

Making A Difference

Marvin L. Birnbaum, MD, PhD

Culture—the customs, civilization, and achievements of a particular time or people.¹

The triumph of culture is to overpower nationality.
Emerson: Uncollected lectures: *Table-Talk*

All of us hope that our life will make a difference. But, how and what we wish to accomplish is highly individual. Our goals may be personal, global, or a combination of both. If any portion of the “difference” you wish to accomplish is in the realm of *humanitarianism*, you are in the right place.

In 1998, in an editorial penned after the remarkable World Congress for Disaster and Emergency Medicine convened in Mainz, Germany, I defined humanitarianism as: (1) *that quality of a human being that is committed to the caring for humanity especially as manifested in those who have become victims of circumstances beyond their control; the personal quality of a true humanitarian; or (2) that quality of caring about humanity and its state of being; an essential element for peace.*² What was considered important then is even more important today. The needs for humanitarian actions become progressively greater as the number and severity of disasters caused by natural or human-made events continue to increase. Almost instantaneous communications between any points on the globe, combined with the ability to be transported rapidly to and from every corner of the world makes us, at least potentially, part of each disastrous event.

As our virtual world shrinks, we become closer and closer to one another. No longer is it possible for us to remain isolated in our own culture with its languages, customs, and beliefs. Globalization, as it is called, forces us to interact. It brings diverse cultures and beliefs face-to-face. This is bound to cause conflicts as we find it necessary to defend our beliefs from those who we perceive threaten the essence of the culture we hold so dear. Often, these clashes in ideology result in inter-human conflicts. Such conflicts always have been a part of human existence. How many wars have been the result of conflict between cultures and beliefs? How many have not?

This is becoming progressively worse: today, inter-cultural conflicts are responsible for more deaths and human suffering than all of those caused by natural and technological events combined, despite the almost exponential increase in the frequency and severity of these

events. Our shrinking world seems engulfed in despair and is desperately in need of greater humanitarianism. In inter-cultural clashes, no one wins the battles; it is not possible to mend inter-cultural differences by the use of force. Such actions only widen the differences and do not enhance understanding and tolerance. History has shown repeatedly that cultural change cannot be created through the use of force. Tolerance happens only through understanding and acceptance of each other's culture and beliefs. Without these, peace is not possible.

Is it possible for each of us to positively impact this circumstance? What can we, in medical professions, do to foster understanding, acceptance, and peace? When contemplating about this terrible state of the world, I repeatedly turn to the model life of Dr. Peter Safar. In the midst of the Cold War with its pervading nuclear threat, Dr. Safar was instrumental in the formation and activities of the Physicians Against the Use of Nuclear Weapons. Moreover, in at least two ways, he bridged the Iron Curtain. He linked his research in the resuscitation sciences with Dr. Negovsky's work in Moscow, and together, following the 1988 earthquake that killed more than 25,000 persons, they initiated cooperative, hallmark research into the resuscitation potentials following earthquakes that has set the standard for disaster research. Together, they were able to successfully bridge the huge cultural and political differences across the Iron Curtain. They accepted their differences. In many ways, medicine was able to bridge these substantial differences; the differences as far as medicine was concerned were minimal. Indeed, medicine can do much to enhance understanding and acceptance between cultures, and promote peace.

Since this realization, I repeatedly have expressed my fascination with the absolute lack of barriers between the delegates who have attended the regional and World Congresses on Disaster and Emergency Medicine convened by the World Association for Disaster and Emergency Medicine (WADEM) as well the multitude of other international medical meetings and conferences.³⁻¹⁰ This special psychology, humanitarianism, is pervasive in these settings, and could serve as a model for the rest of the world. Opposition to human suffering (whether natural or human-made) is universal within the disaster medicine community. I quote from a previous Editor's Corner:

...what is it that so specially separates these persons from others with whom we interact? What is it that makes disaster workers such special people—these persons who devote a major part of their life to the medical responses for those stricken by an unfortunate set of circumstances far beyond their own control (whether it be a disaster or multi-casualty event, a complex human emergency)? Certainly, they fit the definition of humanitarians. But why do they worry and plan and commit themselves to helping and caring for those victims of a circumstance that was beyond their control? There is no pecuniary advantage; it is not something they must do only because it is as a function of their job. There are no external awards: no medals, no recognition. Often, they place themselves at peril for the good of others. Yet, they accomplish their respective missions and quietly go home. What is it that drives them?

By most standards, their's is a peculiar psychology. It unites persons from every corner of the globe. It cements relationships between persons of profoundly different cultures. It engenders respect for each other regardless of their culture, background, or language. It manifests in the excitement one feels in seeing and being with each other. It is the thread that binds us and the world together. Where it is absent, there is chaos—where it is present, chaos melts into caring...²

Since writing the above, much has happened. Recognizing that the WADEM can serve as a model for the rest of the world, the WADEM has stepped forward and reorganized to address many of the barriers that have separated diverse cultures. Through its Task Forces and standing Committees, it is attempting to gain an understanding of these barriers. One must recall that disasters are a global issue and the events that cause them are universal and are dealt with by those who practice humanitarianism, regardless of national or cultural origin. Humanitarianism brings people together. Together, we address the problems of the world that affect all aspects of humanity. We seek solutions. Together, we can gather the strength to generate change and reach for peace.

This is the unifying force that becomes apparent at WADEM's World Congresses. It will pervade during the 14th World Congress for Disaster and Emergency Medicine to be convened in Edinburgh, Scotland in May 2005. If you are reading this editorial, you believe in the ideals of humanitarianism. If you have not yet shared this strong feeling and commitment with your humanitarian colleagues, please join us in Edinburgh. Your participation likely will enhance your life. You can make a difference, but only if you participate. I look forward to working and sharing with you in May.

The essence of a self-reliant and autonomous culture is an unshakable egoism.

HL Menken: *Prejudices*. Ser ii. p 93

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