

"Heart Work"

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The first time the chest pains came, I chalked it up to indigestion. I went to my doctor. Watching the snow fall outside, I walked faster and faster on an EKG treadmill. This wasn't a test anyone wants to fail. I was racing against time in so many ways. Diagnosis: anxiety. I remember posting about the situation on social media, and feeling shocked by the number of academic colleagues who sent private messages about similiar experiences. To a one they said it would end when I got tenure.

As a first-generation college student, I had many things to learn about how college "works." One might imagine that things got easier the more time I spent in the academy, but at each new stage, I had new lessons to learn and new cultures to negotiate. In graduate school, a master's program and then a different PHD program, the stakes of not understanding the culture seemed to escalate. Getting a faculty position, one on the tenure track, might have seemed to some to be the end of my concerns. It wasn't.

The expression "publish or perish" is an incredibly stressful principle. A professor has 7 years to earn tenure, but in reality, it is more like 5 years. You have to do all the requisite work in time to go through a

process that takes a full year. You can fail once, but you can't go past the 7-year mark. So, you apply for tenure at the end of the 5th year, and, if you are unsuccessful on your first try, you immediately reapply at the end of your 6th year. Much of the time you feel like you are living in the shadows of those who have proven themselves worthy—those who have already earned their admission into “the club.”

Since I have always suffered from imposter syndrome, (the sense that I don't really belong—that I just got lucky), the stress began pretty much on day one for me. Every moment that I wasn't working on research felt like a failure. Over time those micro-failures began to take a toll, not just psychologically, but physically.

Over the next few years, new symptoms began to appear. The timing always seemed arbitrary so it was possible to ignore that my health and my work were so interrelated. Then the first of six ER visits happened. Thankfully, each time I would learn it wasn't a cardiac event, but I endured some extremely frightening tests and experiences. The last two times, the doctors were pretty certain I was having cardiac issues. In my last visit, in Chicago miles from home and family, I had a lot of time to reflect. I remember staring into the lighted hallway outside my cardiac care unit room. My legs were enveloped in pulsating wrap to keep me from developing an embolism.

My toes poked out from the sheets. Was a job really worth this kind of stress? And why were some of my colleagues dealing with the process better? I remember that Maya Angelou once said, "You many not control the event that happen to you, but you can decide not to be reduced by them. When I was being discharged, exhausted and trying to figure out how to get an early flight back home. I asked the nurse if I could keep the disposable EKG hook-up cords. They still hang in the corner of my office to remind me to think about work stress, but also to think about the work stress of others.

From that day, I decided to consider how there are many people who are "immigrants" into the academic culture. They need to learn the customs and the language to be productive and happy members of the community. And while tenure must be a rigorous process, it needn't be a torturous one. For me the experience of "heart pains" was one that redefined my interactions with others who are now on similar paths. I try to have an open heart and check on the hearts of those around me—a metaphorical kind of open-heart surgery. I also committed to ask questions about processes and procedures and offer to suggestions for how to make them more inclusive. In the end, all of us need to engage in this "heart work" as part of our professional lives, looking for immigrants who are lost and need help finding their way.