who do this work. San Francisco doesn’t need you. Dallas needs you.” It was good encouragement—but just

that, encouragement. Still, the clock of no change ticked incessantly in the background. Another two months went by.

Early in May, I wrote a letter to my old chief at San Francisco General Hospital. It began, "Dear Alan, remember when I left and you told me if I ever wanted to come back to let you know?" For good measure I faxed the letter as well as mailed it and awaited Alan's usual quick response.

That afternoon I was out of the office when my pager went off to indicate that I had voicemail. "It must be Alan," I thought. I was wrong. When I retrieved the voice message, it was from the executive director of the Harold Simmons Foundation. She was interested in the proposal and wanted to meet.

The rest, as they say, is history. Within the month, we were notified that the foundation would provide full funding for the creation of the VIP Center and its first two years of operation.

As the medical director for VIP, I represent the center to the public. I also have my hands full teaching and doing outreach, on top of making myself available to train or assist fellow physicians and physician assistants, as well as seeing patients.

The VIP Center has now been open for more than a year and a half. During this time, we have had the opportunity to serve and learn from many patients who have sought the services of the clinic, including victims of torture and domestic abuse. We are doing our best to provide holistic care by assessing and documenting physical and emotional injuries, providing a safety plan, spiritual and emotional support, and follow-up care. Equally exciting is that we are networking with other organizations in the community to provide the most comprehensive care possible. Local press and news coverage has been very supportive of our efforts and has frequently highlighted our work, which has helped spread the news of our center to many victims of violence.

We have started research activities that we anticipate will make a major impact in preventing domestic violence. In the future, my dream is to start a violence-prevention fellowship for physicians and professionals in other healthcare fields.

Every day I go to work, I am mindful and thankful for another day to bring the Buddha to work. In the true spirit of never give up, our work continues. We plan to become a national demonstration center and help many hospitals throughout the nation start their own VIP Centers. After all, why just bring the Buddha to one workplace?