

Why did you choose to be a Doctor?

I 'decided' to be a doctor when I was in primary school. It seemed like a good idea at the time – and luckily still does, though my rationale has definitely changed. I am really interested in how things work, how all the little things that make up intricate systems can function together and how we can use scientific principles to understand and ultimately manipulate those systems to bring greater health to a person. Medicine is the ultimate problem solving challenge. The fact that we can improve people's lives is an incredible privilege and noble cause, and the best feeling in the world. But I would say if my sole motivation was to help people I would probably be a nurse.



this issue
Dr Tessa Kennedy

Charming Babies, The Alliance and cheese.

A big thank you to Dr Kennedy, who probably thought we'd forgotten she had detailed these responses to us. As always, Dr Kennedy's responses are considered, timely and full of esprit.

What has been one of the highlights of your career so far?

As a paediatric registrar I've watched hundreds of babies be born. Every time I witness a birth it's hard not to get swept up in the emotion, but my favourite moment is when a macho "head of the bed only" dad forgets about all that and cries with joy as he holds the hand of his tiny little human. My other favourite moment was farewelling a beautiful little toddler whose parents had been told she would almost certainly die, or survive with profound disability, give me a hi five me and walk out of the hospital, three months after I looked after her in ICU.

How do you believe NSW Health can do things better for JMOs?

Let me count the ways... no, actually I think they truly want to make things better for JMOs, but have to do a lot with diminishing funding and don't always know what will help. For me, Goal 1: Safe Work Hours principles and fair pay for fair work to be incorporated into the award. Goal 2: remove structural gender discrimination by giving equitable parental leave, make part time or job share friendly positions the default, and give length of training contracts. Goal 3: progress practical changes to reduce bullying and harassment in our hospitals.

Was it difficult seeing the responses coming in to the HHC?

Frankly, yes. I was stoked to see fantastic engagement from >1000 DiTs completing the survey last year, but really saddened, if not surprised, by so much fear and exhaustion expressed in many of the comments. We are still working through them all and will continue to use these experiences to direct our advocacy, it just goes to show how important this work is.

Why is being part of a Union important to you?

Because we are stronger together. In everything as humans this is true, but particularly among caring, compassionate, 'don't want to cause trouble' health practitioners who are mostly just trying to do their best for patients, thrown into a very big, hierarchical system that can be intimidating and not always kind.

"The Alliance provides a strong backing to say 'Now wait a minute – that's not ok'."

Plus, it's much more effective when we pay professionals to run industrial campaigns, manage media and politics... we can't stop getting paged.

If you weren't a Doctor, what would you be doing instead?

I used to say meteorology – love the idea of chasing storms, but actually if I weren't in health I think I'd learn to code and do something techy or research based. Makes sense with the whole problem solving, complex systems understanding thing. I do a little bit of it for stats programs and it's very satisfying when it works. #nerdexcitement

What do you do when you aren't working?

After my paid full time job (Paeds reg) and unpaid part time job (DiT Committee Chair) are finished for the day, it's equal parts Body Attack and eating my weight in cheese: the former purely to facilitate the latter and hopefully not die by 40. Too much still to do!