

Journal of Health and Human Experience



*Holocaust-Remembering
Then...Now...Always*



Special Notation & Attributions

This edition of the Journal raises up this year's 80th anniversary of various horrific events of the Holocaust. As such, the front cover of the edition calls attention to these remembrances with a photograph of one of the Stumbling Stone Memorials in Europe that honor those who lost their lives during the Holocaust. The front cover photograph is adapted from the original 2019 artistry of Kadir Celeb of Berlin. It is in the public domain and free for usage from Unsplash per: <https://unsplash.com/photos/sQLurGgw1SA>.

The photograph used for the divider page is a reminder of our common call to remembering. The photograph is the artistic work of Tobe Roberts. It is a Pexels free stock photograph as found at: <https://www.pexels.com/photo/woman-touching-a-black-wall-1103093/>.

**Journal
of
Health and Human
Experience**

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The Journal is an interdisciplinary, academic, peer reviewed international publication. Its mission is to explore the full expanse of holistic and integrated health within the nature and meaning of human experience. Its scholarly and professional explorations richly convene all possible areas within the arts/humanities and the sciences, cultural and social concerns, diverse technologies, ethics, law, civil rights, social justice, and human rights. The Journal invites the reader into the fullness of our human nature, our history, and the expanding futures before us.

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MISSION

The Semper Vi Foundation



“From Victim to Survivor to Victor”

Mission: The Semper Vi Foundation is a 501(c)(3) tax exempt public charity dedicated to the design, development, implementation, and promotion of social justice and human rights resources, programs, and diverse opportunities in education, publishing, research, and services that help the suffering find healing and meaning in their lives. Of particular interest for the Foundation’s mission is Wounded Warrior Care and, equally, the care of all those who suffer in our wounded world.

Vision: Semper Vi reaches out to all who have known the many forms of life’s suffering and tragedy. Semper Vi activities and opportunities seek to help all those who suffer, not only to survive, but also to become victorious so that their wounds become sources of healing for others. Semper Vi assists those who have benefited from our programs and activities to help others in need. Some of those who benefit from Semper Vi’s humanitarian and relief commitments include our Wounded Warriors and their families, as well as individuals and communities who have experienced violence and terrorism, victims of assault and destruction, those who have suffered discrimination and the loss of their human or civil rights due to religion and values systems, race, gender, sexual orientation, socio-economic status, national origin and ethnicity.

Values: Those who become involved with Semper Vi programs practice the Foundation’s three core values: *Learning*, *Healing*, and *Serving*. Foundation participants seek to show those who have suffered that healing can be theirs especially when their stories and experiences become sources of comfort and care for others

Programs: Semper Vi Foundation activities are organized into four programs.

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Mission

across the globe. This Foundation designs and provides workshops, seminars, webinars, podcasts, full conferences and continuing education courses at various international locations. Depending on resources, events are filmed and posted on the website.

Publication: The Semper Vi Press publishes the Journal of Health and Human Experience. It also publishes a wide variety of academic and professional books, periodicals, newsletters, and other resources serving the Foundation's mission and constituents.

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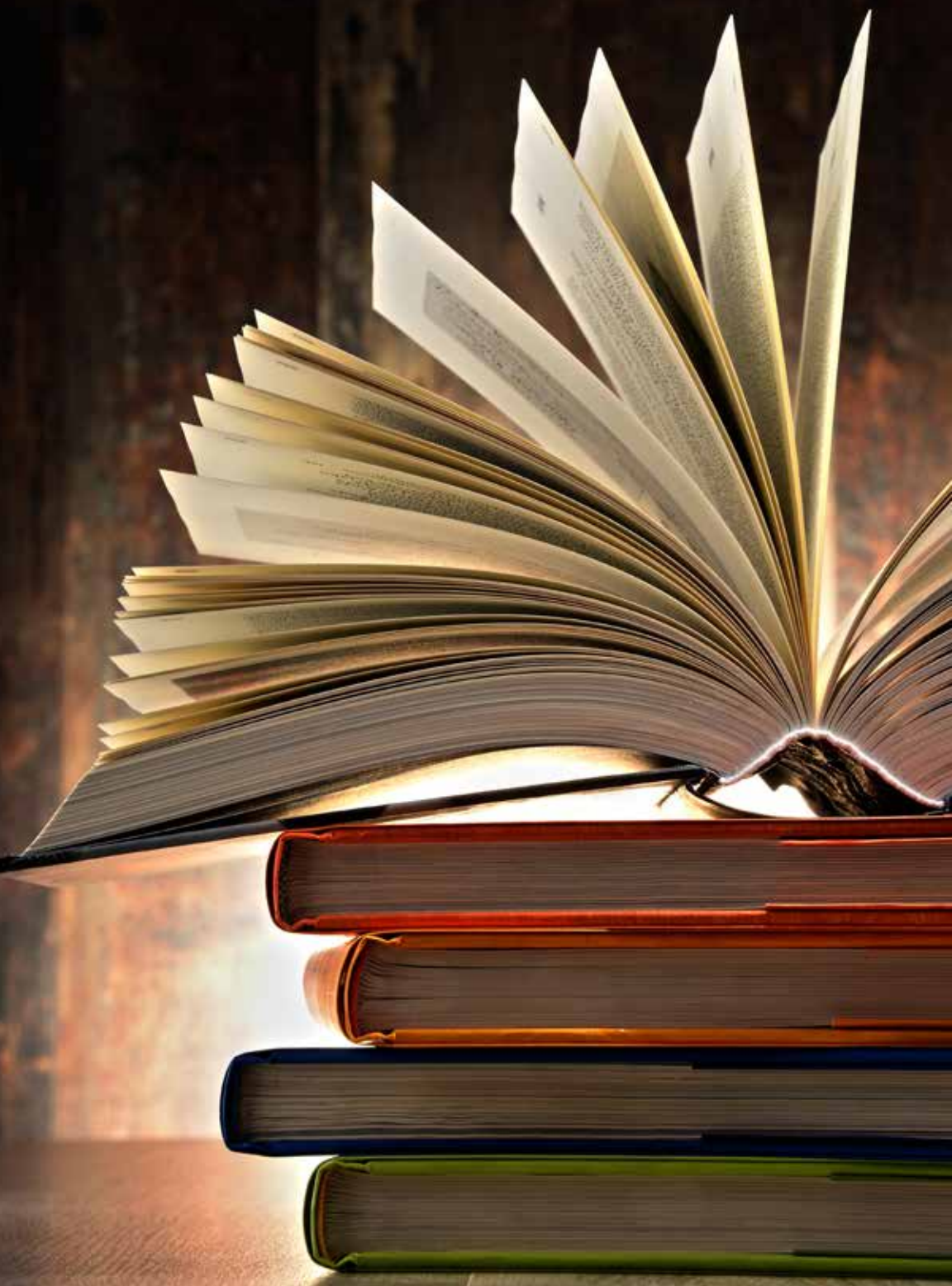
Social Justice Services: The Foundation serves as a gathering point for individuals and communities who design and promote diverse social justice services and resources supporting human and civil rights. The Foundation supports already existing approaches and promotes the invention and launching of new services to meet emerging social justice needs across the globe.

Reflection: Tales of heroes abound throughout world literature. Our attention is always captured by the stories of those who accomplish great deeds that benefit others and the world. Yet what is it that we mean by the term, "hero?" When is something "heroic?" A hero is one who, despite danger and weakness, musters the courage to sacrifice herself or himself for the needs of others. Sometimes this comes at the price of the hero's life. However, in all instances, the hero vanquishes the danger and rises above it as victor. Yet there is another nuance. The work of the hero often goes deeper. In many tales, the hero not only fights the oppressor, but also suffers grievous wounds in doing so. The hero embodies the suffering and takes it into her or him self. The hero endures and survives. Yet even more amazingly, in these stories the suffering and pain are transformed from curse to blessing. The hero matures from victim to survivor to victor! The hero becomes "*semper victorius!*" Always the victor!

Invitation: Join us as we build Communities of Victors, for today and tomorrow!



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Jan Herman, MA, holds a master's in History from University of New Hampshire where he also studied under a Ford Foundation Teaching Fellowship. He is the retired Special Assistant to the Navy Surgeon General for Medical History and Archivist. He has produced many Navy Medicine historical documentaries including "*The Lucky Few*" premiered at the Smithsonian in 2010. He is the 2015 recipient of the lifetime achievement Forrest C. Pogue Award for Excellence in Oral History.

Preface

De Fischler Herman, RP, SD, SM, is a rabbinic pastor and facilitator of Age-ing to Sage-ing® programs. She served as hospice chaplain, taught Jewish bioethics, and currently serves as Director of Studies for ALEPH Ordination Program's rabbinic pastor students. She presented at Smithsonian ethics education conferences and the Tuskegee National Center for Bioethics in Research and Healthcare. She is a climate crisis activist in the Jewish Earth Alliance as well as the Takoma Park community.

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Julie K. Zadinsky, PhD, MSS, RN, is Associate Professor and Director of the Center for Nursing Research in the College of Nursing at Augusta University, Augusta, Georgia. Dr. Zadinsky has a clinical background as a pediatric nurse. She also held several administrative and research leadership positions in the United States Army before retiring in 2010 after 30 years of service.

Michele Savaunah Zirkle, MA, PhD, is a published author, holistic practitioner, and life coach. A regular contributor to *The Journal of Health and Human Experience*, *Two-Lane Renaissance* and *Mindful Writer's Anthologies*, Dr. Zirkle is best known for her inspirational stories of personal transformation. After twenty years of teaching high school English, she now teaches self-empowerment and healing to all ages in workshops and through her writing.

PRELUDE





Breaking The Chains.....Freedom's Forever Call

Dr. Edward Gabriele

Editor-in-Chief and Executive Director,
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President and Chief Executive Officer,
The Semper Vi Foundation
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"We're born to love; we learn to hate. It's up to us what we reach for."

— Dr. Edith Eva Eger
The Gift: 12 Lessons to Save Your Life

As we all know, innumerable anniversaries occur throughout each and every calendar year. Whether they recall personal events or those of family, social communities, nations, or the entire world, anniversaries have an obvious importance for us all. From the time we are born and throughout our lives, they capture our imaginations with growing importance. Many call to mind wonderful moments of joy and celebration. Others, however, raise to our consciousness critical moments of pain and even horror. And as we mature as individuals and members of our communities, the importance of such remembrances grows and develops with increasing understanding. The older we become, the more we begin to realize the incredible depths of meaning in the anniversaries that occur throughout each year of our lives. Very often they raise up to us not only moments to celebrate but also moments that need us to look deep into ourselves and our world and to be strengthened for critically needed change. Such is most striking in this particular year.

This year marks the 80th anniversary of many of the horrors of the Holocaust. These include the beginning of the nightmares at Auschwitz II-Birkenau including the murders of so many Jewish, Gypsy, and other diverse nationalities of women, men, children, and even newborns. Such remembrances move us to ask ourselves how such anti-humanities could have occurred then --- or at any moment in human life. The horrors of the Holocaust can never be forgotten. They remind us of the chains of hate and discrimination that lock people from their right to freedom, justice and peace. And we are well aware that such events have been evidenced in many other moments of history, both far away as well as close to home!

During the same World War II period of time, the horrors of hate's paranoia emerged here in the United States. After the bombing of Pearl Harbor and the beginnings of the war in the Pacific, many Japanese individuals and families, including those who were US citizens, were removed from their homes and incarcerated in internment camps. They lost their homes, their businesses, their funds, and most of all their honor and dignity. This year marks the 80th anniversary of the beginnings of those horrific Japanese internment camps in 1942 which remained open and in usage until 1945. Of particular importance, this anniversary of the incarcerations of our Japanese sisters and brothers clearly reminds us that the devastations of hate and discrimination are not far from home. Not at all! In fact, in this awareness, other anniversaries also remind us how important it is to remember that such paranoias are always possible near, closer, and even deeply within our very own individual selves.

Prelude

Continuing this deep reflection, it is important to remember that this year also marks the 50th anniversary when in 1972 the brutal realities of the Tuskegee Syphilis Study became known to us all. We discovered that the study's actions were being perpetrated against Black men starting 40 years before in 1932. And with this discovery we became painfully aware that the horrors of hate, discrimination and the inhuman usage of people were not limited to wartime events such as occurred in World War II in the concentration camps. Indeed, the chains of hate and discrimination can be found in every time period in human history. Whether due to the addiction to power and domination or other reasons, something always seems to have happened in each period of history that led one group to bind up others, chaining them in subordination, and robbing them of their absolute human right to live in the fulness of justice, peace, happiness, love, freedom, and life itself.

Such hate and violence we are also experiencing today. Our lives are being brutalized by new horrors such as: the war in the Ukraine; the terrors of gun violence and murder suffered by the innocent such as have occurred at Robb Elementary School in Uvalde and in so many other locations; the rise of hate crimes and discrimination against Black, Latinx, Muslim, LGBTQ+, and so many other individuals and communities; the denial of human care sought by refugees and victims; the continued abandonment of the poor and the homeless; and the denial of equal rights to women and other individuals. The rise of what feel like new holocausts is affecting us all. Indeed, the chains of hate and anti-humanity are gripping our lives with new forms of demonic power and insidious strength.

Without question, the chains must be broken. But how? And to what end?

Certainly, in our nations and across the globe, we cannot permit tyrants or absolutes to put into practice the horrors of slavery, abusive usage, hate, discrimination, or the taking of life. We cannot tolerate holocausts of any kind and the dehumanization of others due to prejudice of any form. We have to do everything in our power to bring to an absolute end the terrors we are experiencing today. We must do everything to stand up, resist and fight such anti-humanities that are coming again into our experiences. Indeed, the chains must be resisted and broken. Yet we must ask ourselves: How and why do these chains continue to come into being? What is it that seems to bring these chains back into existence again and again?

As the opening quotation of this reflection says, as human beings we are born to love. Yet we learn otherwise. Though newly born into love, yet many of our experiences from the time of birth lead us to fear and hate. And such moments are increasingly underscored as we grow and develop and step through the walkways of our lives. Indeed, the experience of being chained happens to us all. And then many times we subconsciously come to believe that our chains will be broken if we bind up others and ensure they are beneath us as we seek to rise to any and all forms of self-importance and domination. Indeed if we want to break the chains of hate and raise up one and all to freedom, then we have an important internal calling.....the call to find within ourselves in every period of our lives where we might be enchained and to see the ways to have our own chains broken forever and always.

Indeed, we must break the chains within so we never break the bonds to which we are called and which offer us the exhilarating joy of what it means to be human with one and all. But this can only occur if we take the needed moment of courage to search deep within our own being with utter honesty and dedication to making the choice for The True and The Good

This edition of the Journal calls us to remember all the anniversaries of hate and discrimination in our history. However, we cannot recall them just mentally as calendar events of sorrow. Most deeply, all such anniversaries from every time and place are powerful remembrances of the past so as to lead us to a far better today and a tomorrow when every moment for every person is made not only The Possible but The Reality.

Indeed, will we look within to find our chains? Will we commit ourselves to break today our own chains so as to set free our hands and hearts? What choices will we make for ourselves, for others, and for our world? How will we open up our whole selves to bond with all others in the freedom that is our right and responsibility as members of our human community?

Are we ready to love more deeply? What choices will we make to do so?

Are we ready to make them?



Special Notation

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ARTICLES &
COMMENTARIES



The Case for Tutuian Ethics of Critical Leadership

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*“Sometimes strident, often tender, never afraid and seldom without humour,
Desmond Tutu’s voice will always be the voice of the voiceless.”*

— Nelson Mandela

Author Note

This article is based on the author’s formal education and experience in military, social sector, and government organizational leadership. The opinions reflected in this article are those of the author and do not reflect the official policy of any institutions the author has served or currently assists. The author has no conflicts of interest.

Abstract

Archbishop Desmond Tutu redefined leadership ethics with his unwavering focus on humanity, social justice, and belief in the inherent goodness of people. Even when confronted with profound evils, such as apartheid, government corruption, and religious persecution based on gender and sexuality, Tutu maintained a “consciencism” that placed humanness at the center of conflict to inform his worldview on social issues. While his approach often made him an enigma to his critics and observers, his was a lifeworld shaped by exposure to humankind’s contradictions on a global scale during his formative years, making him a reflection of a world where moral certitude appeared to have no place yet would often show itself during the unlikeliest moments. Tutu’s critical approach to ethics and leadership serves as an important model for study and emulation in times that may have changed although the lessons keep repeating themselves.

Keywords: Tutu, apartheid, ethics, humanity, leadership, Africa, Holocaust, genocide, morality

Introduction

Archbishop Desmond Mpilo Tutu, most regarded for his activism to end apartheid in South Africa and human rights violations around the globe, was born into the “Silent Generation” on October 7, 1931. This generation, which included outspoken figures such as Dr. Martin Luther King Jr. and Muhammad Ali, was shaped by a constellation of world events that have been seen neither before nor afterwards in the modern era. The Great Depression, the threat of Naziism, the atomic decimation of two Japanese cities, and the rise of Communism--all conspired against the hope of the youth at that time.

This generation, silenced by the horrors of humanity’s unmitigated capacity for evil, would locate its identity within the calm center of this global storm where, in the words of Dr. King,

“We must accept finite disappointment, but never lose infinite hope.” This was the worldview that Archbishop Tutu, a man who was once described as layered with “contradictory tensions” (Du Boulay, 1998), brought to the chairmanship for South Africa’s Truth and Reconciliation Commission in 1996.

Apartheid, or “apart-hood” in the language of the Afrikaner descendants of the Dutch and Huguenot settlers in 17th and 18th century South Africa, was a contradiction unto itself. The seeds of apartheid were planted by the Natives Land Act of 1913, a law that outlawed land purchases or leases by Black “natives” in South Africa (Collins & Burns, 2007). Jacobus W. Sauer, an influential politician at the time the bill was introduced, made a name for himself by lobbying against oppressive prohibitions placed on Black natives while embracing separate residential living between the races during parliamentary debate on the measure (Feinberg, 1993). Similarly, John T. Jabavu, a Black activist and newspaper editor during the same period, railed against the growing threat of an Afrikaner takeover while also embracing the very law that would become a precursor to apartheid.

To understand human nature is to suffer a fascination with contradiction, as men like Archbishop Tutu embody. This embodiment laid the groundwork for a leadership ethics custom made to reconcile the seemingly irreconcilable.

A Clash of Truth and Reconciliation

The Truth and Reconciliation Commission’s charter, according to Dullah Omar, then-Minister of Justice in President Nelson Mandela’s cabinet, was designed to facilitate “a necessary exercise to enable South Africans to come to terms with their past on a morally accepted basis and to advance the cause of reconciliation” (Watson, 2007). For some at that time, “come to terms” meant revenge. For others, it meant reparations, with many straddling both end games. In any case, closure needed to come at a cost to the oppressive apartheid government in the minds of many, where history served as a warning for the future, not simply a record of the past. It was a history defined by the codification of territorial segregation and the forced removal and relocation of Black South Africans into “reserves,” just as WWII and the Great Depression exacerbated frictions around the world that ran along ethnic and cultural fault lines.

Oppression on the part of the apartheid regime in South Africa, the Afrikaner National Party, entailed restrictions on interracial marriage, mandated “pass laws” that forced Black Africans to carry documents authorizing them to move about restricted areas, and the extrajudicial killings of innocent Black men, women, and children on the basis of race. In 1960, 67 Black people were killed and another 180 were wounded after police opened fire into an unarmed protest in the Black township of Sharpeville. The following year, Nelson Mandela was arrested, tried, and convicted as the leader of a militarized faction of the African National Congress, the Black-led response to end apartheid that operated “between the anvil of united mass action and the hammer of armed struggle” (Danaher, 1981). Mandela would surrender 27 years of his life for the cause of anti-apartheid before tasting freedom again.

This history lay before Archbishop Tutu, who happened to be a dear friend of Nelson Mandela, as he assumed the chairmanship of the Commission. Tutu’s bias for social justice and consensus building, as the lenses through which he sought reconciliation on a host of issues, had

preceded him. He had overcome his own resentment toward White authorities in the wake of apartheid as faith and spirituality became the connection to others that transcended the social constructs of race and status in his view while studying theology in London (Gish, 2004, p. 34). During these travels, he began to note common threads among people from all walks in his pursuit of better understanding humanity.

Case in point, Tutu analogized the anti-apartheid movement in South Africa to the Prague Spring in Czechoslovakia in 1968. Also, he defined Ugandan President Idi Amin's expulsion of Indian Asians of Ugandan descent in 1972 to what apartheid looked like when Black leaders were the oppressors ("Asians," 1972; Allen, 2006). Sociopolitical liberation transcended race in Tutu's lifeworld, which also made it the very tangle of contradictions he would confront and become as a champion for the voiceless. It is within those contradictions where Tutu would take more solace in conflict bound to goodness than comfort laced with loyalties or the material trappings of rulership.

By the time the Truth and Reconciliation Commission had concluded its work, nearly 850 petitioners were granted amnesty while over 5,300 other petitions were denied after hearing from or identifying over 22,000 victims of human rights violations related to apartheid ("The Truth," 2002; "Department," n.d.). On its face, the former state-sanctioned apartheid authority had perceptively received its comeuppance as victims were restored by the Commission, as much as could be expected, with Tutu at the helm. However, the narrative, and Tutu's faithful adherence to a distinguished ethics of critique, would be incomplete without giving due attention to the framework through which justice was served, care was demonstrated, and professionalism was defined by an objective, principled focus on the desired outcome--truth and reconciliation--beyond the processes and politics involved.

Whether this approach entailed preempting "victor's justice," where the side that won was held to a standard of lesser accountability, as was seen during the Nuremberg trials when Allied atrocities escaped prosecution (Wiegrefe, 2010), or calling for forgiveness of oppressors from victims pursuant to the emphasis on healing behind restorative justice (Gade, 2021), choosing "right" over "easy" distinguished Tutu as a leader among leaders. Thus, this framework and approach would also define a new template for leadership steeped in a counterintuitive yet universally sound philosophy of human-centered ethics.

Tutuian Philosophy Examined

The titles alone of the many books authored by Archbishop Tutu give an indication of what centered his philosophical worldview. "The Rainbow People of God: The Making of a Peaceful Revolution," "No Future Without Forgiveness," "The Book of Forgiving," and "God Has a Dream: A Vision of Hope for Our Time," just to list a few. His enduring criticism of patriarchal culture and inclusion of gay rights in his religious messaging made him an enigma for the institutionalists around him, who largely respected Tutu's work but saw their very identities under assault by his criticism.

When Tutu publicly denounced the corruptive dealings of Jacob Zuma, then-President of the African National Congress, he called Zuma's government "worse than the Apartheid government" because "we were expecting that now we would have a government that was

sensitive to the sentiments of our constitution,” a move Tutu characterized as “a warning out of love” (Lowman, 2016). Tutu’s dear friend and fellow freedom fighter, Nelson Mandela, was not immune to Tutu’s “loving” yet scathing criticism. In a 2003 interview, Tutu publicly admonished then-President Mandela for lavishing in the trappings of a privileged ruling class by paying exorbitant salaries to South African Cabinet ministers (Collins, 1994; Doyen, 2021). That the two men remained friends for the rest of Mandela’s life is perhaps a testament to the importance of “truth value,” even between allies.

However, Tutu’s ethical orientation was neither situational nor confined to the broader sociopolitical context in which he led, which arguably situated his ethics ahead of his time. His embrace of Aristotelian Virtue Ethics manifested in his focus on living a good life without regard for benefits, consequences, or universalized notions of what is right or just that might otherwise disturb his pursuit of inherent goodness (Jain, 2017). When Aristotle spoke of moral virtue, or *arete*, as the midpoint between one’s excess and deficiency, it perfectly described Tutu’s “settled disposition of the mind” anchored to *phronēsis*, or a practical wisdom relative to his bias for investment in humanity’s potential, even when such investments appeared wasted to those around him (Aristotle, Ross, & Urmson, 1980/1984).

Because Tutu’s viewpoints were far from authoritative, they sharply contrasted with the normative ethics that typified the political behavior of his peers, such as utilitarianism approaches that often sought to do the greatest good for the greatest number, irrespective of the consequences for minoritized voices. Or whether the beneficial ends justified a harmful means. Tutu also subscribed to African humanism and its concern for “consciencism,” a school of thought derived from the clash of African and Islamic tradition, as well as the infiltration of Euro-Christian values through colonization.

Kwesi (2017) sharply criticized the attempt to harmonize these competing ideologies, arguing that society “will be racked by the most malignant schizophrenia” (p. 186). Accordingly, one can observe the delicate manner in which Tutu masterfully came to terms with his own feelings toward White oppression and Black corruption, two sides of the same immoral coin in Tutu’s view, by making his conscience the final arbiter of conflict. Becoming comfortable with conflict, even provoking it when necessary to stir a collective conscience, was a hallmark of Tutu’s unapologetic, morally consistent approach to leadership.

The Past and Present Contextual Dimensions of Tutuian Ethics of Leadership

It is far too easy to conflate “ethical” leadership with “effective” leadership. The former is a matter of value judgment and its desired ends. The latter places emphasis on the process and what drives it. While the ideal state for a person chosen to lead is the ability to deliver ethical and effective leadership, context will often dictate which of the two surfaces, in many instances with an eye toward retrospectively determining the character of that leadership in a given situation.

Adolf Hitler, the mastermind behind the murder of 11 million non-combatants between 1939 and 1945, including two-thirds of the Jewish population in Europe during The Holocaust, proved to be a dysfunctionally effective leader who was the absolute antithesis of ethical leadership given the sheer depth of the inhumanity that drove the dysfunction. Kershaw (2000)

said of Hitler, “Never in history has such ruination, physical and immoral, been associated with the name of one man.” The problem with Kershaw’s statement, while understandable given the sheer scale of the atrocities committed under Hitler’s reign of terror, is the entrapping allure of deeming any moment as “the worst.”

One need only to scroll through the annals of history to appreciate the intergenerational nature of the marriage between evil and leadership. The colonization of Asia, Africa, Australia, and the Americas was “intrinsically genocidal” asserted Raphael Lemkin, a Polish attorney who is credited with first coining the term “genocide” in 1943 in response to the Ottoman Empire’s genocide of an estimated 1.2 million Armenians in 1915 (“Coining,” n.d.). However, that atrocity did not need a name to define itself in history, nor did the many others dating back to 149 BCE when Rome decimated Carthage at the end of the Punic Wars, becoming the consensus among scholars as the first genocide in world history (Jones, 2006).

Subsequent genocides in earlier times would follow at the hands of Rufus, the governor of Judea (Davies, 1984), General Ran Min in China (“Book,” n.d.), Dughlat in Kashmir (Hollister, 1953), as well as in modern times when Generals Julio Argentino Roca in Argentina and Lothar von Trotha in Namibia (Friedrichsmeyer et al, 1998) added to the list, all before Hitler invaded Poland in September 1939. Before mastering evil’s manifestation at the highest order, Hitler himself had to become a student of the evil his name would come to signify.

From the time actor Thomas Dartmouth Rice had blackened his face with burnt cork to become the stage character and eventual namesake of Jim Crow, or “Negro,” laws of the late 19th century in the United States, many believe his exaggerated imitations and stereotypes spurred an enduring fascination with dehumanizing Black culture (Woodward & McFeely, 2001). However, Rice had simply carried forward the residue of the Enlightenment Era, when John Locke (1689) argued that God granted the Indigenous world “to the use of the industrious and rational” and Immanuel Kant’s ([1764], 1965, pp. 110–111) stratification of color-coded races as “differentiated by their degree of innate talent” provided a historical anchor to the notion of proximity to Whiteness as a measure of human worth.

This weaponized fascination undergirded the creation of a racialized social order that would eventually take root in Nazi Germany, starting with the Reich Citizenship Law and the Law for the Protection of German Blood and German Honor (Little, 2021). However, the unceremonious removal of Indigenous Native American people, not the oppression of Black people, would serve as the true influence for the design of the Nuremberg Laws, where Jewish Germans became proxies for Native Americans in Hitler’s genocidal plan because of their pre-occupation of the Americas before European adventurism and colonization.

Even the Nazi salute, some historians argue, was modeled after the way American schoolchildren saluted the flag, with an outstretched arm at 45 degrees and palm down, during the Pledge of Allegiance in the early 20th century before a hand over the heart became the custom (Winkler, 2009). Thus, the playbook had already been written, as far as Hitler was concerned, and the only question was whether his *Endlösung der Judenfrage*, or “Final Solution to the Jewish Question,” would be as viable in Nazi Germany as similar plans had been throughout history. Kershaw was certainly right about what the name “Hitler” would come to symbolize. However, Hitler was a conduit of evil in the tradition of a long line of predecessors,

an evil that had evolved for centuries before him and continued thereafter. Confining the sum of all evils to Hitler would be to underestimate evil.

This becomes the point of reentry for Archbishop Tutu, who was an 8-year-old boy being raised by his parents in Roodepoort West, South Africa, as Hitler turned his delusion of grandeur into a fever dream for the rest of the world, including the German people. Tutu would come of age with an understanding that while the concept of evil had a clear extreme, the boundary between good and evil was often shaded by human fallibility, which became painfully apparent in his work whenever he felt compelled by his convictions to excoriate allies and forgive foes on principle, even when it would cost him political capital and influence.

“*Ubuntu*,” Tutu remarked, “The profound sense that we are human beings only through the humanity of other human beings,” a sentiment explaining why no race, political party, or country owned a monopoly on good or evil. It was a sentiment that gave words to loving context in which Archbishop Tutu viewed the world and its many problems, with a consistent, unflinching fixation on the human condition above all else, as well as his insistence that “the bad, the evil, doesn’t have the last word.”

The Age of Ethical Paradoxicality

A global pandemic in 2020 and all that followed raised new concerns surrounding ethics, as unprecedented dilemmas related to shared hardship and scarce resources collided with unresolved race tensions and rising extremism among sects. This confluence of new problems was complicated by preexisting social problems in the United States and around the globe, such as mass shootings in schools and places of worship, police brutality of minoritized citizens, catastrophic weather events that exacerbated infrastructure divestment in underserved communities, and irreconcilable chasms of mistrust between citizenries and their governments.

Nobel Peace Prize recipient, physician, and theologian Albert Schweitzer said, “The first step in the evolution of ethics is a sense of solidarity with other human beings.” Consequently, solidarity would give way to tribalism, with humanness then being defined by the eye of the beholder, thereby making leadership the place where ethical clarity would go to die. A variety of authors discuss this as they present and/or interpret the actions of various cross-party political and government leaders both national and international. For example, former United States President Donald Trump, twice impeached and variously investigated, sat in judgment of a Congress where insider trading, personal enrichment, lobbyist-funded junkets, and campaign finance breaches seemed to many to be the norm, not the exception (Brock, 2022).

This perspective also includes Democrats such as Rashida Tlaib of Michigan and Gregory Meeks of New York, as well as Republicans John Rutherford of Florida and Doug Lamborn of Colorado, all of whom joined a list of congressional representatives who had reportedly refused to cooperate with Office of Congressional Ethics investigations into their office’s activities (Hall, 2022). While other authors do raise up more examples, the previously mentioned list does not include Speaker of the House Nancy Pelosi’s alleged stock purchase right before the House of Representatives announced legislative action that would affect the market, or Senators Richard Burre of North Carolina, Kelly Loeffler of Georgia, David Purdue of Georgia, Rand Paul of Kentucky, Dianne Feinstein of California, and Susie Lee of Nevada, who either acted

insider traded information to engage in trades with companies affected by the pandemic, or failed to disclose transactions or comply with disclosure requirements (Faturechi & Willis, 2020; Burns, 2020; Seddiq, 2020; Slodysko, 2021; Levinthal, 2022).

Additionally, the United States would not be the only place where ethics essentially came down to a contest of who had the most unclean hands. Former British Prime Minister Boris Johnson was characterized by former Speaker of the House of Commons John Bercow as "ritually dishonest" and the worst of the twelve prime ministers he had known (Sabin, 2022). Former Israel Prime Minister Benjamin Netanyahu was indicted on charges of breach of trust, bribery, and fraud (Woolf, 2019). The crowned prince of Saudi Arabia, Mohammed bin Salman Al Saud, was implicated in the brutal killing of Saudi journalist and long-term resident of the United States Jamal Khashoggi in addition to being cited as a co-conspirator, along with Boris Johnson, as playing a "central and complicit role in arming and supporting the Saudi-led destruction of Yemen" (Milmo, 2019).

These are just a few of many examples where even the mere patina of ethical comportment was no longer a requirement to hold office. That being said, the difference between corrupted ethics in previous times and now is not in the audacity or level of depravity. Rather, the difference is in the virulence. Specifically, how quickly ethical entanglements on one side of the globe can now move through the social media and 24-hour cable news bloodstreams of societies around the world. Consequently, the "Overton window" further shifts across sociopolitical and cultural boundaries for leaders around the globe who, by citing The Holocaust as a frame of reference for the height of all evil, appear to assume moral and ethical cover for all perceived lesser acts by comparison--even as present-day genocides persist.

Killing fields presently exist in places like Myanmar, China, Ethiopia, Iraq, Syria, and South Sudan where people of Rohingya, Uighur, Yazidis, Darfuris, Nuer, and other ethnicities--human beings--face a real threat of extinction in those regions at this very moment (Kranz, 2017; "Report," 2022). A moment that cries out for a seismic shift in normative ethics, where the impartial critique of friend and foe alike, is bound to a bias for humanity as part of a moral calculus in leadership and decision making.

Ethical Foundations of Tutuian Critical Leadership

Archbishop Desmond Tutu died on December 26, 2021, leaving the world an inheritance in the form of an ethical leadership model for application in times when there do not seem to be good answers, only very-bad, bad, and less-bad pathways to socially acceptable outcomes. So, what can be learned, much less applied, today from the lessons of Tutu's lifelong, trench-tested walk as a leader? First, history has always made it difficult to disentangle self-preservation from humanity, a paradox that Tutu understood all too well. More importantly perhaps, intelligent, well-intentioned individuals have always come to diverging yet equally well-argued calculi for determining right versus wrong, be it unconditional absolutes or the greatest good for the greatest number.

Conversely, Tutu was neither an ethical absolutist nor utilitarianist. Even as a man of peace and nonviolence, he saw military action against the threat of Naziism as necessary (Gish, 2004). Also, while he embraced Christian values as ideal for all, he criticized Black Christian theology

for suborning racism by forcing the Black person “to see himself and to be seen as a chocolate coloured white man” in order to be treated as a human being (Du Boulay, 1988). What Tutu normalized was the critical examination of the conscience on matters that bumped up against his moral center, where his own conscience had no allies or material needs. A conscience nourished by the nutriment that only a near-obsessive concern for humanity could provide. This becomes the thread that runs through the three principles of the Tutuian ethics of critical leadership that will now be outlined.

Three Principles

Tutu’s ethics of critical leadership is founded on three principles: (1) a focus on consensus building, (2) a commitment to social justice and human rights, and (3) speaking truth to power.

Consensus Building

The “Creating WE Institute” provided the following relevant insights on effective communication:

Language is instinctual. All animals use language to communicate, and most of all to signal each other about how to explore, navigate, and survive the environments in which they live. Conversational Intelligence is the intelligence hardwired into every human being to enable us to navigate successfully with others. (“Conversational,” n.d.)

Tutu regarded language as essential to being in the world. So much so that language defined the nature of being. “Language is very powerful,” he said. “Language does not just describe reality. Language creates the reality it describes.” Being, therefore, is not a solo endeavor. Being requires co-existing with others, and co-existence requires consensus using language that creates a reality in which all beings involved may co-exist. When conversations, debates, and negotiations happen at a transactional or positional level, it becomes a self-centered exchange where existing knowledge is simply validated, persuasion supersedes a desire for mutually beneficial outcomes, and nothing new enters that may create a shared benefit in the end (“Conversational Intelligence,” 2018).

Case in point, a meeting between United States President Ronald Reagan and Archbishop Tutu that began with hope ended with the President’s condemnation of African National Congress’ use of violence to end apartheid, with virtually zero criticism of the apartheid South African government and its own track record of violence (Parks, 1986). Tutu’s prediction that “disillusioned blacks would increasingly turn away from peaceful protests” would prove prescient as soldiers and police officers would be killed or injured in riots and bombings in Alexandra, Johannesburg, Soweto, Bokomo, Gugulethu, New Crossroads, Atteridgeville, Mamelodi, Nyanga, Ventersdorp, Umbumbulu, Newcastle, and a host of other townships in South Africa the following year.

Conversely, what Tutu put on display while chairing the Truth and Reconciliation Commission was a transformational conversation where participants held “a neutral space to explore uncharted territory” and could “ask questions for which we have no answers and listen to connect” while remaining “open for co-influence” to work through extremely difficult conversations on past abuses, atrocities, and extreme loss that shared the same space with forgiveness, redemption, and retribution (“Conversational Intelligence,” 2018). The difficulty

of such an approach lies in being able to place one's consciousness beyond the zero-sum game outcomes, where closure, not winning, becomes the desired end state for all involved. Even then, the definition of "closure" itself would likely escape consensus, as peace and justice differed in flavor for those who survived the hurt versus those who hurt the survivors, which made what Tutu and the Commission were able to achieve that much more astounding.

Commitment to Social Justice and Human Rights

Archbishop Tutu spoke of the "essential interdependence of all of us human beings" during a speech at the 2007 founding meeting of the Elders, a group of international leaders assembled to promote global conflict resolution and problem solving. One could stop at a focus on Tutu's defense of human rights on various fronts, such as HIV/AIDS, state-sanctioned racism, and sexism and homophobia in the church, homophobia and transphobia, for which he received the Nobel Peace Prize, Albert Schweitzer Prize for Humanitarianism, Gandhi Peace Prize, and Presidential Medal of Freedom. For Tutu, however, social justice was about containing inhumanity wherever it lurked, whenever it occurred, because he intimately understood evil's ability to mutate and find new hosts.

His generation saw Jim Crow's viral jump to Nazi Germany and how this ethically justified the dropping of two atomic bombs on non-combatant men, women, and children in the Japanese cities of Hiroshima and Nagasaki. He realized how quickly sexism and homophobia could similarly condition otherwise civil societies to see certain human beings as less-than or expendable, as well as how religion and ideology often lubricated the slide toward debasing the humanity of other human beings because of their identities.

"Forgiving is not forgetting; it's actually remembering--remembering and not using your right to hit back," Tutu quipped. "It's a second chance for a new beginning. And the remembering part is particularly important. Especially if you don't want to repeat what happened." Thus, social justice was not simply about protecting the most vulnerable. It also entailed protecting oppressors from themselves and the consequences of their own evil that, while likely to reap harm upon themselves, would also reap harm on those who held no power and garnered no benefit by being associated with the oppressor, such as the far-removed generations of innocent Japanese, German, White American, and South African citizens whose fates were sealed before their time by the momentum of memory.

In Tutu's lifeworld, a commitment to social justice and human rights was a macro-level concern that transcended meso-level issues of race, ethnicity, gender, and micro-level issues of acquired identity and community conflicts. This includes restorative justice, where victims and offenders meet to reconcile the wrongs committed and harm done with the support of the community, that brought closure to the work of the Truth and Reconciliation Commission chaired by Archbishop Tutu.

Speaking Truth to Power

One of Archbishop Tutu's greatest gifts was his ability to mesmerize others by centering "truth value" no matter the nature of the discourse. This was evident in Tutu's public reaction to President Ronald Reagan's comments following their meeting in 1986. Tutu was just as scathing in his open criticisms of corruption in the Black-led government, Black South Africans

mistreating migrants from other African nations, and the political machinations of the African National Congress, in which he remarked, "I'm glad that [Mandela] is dead. I'm glad that most of these people are no longer alive to see this," in reference to the chronic issues that plagued the party (Jivanda, 2014; Myre, 2013).

While Tutu did not originate the notion of "critical solidarity," he certainly did exemplify it in his leadership in a way rarely seen on the global stage. "If the state does the correct things, it must be obeyed," he admonished. "But when it abuses its power, it is our Christian duty to condemn it." (Pali, 2018). This did not just mean condemning state authorities when they did wrong, it also meant commending those same authorities when warranted (Pali, 2018, p.275). He demonstrated critical solidarity by publicly congratulating his former nemesis-turned-ally, South African President F.W. De Klerk, for decriminalizing oppositional political parties and releasing Nelson Mandela from prison in 1990 (SAHO, 2018).

Tutu's most stark example of critical solidarity was put on display in 1985, during a funeral that left angry young mourners bent on revenge. As Nontombi Naomi Tutu, Archbishop Tutu's daughter, recalled, a Black man identified as an apartheid collaborator was being beaten by a crowd and doused with petrol to be set on fire when Tutu stepped between the man and the crowd. "To see that and to see him going in. There were so many things striking about it," she recalled. "One was that he had the courage to go into the crowd and say: 'No, this is not how we do it.' But the other is that those young people listened ... There was still that respect for Daddy and the other clergy" (Skweyiya & Roelf, 2021).

Archbishop Tutu found solidarity among the different castes in societies around the world in which he vowed to serve, in this instance through what Mahatma Gandhi referred to as "truth-force," or a vow of fearlessness when defending others from violence (Cox, 2019). This vow among others culminated into the fundamental values that undergird Tutuian ethics and its universal application as a cornerstone to conscientious leadership for the good of humanity.

Closing Reflection

At risk of appearing quixotic or naive regarding the burden of leadership in today's times, I submit that the strength of Tutuian ethics of critical leadership lies in his recognition of the unconditional goodness of people. No matter who we are or where we are from, every single one of us, as human beings, shares one important aspect of our existence: at the moment we were born, each one of us was the youngest person on Earth, divinely entitled to life by virtue of our births, and our lives would contribute to humanity by virtue of our existences.

The problem becomes the moment human lives are regarded for the sole purpose of destroying them through genocide, as was the case with the evils perpetrated by Nazis on Jewish men, women, and children during The Holocaust. Or seeing the lives of some as functionary so that others may live at a certain standard, as was the case with state-sanctioned slavery and apartheid on the basis of race. If the Silent Generation taught us anything, as Zora Neale Hurston said, "If you are silent about your pain, they'll kill you and say you enjoyed it." Being silent for leaders like Dr. Martin Luther King and Archbishop Desmond Tutu was not about keeping quiet in the face of injustice. Quite the opposite, in fact. It was more about silencing

one's conscience long enough to work through human complexities and situational ethics that challenge moral certitude.

The body of ethics literature includes empirical and normative studies on morally challenging topics, prescriptions for moral intuition and judgment, and theories on desirable outcomes associated with various moral calculi in an exploitative world. The fundamental question surrounding Tutuian ethics is a leader's ability and willingness to reflect on and hone the capacity to listen to truth, irrespective of source or allegiance, and use it to guide decisions that prioritize the wellbeing of all involved, not just allies and supporters.

The real challenge for any one of us as leaders is to fearlessly stand for a righteous cause when it appears most stand against us. Fortunately, we had Archbishop Desmond Tutu to model what that looks like, particularly when the danger was real, the outcome uncertain, and the damage perceivably beyond repair. However, it is precisely in those moments when we can best locate our true moral makeup as leaders and become more certain about our ethical comportment as it is measured against one of the greatest ethical leaders our world has ever known.



*Archbishop Tutu with Dr. Elizabeth Holmes (CAPT, MSC, USN ret).
Photograph from an ethics education conference held overseas at which Abp Tutu gave the keynote
and Dr. Holmes was a distinguished faculty speaker. Courtesy photo: Personal donation.*

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Special Notation

The photograph at the beginning of the article is of Archbishop Desmond Tutu giving the opening keynote address at the University of the Western Cape's 2009 New Member Recognition Event. The photograph is listed as being in the public domain on Wikimedia Commons per: https://commons.wikimedia.org/wiki/File:Desmond_Tutu_At_NMRE_2009_-_pic_2.jpg.

The Role of the Creative Arts in Fostering Resistance, Resilience, and Survival: Lessons from the Terezin Holocaust Experience

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Abstract

The Holocaust represented one of the darkest periods in human history in the modern era. Cruel and dehumanizing methods of physical and psychological humiliation were used that eventually led to the murder of some six million Jewish men, women, and children. The concentration camp system became the vehicle for the deliberate and systematic destruction of the European population of Jews in what became known as the “Final Solution to the Jewish Problem.” The Terezin concentration camp became a “model camp” for Czech Jews, many of whom were “socially prominent artists, writers, scientists, jurists, diplomats, musicians, and scholars (Hájková, 2020). This article highlights vignettes of several artists and performers in Terezin to illustrate how the creative arts facilitated personal meaning, social interaction, and resistance. Research with elderly Holocaust survivors highlights their inner strengths and qualities of resilience that facilitated survivorship and well-being. Mental health and well-being of survivors demonstrates their ability to integrate traumatic memories as a part of a coherent life narrative. The relationship of creativity, adversity, and post-traumatic growth are reviewed as the perception of positive psychological change following highly challenging, adverse life circumstances. Finally, several recent studies document how the present use of the arts can promote increased self-understanding and self-reflection, and change behaviors and thoughts.

Keywords: creativity, creative arts, resilience, resistance, survivor, Holocaust, Terezin, Theresienstadt, trauma, adversity, stress, post-traumatic growth

Introduction

The period of the Holocaust has emerged as the most cruel and inhumane period in 20th Century history. This period was marked by destructive and inhumane behaviors which primarily targeted the European Jewish population for extermination. It was an assault on the physical, relational, emotional, spiritual, and psychological aspects of being human. The early T4 Euthanasia program began by focusing on other vulnerable groups (Berenbaum, 2001), including the terminally ill, those with physical and mental disabilities, individuals with mentally incapacitating disorders, children with various physical and emotional problems, and the elderly. This was the precursor to what was to become the “Final Solution to the Jewish Question,” a euphemism referring to the deliberate and systematic mass murder of European Jews by the Nazis. It resulted in the mass murder of some six million Jews and non-Jewish persons (Illinois Holocaust Museum and Education Center, 2022) in extermination camps.

One such camp, Terezin (Jews referred to it as Terezin, the town’s name in Czech, while the Nazis used the German, Theresienstadt), was unique in the camp system. The major occupants of the camp were prominent Czech Jews who were celebrated artists, musicians, and composers of their time. It functioned as a transit camp where prisoners were deported before being sent to extermination camps. It also served as a propaganda vehicle to disguise the true nature of the “Final Solution” (Meckler, 2015). As the Nazis became aware of the propaganda value of the camp, it became a deceptive “model camp,” cynically referred to as a “spa town” (United States Holocaust Memorial Museum, 2022).

The camp was promoted as a “retirement center” where the Czech elderly and disabled German military veterans from World War I could live out their lives in relative safety. The camp was located 30 miles north of Prague in the Czech Republic. Due to the adverse conditions of the camp, 33,000 of the 140,000 Jews transferred to Terezin died of illness and disease. Of the 87,000 sent to extermination camps, only 5 percent survived (Ludwig, 1998). This included 15,000 children with only 132 survivors (Holocaust Memorial Day Trust, 2022). Among the camps in the Nazi system, Terezin stood out due to the many prominent European Jews who were the upper class of society and included socially prominent artists, writers, scientists, jurists, diplomats, musicians, and scholars (Hájková, 2020; Ludwig, 1998). The camp also included members of the general population.

The creative arts became an important experience for prisoners at Terezin. Adolf Eichmann was appointed Director of the Camp in June 1940 and, unlike other camps, in 1942 he appointed Jewish Elders to oversee the daily management of the camp’s cultural activities (Administration for Free Time Activities). The “Jewish-run organization was responsible for a wide range of activities offered to the prisoners, including lectures, sports, chess, theater, cabaret, opera, jazz, and chamber concerts” (Ludwig, 1998, p. 160).

The Creative Culture at Terezin

Despite the horrible conditions in the camp, cultural activities were encouraged by the Nazis with relatively minimal interference. This limited oversight provided an atmosphere where the creativity of the artists could thrive. The value to the artist was the ability to create art, compose music, write and perform plays, even if carried out covertly, with a relative sense of

freedom. They had the ability to play music as several musical instruments were smuggled into the camp as early as the second transport.

As a cultural center, Terezin functioned as a showcase camp, a demonstration to the Red Cross and the world that the Nazis treated members of the community humanely. Hearing reports of negative treatment, however, representatives of the Red Cross contacted Nazi officials and arranged to visit the camp on June 23, 1944 (Hájková, 2020) and requested that they be allowed to inspect it. The Nazis, in preparation for this inspection and to continue their deception to the world, created a “beautification” campaign. They quickly deported 7,503 Jews to extermination camps making it appear less overcrowded. As the camp itself was transformed to demonstrate how well the inmates were being treated, flowers and grass were planted, prisoners were given new clothes and good food, and were housed in a clean bunkhouse with clean bedding. The Nazis went as far as to create the façade of shops, schools, and cafés, and the delegates were entertained by various cultural performances (Adler & Adler, 2017).

When Red Cross officials arrived to inspect the camp, they were introduced to prisoners who looked well and who had been briefed beforehand. This was designed to give officials a positive impression of the camp, making the Nazi propaganda campaign successful. In addition, the Nazis’ created a propaganda film, “The Führer gives a City to the Jews,” showing the positive treatment of the Jewish people under the protection of the Third Reich. The film included scenes of children playing, women interacting with each other, a men’s soccer game, an orchestra playing, residents tending a camp garden, and an audience for a lecture. Shortly following the making of the film, most of the people who were depicted in the film were transported to Auschwitz and perished in the gas chambers.

One resource addressed the following question. “What did the term ‘culture’ mean in this camp? It meant values that went beyond the mere physical survival of the community and were lived out and fulfilled as aspiration and creation, surpassing the minimal amount of vitally necessary achievement” (Adler & Adler, 2017, p. 517). The arts flourished with limited control and oversight by the Nazis. Scripts and musical presentations had to be approved by the Jewish Elders and then the commandant. As also pointed out:

The only times that high-ranking members of the SS [Schutzstaffel] showed a deep interest in the inmates’ art was when the artists broke one of the central prohibitions: contact with the outside world to disseminate information about the [camp]. At the height of the beautification campaign, the SS intercepted dozens of smuggled drawings that dramatically illustrated the misery of the [camp] (Hájkova, 2020, p. 174).

However, there were many ways in which inmates defied the Nazis due to being allowed to continue their work in the arts. There were clandestine programs in the camp, composed of readings, songs, and various artworks which served the other functions about life in the Terezin camp. As Goldfarb (1976) points out, the arts had three functions: escapist entertainment, the desire to hold on to tradition, and outlets for resistance. The relative freedom to create, under the extreme circumstances of incarceration, nurtured a level of resistance and survival in the camp, something that gave a sense of personal and collective meaning.

The exclusive nature of Terezin provided artists numerous opportunities to create and produce works from their creative experience. The relative freedom to create also granted more

clandestine aspects of art, a means of depicting the horrors of camp life. The Nazis also used the talents of inmate artists to achieve their own goals and commissioned artists to produce works of art that were copies of the old masters or portraits of SS officials (Hajkova, 2020). “Materials available for officially commissioned works thus provided supplies for secret sketches, portraits, and caricatures. Thus, official labor assignments enabled the artists to obtain access to paper, canvas, oil, and other supplies for their clandestine art” (Milton, 2001, p. 23). Furthermore:

The act of producing art also confirmed one’s sense of individuality; considering how to stage a play, interpreting a musical piece, or drawing were ways of expressing a distinct sense of self. Cultural activities can be understood as a life strategy, a reminder of individuality, a more convincing argument than the idea that art served as a strategy for survival. Did artistic activity sustain the spirit and promote survival in [Terezin]? Self-control over process and outcome, painfully absent in the lives of the inmates of the camp, could be momentarily achieved through creative work. A blank piece of paper provided a form of escape, access to memory and imagination, and a rare moment of privacy. (Dutlinger, 2001, p.1).

This personal sense of self, garnered through the creation of personal art, provided personal meaning under very challenging, adverse circumstances, and stress. Experiencing a sense of personal identity and meaning are powerful in one’s motivation to survive (Frankl, 1984).

Human Stories of Creative Expression at Terezin: Resistance, Resilience, and Survival

Interviews of survivors from the Holocaust offer a compelling assortment of individual and collective stories of resistance, resilience, and survival. The experiences of ordinary human beings thrown into extraordinary and adverse circumstances are illustrated through their art-making and performances. Artists and performers during the Holocaust have a unique story to tell and their artistic and creative works are testimonies to an experience of how the human spirit can function under extreme stress and even in the face of death. The enormity of mass extermination may be difficult to understand as an event. However, when confronted with the individual, personal, and human stories of survivors, we are quickly confronted with our own sense of humanity.

It is only in describing the individual stories of resistance, resilience, and survival that one can begin to capture the essence of the human experience of extreme trauma, adversity, and stress that draws us into the experience of being human ourselves. The human stories that have evolved and been brought to light in the aftermath of the Holocaust provide evidence of the meanings and motivations that people gave to their lives and that affected their survival during life in the camps. Life in Terezin depicts how, under the adversity of capture, deportation, and incarceration in concentration camps, the use of art and music provided a means where personal meaning and hope could contribute to the possibility of living another day.

Researchers have been interested in how people successfully cope with stressful and traumatic experiences and move on with their lives while other people are painfully affected and never seem to make an adequate recovery. While some individuals are affected by minimal stressful events which produce physiological, psychological, social, and interpersonal sequelae,

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others achieve a psychological equilibrium and are more psychologically immune to intense traumatic events and disasters. The outcome of a traumatic event has to take into account a combination of risk and resilience factors (Bonanno, Brewin, Kaniasty & LaGreca, 2010; Bonanno & Mancini, 2010).

In a relatively small-scale study of aging Holocaust survivors, Reches & Sondaité (2017) outline the protective factors of resilience for survivors. The themes and subthemes that emerged from their study include *social support* (help that they received from close relatives and other people), *changes in values* (this included changes in attitudes toward people, life, and God), *circumstances* (“miracles” and coincidence), *integration of experience* (acceptance of fate, sharing experiences with others), and *self-reliance* (finding ways to survive, fighting for oneself and one’s family). These protective factors are both external (social support and circumstance) and internal (changes in values, integration of the traumatic experience, and self-reliance). Surviving can mean living to be a witness, to tell one’s story and to keep alive the memory of others and what they endured. Surviving may also have a more nuanced meaning in the context of resistance, whereas surviving may be as simple as living one more day or one more hour where the possibility of resistance and the hope of survival may be realized.

The ability to create works of art, compose and perform music, and write plays under very stressful conditions provides something meaningful that is psychologically effective for keeping the self relatively functional while in confinement. Ornstein (2006) presents the functions of creativity during incarceration as activities that permitted important functions of the self, making *emotional survival* and eventual *recovery* with a relatively intact mind more likely. The sketches and drawings served as witnesses to events that could not otherwise be visualized because there were no precedents for such events in the Western world. As detailed:

They had become invaluable sources of information for historians, and art also functioned as *internal resistance* against the effects of humiliation and degradation; passing jokes, singing songs, writing poetry, and creating caricatures created mental escape routes, and art created in camps and after the Holocaust, served as memorials for the dead (Ornstein, p. 391-392).

By drawing attention to the human stories of what individuals faced and how they coped with such horrific conditions, Holocaust art contributes to our understanding of approaches to resistance, resilience, and survival. The following stories are testaments to the human desire to find meaning and to provide a purpose to carry on with a sense of hope. Every survivor has an important story to tell. These stories from Terezin focus on the unique use of the arts.

Werner Reich was a teenager when he was sent to the concentration camp at Terezin. At 16, he was required to work at various jobs in the camp while younger children were able to play or engage in educational activities. In May, 1944 Reich was transferred to Auschwitz II (Birkenau) where he met a kind gentleman who shared a bunk with him. The gentleman, known to him as Herr Levin, produced a pack of playing cards that he shuffled daily. “And then one day, he showed me a card trick. I was amazed. It was the first trick I had ever seen. And then he explained it to me, in great detail” (Rauscher & Reich, 2017, p.101). Mr. Levin turned out to be a celebrated magician with the stage name “The Great Nivelli.” When the Nazis found out that he was a magician, they supplied him with cards and in return he performed for them

and taught them card and coin tricks. Reich acknowledges that, in part, this accounted for his survival in the camp.

Levin was then transferred to another camp. He survived the war, having lost his family in the gas chambers, and moved to New York where he resumed his magic performances. He died in 1977 (Rauscher & Reich, 2017). Werner Reich also survived, attributing his survival to “luck” and “looking strong and fit” for labor. He speaks to many groups today with the message of his own experience of how the kindness of Mr. Levin was also instrumental in his survival and how to treat others. He stated in a lecture, “So, if you ever know somebody who needs help, if you know somebody who is scared, be kind to them. Give them advice, give them a hug, teach them a card trick. Whatever you are going to do, it’s going to be hope for them. And if you do it at the right time, it will enter their heart, and it will be with them wherever they go, forever” (Reich, 2019).

Artforms have a variety of uses: some tell stories, others create symbols; some illustrate and document particular experiences and encounters, others heal. In an interpretive study of children’s artwork while in Terezin, Grossman (1989) signals the difference in themes between adult and children’s art. Adult artists depict the horrors of the camp with images that exposed the Nazi atrocities. Drawings include “a mountain of children’s shoes, the living skeletons of the aged, the transports, and the mortuary. We see the hunger and the sense of hopelessness and doom on the faces of the living dead. The art, by adults, is considered documentary. The artwork of children seemed to create a “rational world out of the madman’s dream which was life at Terezin” (p. 213). The themes depicted in children’s art include hunger and the longing for freedom as expressed in the many images of food, birds, butterflies, railroad trains, and windows. Many of the other drawings were of the Passover Seder and the themes of food, family, and freedom.

According to Etienne & colleagues (2019), “Art therapy strives to utilize a variety of forms of creative expression to allow individuals to identify and vocalize their inner thoughts, feelings and identity in a positive environment with the goal of improving their quality of life.” (p. 33). The account of Friedl Dicker-Brandeis is a case in point. Shortly after arriving at Terezin, Dicker-Brandeis organized drawing classes for children in their dormitories. Makarova (2000) quotes Dicker-Brandeis describing her approach: “The drawing classes are not meant to make artists out of all the children. They are to free and broaden such sources of energy as creativity and independence, to awaken the imagination, to strengthen the children’s powers of observation and appreciation of reality” (p. 31). Her experience with them exemplifies expressions of their internal worlds as powerful and effective psychological holding environments. In addition to the excellent art instruction, she also gave them freedom, an escape from the horrible reality of the camp (Hajkova, 2001). Dicker-Brandeis was deported from Terezin to Auschwitz-Birkenau October 6, 1944, and shortly thereafter died in the gas chambers with a group of her students.

What has become known in the Holocaust literature as the story of “The Girls from Room 28” (Brenner, 2009), tells the compelling story of Dicker-Brandeis’ students. These coming-of-age young women survived beyond the camps, though their teacher did not. Their experiences making art created interpersonal relationships and a close-knit community, contributing to their survival. The developmental tasks for these adolescent girls had to be navigated in less than adequate conditions for survival. However, their teachers were conscious of the need to protect

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them from the daily stress and fears of incarceration by occupying their time with art-making (Wonschick & Dutlinger, 2001). Adults put forth considerable effort, due to their ability for self-government in the camp, to protect and nourish the youth and instill a sense of hope because youth represented the future. “Some ‘room leaders’ were highly educated. Many were teachers or artists. They were expected to mentor and care for the children, and to teach them values to prepare them for later life-life after the war” (Wonschick & Dutlinger, 2001, p. 63).

Hanka Wertheimer-Weingarten stated, “We were able to learn, draw pictures, read books, and talk a lot. We made plans for the future. What I enjoyed most were the long evenings when we would lie on our hard boards, in darkness. While most children were sleeping, some of us were awake and wondered how soon the war would be over, how we would return home and start a normal life” (Wonschick & Dutlinger, 2001, p. 72). Almost all of her family perished in the camps, except her sister, and Hanka herself was near death when liberated from Bergen-Belson. She survived the Holocaust and died in 2018 at the age of 89.

Anna Flach (called Flaska), continued as a singer, pianist, and professor of music after liberation. She was a talented singer and participated in many musical performances while in Terezin. She was part of a youth organization in the camp known as “helping hand” (*Yad Tomechet*) where she assisted the elderly with food and care (Brenner, 2009). She kept a journal called a “Memory Book” (*Gedenkbuch*), which contained aphorisms, drawings, pressed flowers, and dedication. Many of the inscriptions are words of farewell with her friends. While she remained in Terezin, many of her friends were sent away to Auschwitz where they perished. Flaska and her mother and sister survived the camps (Wonschick & Dutlinger, 2001; Brenner, 2009). She has continued as an educator and advocate of music.

Goldfarb (1976) reports that theatrical performances in Terezin ranged from dramatic readings in the barracks to full-scale productions. Theater may seem a surprising activity in a concentration camp. Tuma (1976) notes, “Heroism wasn’t in the clandestineness but in the will to create, to paint, to write, to perform and to compose in hell” (p. 15). Peschel (2009) cites survivors’ testimony suggesting that in the camp, theatrical performances functioned as social practice, increasing prisoners’ resilience and ability to cope with unrelenting traumatic events.

One notable performance at Terezin was the children’s opera, *Brundibár*, composed by Hans Krasa in Prague, 1938. The opera tells the story of a brother and sister who sing for money so they can buy fresh milk for their sick mother. *Brundibár*, a nasty organ grinder, steals their money. With the help of singing animals, the siblings recover their stolen money. Krasa and several members were transported to Terezin in 1943, where the opera was performed 55 times as part of the “free time activities” in the camp. The Nazis also exploited the opera for the Red Cross visit in June, 1944 and it appeared in the film titled, “The Fuhrer Gives a City to the Jews.”

Rovit (2000) suggests, “But the simple tale may have provided Terezin audiences with an allegory for their situation. A brother and sister sing for money so that they can buy fresh milk for their sick mother. Existing production photos from Terezin show that the boy in the role of *Brundibár* wearing a Hitler mustache” (p. 111). In addition:

All of the children of Terezin were swept up in their collective hatred of a wicked organ grinder who refuses to let needy children sing for money in the district he considers his own beat. Animals finally advise the children to get together and fight the wicked man and

the evil Brundibár is finally defeated. Again, the marching song that expresses their victory became a substitute defiance of the evil the Jews were helpless to fight in the [camp]: “Beat your drum, we have won. . . We did not give in! We are not afraid” (Levin, 1968, p.485).

The performance of Brundibár provided inmates with the opportunity to covertly, in Czech, present a resistance message that Nazi officials did not suspect nor seemed to care about. Knowing that any detection of a message that was contrary to Nazi ideology could result in beatings or death, the performers knew the message they were conveying. Toltz (2004) highlights the seriousness of the risks of resistance:

The Czech libretto of *Brundibár* (using words similar to those of Czech cabaret and everyday Czech work songs) created a language barrier against any German objections, and invested the work with a special power of resistance, especially for the children who performed in it or saw it. This resistance is most strongly embodied in the words of the final song of the opera: “He who loves his father, mother and native land, who wants the tyrant’s end, join us hand in hand and be our welcome friend.”

Far from music acting as a tool of deception by the Nazis for the greater world, music for these survivors was a tool of resistance, survival, and nourishment (p. 45).

Brundibár was popular in the [camp] for three major reasons: inmates could see children enjoying a theatrical experience; the allegorical nature of the story of victory over a tyrant could be extrapolated to include the current political oppression suffered by the inmates; and the music was approachable, memorable, and enjoyable. Each melody in the work returns motif-style to represent characters (Brundibár, the animals) and situations (the quest for milk, the victory march) (Toltz, 2022).

There are numerous examples of resistance during the Holocaust. Krieger (2010) reports on the work of John and Mary Felstiner, who describe an aspect of art during the Holocaust as “*creative resistance*.” Counter to the perception of Jews as passive victims, the Felstiner’s argue for those artists during the Holocaust who demonstrated resistance through various works which included artists, writers, and musicians (Haven, 2010). The driving motivation of artists in the moment was the sense of creating something from within themselves that possibly could live beyond them. “It did not serve as much as another piece of bread. It didn’t kill one Nazi. It didn’t stop anything,” said Mary Felstiner. “But it gave them the morale to go another day. And when we look at these works, we see transcendence” (Krieger, 2010). Haven (2010) cites Mary Felstiner’s common feature of creative resistance, that “is that pushing into the future, that sense that we need to mark this moment because there must be a future out there that will look back on us.”

Artwork did not have to be exquisite, refined, or necessarily conform to the rules of artmaking. In fact, the Holocaust itself was so abhorrent and life-altering that it naturally became an object of artmaking for those who experienced life in the camps. Such a horrible experience would have unlikely become a subject matter that artists would have initiated. Artists’ creations can often be reflective of historical and cultural events as they trigger intense emotion from which art forms emanate. As Haven (2010) cites, “creativity” may be as simple as “a trace, a mark, or a scribble.” Marcel Chetovy, a teenager at the time, wrote on a wall at the Drancy internment camp that he and his father, Moise, were leaving the deportation camp in

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France for Auschwitz, “with very good spirits and the hope of returning soon.” They were never heard from again.

From 1942-1944, a group of defiant and resistant teenage boys in Terezin created and published a secret underground magazine titled *Vedem*, which in Czech means “In the Lead.” The magazine’s founder, Petr Ginz, was a 14-year-old child prodigy from Prague. The boys published 83 weekly issues (more than 800 pages), documenting life in Terezin. The articles, some humorous, some with hand-drawn illustrations, reported on life in the camp. Readings held on Friday evenings drew attendance from well-known artists and writers. During the Red Cross visit, the boys were openly critical of the “beautification” campaign the Nazis used as a deception to the organization. After the Red Cross staff left, transports to Auschwitz resumed. All but one of the boys involved in the *Vedem* project were sent to the gas chambers. The sole survivor, Sidney Taussig, had saved the issues of *Vedem* by stashing them in a metal box that he recovered after he was liberated (Krizkova, Kotouc, & Zdenek, 1995; Milton, 2001; Shey, 2017).

Music is integral to the cultural experience within any society. Its functions are complex for both the listener and the performer. Schafer, Sedlmeier, Stadler, & Huron (2013), have identified several functions experienced by the listener, namely, *self-awareness* (music has an identity function where it helps people think about who they are), *social relatedness* (promotes the concept of social bonding and relating to friends), and *arousal and mood regulation* (music utilized as entertainment and emotionally, diversion).

During the Holocaust, music had a variety of functions for both inmates and the Nazi regime. As unusual as it may seem for music to exist in the camps, it actually was an important part of the culture of virtually every camp in some form or another. Historically, music was a tool used to indoctrinate and control Germans with their ideology of being superior, suppressing independence of thought, and racial hatred and prejudice. Known as *Entartete Musik*, it was translated as “degenerate” music, and was introduced as a threat to the German citizenry in 1937 (Ludwig, 1998). In Terezin, the Nazis permitted music as a cover for the more sinister goal of ultimately deporting victims to other camps for extermination.

Goldfarb (1976) addresses the theatrical performances and activities in the camp that were composed of songs and readings in the barracks. The inmates used their performances as a way to resist Nazi leaders. Resistance may be an internal attitude; however, the public performances communicated personal expression, meaning, and defiance, even when knowing the likely outcome could be their own death. The audience sat on their bunks while observing and listening to familiar performances. This offered opportunities to engage in such songs as Mordecai Gebirtig’s “Our Town is Burning.” Gebirtig was a Yiddish poet and songwriter. This song commemorated a 1938 clash between Polish and Jewish communities in Przytyk, Poland. However, the song represents, in the context of Nazi occupation, the opportunity to sing with an attitude of defiance because the Nazis would not necessarily understand Yiddish. Gebirtig died on June 4, 1942, while being marched to the Krakow train station for transport to the Belzec death camp. He and his family, among others, were gunned down by Nazi guards (Cohen, 2013).

Celebrated composer, Rafael Schacter and a group of performers at Terezin presented Giuseppe Verdi’s *Messa da Requiem*, a Catholic funeral mass, 16 times in the camp. Adolf

Eichmann and representatives of the Red Cross attended the last performance on June 23, 1944. The artists designed the production as part of the showcase and performed with vigor, despite most of them knowing their fate. The following day the entire ensemble of musicians and choral singers were deported to Auschwitz and died in the gas chambers.

The “*Requiem*” represented what the performers could not say directly to the Nazis. They were able to forget, momentarily, camp life and deportations and garner enough strength to better cope with the loss of freedom. Marianka Zadikow May, a survivor of Terezin, suggests that Schachter and his chorus may have been singing directly to Eichmann the words, “the day of wrath, that day will dissolve the world in ashes as foretold by David. . . When therefore the judge will sit, whatever hides will appear. Nothing will remain unpublished. We didn’t have weapons so we could not fight them--but we could fight them with singing” (Lowe, 2010).

Ironically, the very music condemned by the Nazis was allowed in Terezin. The Ghetto Swingers was a jazz group formed by Eric Vogel, a trumpeter who was sent to Terezin in 1942. As musicians in the camp, they “were forced to perform for the SS, on command and under inconceivable duress. The particular cruelty of this--desecrating and corrupting the creative impulse that fuels and sustains art remains wildly perverse, though Vogel was nonetheless grateful for any chance, however grim, to make the music that he loved” (Petrusich, 2019). Since Jazz was considered “degenerate” music under the Nazis, Joseph Goebbels from the Ministry of Propaganda realized its value to promote Terezin as the showcase camp. The Ghetto Swingers performed outside a café for the 1944 visit of the Red Cross.

Three months following the Red Cross visit, most of the Ghetto Swingers were sent to Auschwitz and to the gas chambers. Vogel was sent on a separate transport and reunited with a few members of the group. They were to play music for the SS from morning until night. The guitarist, Heinz Jakob “Coco” Schumann also described the band as offering deep, if temporary, relief from the panic of the camps. “When I played, I forgot where I was. The world seemed in order, the suffering of people around me disappeared--life was beautiful. Nothing was further from my mind than the wall that enclosed the camp, the emaciated men, women and children, the trains to the extermination camp of Auschwitz-Birkenau. We were a ‘normal’ band who played for a ‘normal’ audience” (Schumann, 1997, p. 42). Schumann was liberated from Dachau and returned to Berlin where he continued to play jazz. He died in 2018 at the age of 93. Vogel similarly recalled, “We were so concerned and so happy to play our beloved jazz that we had tranquilized ourselves into the dream world produced by the Germans for reasons of propaganda” (Petrusich, 2019). While being transferred to Dachau, Vogel dodged gunfire and escaped through the woods. He went on to program radio shows, book jazz festivals, and play music with friends. He died in 1980 at the age of 84.

Adversity, and Post-Traumatic Growth: How the Creative Arts Can Promote Survivorship

Holocaust survivors experienced one of the most horrific catastrophes in human history. As a traumatic life event, one’s ability to cope, adapt, and survive is a complex and multifaceted experience. Today’s Holocaust survivors, frequently children or adolescents, were often torn from their families. They became witnesses to the destruction of their homes and communities. Psychologically, one experienced a loss of identity (displacement, personal items confiscated,

and personal history lost), assaults on personality, social experiences and interactions, mistrust, alienation, and, in some cases, a loss of faith in humankind (Fisher and Gilboa, 2016). Garwood (2018) identifies issues of powerlessness, fear of annihilation, object loss, and torture as elements that Holocaust victims faced while incarcerated in the camps. Coping with the daily issues of stress that the camps created for victims was paramount in the way that some prisoners were able to survive through resilience.

The consequences of long-term traumatic sequelae related to extreme stress suffered in the Holocaust has been a topic of recent research (Preiss, et. al., 2022; Kahana & Kahana, 2001; Barel, Van IJzendoorn, Sagi-Schwartz, & Bakermans-Kranenburg, 2010). These studies have highlighted how many elderly Holocaust survivors experience long-term traumatic affects into old age. Overwhelming maltreatment and torture that characterized the experience of survivors has also shown consistent evidence of psychological distress in comparison to a group of controls (Kahana & Kahana, 2001). Long-term stress and complex trauma resulting from exposure in the Holocaust causes significant disruptions to one's sense of self, social and interpersonal relationships. Although survivors of the Holocaust experience long-term pain from their past ordeal, they also demonstrate a remarkable ability to be resilient in adapting to their "personal, social, and communal life" (Barel, Van IJzendoorn, Sagi-Schwartz, & Bakermans-Kranenburg, 2010, p. 694).

Elderly survivors of the concentration camp experience attribute their survival, in part, to participating in art and music. A factor associated with survivors' mental health and well-being is the ability to integrate traumatic memories as part of a coherent life narrative. Creating a coherent life narrative allows adults to come to terms with life as lived and learn to cope with later life losses. According to O'Rourke, et. al. (2015), reminiscing about the past has both positive and negative effects on mental health and well-being. Survivors who remember drawing upon their inner strength and coping resources during the Holocaust appear to have a strong sense of meaning, coherence, and good mental health in later life (Zeidner & Aharoni-David, 2014).

While earlier research focused on the pathological experiences of extreme stress, adversity, and trauma (Diamond, Ronel, & Shira, 2020; Frankl, 1984; Krystal, 1988), recent work has examined the internal strengths and the adaptive ability of survivors to cope by using their own inner resources (Barel, et. al., 2010; Corley, 2010). Research focusing on the internal strengths and adaptive qualities of living Holocaust survivors show that they are the most resilient and have led long and full lives (O'Rourke, et. al., 2015). Psychological resilience, termed hardiness by Kobasa, Maddi & Kahn (1982), is a pervasive belief that one can rebound from trauma effectively. Resilience in the face of adverse life events is the ability to have a *commitment to living* (engaging fully in daily activities), *embracing challenge* (belief that change, rather than stability, define life and living), and *perceiving control* (belief that one has the ability to directly alter the course of their life).

Survivors who were adolescents in Terezin recall favorable experiences about interacting with adults while engaging in various forms of art, music, and performance. Creating art is an exclusively human endeavor. Gabora (2013) has pointed out: "Creativity is arguably our most uniquely human trait. It enables us to escape the present, reconstruct the past, and fantasize about the future, to envision something that does not exist and change the world with it" (p. 1). Creativity represents a means of envisioning new possibilities, inspiration, and

transformation. Further, it functions as inspiration referring to being inspired by another's creative expression and the creative person's own sense of inspiration is expressed through the creative process. Simonton (2006) argues that creativity must embody two criteria: first, the demands of originality, novelty, and surprise; and second, adaptation. The expressive elements in artmaking are seen in the works of the various Holocaust artists: painters, novelists, poets, playwrights, musicians, composers, entertainers, and even a magician. "Societies can be linked and transformed through creative processes" (Corley, 2010, p. 543).

A growing body of literature references the relationship of growth, adversity, and creativity. Post-traumatic growth is the perception of positive psychological change that an individual manifests following highly challenging, adverse life circumstances (Tedeschi & Calhoun, 2004). Post-traumatic growth "can result from the struggle with loss" and the "positive change that the individual experiences as a result of the struggle with a major loss or trauma" (Calhoun & Tedeschi, 2001, p. 158). Research on the positive changes that accompany experiences of adversity has found that people report positive growth in five domains: interpersonal relationships, the perception of new possibilities for one's life, personal strength, spirituality, and appreciation for life. Further, the unique life experiences that highly creative individuals report suggest that traumatic and adverse experiences may play a critical role in fostering their creativity, and increased creativity can manifest post-traumatic growth (Tedeschi & Calhoun, 2004).

The ability for psychological growth (post-traumatic growth) following adverse and traumatic circumstances (Calhoun & Tedeschi, 2001; Forgeard, 2013; Tedeschi & Calhoun, 2004) has been shown in victims who manifest resilience (Bonanno, Brewin, Kaniasty, & La Greca, 2010; Reches & Sondaite, 2017). Individuals engaged in creative activities during the Holocaust who were presented with opportunities to be expressive through art, plays, and music, even clandestine in nature, and who lived beyond the camp experience, regard those activities as helpful in their survival (Corley, 2010; Diamond, Ronel & Shira, 2020; Diamond & Shira, 2018; Fisher & Gilboa, 2016; Ius & Sidenberg, 2017).

Camic (2008) reports studies of psychologists documenting how the arts can be used to heal emotional injuries, increase an understanding of oneself and others, develop and demonstrate an increased capacity for self-reflection, reduce and alleviate psychological symptoms, change behaviors, and thinking patterns. Art engagement is an interaction between inner and outer reality and are formed cognitively, affectively, and unconsciously while interacting with the environment. A study by Forgeard (2013) provided support for a relationship between the experience of adversity and creativity, with self-perceptions of creativity constituting the psychological construct of post-traumatic growth. This adversity-creativity link has been empirically explored relating to adverse life events, psychological disorders, and physical illness and the subsequent experience of creativity. Following adverse circumstances, the perceptions of post-traumatic growth in the form of a creative experience can contribute to well-being.

Engagement in the arts has been described as goal-directed activity that operates as a diversion from physical and emotional pain (Malchiodi, 2005); and includes other benefits including: giving meaning, purpose and hope; increased confidence; a sense of achievement; pride and satisfaction; as well as confidence, self-esteem, and the ability to rebuild an identity beyond that of being a service user (Secker, et. al., 2007). Recovery in mental health is an

important concept when engaging in art for individuals who feel trapped in a “cycle of hopelessness and despair” (Spandler, et. al., 2007, p. 78).

Although art and performance existed in all the concentration camps, Terezin was unique. Frequently, clandestine in nature, creativity functioned as a holding environment during captivity and, for those inmates who demonstrated resilience and survived, it fostered growth into adulthood after the Holocaust. While resilience can lead to survival, survival leads to the potentiality for growth following the Holocaust. Many of those who survived the camps and manifest a level of resilience, were able to achieve some levels of growth and were able to find purpose and meaning in the future.

Conclusion

Artists and performers, captives in the Terezin concentration camp, have a unique story to tell through their art. Their artistic and creative works have lived well beyond their own lives to tell the larger experience of the Holocaust. The intensity of the trauma and adversity of capture, deportation, and incarceration at Terezin facilitated a culture where artists, performers, playwrights, and musicians were able to thrive, in part, due to their participation in the creative arts. Unlike other camps, the arts became a part of camp life. Some artwork, plays, and music were produced covertly. Participation in creative efforts, by the testimony of survivors, fostered resistance and resilience leading to survivorship in adulthood. Creativity played a functional role in the resistance, resilience, and survival of artists. It provided avenues in which meaning could be manifest from participation in the arts. Interaction with others who were artists provided levels of hope for the future, especially for children and adolescents.

Those who were adolescents in Terezin are documented as having more favorable experiences, with the adults who, as a community, set out to protect them from the overt horrors of the camp. In Terezin, the creative arts provided meaning for those individuals incarcerated and allowed them the potential to be resilient and survive, even if this meant surviving only one moment or one day longer. Although engagement in the arts did not guarantee an inmate’s survival beyond the camps, the artwork, music, and plays provided personal meaning, social interaction, and hope--factors that increase resilience. The creative works that survived the camps are still exhibited and performed today, keeping the artists’ memories alive. Creativity provided a pathway for resistance and potentially resilience and survival into adulthood. They took solace in using their imagination to produce art, potentially culminating in what is known today as post-traumatic growth. The relationship between the experience of adversity and creativity, with self-perceptions of creativity supports post-traumatic growth (Forgeard, 2013).

Resilience (Kobasa, Maddi & Kahn, 1982; O’Rourke, et. al., 2015), as a construct, highlights the use of an individual’s internal strengths that allowed adaptation to the adverse conditions in the camps (Barel, et. al., 2010; Corley, 2010). The ability to be psychologically resilient in the face of adverse life events is the ability to have a commitment to living, embracing challenge, and perceiving control. Following adverse circumstances, the perceptions of post-traumatic growth in the form of a creative experience can contribute to an individual’s well-being. Creative therapies, which includes art therapy (Etienne, et. al, 2019), as used today have generated enough success as to justify their use in medical, educational, and psychological settings. Attard & Larkin (2016) assert that creative therapies (art psychotherapy, dance

movement, body psychotherapy, drama, and music therapy) can enhance a person's creativity, emotional expression, communication, insight, and ability to relate to themselves and others.

Accepting an understanding of a resilience-based philosophy allows for informed implementation of strategies and treatment methods to build resilience. As health and human service providers, this requires turning our attention to people's inner strengths and their ability to overcome the psychological impact of adverse events. Using resilience-enhancing interventions can build survival and coping skills. Those skills, especially when used by older adults dealing with difficult life situations, can revolutionize clinical practice (Greene & Graham, 2009). Recognizing individual strengths and resilience is important in physical, emotional, and spiritual health interventions to foster future survival and growth.



*Terezin Memorial Cemetery
The Czech Republic*

Special Notation

The photograph at the conclusion of the article is that of the Memorial Cemetery in front of the Little Fort in Terezin in the Czech Republic. The photograph is in the public domain per Wikipedia Commons: https://en.wikipedia.org/wiki/File:Terezin_CZ_Memorial_Cemetery_01.JPG

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Exploring Ethical Constructs of the Complementary Roles of Military Healthcare Providers

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Abstract

The mission of military medicine establishes and promotes a conservational stance by dually focusing upon (1) individual health, and (2) military force capability. This conjoins the healthcare practitioner to both the individual clinical encounter and collectivist aspect(s) of the military. There has been discussion about competing loyalties fostered by duties of the military and medicine; however, we posit that these duties are complementary, reinforcing and reciprocal per a structural-functional hierarchy of ethics that situates duties, utility, and agency as interactive. We further propose that categorical roles that healthcare professionals embody operate within this structural-functional framework to ethically execute healthcare providers’ relationship(s) to both patients and the military collective.

Keywords: Clinical ethics, duties, utility, agency, roles, military, healthcare

Introduction

Historically, the military has leveraged supporting medical establishments to sustain personnel mission-preparedness during both peacetime and war. The current mission statement of the United States (US) military health system reflects this directive in defining its principal tasks: “To ensure America’s 1.4 million active duty and 331,000 reserve-component personnel are healthy so they can complete their national security missions and to ensure that all active and reserve medical personnel in uniform are trained and ready to provide medical care in support of operational forces around the world” (*About the Military Health System*). This obtains that all military health professionals serve their patients (i.e., the military service members of all ranks, and their dependents), while being integrated to plans at the strategic, operational, and tactical levels to achieve mission goals.

In this way, the mission of military medicine establishes and promotes a conservational stance through a dual focus upon (1) individual health, and (2) military force capability; and in so doing conjoins the healthcare practitioner to the individual clinical encounter as well as the collectivist aspect(s) of the military mission. While there has been discussion about competing loyalties and responsibilities fostered by the duality of this enterprise (see, for example (Institute of Medicine (US) Board on Health Sciences Policy, 2008)), we opine, in agreement with Edmund Howe (Howe, 1986), that these duties and their explicated obligations are complementary, reinforcing and reciprocal, given the architectonics of the articulation of healthcare within the military community and its contexts of performance and service.

A Structural-Functional Model of Ethics

We have previously proposed a structural-functional model of ethics that situates duties, utility, and agency within an interactive hierarchy (Applewhite, Giordano, Girton, et al., 2022). It can be fit within various contexts of application and employed with other ethical precepts such as care ethics, theological ethics, and communitarianism, in ways that are germane to the environments, settings, and contingencies of specific professions (see Figure 1). For military healthcare, the duties and rules of both the healthcare and military professions establish the primary ethical structure. However, individual action is critical to operationalizing these duties and rules within the particular contexts, circumstances, contingencies and exigencies of the military.

Thus, the functional components of ethics entail the individual healthcare practitioner’s capability to understand and enact relative goods within the scope of duties and rules. This scope of duties and rules also upholds the obligation(s) to meet the needs and values of the group involved and affected (i.e., the military unit, and military at-large). Ultimately, healthcare professionals’ actions are an alignment of their individual moral compass with the duties, outcomes, and service - both to other individuals and the community (viz., the military) - as the subjects and object of moral responsibility.

This structural-functional framework of military medical ethics is shown in Figure 1.

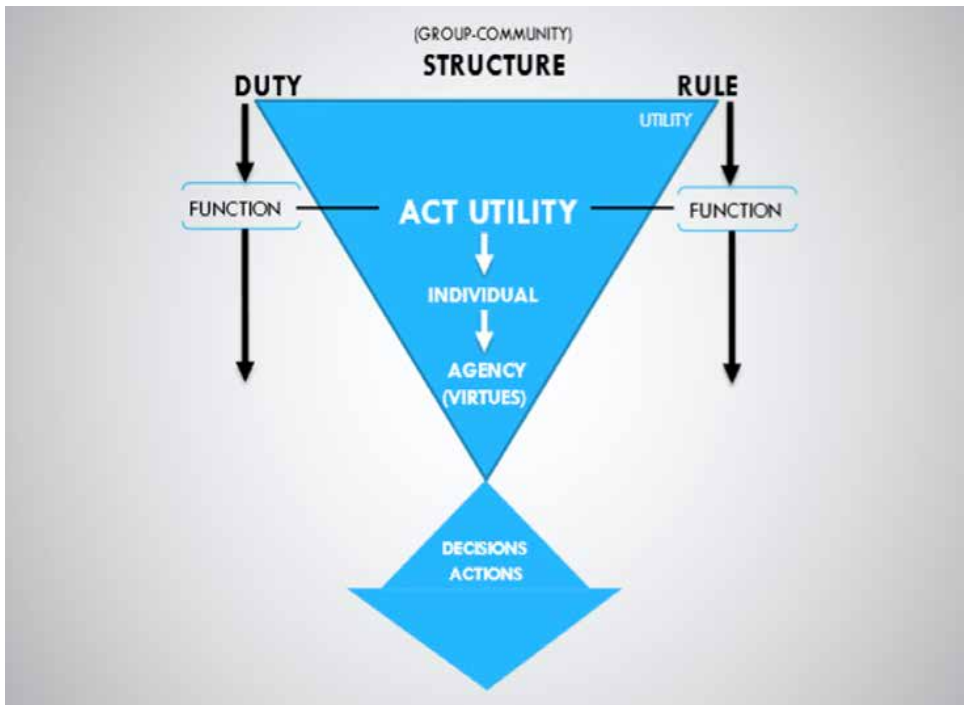


Figure 1. Diagrammatic depiction of the structural-functional model of ethics (adapted from Applewhite, Giordano, Girton et al., (2022), with permission)

Execution of Structural-Functional Ethics within Role-Focal Practice(s)

This framework certainly may provide an actionable model for the ethical basis of military medical healthcare practice. However, it does not attempt to delineate the categorical roles that the healthcare professional assumes to carry out functional relationships with both their patients and the military collective. Ethics must be focal to the enterprise of its application. Actions--and the direction and responsibility for the ethical probity--are reflective and relevant to the role(s) undertaken within various context of professional (and personal) engagement. Axiomatically, the military clinician assumes the roles of both military member and healthcare provider. Within these are sub-dimensions that define the particularities in/of the various contexts of service that constitute the realities of the profession-in-practice.

Edmund Pellegrino has conceptualized the roles of the clinician as applied scientist, healer and helper, mechanic, businessperson, and social servant (Pellegrino, 1986). These roles, and the domains and dimensions of the individuals and communities they serve, are depicted in Figure 2. The military clinician operates daily within some combination of these roles, and we posit that a thoughtful balance of technical and moral agency in the execution of these roles is vital to sustaining the structural and functional parameters of ethically sound military healthcare practice.

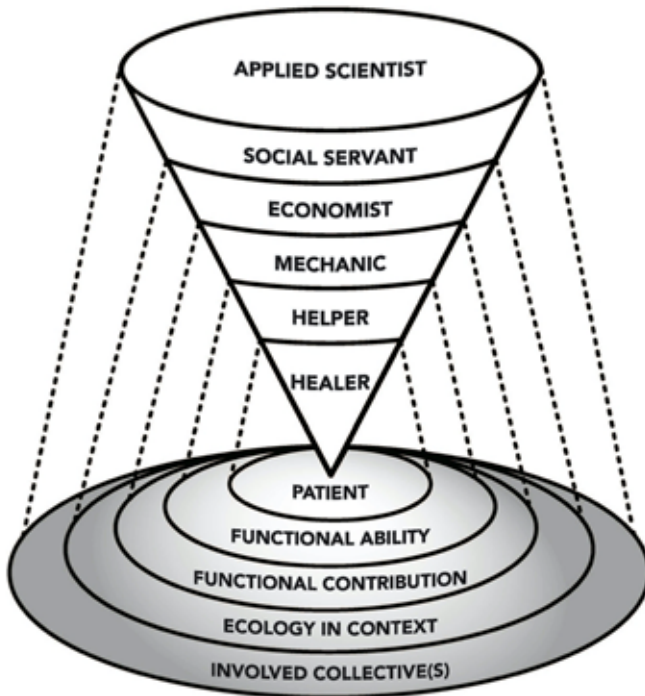


Figure 2. Diagrammatic representation of interactive, complementary and reciprocal roles of the healthcare practitioner, and the domains and dimensions of effect afforded and articulated in/through the execution of these roles-in-practice.

The Clinician as Applied Scientist

Pellegrino has explicated the construct of the clinician as applied scientist as “...means for attaining knowledge and also for applying existing knowledge to solve a patient’s diagnostic or therapeutic problem.” (Pellegrino, 1986). Essentially, Pellegrino views the “scientist” in literal terms: as one who employs *scientia*, theoretical knowledge based upon demonstrable and reproducible findings of events, results, and situations (Glare, 2012) – in the applications of skill and understanding in practice. In other words, *scientia* is a domain of knowing that contributes to understanding the right course of actions that can and should be undertaken in given settings and circumstances. This demands knowledge of the (1) subject of care, as well as (2) the objects of consideration and utilization of rendering such care, and (3) the settings and circumstances in which the subject(s) of technical and moral care function, are to be engaged and treated.

At the tactical unit level, working in direct support of the unit’s mission, the military clinician would be remiss if s/he did not appreciate and treat the patient as a whole person-in-community-under-circumstance. In regarding the patient only as “...the object of study seen as a concrete instance of the universal laws of biology and pathology;” (Pellegrino, 1986) the clinician’s counsel to the unit commander would merely be a list of signs and symptoms of the presenting injury or disease, and a treatment plan to return the patient to relative health. However, the contexts and obligations of both the patient and the clinician to the mission may create a situation wherein the care is provided to the patient - as a military agent – to allow him/her to return to duty as expeditiously as possible, in order for the commander to leverage maximum personnel resources to accomplish the military mission. Such situations abound in military operations in which time is short and tactical situations are fragile. In this light, engaging the clinicians’ scientific knowledge and problem-solving process informs all domains and aspects of the clinicians’ roles, from the direct care of the patient to the needs, extent(s), effect(s) and value of such care upon the capability (of both the commander and the military as a whole) to effectively execute the mission at-hand and at-large.

The Clinician as Healer and Helper

This role embodies “the foundation for the ethics of the healing professions,” (Pellegrino, 1986) and certainly includes the mission of military healthcare. In the healer role, the clinician executes direct contact and most intimate effect upon the patient, and helps the individual regain some sense of health, agency and action. This restoration of the patient’s agency is contextualized within their role as a military member, and thus, the clinician’s helping role is also afforded to the service of the military and its mission.

The twofold foci of helping are reflective of roles of both the clinician and the patient as members of the military. To be sure, patients’ trust and confidence in healthcare professionals is not unique to military medicine, but within the military, the professionals who are healers, and those who seek and require such healing are common in their obligation to serve the military mission. All military members swear an oath upon their entry into the armed forces. This is an act of profession, derived the Latin *profiteor*- “to openly declare (an intention)”. The military clinician professes not only their oath of service and office, but also the oath - and obligation - to heal and in so doing, help those with and for whom they serve, both individually and communally: in the proximate sense, i.e., the military; and in the more expansive sense, i.e., the nation. This latter aspect is further addressed below.

The Clinician as Mechanic

Application of theoretical and empirical knowledge in the technical aspects of clinical practice can be likened to "... a mechanical event equivalent to the... repair or replacement of a part", (Pellegrino, 1986) in order to restore elements of functional utility. Such employment of knowledge in the clinical mechanics of healthcare occurs daily in military medical practice. For example, imagine daily walk-in hours at a battalion aid station for a special operations unit, or a clinic for an aviation group where critical skills operators (CSO) and military aviators are patients. These military professionals use (and often abuse) their bodies on a regular basis in the course of performing their (high-risk, high stress, high-tempo) operational duties. In voluntary and highly competitive fields like special operations and aviation, becoming a patient (both in the literal sense, from the Latin, *patitur* – the "one who suffers"; and in the practical sense – as one who requires aid) is frequently not a role that these personnel wish to assume (Smith et al., 2016). In simplest terms, the nature of those occupations – as well as others within the military – is such that when one is a "patient," then one may not be performing their military job. In this context, the military clinician can be seen as the mechanic who is able to "repair" the patient, and thus enable a return to functional duty.

Yet, it is also important for the clinician to understand and function in support of the mechanics of the community-body and its system in which the patient and the clinical professional serve. In this light, the military community may create certain necessities that must also be entailed in the relative balancing calculus of maximizing care of the individual while concomitantly maximizing the benefit to the force readiness of the military unit. A commander may exert pressure on unit clinicians to maximize these same ends, regarding the "Doc" as another support entity, to be engaged to repair and/or restore an operational component that is broken and/or dysfunctional. Often, exigency is paramount. In a combat situation, a military clinician may have to approve a patient to return to duty before being fully recuperated, due to operational demands (*Ethical Guidelines and Practices for U.S. Military Medical Professionals, 2015*). Likewise, the commander may need to make the often difficult decision to send the personnel in her/his charge back into harm's way (McCoy, 2006). Due to the immediate nature of combat operations, certain medical treatment decisions may not be wholly applicable – or valid - as they would be, for example, in garrison or training.

Indeed, the "clinician as mechanic" can be a difficult relationship model for both health care professionals and patients, in that it can be seen to objectify the patient in a way to ensure their health is restored in an effort to return them to accomplishment of the mission and to carry out operational imperatives. Nevertheless, it is a frequent and very real dynamic of front-line military medicine. Understanding the mission-essential requirements and capabilities of the individual as well as those of the collective unit are essential to developing and articulating the practical wisdom that enables the military clinician to effectively execute decisions and actions in treating each patient s/he encounters. Thus, the immediacies, contingencies and demands of the operational theater and mission should frame such decisions and actions, but need not – nor should not – compromise a clinician's integrity and diligence in providing both the most capable provision of patient care, while concomitantly upholding the highest standard and level of operational support for the commander, and the unit's mission.

The Clinician as Economist

A business model of healthcare construes services and resources to be exchanged in some market system for profitable end. While Pellegrino identified a role for the clinician as ‘business person’, we reject that title in its simplicity, and instead – and pro Pellegrino – feel that ‘economist’ is more apt.

Although this is usually not perceived as particularly applicable to military medicine, there are tenets of this model that are relevant to the relationship of the military clinician, their patients, their commander, and the mission. Like any healthcare practice, military medicine must adhere to the allowances and constraints of an operating budget (Pellegrino, 1986; *DHAPM 601013 MEPRS Volume 1*). The budget may be a subset of a unit’s total budget, and in this way, incur relative restriction(s) in proportion to allowances for other mission-required expenditures. This may dictate the military clinician requiring approval (from the unit commander, or from higher levels of command within the military medical chain) for more expensive tests and procedures, which can delay or impede the care determined and prescribed.

As well, the business model of healthcare establishes that, “the patient often is seen not as a personal responsibility of the clinician, but of the organization” (Pellegrino, 1986). Apropos this construct, the clinician is less a businessperson, but more appropriately an economist of the health and readiness of the force (in this sense, literally, from the Greek *oikonomos*, one who tends to the upkeep and running of the household or community). The military clinician serves as a steward of the human capital that comprises each unit, and hence, the force as a whole.

These business/economic aspects and dynamics, too, need not denigrate the focus, scope and/or quality of care provided by the military clinician to her/his patients. Rather, we opine, just the opposite. Given the relationship of clinician-to-patient, patient-to-duty (as military service member), clinician-to commander, and the commander’s intrinsic responsibility for maximum mission readiness, then the highest level of healthcare support would, and should, be seen as essential to upholding and sustaining the duties inherent to these each and all of these relationships (McCoy, 2006).

In this light, we believe that Peters and Waterman’s “excellence model” (Peters & Waterman, 2015), if paired with Klein’s “craftsman ethic” (Koehn & Elm, 2013) would well-preserve both the core philosophical constructs of healthcare/medicine, and the practical application(s) of skill, knowledge, and services that sustain and/or advance the “goods” of the relationships inherent to healthcare practice and military operations. Taken together, we believe that this approach can enable the values and ends of the clinical, budgetary, and operational dimensions of military medicine to be more effectively mutualized.

The Clinician as Social Servant

The military medical mission “...orientation...toward the good of the population in general, or a specific population in a social institution” (Pellegrino, 1986) engenders the role(s) of the military clinician to sustain the readiness of her/his charges for military operations as set forth by the health metrics of the Department of Defense, and service-specific instructions and regulations. The military clinician accomplishes this at the level of the individual while also

maintaining awareness of the metrics of the entire patient population for which care is rendered (i.e.- the unit, which in many cases includes the commander as well).

Certainly, there is some overlap with the aforementioned business model. The military clinician frequently acts as a rationer of goods and services within some form of managed care system, given that the commander may direct clinicians to make decisions for the good of the unit - and mission - that could have burdensome, if not adverse effects at the individual level. It is, to paraphrase Thomas Szasz, representative of the ancient conflict between the individual and the collective (Szasz, 1974). Yet, we posit that this can be reconciled, to considerable extent, by applying (1) the telic focus of Pellegrino's philosophy of medicine (viz.- to strive toward and achieve a right and good healing), and (2) a Heraclitan view (Kahn, 1979) of employing knowledge to apprehend and negotiate the value of parts and wholes (i.e., of the patient as an integrated biopsychosocial system, integrated within the community and systems of the military) within the structural-functional model of ethics (as shown in Figure 1).

Conclusion

Together, elucidating these perspectives and this ethical model enable the military healthcare professional to appreciate the aforementioned distinct roles in an effort to balance the relative good(s) of both the individual patient and the missional obligation. Further, in open democracies, the military serves to protect the *polis*, and therefore, acts to defend valued public goods (of freedom, rights, etc.). Thus, by extension, military healthcare contributes to the sustenance of such public good(s) by preserving the capability of the operational force, and in this way, the military clinicians' role as social servant is more broadly enacted and upheld (May, 1983). Tensions and conflicts between socio-political instrumentalization of ethics and a core morality of healthcare can, and do occur; and while authoritarian regimes such as medicine in the Third Reich (Shevell & Peiffer, 2001) and Soviet Russia (Newsholme & Kingsbury, 1934) may exemplify politization of medicine, open democracies are not immune to these occurrences (Bynum, 2000; Clark, 2006).

The adage that "good ethics is the basis of good law" begs the question which (and whose) definition of "good" is utilized and leveraged (MacIntyre, 1988), which prompts further, more detailed address than the scope of this article. For further discussion of the constructs and extents of health-related goods, see Frankena, 1963; Pellegrino, 1985, and Applewhite, Giordano, Girton, et al., 2022. Healthcare practices within the US military fall under the Uniformed Code of Military Justice, at least as regards their most proximate oversight and governance (Applewhite, Giordano, Girton, et al. 2022). In the United States, relative public transparency of military conduct has become a critical aspect of socio-political discourse, and aspects of military healthcare are equally scrutinized and can be source(s) of public attention.

Certain dimensions of military healthcare, such as performance optimization within preventive military medicine and research and development of weaponizable biomedical science, can vary widely based upon differing cultural norms and the political direction of various nations' militaries (WMA Regulations in Times of Armed Conflict and Other Situations of Violence, 2012). And while international treaties and signatory conventions provide some guidance and governance to establish relative conformity with international law, coherence is not uniform, and cooperation is not absolute. Thus, while the United States' and its allies' militaries uphold

“keeping honor clean” while “fighting for right and freedom”, an understanding of – and insight to – cosmopolitan perspectives of military and healthcare ethics (i.e., in hetero-cultural contexts) is and will be evermore vital to sustaining sound practices of military healthcare in light of the changing socio-political and military dynamics of the 21st century.

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The Way We Live Now: Civilization and Disease

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Abstract

Disease is inextricably linked to way of life and, as that changes, so does the vulnerability of the population to specific diseases. This article explores these relationships by examining five modes of living and how they engendered the diseases the population experienced. The lifestyles of hunter-gatherers, early agriculturalists, urban dwellers, early factory workers, and technological westerners are discussed, and predictions made of how and why new epidemics will arise.

Keywords: epidemiology, infectious disease, nutrition, agriculture, industrial revolution, hunter-gatherer

Introduction

Medicine is an act of culture and those humanistic disciplines that enrich our understanding of culture enrich our understanding of medicine as well. This article will argue that the forms and frequency of disease within a population are inextricably bound to the culture in which they occur. As culture changes, so do the diseases that afflict its members and, by studying culture, we can better understand both disease and medicine.

This article will trace the progress of civilization from our paleolithic past to our technological present and show how changes in society and culture during each period influenced the characteristic forms of disease. For purposes of discussion, the history of civilization will be divided into five broad and overlapping periods: hunters and gatherers, early agriculturalists, urban dwellers, the Industrial Revolution, and globalization.

Hunters and Gatherers

The term hunters and gatherers refers to those groups who procure their food directly from the wild, and practice neither agriculture nor the domestication of animals for subsistence. Hunting and gathering was the dominant form of human subsistence until about 12,000 years ago but is vanishingly rare today (New World Encyclopedia, n.d.). Therefore, our conclusions about disease in hunting and gathering societies depend on the study of paleolithic skeleton assemblages and observation of the few remaining hunting and gathering societies in the world today.

Hunting and gathering societies are usually composed of small bands of less than 50 members and are often organized along kinship lines. They are nomadic and highly mobile, with few possessions, and no domesticated animals other than dogs. Hunting and gathering bands are usually non-hierarchical because the economy cannot support a class of artisans and bureaucrats and the demands of mobility limit the accumulation of wealth.

Twenty-first century humans are so far removed from the time of their hunting and gathering ancestors that it is difficult to imagine their lives, though there has been no end of speculation on the matter. Opinion on the issue has oscillated between two extremes. The first position, memorably stated by the political philosopher Thomas Hobbes, imagines hunters and gatherers to have inhabited a state of hellish deprivation. In *Leviathan* (1651) he describes the life of humans residing in the state of nature (i.e., before the formation of a central government) as “solitary, poor, nasty, brutish, and short.” Opposing this view are the supporters of Romantic Primitivism, who envision hunting and gathering societies as composed of “nature’s gentlemen,” unsullied by the decadence of modern civilization and living in harmony with a beneficent environment. Until recently, scientific thinking has favored the former view, picturing hunters and gatherers as poor, pitiable, and continuously engaged in a struggle for survival. However, more recent studies have challenged this view.

There is a consensus that the life expectancy of ancient hunter-gatherers was less than our own. However, a recent comprehensive survey of multiple current hunting and gathering tribes from around the world suggests that this is due to an increased infant mortality rate and that the age-specific mortality rate of those who reach maturity is much the same as ours. In other words, many children die in infancy but, if you reach adulthood, you can expect to live about seven decades (Gurven & Kaplan, 2007).

Hunting and gathering societies may have suffered relatively few common colds. Because small bands contain only a few susceptible individuals, they cannot sustain the continued transmission of many respiratory viruses. This was convincingly demonstrated by Paul and Freese in their 1933 study of respiratory illness in Longyear City, Spitzbergen. During the winter months the city’s harbor freezes, isolating the small population and preventing the introduction of new viral serotypes. Consequently, the city’s inhabitants remained disease-free throughout the winter. When spring came the ice melted and, upon arrival of the first ships, waves of respiratory illness swept through the city (Paul & Freese, 1933).

Similar findings have been observed among small groups of men wintering over in Antarctica. Although one-half of the party had cold symptoms within two weeks of leaving their home base in Australia, there were no cases of respiratory disease in the period of isolation

during the winter months. Within a short period of returning home over one-half the men developed cold symptoms (Cameron & Moore, 1968).

Despite a long-standing belief that hunting and gathering bands hover on the brink of starvation, the evidence shows that their diet is diverse, nutritious, and healthy. Linear height is a good measure of general nutrition; when nutrition is poor, men and women tend to be shorter. Examination of hunter-gatherer skeletons from the end of the last ice-age shows that the average height of men was 5 feet 9 inches, and the average height of women was 5 feet 5 inches. After the advent of agriculture these average heights were not achieved again until 1900 (Diamond, 1999).

The diversity of the hunter-gatherer diet was recently demonstrated by Tim Spector, a British epidemiologist, who spent time with the Hadze tribe of northern Tanzania and ate only what they ate. Over a period of three days his diet consisted of baobab fruit, kongorobi berries, tubers, a porcupine, and a hyrax (rock rabbit), with honey for dessert. Spector noted that the hunters first ate the heart, lungs, and liver of the porcupine, apparently the choicest bits (Spector, 2017). This preference for organ meats is common among hunter-gatherer bands. Organ meats are rich in vitamins whereas muscle tissue is not. For example, beef steak contains negligible amounts of vitamins A and C, but three ounces of beef liver contain 539 percent of the minimum daily allowance (MDA) of vitamin A and seven ounces of beef thymus contains 100 percent of the MDA of vitamin C (fitbit, n.d.).

The diet of modern hunter-gatherers varies with the latitude at which they live. Those who reside in the tropics obtain most of their calories from vegetable matter. Those in the temperate zones depend on fish, and those in the far north depend on marine mammals (Ströhle, Hahn & Sebastian, 2010; Ströhle & Hahn, 2011). The diet of the !Kung people of the Kalahari Desert provides an interesting example of the adaptation of diet to local circumstances. Meat is prized but reportedly seldom consumed since !Kung hunters are unskilled and rarely successful. The majority of the tribe's calories come from the ubiquitous Mongongo nuts (*Ricinodendron rautanenii*). Mongongo nuts are surprisingly nutritious with a high protein content, polyunsaturated fatty acids, and a lot of Vitamin E (Natural Food Hub, 2017). When someone from a local town suggested that the !Kung engage in agriculture they were astonished. "Why should we do that when God has put so many nuts on the ground?"

The diet and active lifestyle of hunter-gatherer bands appears to have protected them from the rampant atherosclerotic heart disease, inflammatory bowel disease, and cancer so prevalent in modern western society. Although these diseases are sometimes found in hunter gatherers, they occur much less frequently than they do in the industrial West. (O'Keefe & Cordain 2004; Gibbons 2015).

With all the positive things that have been said about the hunter-gatherer lifestyle, the reader may wonder what our ancient ancestors died from and what diseases they suffered. Although our information is far from complete, it is likely that the high infant mortality rate was associated with acute intestinal disease leading to vomiting, diarrhea, and death from dehydration. Causes of adult mortality vary from group to group. Among the Hiwi (Venezuela and Colombia) the primary cause of death among adults is violence (warfare and homicide) followed by gastrointestinal pathogens. The Ache (Paraguay) also have a high death rate from violence, followed by respiratory pathogens. In contrast, the Agta (Philippines) and !Kung

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(Namibia and Botswana) are peaceful and have low rates of death from violence (Hill, Hurtado & Walker, 2007). One thing is certain, hunter-gatherer tribes were afflicted with a host of parasites, no doubt from eating wild game, because helminths (worms) have been found in every study of their intestinal tracts (Schuster, 2019).

Healthcare. During this period, diseases were believed to have a spiritual origin, and medical practice, such as it was, was limited to shamanism and the empiric use of plants in the immediate environment (Lamb, 1986; Challis, & Lewis-Williams, 2011). It should not be assumed that such practice was ineffective. Many of the pharmaceutical medications used today are modifications of plant medicines discovered by indigenous peoples. These include aspirin from willow bark, digitalis from the foxglove, and statins from red yeast rice. Shamanistic medicine, although not supported by western medical theory, has been reported to be highly effective in an indigenous village setting (Prechtel, 1998).

The Agricultural Revolution

In the view of traditional academic historians, the advent of agriculture heralded the beginning of civilization. Bands of former hunter-gatherers stopped wandering from place to place and settled in a single location, giving them the incentive to build permanent structures and acquire wealth. Surplus food and the ability to preserve and store food led to the rise of specialized labor (artisans), central government, and organized religion. And so, as the theory goes, the Egyptians were able to build the pyramids and Homer had time to write the *Iliad* and *Odyssey*.

Recent discoveries have challenged this view. Jared Diamond, geographer, anthropologist, and Pulitzer Prize-winning author of *Guns, Germs, and Steel*, has called the adoption of agriculture “the worst mistake in the history of the human race,” one that led to disease, despotism, and the flagrant social and sexual inequality that continue to plague our world today (Diamond, 1999).

What is the evidence supporting Dr. Diamond’s iconoclastic claims? Skeletal remains of Native Americans at Dickson Mounds in the Illinois River Valley show that after the inhabitants adopted maize agriculture their dental enamel defects increased by 50 percent (malnutrition). Moreover, their bone lesions increased three-fold (infectious disease). Degenerative conditions of the spine were increased (hard, repetitive labor) and their life expectancy decreased by seven years. Studies of other ancient skeletons confirm these findings. After the adoption of agriculture in Turkey and in Greece male linear height fell from an average of 5 feet 9 inches to 5 feet3 inches (Diamond, 1999). Oral health is a good measure of nutrition and overall health. Examination of the teeth of Neolithic people after the introduction of agriculture shows that, in comparison with hunter-gatherers, they had a reduction in tooth size, dental crowding, an increase in the frequency of dental decay, and increased periodontal (gum) disease (Latham, 2013). All these indicate that the adoption of agriculture was associated with a decline in human health.

The decline in health following the adoption of agriculture can be explained by examining the particulars of early agricultural life. These include environment, the domestication of animals, nutritional diversity, vulnerability of the food supply, and waste disposal.

Environment. The early farmers settled in deltas or well-watered river valleys that increased their contact with the insect vectors of infectious disease. These include mosquitoes (Malaria, Dengue, Yellow Fever, West Nile Fever, Zika Virus) and flies (African Sleeping Sickness, Typhoid, Cholera, Tularemia, Dysentery). The introduction of irrigation to increase crop yield aggravated these problems by exposing families to large areas of standing water that were prime breeding grounds for insect vectors (WHO, 2020).

Animal Domestication. The agricultural revolution was accompanied by the domestication of sheep, goats, chickens, and cattle. Most often these animals did not have separate living areas but resided with the families in a single dwelling. Consequently, their human masters were exposed to such animal-borne diseases as tuberculosis, anthrax, Q fever, Salmonellosis, and undulant fever, transmitted through milk, hair, hides, and ambient dust.

Nutritional diversity. Ancient farmers did not cultivate the wide variety of fruits, grains, and vegetables that are enjoyed today. Most of their calories came from cereal grains (emmer wheat, einkorn wheat, spelt, barley) and maize, making early agriculturists susceptible to multiple nutritional deficiencies. For example, cereal grains contain little iron. Even worse, grains contain phytates that can interfere with iron absorption. Porotic hyperostosis, a thick, sponge-like lesion of the bones, is frequently found in the skeletal remains of Neolithic peoples and is believed to have been caused by their chronic iron deficiency anemia (Latham, 2013). Maize, the primary calorie source for Native American agriculturists, is deficient in the amino acids--lysine, isoleucine, and tryptophan. It has been suggested that the transition from animal to plant foods reduced the intake of zinc, vitamin A and vitamin B12. The combination of incomplete protein and micronutrient deficiency would make Neolithic people more susceptible to the ravages of infectious disease.

Vulnerability of the food supply. One might suppose that adoption of an agricultural lifestyle would increase the safety and stability of the community's food supply. After all, hunter-gatherers had little ability to store food and were dependent upon a constant food source over which they had little control. In fact, the opposite appears to be true; early farmers were in greater danger of starving than were hunter-gatherers. The reason is that the success of agriculture depends upon the weather. Floods, droughts, and sudden changes in temperature can all wipe out a crop. Even after a successful harvest, the stored food is in jeopardy from mold, rats, thieves, and raiding parties. If the stored crop or the seed for the next planting is destroyed the community is in danger of starvation.

Waste disposal. The introduction of agriculture and fixed habitation introduced a problem that remains today--how to dispose of human excrement safely. This was not a problem for hunters and gatherers because they were nomadic. However, once populations settled in a single place, solving the problem of waste disposal became a priority. Lacking the technology of modern sewage treatment plants, our Neolithic ancestors had only three options: 1) disposal pits, 2) disposal in a river, and 3) use as fertilizer (nightsoil). All three options are unsatisfactory. Disposal pits attract flies and other disease vectors; river disposal contaminates one's water supply, and fertilizing crops with nightsoil also spreads infectious diseases. The contamination of water supplies is especially problematic in an indigenous community because the chief killer of young children is dehydration and diarrhea, often caused by the ingestion of pathogens in drinking water. The number of pathogens that can be disseminated through the use of

nightsoil is truly impressive and includes viruses (enterovirus, hepatitis A, rotavirus), bacteria (campylobacter, *E. coli*, salmonella, shigella, cholera vibrio), protozoa (amoebic dysentery, giardia), and helminths (roundworm, hookworm, tapeworm, schistosomiasis) (Blum & Feachem, 1985). Unfortunately, contamination of the food chain through the importation of vegetables fertilized with nightsoil still plagues us as evidenced by recent outbreaks of diarrhea from lettuce contaminated with *E. coli*.

Societal change. The Neolithic revolution in food production was accompanied by equally revolutionary changes in societal organization such as the accumulation of wealth, the growth of artisans, and the emergence of a ruling class. The sedentary lifestyle permitted larger families, and women found their roles increasingly restricted to home, children, and the domestic arts. Whereas children can be cherished but still be an economic burden to mobile hunter-gatherers, they are not so to an agrarian society. Toddlers can be cared for by older sisters or grandparents who live in the same house or nearby. Children can assist in the fields at an early age, making them an economic asset rather than a liability. Perhaps this is one reason the human population began to increase exponentially during the Neolithic period (Meadows, et al., 1972). The increase in population density had mixed effects. It certainly increased both the transmissibility of infectious disease, as well as the number of susceptible persons in the community. On the other hand, the repeated waves of infectious disease during this period may have given rise to groups of people with relative resistance to their formerly lethal effects. There is evidence that the so-called childhood diseases such as measles and chicken pox were at one time deadly plagues.

Healthcare. Medical care in neolithic villages, as in hunter-gatherer tribes, consisted primarily of shamanistic practices and the empiric use of plant medicines. However, it should not be thought that these ancient peoples were medically unsophisticated. Multiple skeletons from the late neolithic period show evidence of trepanation (a surgical procedure to create a burr hole in the cranium) with reparative bone growth indicating that the patient survived the procedure (Gross, 2009). A recently discovered skeleton from the paleolithic period showed evidence of a successful below the knee amputation, indicating knowledge of anatomy, anesthesia, antisepsis, and procedures to stop blood loss (Hunt & Whiteman, 2022). The biography of a modern shaman, working among traditional Mayans in a Guatemalan village, claims that practices western science might dismiss as magical can be surprisingly efficacious in an indigenous society (Prechtel, 1998).

Although the transition of hunter-gatherer bands to early agriculturists is the beginning of civilization as it is known today, there is clear evidence that this revolution was accompanied by a substantive decline in the health and nutrition of the population. With further population growth and social reorganization these early agricultural communities developed into the first cities. And, with the transition from agrarian villages to cities, new health challenges arose.

Urbanization and the Growth of Cities

The growth of cities was promoted by two factors that began in the Neolithic era, the population explosion, and the growth of specialized labor. Agriculture can support more people per unit area than can hunting and gathering. Hunter-gatherers require about 10 square kilometers per person, dry farmers need 0.5 square kilometer per person, and irrigation farmers need only 0.1 square kilometer per person. Thus, irrigation farming can support 100 times as many people per unit area as hunting and gathering (Diamond, 1999). Despite its deleterious

effect on health, the transition from hunting and gathering to agriculture and the resulting food surplus led to a population explosion.

The population explosion during the neolithic period promoted the specialization of labor. Specialized labor was attractive because it offered social mobility. A young adult could immigrate to a city and make a living in other ways than farming. But specialization also created interdependence. Bennett Sherry gives the following example. A shoemaker may seem to work independently but he depends upon farmers to feed him, pastoralists to provide hides for leather, soldiers to protect him, and priests to bless him (Sherry, n.d.). Furthermore, the shoemaker is forced by this interdependence to reside in a central location, such as a city, to obtain these services.

Urban dwelling as the dominant mode of human life began around 6,000 BCE. The earliest cities were city-states, small independent communities that could supply all their inhabitants' needs. An example is Uruk, a Mesopotamian city of 50,000 people (5,000 BCE) and at one time the largest city in the world (Sherry, n.d.). Uruk was densely populated, surrounded by huge walls, and dependent for subsistence upon surrounding farmland. The health challenges of city dwellers before the Industrial Revolution can be illuminated by examining each of these characteristics.

Food production. Because of improvements in agriculture the farmers who supplied early cities were able to grow more diverse crops than their Neolithic predecessors, who often relied on monoculture. Consequently, the diet and nutrition of some city dwellers was greatly improved.

A great deal is known about the diet of Medieval peasants. Much of their caloric intake came from grains, including wheat, rye, barley, and oats. Legumes (peas, beans, and lentils) were readily available as were fish, eggs, and garden fruits and vegetables. Although this diet is very nutritious by modern standards it was strictly seasonable. One could only eat what was available at the time because the ability to preserve and store food was minimal. Moreover, the food supply was erratic. Crop yield was far less than now, and a string of poor harvests could lead to famine (Singman, 1999).

One example of bad weather leading to crop failure and famine occurred in the Great Famine of 1315--1317, which affected the British Isles, most of Western Europe, and parts of Poland, and Scandinavia. Problems began after especially heavy rains in 1315 which caused widespread flooding and left the fields waterlogged. Multiple villages were abandoned after repeated flooding. Crop yields fell by one-third to one-half and herds of sheep and cows were stricken with *murrains* (an archaic term for infectious diseases of animals), reducing their number by 80 percent. It is estimated that about 15 percent of the population of England and Wales died during this famine (Johnson, n.d.).

As cities grew so did their demand for increased food production. Farmers began to clear pristine forests for agriculture, thereby disrupting the ecosystem and bringing farmers and their domestic animals into contact with wild animals and their pathogens. This practice encouraged the ability of viruses to jump from their animal hosts to humans and made cities "ground-zero" for the transmission of emerging infectious diseases (Santiago-Alarcon & MacGregor-Fors, 2020).

There is another aspect of food production for early cities that directly impacted human health. For the first time in history large groups of people ate food that they neither hunted, gathered, nor grew. Both hunter-gatherers and early agriculturists participated in obtaining food and could judge whether it was fit to eat. City dwellers could not. This led to several notable epidemics during the medieval period.

One such outbreak was epidemic ergotism. When rye is grown during a cool wet spring, the crop can be infected by the fungus *Claviceps purpurea*, also known as ergot. The harvested grain contains ergot alkaloids that remain toxic even after being baked into bread. The ingestion of ergot-contaminated flour causes two syndromes depending upon the profile of alkaloids present. Convulsive ergotism is characterized by paranoia, seizures, and hallucinations, caused by psychoactive alkaloids (Haarmann et al., 2009). It is notable that LSD is itself an ergot alkaloid. Gangrenous ergotism is characterized by loss of sensation, edema, and tissue necrosis caused by intense vasoconstriction and interruption of normal blood flow (Haarmann et al., 2009).

The first well documented epidemic of ergotism occurred in 857 CE in the Rhine River Valley. An outbreak in Paris and southwestern France in 944–945 CE killed 20,000 people, half of the population of the area. A second epidemic in France in 1039 CE led to the creation of a hospital for ergotism victims. The hospital was dedicated to St. Anthony and ergotism became known as St. Anthony's Fire (Lea, 2021, Haarmann et al., 2009). Surprisingly, epidemic ergotism occasionally occurs today. In *The Day of St. Anthony's Fire*, John Fuller recorded the case of a French village in which hundreds of people seemingly went mad in a single night in 1951 after eating ergot contaminated rye bread (Fuller, 1968).

Waste disposal. As mentioned before, waste disposal is a problem for any sedentary community and as cities grew the problem became more acute. The city of London provides a good example. The city's medieval sewers were used to collect rainwater, not sewage. Chamber pots were emptied into the streets and the muck collected by farmers to cart to their fields and use as fertilizer. As the city grew, the distance the farmers had to travel increased until collection and transport were no longer profitable. Scavengers were appointed to clean the streets in each borough but eventually the waste was diverted into sewers leading to the Thames (Hearfield, 2009). To make matters worse, the Thames is a tidal river and at high tide water from the North Sea can and does flood parts of the city. Consequently, the muck that is thrown into the river may be returned by the river (Prockter, 2007). This led to outbreaks of infectious disease carried by feces-contaminated water, such as the 1854 cholera epidemic in which 10,000 Londoners died (Hearfield, 2009).

Rats. If there is any animal closely associated with the medieval city, it is the rat. The growth of cities fostered the global distribution of rats because of their ability to live in urban environments close to humans and take advantage of discarded food and transportation opportunities (Yu, Jamieson, Hulme-Beaman, et al., 2022). Because of their secretive nature it is hard to estimate the number of rats in a city, but one authority has placed it as approximately the same as the number of human inhabitants (Zinsser, 1935). Rats carry multiple diseases, including Leptospirosis, Hantavirus, Lymphocytic Choriomeningitis, Salmonella, Tularemia, and Rat Bite Fever. These diseases can be transmitted through rodent urine, feces, and saliva or through breathing air contaminated with waste (CDC, 2022).

The plague most associated with rats is the Black Death or Bubonic Plague, which struck western Europe in 1347 and over a period of seven years killed between 30 percent and 60 percent of the inhabitants. Plague is caused by the bacterium *Yersinia pestis* and transmitted from rat to human by the Oriental Rat Flea, *Xenopsylla cheopis*. The rat is the flea's preferred host, but when the rats succumb to plague themselves, the flea turns to human hosts to obtain their blood meal. Plague takes three different forms: 1) Bubonic plague which begins with flu-like symptoms and progresses to black swollen lymph nodes (buboes) and causes death in three days; 2) Septicemic plague, caused by multiplication of plague bacilli in the blood and leads to gangrene and organ failure, and 3) Pneumonic plague, caused by multiplication of plague bacilli in the lungs and progresses to pneumonia, respiratory failure and death in as little as 24 hours (Cleveland Clinic, 2022; Mark, 2020).

Armies and traders. Although the early cities were self-sufficient communities, there was contact with other cities through trade and armed conflict. Many ancient and medieval plagues were spread by traders bringing goods from China. Plague is believed to have originated in China or Central Asia and was brought to Mediterranean ports in Genoese trading ships carrying infected rats. From these ports the disease spread rapidly throughout Europe. In subsequent years Europe was buffeted by repeated waves of Plague, each successively milder and each thought to have been brought from Asia by traders (Encyclopaedia Britannica, 2022; Mark, 2020). The Plague of Cyprian (250--266 CE) and the Plague of Justinian (541--542 CE) provide additional examples. Each of these plagues is believed to have originated in China and was transported by traders traversing the Silk Road to Rome and Constantinople respectively. The Plague of Justinian is especially noteworthy because it led to the death of 50 million people and is believed to be the first well documented outbreak of Bubonic plague (Mark, 2020).

Many ancient plagues were spread by armies, the Antonine Plague (165--ca. 180/190 CE) being one example. This plague broke out among Roman soldiers besieging the city of Seleucia in Mesopotamia and was brought back to Rome when they returned. Syphilis, the Great Pox, first appeared in epidemic form among the soldiers of Charles VIII in the 1494 siege of Naples. When the French withdrew and disbanded their army, the returning soldiers spread the disease throughout Europe. When it first appeared, syphilis was recognized as a novel or *de novo* disease and was much more fulminant than it is today (McNeill, 1977).

Healthcare. Urbanization fostered the emergence of true healthcare practitioners. One of the first of these was the iatros or Greek craftsman physician who could prognosticate the outcome of a patient's illness. This period also saw the first medical writings such as the Ebers Papyrus (1550 BCE), a discourse on herbal remedies and *On Airs, Waters, and Places* by Hippocrates (400 BCE). The cause of most disease was attributed to supernatural agency. For example, the Antonine Plague (165--ca. 180/190 CE) was blamed on heaven's wrath at the Christians who refused to perform state sponsored sacrifices to the gods. Although the cause and epidemiology of many of these ancient plagues are now well understood there are some whose cause remains unknown. These include the Plague of Athens that began in 429 BCE and led to the death of between 75,000 and 100,000 people within a walled city under siege. A second example can be found in the English Sweating Sickness that began in 1485 CE with four subsequent epidemics. This strange disease affected the nobility more than the yeomanry. It has been suggested that it was caused by hantavirus (Mark, 2020; Heyman, Simons, & Cochez, 2014).

Beginning in the 18th century the world's economy began to change from one dominated by agriculture and handicrafts to one dominated by industry and machine manufacturing. This was the Industrial Revolution. It changed how people lived and worked and introduced a host of new health challenges.

The Industrial Revolution

The Industrial Revolution has been attributed to many causes including the birth of capitalism, European imperialism, advances in science, financial innovation, and improvements in transportation and communication (Bhasin, 2019). While all these suggestions have merit, the factors that influenced the health and disease of the population are more straightforward. Technological innovation and the use of steam power made mass production possible and gave rise to the factory system. Emigration from the countryside swelled the cities and created the squalid living conditions described by Charles Dickens. Crowding, poor sanitation, and malnutrition led to waves of epidemic disease. Interestingly, mass production and the factory system created a host of never-before-seen occupational diseases.

Technological innovation. The Industrial Revolution first occurred in England and the changes there illustrate the health consequences that this new way of life engendered. Technological innovation in the second half of the 18th century made mass production and the factory system possible. These include invention of the hand-powered spinning jenny (1767) and water-powered water frame (1769) that were used to spin cotton and wool into yarn. The subsequent invention of the power loom (1786) and wool combing machine (1789) automated every phase of the textile industry from carding to weaving. Richard Arkwright, inventor of the water frame, also developed the factory system of production, thereby making possible the explosive growth of the textile industry in England. In 1780 there were 20 cotton mills in England; by 1800 there were 900. The increase in the number of English looms tells a similar story. In 1803 there were 2,400 looms in England; 30 years later there were 100,000 (Hills, 1993).

Migration to the cities. Eighteenth century innovations in agriculture, such as crop rotation and invention of the seed drill (1700) by Jethro Tull, led to increases in food production and a subsequent population boom (Beck, 2017). Meanwhile, the Enclosure Movement (1604--1914) abolished the open field system of agriculture that had existed for centuries and allowed the wealthy to privatize land that was formerly open to all. These acts of parliament forced small farmers off their land, and the rural poor migrated to cities where jobs were available in newly erected factories (Beck, 2022). The London census tables chronicle how the city swelled with immigrants. Between 1801 and 1811 the population of London increased by 206,780. Between 1851 and 1861 the population increased by 536,546, more than 20 percent of the 1851 population (Demographia, 2001).

Living conditions. London and the other factory cities did not have the infrastructure to support the surge of new migrants. Factory workers were poorly paid and crowded into dark, squalid, vermin-infested tenements. In the 1830s Dr. William Duncan carried out a sanitary survey of Liverpool and found one-third of the population living in cellars with earthen floors and no ventilation. In some tenements, 16 people lived in a single room and used a common privy (Ashton, 2006). The diet of a factory worker was as bad as the housing and often consisted of nothing more than bread, tea, oatmeal, and potatoes. And if this was not enough, the air itself

was polluted by coal smoke from every chimney and factory smokestack. Factories depended on the steam engine to power their machines and steam engines depended on coal to heat water (Kriger, 2021).

Epidemic disease. The combination of crowding, malnutrition, and lack of sanitation made industrial cities ideal breeding grounds for epidemic disease. Tuberculosis, then known as consumption, was the major killer of the period, and is reported to account for one-third of British deaths between 1800 and 1850. Louse-borne typhus is another disease that thrives in crowded and squalid conditions. In the epidemic of 1837-1838 most of the deaths associated with fever were attributed to typhus with an additional 16,000 cases a year reported in each of the next four years. Smallpox was also rampant, with a high mortality rate among infants and children. Although Jenner had discovered the efficacy of vaccination with cowpox virus in 1796, this information was unknown to most Londoners (Douglas, 2002).

Not knowing anything about bacterial contamination, Londoners continued to dump their sewage into the Thames River, from which they obtained their drinking water. This set the stage for repeated epidemics of cholera and typhoid fever, both of which are water-borne diseases. Cholera was especially lethal at the time, and Britain was wracked by four cholera epidemics between 1830 and 1870 at the cost of 52,000 lives (Lemon, 2022). During this period, cholera also struck the eastern United States in repeated waves. Typhoid fever was also prevalent with 19 outbreaks between 1867 and 1879 (Hart, 1895).

Occupational diseases. The factory system of production and the new occupations were dangerous and created a host of new diseases. Many factories and mines employed children as laborers, some as young as four years old. Child labor was popular among factory owners because children could be paid less than adults for the same job and they were easier to discipline. Spinning machines did not have the safeguards of today, and children working near them were sometimes horribly injured by the spinning belts and shafts (Beck, 2021).

Below are samples of some of the unique occupational diseases that arose during the Industrial Revolution.

...Mad Hatters' Disease. During the 19th century, mercuric nitrate was used by hatters to make felt from animal skins. Prolonged exposure to the mercury fumes produced symptoms of confusion, tremor, and psychosis (Zambon, 2020).

...Chimney Sweeps' Carcinoma. This was a form of scrotal cancer found among young men who worked in soot and, if untreated, was invariably fatal. Unaware that soot contained carcinogens, boys as young as four were hired to crawl through narrow chimney ducts (Benmoussa et al., 2019).

...Phossy Jaw. In the early 1800s it was discovered that adding phosphorus to match heads made them easier to ignite. Demand rose for the new phosphorus matches and young women ("matchgirls") were employed to make them. It was later found that inhalation of phosphorus fumes caused a painful and disfiguring necrosis of the jaw (Isaac, 2018).

...Woolsorters' Disease. In the mid-19th century woolsorters in the city of Bradford fell ill with a mysterious disease characterized by tightness of the chest, difficulty breathing,

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cyanosis, and death. In 1870 it was found that the disease was inhalation anthrax. The factory had imported mohair (goat's hair) from Asia Minor contaminated with anthrax spores (Laforce, 1978).

Other occupational diseases continued into the 20th century and a few still affect workers today. These include radium jaw, byssinosis, asbestosis, lead poisoning, silicosis, and black lung.

Medicine and Public Health. The Industrial Revolution saw extraordinary advances in healthcare. One of the most important of these was the discovery of bacteria as the cause of human disease, leading to the adoption of the germ theory as a replacement for the old miasma theory. Vaccination began during this period with the invention of vaccines for smallpox (1796), cholera (1885), rabies (1885), and tetanus (1890). Surgical anesthesia began in 1844 followed by surgical antisepsis in 1867. Casualties in the Crimean War (1853-1856) and the American Civil War (1861-1865) led Florence Nightingale and Clara Barton to develop the profession of nursing. The first diagnostic x-rays were taken during this period and the first blood transfusions were given.

Of all the advances in healthcare during the Industrial Revolution, perhaps the greatest was the government's belated recognition of its obligation to safeguard the health of its citizens. The wretched living condition of the poor led social reformers like Sir Edwin Chadwick to propose legislation that led to reform. Bacteria had not yet been discovered in the 1840s and contagion was attributed to miasmas, that is, bad smells. Thus, it seemed reasonable to prevent infectious disease by the removal of filth. Despite this lack of understanding, Chadwick's magisterial 1842 *Report on the Sanitary Condition of the Labouring Population of Great Britain* exposed the intolerable living condition of the poor in a way that legislators could not ignore. With considerable political acumen, he argued that the cost of disease was greater than the cost of clean water and housing, and that better living conditions would improve the morality of the poor (Morley, 2007). However, parliament still dragged its heels, and it was not until another cholera epidemic struck in 1848 (52,000 deaths in England and Wales; 14,137 deaths in London) that *The Public Health Act of 1848* became law. This act gave local municipalities the authority to deal with water supplies, sewage, garbage removal, and other issues of sanitation. Expansion of the electorate in 1867 to include working class males (UK Parliament, 2022) made their representatives more responsive to public health issues and paved the way for the more comprehensive Public Health Act of 1875.

The sequence of events leading to the factory system of production, working class poverty, and epidemics in England during the Industrial Revolution was subsequently repeated in the United States and other countries in Western Europe. Meanwhile, another drama was unfolding that would decimate indigenous cultures and shake the present world.

Globalization: The Age of Discovery

During the 13th through the 18th centuries, the maritime nations of Europe embarked upon voyages of discovery that would change the world. The original motivation for these explorations was a search for a maritime route to India to enhance international trade. However, once new lands were discovered, the motivation turned to conquest, exploitation, colonization, and enslavement of native peoples. Among the many evils of this time was the exposure of indigenous peoples to European pathogens they had never before encountered. These included

smallpox, malaria, influenza, yellow fever, typhus, measles, plague, typhoid, cholera, and pertussis (Boyd, 2022).

The Pacific islands provide a good example. When Captain Cook discovered the Hawaiian Islands in 1778, the population numbered about 300,000. By 1820 the population had fallen to 135,000 and by 1876 it was only 53,900 (Shulman, 2009). This population decline was caused by repeated epidemics of infectious disease introduced by visiting ships. These not only include epidemics well known to Europeans, such as cholera (1804 and 1895) and smallpox (1853), but also epidemics of childhood diseases (measles, mumps, and pertussis) that were deadly to indigenous Hawaiians. During 1848-1849, over a period of about six months, a series of epidemics (measles, pertussis, dysentery, and influenza) swept across the islands and killed an estimated 10,000 people, one-tenth of the population (Schmitt & Nordyke, 2001). Other Pacific islands experienced similar waves of epidemic disease. The 1875 measles epidemic killed between 20 percent and 25 percent of the population of Fiji (Shanks, 2016). Epidemics of dysentery (possibly *shigellosis*) decimated Tahiti (1792 and 1807), French Polynesia (1843), and the Cook Islands (1830 and 1843) (Shanks, 2006).

The indigenous peoples of North America were similarly affected by their contact with European pathogens. Smallpox ravaged the Pacific Northwest with six epidemics between 1781 and 1863. William Clark of the Lewis and Clark Expedition (1804-1806) wrote in his journal, "They all died with the disorder . . . Small Pox destroyed their nation" (Boyd, 2022). Like the Pacific Islanders, the indigenous peoples of the Pacific Northwest experienced measles as a fulminant disease. The epidemic of 1847-1848 is estimated to have killed 10 percent of the Native Americans in this region (Boyd, 2022).

The inquisitive reader may well wonder why the childhood diseases of Europe were so devastating to the inhabitants of the Americas and Pacific Islands. Although there are detractors, the prevailing theory is that the indigenous peoples were immunologically naïve to European pathogens. In other words, because the Europeans had experienced measles, mumps, and pertussis for millennia, the population developed constitutional factors that lessened the severity of these diseases. The indigenous people of the Americas had never been exposed to these pathogens and had not developed these constitutional factors.

Exactly what these constitutional factors are and how hereditary resistance/immunity is mediated is not well understood, but there is evidence that, in some cases, acquired immunity can be passed to future generations. Professor M. F. Guyer inoculated successive rabbit generations with *Salmonella typhi*, the bacterium causing typhoid fever. By the fourth or fifth generation, the rabbits produced anti-typhoid antibodies and were able to withstand injections of bacteria thirty to forty times stronger than given to the first generation (Guyer, 1923).

The history of epidemics supports the heredity of acquired immunity hypothesis. When an infectious disease occurs in successive waves, later waves are frequently less severe than earlier ones. When bubonic plague struck Europe in the Autumn of 1347, the case fatality rate approached 100 percent and, with each successive wave, the case fatality rate fell. By 1666, the last wave of plague in England, the case fatality rate was near zero (Zinsser, 1935). Epidemic syphilis showed a similar pattern. When syphilis emerged in the early 1500s, it was often lethal and regarded as a major plague. The disease is now more chronic and rarely fatal even in untreated cases (Zinsser, 1935).

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This saga of immunologically naïve populations and their vulnerability to novel pathogens is of particular relevance today. By the mid-20th century, the successful use of vaccination and antibiotics had lulled many scientists and clinicians into believing that the conquest of infectious disease was at hand (Winslow, 1943). Reason dictated that it was now time to turn our collective attention to the diseases of affluence, such as diabetes, hypertension, atherosclerotic heart disease, and lung cancer. Although these ailments remain important causes of morbidity and mortality in the West, it is now clear that epidemic infectious disease is far from over.

Multiple new human pathogens have emerged in the last 30 years. About 70 percent of these are zoonoses, that is, diseases that can be transmitted to humans from animals. In many cases, the animals harboring these pathogens show no evidence of illness. Presumably, the long association between animal and pathogen has made the animals immune. In contrast, modern human populations are immunologically naïve and at risk for epidemic zoonotic disease.

The number of these new zoonoses is impressive and includes Hantavirus pulmonary syndrome (1993), Ebola fever (1995), West Nile encephalitis (1999), Rift Valley Fever (2000), SARS-CoV (2003), Avian (H5N1) influenza (2004), Zika virus (2007), and MERS-CoV (2012). The pandemic caused by Human Immunodeficiency Virus (HIV) also has a zoonotic origin; the virus has been traced to a similar immunodeficiency virus circulating in chimpanzees in central Africa. The source of COVID-19 is still unclear, but it may also have an animal origin.

The recent influx of zoonoses is largely attributable to changes in the way we live. Deforestation brings humans into closer contact with animals whose habitats are disturbed. Global warming increases the area in which insect vectors can thrive and transmit disease. For example, there is concern that warming in northern latitudes will extend the habitat of the Deer Tick and thereby spread Lyme disease to Canada (EPA, 2021). War and political disruption have increased the number of refugees and displaced persons. Many of these may harbor infectious diseases and reintroduce them into their destination countries. Hmong refugees from Thailand with active tuberculosis emigrated to the United States after inadequate screening (Oeltmann, 2008). The rapidity of global travel allows new pathogens to be introduced to any country in the world within hours. For example, at the beginning of the COVID-19 pandemic it was possible to book a direct flight from Wuhan, China (allegedly the epicenter of the outbreak) to New York City.

Conclusion

Throughout human existence, disease has been tied to lifestyle, and every change in our way of life has been attended by unexpected health consequences. In the past, historians have tended to minimize these consequences. Frequently, they minimize the plight of the poor during the Industrial Revolution, while extoling the innovation that gave birth to modern industry. To be fair, our predecessors were hampered by ignorance. The germ theory of disease is less than 150 years old, and viruses were shown to be pathogens less than 90 years ago. Physicians in the 1800s could not have known that inhaling mercury fumes would cause neurological damage or that inhaling phosphorus fumes would cause bone necrosis.

That being said, we do need to hold public officials accountable for what they know and fail to do. Public health authorities agree that epidemic infectious disease from animal reservoirs (zoonoses) is a major threat. Moreover, much is known about how to prevent epidemics of these emerging infectious diseases. These include cessation of deforestation, control of animal reservoirs, elimination of insect vectors, protection of vulnerable populations, international travel screening, and increased epidemiological surveillance. But these strategies require international cooperation, funding, and political will. Although difficult, it can be done; all three united in the world elimination of smallpox (1980). Measles was eradicated in the United States (2000), and scientists believe that it is also possible to eradicate mumps, Rubella, polio, and Lyme disease.

Human life will continue to change and with change will come new health challenges. Future generations will be exposed to deadly pathogens that are unknown today. Without the concerted effort of all nations and attention to causative factors we know, we ensure our descendants will suffer other plagues like HIV and COVID-19.

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PROFILES IN COURAGE



Defeating Hate: A Survivor's Story

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Author Note

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Introduction

As a child in the early to mid-1950s, World War II and the near total destruction of European Jewry by the Nazis were abstract occurrences in far-off unrecognizable lands. About 15 years after the war, I met Vera Goodkin, most likely at a family gathering. But at my young age, the memory of that first encounter faded over the years. I recall a petite woman with a winning smile and congenial personality. She was married to my mother's cousin, Jerry Goodkin.

When I was in my teens, I discovered that Vera was a Holocaust survivor who had immigrated to the United States with her parents when she was my age. At that time, I was learning the history of the war and the Holocaust and was somewhat better able to put Vera's horrifying experiences into perspective. Just entering early adolescence, she had to deal with life and death situations on a daily basis. At Vera's age, I was occupied with mowing lawns and fishing with my friends.

I don't recall Vera talking of her wartime experiences back then. Occasionally, I would hear my parents mention Vera and would grab snatches of the story she had related to them: harrowing escapes from Nazi pursuers through the forest in a quest to reach the Hungarian border, betrayal, capture, and forced separation from her mother and father who both ended up in separate transit prisons. These detention centers were way stations to concentration camps and certain death. Vera, their one child, who was then 14 years old, had been consigned to an orphanage only to be saved by a Swedish diplomat and eventually reunited with her parents, Emil and Margit. Miraculously, both parents had escaped the gas chambers. The following account is Vera's story with many of the blanks filled in. But I still had much to learn about this young girl's survival in a world turned upside down by madness, inhumanity, and war.

And So Her Story Begins....

It seemed the perfect life for a youngster growing up in a region of Czechoslovakia called "Bohemia." Vera was the only child of an upper middle class family. Her father, Emil Herman, a respected physician, had moved his family to pursue professional opportunities. Her mother, Margit Burger Herman, was a wise, loving, and resourceful matriarch. (*NB. Vera's surname and that of the author is an ironic coincidence.*)

Profiles in Courage

Vera Herman was born on June 13, 1930 in Užhorod, a city located in the foothills of the Carpathian Mountains. The family then moved to Hradec Královè about 63 miles east of Prague at the confluence of the Elbe and Orlice rivers. Although Czech was Vera's mother tongue, she learned Hungarian by age 4 so she could communicate with her maternal Hungarian grandparents. She even learned German in school and a governess helped hone her language skills. Vera's aptitude for languages also enabled her to learn Slovak and French. In their home, she spoke Hungarian to her mother, Czech to her father. By her own account, it was a privileged idyllic childhood. She played with her friends, ice skated, and took skiing lessons. Her parents, both avid tennis players, often included their daughter in the sport. "I loved playing their 'ball boy' at the early morning tennis games" (Goodkin, 2006, p. 64).

Despite the tranquility, a yet obscure but ominous cloud lurked on the horizon. Emil and Margit were certainly not ignorant of what had been occurring in Germany in the 1930s. But, as with many other Jews, they saw Hitler's rise as an aberration. Shortly before German troops goose-stepped into Prague on March 15, 1939, Vera recalled a conversation between her mother and grandmother. Her grandmother warned, "Look, you see the handwriting on the wall? Things are so bad in Germany. Wouldn't you think of immigrating to the west?"

"And my mother said, 'Oh no, it can't happen here. This is a democracy. We're not going anywhere.' And my father held similar feelings" (Holocaust Museum Interview, 1989).

Vera lived in their Hradec Královè home until 1939. Everything changed when German troops occupied Bohemia and soon all of Czechoslovakia. Antisemitism, which had occasionally reared its ugly head, quickly became evident and frequent. Vera's first experience with hate came shortly after the Germans arrived--slights and epithets thrown at her in school. Vera remembers her father rising early some mornings to clean antisemitic graffiti from his doctor's shingle in front of their home.

Czechoslovakia had emerged as a nation state from changing borders at the end of World War I, and by the early 1930s, it was one of the most progressive and liberal democracies in Europe. The Germans had fully occupied the country by the end of 1944. Their fascist puppets instituted the so-called "Nuremberg Laws," which institutionalized Nazi racist theories. Living conditions subsequently grew progressively worse for all Jews who suddenly became non-citizens.

"The first time I was called a 'dirty Jew,'" Vera recalls, "I was totally confused. I didn't know where that [derogatory name] came from. Little by little, as we lost our civil rights, as we were subject to the Nuremberg Laws, as we lost the protection of the law and [as] we lost the ability to make a living or to get an education, we began a gradual process of dehumanization. . . [that] began with incredible manifestations and grew like a malignancy toward the ultimate goal of murder" (Wallenberg Foundation Interview, 2007).

While in hiding in November 1943, the "Jewish Property Inspection Team" visited them in the tiny attic room in which they were living. This professed "team" consisted of a member of the SS, the Slovak secret police, a local collaborator who had betrayed them, and a poor Jewish attorney who was forced to prepare "legal papers" allowing for the confiscation of all their belongings. "This was an unmistakable signal that we were going to be in the next transport

to Auschwitz [in Poland annexed by Germany]. The Auschwitz transports had already begun. And we already knew what had happened to my maternal grandparents” (Holocaust Museum Interview, 1989).

Vera and her parents stuffed their meager belongings into knapsacks and, with only the clothes they were wearing, set off on foot. Local farmers would occasionally make a little money transporting fugitives in horse-drawn wagons or hiding them on their farms. Constant fear for their lives became an everyday reaction. “You wake up hungry, you go to sleep hungry, and you don’t know whether you’re going to survive the day. It informs all your thoughts and all of your actions. And yet there was hope because, without hope, none of the survivors would have made it” (Wallenberg Foundation Interview, 2007)).

The Herman family recognized that they were no longer safe in a nation now in control of Nazi puppets. They had become homeless refugees in Slovakia on Czechoslovakia’s eastern border. They sometimes hid in basements, often in attics and barns. Despite the fact that thousands of Jews had already been rounded up in rural parts of Hungary, Budapest was still a refuge for Jews. The family’s only option was to join Margit’s parents who still lived there. Their escape across the border to the south into Hungary, however, would be another harrowing experience.

The trek from Slovakia began with what Vera later described as a journey similar to what took place in antebellum America--the “Underground Railroad” in which sympathetic “conductors” guided escaped slaves northward to freedom. In Slovakia, mostly gentile families, who lived near the Hungarian border, were willing to shelter fugitive Jews. Others acted as guides. Margit had made contact with an underground group that offered to help.

“We were instructed to remove the yellow stars, to be careful not to leave any tell-tale yellow threads behind, to get on a local train without any luggage, and try to look inconspicuous in the hopes of not being asked for identification papers. When we got off the train, we were to follow, at a respectable distance, a tall young man at the end of the platform” (Goodkin, 2006, p. 73).

The young man led Vera and her parents to a cottage in the woods. He propped a ladder against an attic window and motioned them to climb through the partially opened window. The very next night, when the family [in the house] was asleep, the farmer again propped the ladder against the window and signaled them it was time to go. Torrential rains had been falling for hours, and by the time the trio had descended the ladder, they were soaked to the skin. And their perilous odyssey had barely begun.

With each step, we sank ankle-deep into the mud. . . . Our guide however, noticed an unaccustomed flicker of light at a distance. Quite logically, he feared we might be apprehended because of a change in the usual guard. His spontaneous decision was to turn on his heels and head home without a word, leaving us to our own devices in the pitch-dark forest in the pouring rain. I watched in utter amazement as [my mother] broke away from us, pursuing our guide at an incredible pace. “You have children of your own,” she cried out, “Are you going to let this one die?”

He motioned us to follow him to the border. The next night, we made it across the Hungarian border and boarded a train for Budapest where Jews, while harassed, still lived in relative safety. This successful escape bought us two more months. . . (Goodkin, 2006, p. 59).

Margit's Choice

It was January 1944 when their luck ran out. Members of the fascist Arrow Cross Party, the Hungarian version of the "Brownshirts," that is, Hitler's militia bullies, arrested them. The Arrow Cross fascist forces hustled the family off to the medieval fortress of Tolonc, a bedbug-infested facility housing Jewish prisoners in downtown Budapest. The following day, Vera and her mother were separated from Emil, who was taken to a concentration camp on the Austro-Hungarian border. Fortunately, that camp had no means of performing mass exterminations.

Vera and Margit's incarceration at Tolonc was cut short when they were transported to Kistarcsa, a similar holding prison not far from Budapest. In late July 1944, the prison commandant assembled mothers and their children in the prison yard and introduced them to three members of the Swedish Red Cross. Citing provisions of the 1929 Geneva Convention on Prisoners of War, the commandant had agreed to release all children under the age of 14 if their mothers were willing to let them go. Most would not give up their children, knowing they would never see them again. It was too painful to release them to an uncertain fate.

Realizing it was her daughter's only chance to live, Margit pushed Vera forward. Instantly the three Swedes escorted Vera out of Kistarcsa to a waiting car. "I later learned that as I was out of eyeshot, my mother passed out" (Holocaust Museum Interview, 1989). But when the car sped away, the men revealed to Vera that they didn't really work for the Swedish Red Cross but rather for a Swedish diplomat named Raoul Wallenberg whose self-imposed duty was to save Jewish children.

Years later, when relating this experience, Vera pointed out that her mother always had a sixth sense and trusted these people, telling her: "I was sure you were going to something better, and if you were going to get decent, humane treatment and a chance to survive that hell, I was willing to take a chance of never seeing you again" (Holocaust Museum Interview, 1989).

"The Angel of Budapest"

On March 19, 1944, four and a half years after the outbreak of the war, the German Army finally occupied Hungary. The newly installed Nazi puppet leaders quickly began turning over Hungarian Jews in the outlying countryside to the Nazis. Overall, some 450,000 Jews were deported. The notorious Adolph Eichmann, intent on implementing "the Final Solution," arrived in Budapest, responsible for overseeing the extradition of all remaining Jews in Hungary to death camps.

That summer of 1944, the more than 200,000 Jews still living in the Hungarian capital, who had not yet been rounded up, were slated for liquidation. At the Embassy of Sweden, a neutral nation, provisional passports were being issued, but the numbers issued were insufficient. More powerful measures to save the condemned were needed. Responding to

the crisis, negotiations took place between the Swedish Foreign Ministry, the American War Refugee Board, and the World Jewish Congress. These organizations recommended that someone from neutral Sweden be appointed to lead a mission to rescue the Jews of Budapest. Raoul Wallenberg became that person.

Who was this mysterious man who had intervened to save Vera's life? Raoul Wallenberg, 32, was born to a Swedish family of bankers, diplomats, and politicians. He later graduated with a degree in architecture from the University of Michigan, but he never practiced that profession, becoming a businessman instead.

From the moment Wallenberg arrived in Budapest in July 1944 as Secretary to the Swedish Embassy, he distinguished himself as a talented and effective diplomat. At that time, the Nazis had scrapped deportation trains after an intervention by Sweden's King Gustav V. Jews, however, were still being transported by other means or in forced marches to labor camps, principally near the Austrian border. Wallenberg was a non-threatening negotiator who had an uncanny ability to win over his opponents, one of whom was Adolph Eichmann. Raoul Wallenberg's efforts, often exercised without his own government's instructions, enabled him eventually to effect the survival of an estimated 100,000 Hungarian Jews from Nazi persecution.

To accomplish this massive, stealthy undertaking right under the noses of the German authorities, he distributed "Schutzpasses," protective passports, to Hungarian Jews and set up safe houses for them. The blue documents with the imprint of Sweden were provisional documents which gave Jews the status of Swedish citizens.

The Schutzpass ("to protect" in German) did not entitle anyone to cross an international border. Instead, this fake authorization was a takeoff on the diplomatic immunity pass that diplomatic employees carried in host countries to indicate that they were not subject to the host country's laws. When Wallenberg arrived at the embassy, he determined that the diminutive paper identifications would not impress anyone, so he redesigned the diplomatic immunity pass. The new document was 8½ by 11 inches, printed on parchment in the Swedish royal colors, and included ample stamps and seals to impress the SS and intimidate the Arrow Cross. The new "protective pass" or Schutzpass, was supposed to carry the same authority as the diplomatic immunity pass.

In his quest to save as many Jews as possible, Wallenberg also employed what some later called his little side joke. He selected several blond, blue-eyed Jews who looked remarkably Aryan and dressed them in SS uniforms. They often wandered Budapest streets and occasionally pulled rank on the real SS by commandeering groups of Jews who had been taken into custody and were being led off to death camps (Wallenberg Foundation Interview, 2007).

But producing Schutzpasses was his main focus. At first, Wallenberg was able to print only a thousand copies, but quickly raised the quota to 4,500. A more accurate estimate, however, brought that number closer to 13,500. Operating from a special department within the Swedish Embassy, Wallenberg had more than 300 volunteers assisting him. The 32 "safe houses" he established came under the protection of the Swedish Embassy with apartment houses flying the Swedish flag.

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The vehicle that had whisked Vera from Kistarcsa Prison took her to one of those safe houses in Budapest where she occupied a room on the third floor. But not for long. A few nights later, as air raid sirens announced the arrival of Soviet bombers, she and 128 other children in the house took shelter in the basement. When the raid finally ended, they tried to return to their rooms, but they discovered the upstairs had been destroyed. Russian bombs had leveled the apartment house. The children returned to the cellar, their only shelter.

Wallenberg never identified himself but the youngsters recognized him by his characteristic leather coat. “He had such a wonderful sense of humor,” Vera calls to mind. “He used to come to the home and bring food at night, and he would joke and play with the children. For those among us, his name became synonymous with a blessing for after all, we owed our lives to him. He had no reason other than purely humanitarian motives to do what he was doing, and he was doing a great deal to endanger himself” (Holocaust Museum Interview, 1989).

The cold, damp basement turned out to be no better than any of the vermin-ridden prisons these Jewish children had previously known and where they had subsisted on a starvation diet. Yet Vera recalls the morale in that safe house basement as being sky-high. “We felt we were considered worthy of saving and that was an incredible feeling” (Holocaust Museum Interview, 1989).

After living there for two weeks, Vera contracted scarlet fever and was admitted to a hospital for contagious diseases where she spent six weeks quarantined and recovering. It was only then, she remembers “that I first cried and cried, realizing I was alone in the world and what would happen to me” (Holocaust Museum Interview, 1989).

And “what would happen” turned out to be too horrific to imagine. It was during her hospital stay, Arrow Cross thugs broke into the Swedish safe house and kidnapped the children, all of whom were subsequently murdered. Only Vera’s absence at the time due to having scarlet fever ensured her survival. Once released from the hospital, she was assigned to another Swedish-run orphanage, where she remained until early October 1944.

Meanwhile back at Kistarcsa Prison, Margit boarded a sealed cattle car on what seemed a one-way journey to Auschwitz. Along the way, the death train, containing about 2,000 men, women, and children, came to an abrupt stop near another holding camp. Why had the journey been delayed? It seems that Admiral Miklós Horthy, Hungary’s puppet leader, had ordered the Hungarian high command to halt the train because his Jewish daughter-in-law was aboard. Guards off-loaded the prisoners while they searched for the woman.

When my mother jumped off the train and got used to the light, she saw a man across the yard that looked very much like her husband. In fact, that was who it was. My father had been transported there and served as prisoner physician. He saw this chaos, so he passed by to see what was going on and, when he saw her, he disappeared and returned with a little vial of liquid. As he brushed by her, he put the vial in her hand and whispered, “Take this” (Wallenberg Foundation Interview, 2007).

Margit complied then promptly passed out. She was carried to the prison infirmary strapped to a stretcher to be treated by the prison physician, her husband. But for the success of Emil’s act, his wife fortuitously escaped the fate of the other prisoners.

After the transport's long, unscheduled stop, the Hungarians' German masters angrily inquired why the train had been delayed. In a rage, they ordered the Hungarians to load the prisoners onto trucks immediately, take them to a nearby forest, and machine-gun everyone. Only four survived the massacre from that transport of 2,000: the young Horthy daughter-in-law, Margit, who was in the prison infirmary, and two others who successfully hid themselves. These four remained in this last holding prison on Hungarian soil.

Margit had cheated death yet again. She then became part of the prison's female population put to work in the prison tailor shop sewing uniforms for the SS. She didn't see Emil again for three months and then only after Hungarian partisans, many of whom were Jewish underground fighters, sabotaged the prison gates, enabling many prisoners to make a break. Most were recaptured, but luckily in the chaos, Emil and Margit found each other, eluded the prison guards, and began a long three-week journey back to Budapest on foot. They hid in burned-out barns by day, traveling at night, and scavenging whatever they could to eat. In Budapest, Emil hid his wife in a bombed-out building while he sought to find his missing daughter. Margit had already told him how she had given Vera to three men from the Swedish Red Cross.

Fearful he would be arrested along the way, Emil finally arrived at the Swedish Embassy where he found a chaotic beehive of activity with people pushing and shoving to get in. Once inside, he encountered long lines of other desperate men and women hoping to obtain a *Schutzpass*. Emil finally met Raoul Wallenberg, an encounter that lasted just a few minutes but remained indelibly engraved in his memory the rest of his life. He would always remember the handsome, eloquent, elegantly dressed, and courageous man who saved his daughter. As with many others, Emil, too, recognized Wallenberg as a man of outstanding individual courage, humanity, and decisiveness. Vera later recalled that one of her "father's obsessions was to spread the word about him--to tell everyone what an altruistic, wonderful human being he was" (Holocaust Museum Interview, 1989).

A Diplomat's Fate

That same day, Vera reunited with her mother and father, each now protected by a *Schutzpass*. A rare Holocaust miracle had occurred. A father, mother, and their teenage daughter had persevered and overcome the odds even as the diabolically efficient Nazi killing machine would continue its ghastly work across occupied Europe for nearly four more months.

The final battle for Budapest was a classic urban fight--street by street, house by house, and floor by floor. Most resistance ended by January 16, 1945, when Soviet troops liberated the city and its inhabitants. But almost immediately, their presumed Russian saviors became their tormentors. Emil smeared raspberry jelly on his wife and daughter and applied old bandages to make them uninviting to the drunk and plundering "Russian soldiers who had made a mockery of liberation by raping women who had already been victims of the Nazis" (Goodkin, 2006, p. 59). This beyond reprehensible behavior was no surprise because this wartime conduct has been commonplace in the Russian armies for centuries, as it still is today.

By the time the Red Army appeared on the scene, Vera, already emaciated by a near-starvation diet, was also suffering from a respiratory illness. It was time to flee the city which had yet to be completely secured from hold-out German snipers. Emil, Margit, and Vera again began another epic trek on foot toward the Czech border. Converting an old orange crate into a

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makeshift sled, Emil dragged his daughter through the snow and bitter cold. The trio eventually hitched a ride on a dilapidated farm wagon.

The journey ended at their old hometown of Hradec Královè. When the war ended with the German surrender in the east on May 9, 1945, the Czech government offered Emil a position in the Czech Ministry of Transportation. That job required the family to move to the Sudenland in northern Czechoslovakia. "I thought I had died and gone to heaven because I was back in school . . . and the Czechs offered us a beautiful villa" (Wallenberg Foundation Interview, 2007).

A New Life

But yet again in the life of Vera and her parents, another brutal system was in the ascendency. "It appeared that we were trading Nazism for communism. My father was watching the political situation, and he said to my mother one fateful day, 'We're going to the United States'" (Wallenberg Foundation Interview, 2007). In February 1947, a year after the Hermans immigrated to America, the Communist Party of Czechoslovakia seized control of the government. For the next four decades, the nation of Vera's birth would be a satellite of the Soviet Union.

As countless refugees before them, the Hermans arrived in New York City on October 28, 1947, ironically, Czech Independence Day. And as with other refugees, the transition to a new life as Americans was difficult. Emil had been a psychiatrist in the "old country," but he now had to take qualification exams all over again, a process that took a year and a half. Nevertheless, Emil practiced his healing art until he died in 1972. Margit passed away in 1995 at the age of 93. Until then, she had been an active volunteer who ran the gift shop in a hospital two days a week.

Becoming an American for then 16-year-old Vera was fraught with trepidation and some anxiety. Learning English was hardly a problem for a girl who already spoke several languages with ease. The issue was her recent past and the trauma she had not only witnessed but suffered firsthand. Even though she and her parents had survived the war, the Holocaust had taken a terrible toll on her extended family. Vera's maternal grandparents, two maternal aunts and uncles, and their children had been murdered by the Nazis. And all her father's seven brothers and their families had perished in Auschwitz.

Conversations with her peers about classwork, movie stars, and other light teenage subjects occasionally drifted to Vera's experiences as a fugitive from the Nazis and the murder of her aunts, uncles, and cousins. At age 16, she was very anxious to share what had happened. But she got only two kinds of reactions: "Oh, you've suffered so much. Why don't you just put it behind you?" Well-meaning advice but impossible to deal with. "The other reaction was responsible for my keeping quiet for 37 years, and that was, 'You must be exaggerating. Human beings don't do things like that to other human beings'" (Wallenberg Foundation Interview, 2007).

In those 37 years, Vera continued with her life, attended college, married Jerry Goodkin, became mother of two daughters and grandmother to three. She earned a Master of Arts degree in French, a Doctor of Education degree in English, and retired after 44 years of teaching, her last position as a professor at Mercer County Community College in West Windsor, New Jersey.

Into the Gulag

And what became of the Swedish diplomat-hero who had intervened to save the Herman family and thousands of other Jews? On January 17, 1945, the day following the Hungarian capital's liberation, Soviet authorities arrested Raoul Wallenberg for unspecified reasons. He was never heard from again. Many theories abound. Why would the Soviet Union imprison a heroic Swedish diplomat whose humanitarian efforts had accomplished so much? One hypothesis is that Stalin himself found it improbable that a rich Swedish diplomat negotiating with Nazi officials would risk his life to save Hungarian Jews. He therefore must be a Nazi himself or that he was working on behalf of U.S. and British military intelligence. This belief was not a theory without merit for the Soviet dictator. Suspicion and distrust of his wartime allies had already been established in Stalin's mind.

To this day, Raoul Wallenberg's ultimate fate remains a mystery. One account, not deemed to be reliable, had him dying of a heart attack in Moscow's Lubyanka Prison in 1947. Another equally tragic fate had the Swedish diplomat exiled to a Soviet labor camp in Siberia where he was allegedly spotted as late as 1980.

In the years immediately after World War II, as the Cold War was quickly becoming the established world order, neutral Sweden seemed overly timid in bringing up the Wallenberg matter ostensibly so as not to offend the Soviets. As a result, efforts to secure his release or even hold the Soviet government accountable for the diplomat's ultimate fate seemed half-hearted at best or, at worst, unforgivable. Raoul Wallenberg, a World War II hero who never bore arms but saved thousands from certain death, tragically became a victim of the Cold War. "At the time of our liberation in Budapest," Vera recalls, "we had no idea what happened to Wallenberg. We didn't know for many years that he didn't go home and live happily ever after. Shortly after our liberation in January 1945, we went back to Czechoslovakia and heard nothing" (Holocaust Museum Interview, 1989).

Speaking Out

Raoul Wallenberg's heroic legacy was resurrected in the 1970s, about three decades after the war ended. By that time, the post-war generation that had never heard of the Swedish diplomat and those who had been alive during World War II had forgotten him or simply lost interest. Yet with a renewed emphasis on reckoning with the Holocaust, the greatest crime of the 20th century, Wallenberg was again in the news. He had become a subject of interest with renewed efforts not only to determine his fate but to honor him for his wartime heroism. What were the true circumstances of his disappearance? Was he still alive, languishing somewhere in the Soviet gulag?

In October 1983, Vera received a phone call from a woman in the New Jersey Jewish community who knew she was a Holocaust survivor. The woman asked, "Would you consider helping put on a commemorative event for a Swedish hero? His name is Raoul Wallenberg. Do you know who he is?"

That one question unlocked Vera's long, self-imposed silence when she accepted the invitation to give the keynote speech at an event held at Rider University on the second anniversary of Wallenberg's conferment as an honorary United States citizen. That honor

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was the outcome of a bill sponsored by Congressman Tom Lantos of California, another of Wallenberg's "children."

"Six weeks after that call, I stood before 800 people and spoke for the first time in 37 years, and I haven't stopped talking since" (Wallenberg Foundation Interview, 2007). Vera has told her own account and Wallenberg's story to countless audiences in high schools, colleges, universities, synagogues, churches, and other organizations. Her story and passionate dedication to her rescuer eventually resulted in a memoir, *In Sunshine and in Shadow: We Remember Them*, published in 2006.

Although Wallenberg's fate remains a mystery, the world has honored his memory by dedicating monuments and streets to him. In 1985, the portion of the street on which the United States Holocaust Memorial Museum in Washington DC, is located was renamed in his honor. The United States Postal Service released a stamp honoring Wallenberg. Canada also produced a Wallenberg stamp. In 1981, the same year he was posthumously granted U.S. citizenship, the Raoul Wallenberg Committee of the United States was established to "perpetuate the humanitarian ideals and the nonviolent courage of Raoul Wallenberg." Each year the Committee gives the Raoul Wallenberg Award recognizing those who carry out those goals. On July 9, 2014, Wallenberg was posthumously awarded the Congressional Gold Medal during a ceremony in the U.S. Congress "in recognition of his achievements and heroic actions during the Holocaust."

Attending a reception honoring Raoul Wallenberg's sister Nina Lagergren, Vera's thoughts turned to Nina's brother and how that in "subverting an evil system, he had forfeited all the normal joys of life. Those were the thoughts that went through my mind," as Nina approached Vera. "Carried to what appeared to be a logical conclusion, I speculated further: She must think, 'If it weren't for people like her, my brother would still be enjoying life.'" Instead, Nina smiled and said to Vera, "May I touch you? When I touch people he saved, I feel Raoul's presence" (Goodkin, 2006, p. 86).

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Canadian Postage Stamp Honoring Raoul Wallenberg.

Special Notation

The photograph used at the beginning of the article is adapted from an original of Vera Herman Goodkin holding a photograph of her parents. The original is used courtesy of the International Raoul Wallenberg Foundation with their permission. The closing photograph honoring Raoul Wallenberg is from the author of this article's personal collection.



THE CRITICS
CHOICE



Book Review

***The Choice: Embrace the Possible* A Memoir by Dr. Edith Eva Eger**

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Special Editorial Introduction

This book review was originally published in the Journal in Spring 2018. The author has expanded and updated the review with permission for its new publication thereby underscoring the remembrances raised up in this edition. Most powerfully, this review reminds us that we ever stand at crossroads in our lives. This is certainly true for our world today with the pathways to choose either justice and peace, or hate and anti-humanity. Yet we are also reminded that these same choices are not just for nations and institutions. They are most deeply the pathways that stand before us as individual persons in our daily lives. Indeed, this review asks: What pathways will we choose?

Author Note

The insights or views expressed in this creative reflection are those of the author. They do not reflect official policy or the position of any of the institutions the author serves. The author has no financial conflicts of interest.

Introduction

Readers of this review who identify yourselves as seekers, healers, caregivers, therapists, humanitarians, psychologists, ministers, pastors, social workers, psychiatrists, spiritual teachers, social change agents, meaning-makers: I urge you to read *The Choice*. The operative word here is “urge,” as in “urgent.”

During the present frenetic moment in history marked by Biblical scale floods, fires, tsunamis, and famine, as well as genocide, human-induced climate change, pathological world leaders, technology running amok, escalating international tensions, and threats of nuclear annihilation, how are we to cope? The healing of humanity and the precious blue marble upon whose bounty we live and thrive depends on the forces of Good prevailing over the forces of Evil. And it takes those with attributes of awareness, empathy, wisdom, compassion, lovingkindness, understanding, discipline, ego strength, humility and resilience to navigate the troubled waters of our time.

The Critic's Choice

Dr. Edith Eva Eger is one who possesses these attributes and, published at the age of 90, beautifully shares her story, teachings, and insights with the world. The more who read and heed it, the closer we will be to redemption.

Book Description

The year was 1943. At age 16, Edith Eva Eger, a trained ballet dancer and gymnast from Hungary, was arrested with her family and sent to Auschwitz. The Nazis murdered her parents, yet spared Edie and her sister. Edie's talents enabled her survival when she became a performer for the Nazi "Angel of Death," Dr. Josef Mengele. Her life hung in the balance during her internment in several death camps, during the infamous Death March and upon liberation, when she was nearly left for dead among a heap of corpses. How did this orphaned teenager live through unimaginable darkness and become Dr. Edith Eva Eger, a beacon of healing to thousands of veterans suffering from post-traumatic stress and traumatic brain injuries? Philip Zimbardo, PhD writes in the book's foreword, "Despite torture, starvation, and the constant threat of annihilation, she preserved her mental and spiritual freedom. She was not broken by the horrors she experienced; she was emboldened and strengthened by them. In fact, her wisdom comes from deep within the most devastating episodes of her life."

Edie's inner strength and wisdom compel her to choose to live with authenticity, to thrive, to get educated, to love, to parent, to find humor and joy, to teach, to heal. To believe in the goodness of human beings. Alongside Viktor Frankl's classic *Man's Search for Meaning*, Edith Eger's *The Choice* conveys the value of basic human goodness and does so through a process of profound liberation. No matter how dehumanizing and evil a situation may be, each one of us has a choice in how we respond.

Edie shares this powerful story when she speaks to patients or addresses audiences:

Today I have been assigned two new patients, both Vietnam veterans, both paraplegics. They have the same diagnosis (lower T-injury of the spinal cord), the same prognosis (compromised fertility and sexual function, unlikely to walk again, good control of hands and trunk). On my way to see them, I am unaware that one of them will have a life-changing effect on me. I meet Tom first. He is lying on his bed, curled up in a fetal position, cursing God and country. He seems imprisoned—by his injured body, by his misery, by his rage.

When I go to the other vet's room, I find Chuck out of bed and sitting in his wheelchair. "It's interesting," he says. "I've been given a second chance in life. Isn't it amazing?" He is brimming over with a sense of discovery and possibility. "I sit in this wheelchair, and I go out on the lawn, out on the grounds, and the flowers are much closer. I can see my children's eyes."

...The way I tell this story now...is that every person is part Tom and part Chuck. We are overwhelmed by loss and think we will never recover a sense of self and purpose, that we will never mend. But despite—and, really, because of—the struggles and the tragedies in our lives, each of us has the capacity to gain the perspective that transforms us from victim to thriver. We can choose to take responsibility for our hardship and our healing. We can choose to be free.

I read and process the written word slowly. Yet I read *The Choice* in a few short sittings and came away profoundly moved and forever changed. Dr. Edith Eva Eger models the highest attributes a human being can aspire to. Her practice as a clinician with candor about her lived experience and the choice she has made gives her empathy credibility and makes it palpable to the most wounded veteran of military service.

In the book's Foreward, Dr. Philip Zimbardo refers to Edie as a hero and puts that term in proper context:

I've sought to understand the mechanisms by which we conform and obey and stand by in situations where peace and justice can be served only if we choose another path: if we act heroically...Heroism is...a mind-set or an accumulation of our personal and social habits. It is a way of being...To be a hero requires taking effective action at crucial junctures in our lives, to make an active attempt to address injustice or create positive change in the world. To be a hero requires great moral courage. And each of us has an inner hero waiting to be expressed...Our hero training is life, the daily circumstances that invite us to practice the habits of heroism: to commit daily deeds of kindness; to radiate compassion, starting with self-compassion; to bring out the best in others and ourselves; to sustain love, even in our most challenging relationships; to celebrate and exercise the power of our mental freedom. Edie is a hero—and doubly so, because she teaches each of us to grow and create meaningful and lasting change in ourselves, in our relationships, and in our world.

That Edie not only survived, but went on to live a full and rewarding life would be remarkable by anyone's measure. Edie goes beyond remarkable as she inspires and teaches her readers through her candor, authenticity and gifted writing. How Edie rose from the depths of human suffering to living a life so well integrated and deployed makes for a riveting, inspiring memoir.

Closing Reflection

The Choice remains a powerful work, perhaps even more so since its publication five years ago. The choice facing individual humans and life itself is at a critical juncture. The central question is whether one's focus on individual needs will yield to those of the collective. When any of us is confronted with evil, distress, or seemingly insurmountable odds, can we elevate our consciousness, find our resilience, act with courage, and work for the well-being of the community, without regard to another's origin, skin color, religious belief, sexual identity, or social status?

The challenges we face are great:

.....Human-caused climate change is accelerating at an alarming rate, noted by the increased frequency and severity of storms, floods, wild fires, droughts, melting polar ice, and temperature extremes.

.....Limitless population growth, poor education, ever increasing need for energy and refrigeration, continuing extractive drilling and fracking, outmoded agricultural practices, and runaway development continue to pollute air and water, foster diseases, escalate carbon emissions, and exacerbate the climate crisis.

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.....The Covid-19 pandemic, now in its third year, has claimed the lives of nearly 6.5 million people and the variants continue to multiply and spread.

.....The prevalence of firearms per capita in the United States far exceeds that of any other country, 120.5 per 100 residents compared to Yemen, the next highest, at 52.8, and our neighbor Canada at 34.7. The frequency of mass shootings in this country continues unabated. As of mid-August, the Gun Violence Archive reported 415 mass shootings so far this year. Five years ago, there were 346 for the whole of 2017, up from 272 in 2014. So far in 2022, more than 15,000 people in America have suicided using a gun.

.....Democracy is in trouble here and around the globe. For the first time in U.S. history, the transfer of power following the 2020 presidential election was not peaceful as the defeated former president incited a violent insurrection at the United States Capitol. The growing chasm between the Left and the Right threatens the stability of the nation and, by extension, because of this country's global influence, the world. Illiberal democracies such as Hungary, Turkey, India, and the Philippines increasingly limit freedoms of the people they represent.

.....Dictatorships further erode human freedoms and well-being. While keeping his thumb on the Russian people, Vladimir Putin's invasion of Ukraine has caused enormous population migration and is fostering potential famine in other countries dependent upon Ukraine's exported grain.

The stresses upon us are grave. Some proclaim we must stop climate change. Some think that we must do all we can to save Earth. The truth is that climate is always changing and Earth will continue. What's not clear is whether we humans will make the choice in time to remedy and reverse the human-caused injury to Earth's atmosphere, landscape, water, flora, and fauna.

Can we elevate our individual conscience and confront evil, as did Desmond Tutu, Nelson Mandela, Martin Luther King, Jr., Viktor Frankl, and Edith Eger? Will we respond with selfishness, greed, and apathy or with compassion towards the stranger? Will we only strive to acquire more possessions, subscribing to the notion, "The person who dies with the most toys wins" or will we acknowledge and internalize that which gives meaning to life--spiritual fulfillment?

Will those in positions of contemporary leadership choose well? Will populations of nations doing the most damage, particularly the United States, change habits in time to prevent irreversible damage? Will we choose to repurpose rather than buy new? Will we study our history, become critical thinkers, and make informed choices or will we remain stuck in a mindset that keeps us repeating the old patterns that failed? Will we exercise our right to vote or stay home because "my vote doesn't count." Will we find ways to choose life, expressing empathy and compassion for others who look different or will we fall victim to despair, anger, self-pity, and hatred?

I'm reminded of the Native American story about the two wolves.

"I have a fight going on in me," said the grandfather to his grandson. "It's taking place between two wolves. One is evil – he is anger, envy, sorrow, regret, greed, arrogance, self-pity, guilt, resentment, inferiority, lies, false pride, superiority, and ego."

The grandfather looked at his grandson and went on. "The other embodies positive emotions. He is joy, peace, love, hope, serenity, humility, kindness, benevolence, empathy, generosity, truth, compassion, and faith. Both wolves are fighting to the death. The same fight is going on inside you and every other person, too."

His grandson took a moment to reflect on this. At last, he looked up at his grandfather and asked, "Which wolf will win?"

The old man gave a simple reply. "The one you feed."

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Book Review

***MAUS I: A Survivor's Tale:
My Father Bleeds History***

***MAUS II: A Survivor's Tale:
And Here My Troubles Began***

**By Art Spiegelman
Pantheon Books
New York
1986 and 1991**

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Author Note

The opinions expressed in this review are those of the author. They do not reflect official policy of the institutions the author serves. The author has no conflicts of interest.

Introduction

Maus is Art Spiegelman's two-part graphic novel about his struggling relationship with his father and his father's survival of the Holocaust. In the novel, Art is a cartoonist who interviews his father about his parents' World War II experiences. Throughout both parts of the novel, the narrative moves back and forth between the past and the present in a way that shows how the two are forever interconnected. Art's parents and the other Jewish characters are depicted as mice, Nazis as cats, Poles as pigs, and Americans as dogs.

Maus was ground-breaking work. At the time of its publication, there had not been many books written about the Holocaust, and the comic medium of graphic novels was a new way of telling such a story. In fact, Art changed the medium of comics forever. As recognition for his work, Art Spiegelman was awarded a Pulitzer prize for *Maus* in 1992, and in 2005, *Time* named him one of the top 100 most influential people of the century. In spite of these and many other accolades, in January 2022, a Tennessee school board unanimously voted to remove *Maus* from the eighth-grade curriculum because of its use of profanity and nudity and its depiction of violence and suicide. *Maus* subsequently made the Amazon best-seller list.

Maus I

Maus I begins with Art, or Artie as his father called him, going to his father's home in Rego Park, New York and asking to interview him about his experiences in Europe during World War II for a comic. Artie's previous work, *Prisoner on the Hell Planet*, had focused on his mother's suicide and the emotional trauma it had caused for himself and his father. Artie's father, Vladek, was now remarried to Mala, also a Holocaust survivor. Artie visited his father on several occasions to continue the interviews.

Although at first hesitant to be interviewed, Vladek talked about his days as an enterprising young Jewish man in Poland and his courtship with Anja. Vladek and Anja were married and had a son named Richieu. As the interviews continued, Vladek recalled that he started hearing stories about how the Nazis were treating Jews in Germany, with synagogues being burned, Jews being beaten, and towns pushing out all Jews. Soon anti-Semitic riots, lootings and other activities started occurring in Poland. Vladek explained that, at the time, they thought Hitler only wanted the part of Poland that belonged to Germany before World War I.

As he continued his story, Vladek talked about being drafted into the Polish Reserves Army and then becoming a prisoner of war. After escaping and returning to his family, Vladek saw a different life when the Nazis took over Jewish businesses and property and moved Jews to ghettos. Vladek explained how he engaged in the black market business and found other work when he could. Later all of the Jews in his town were told to register at a stadium to have their documents inspected. Some were selected for work and had their passport stamped. Others were taken away and never returned.

Vladek recalled that he was able to qualify for work and keep his family together for a while. As conditions worsened, he arranged for Richieu to live with some of his family in the Zawiercie ghetto where he thought young Richieu would be safe from being sent to a concentration camp. However, Vladek later learned that the Nazis sent everyone in Zawiercie to Auschwitz and that Richieu's aunt poisoned herself and the children under her care, including Richieu.

Vladek went on to explain that when the Nazis started liquidating the ghetto where he and Anja lived, he made a bunker where his family could hide. Then Vladek and Anja began moving from place to place in search of safety. Finally, Vladek paid to have himself and Anja smuggled out of Poland to Hungary. They did not realize that they were falling into a Gestapo trap. Vladek explained that he was taken to Auschwitz, and Anja was taken to another part of the Auschwitz complex called Birkenau.

Intertwined with the interviews is a narrative of the present that gives us a window into Vladek's later life and Art's relationship with his father. Vladek had had two heart attacks and had diabetes. He is sometimes seen counting his pills. He is depicted as anxious, stubborn, untrusting, miserly, short-tempered and neurotic. Both Mala and Artie found it difficult to get along with him. Although Artie admired Vladek for his survival of the Holocaust, he got frustrated with his aggravating tendencies and also seemed to feel guilty for neglecting him over the years.

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One particular point of contention between Vladek and Artie concerned the diaries that Anja had written about the Holocaust. Artie kept looking for them and asking his father where they were. Finally, Vladek admitted that he had burned the diaries after Anja died because they brought back too many painful memories. This made Artie furious, and at the end of *Maus I*, he called his father a murderer. Here we see the destruction of Anja's diaries being conflated with the Nazi war crimes. Throughout *Maus I*, we also see how Artie experienced the trauma of the Holocaust vicariously through his parents and how this affected his relationship with his father.

Maus II

In *Maus II*, we see Artie lamenting about his struggles to come to terms with his parents' unimaginable experiences during the Holocaust. He talks about having difficulties writing about his father's Holocaust experiences and feeling guilty about having had an easier life than his parents did. In one section of the book, Artie is shown sitting at a drawing board amidst a pile of emaciated, dead Jews and feeling depressed. The scene depicts the continuing effect of the Holocaust past on Artie.

As Artie continued his interviews with Vladek in a bungalow in the Catskills, Vladek described some of the horrific details of his experiences in Auschwitz. He also talked about some of his strategies for survival, such as saving scraps of food and anything he thought may be useful, as well as volunteering for specialized services that enabled him to avoid being selected for the gas chamber. He elaborated on developing relationships that helped him survive and enabled him to send a few messages and packages to Anja.

Vladek explained that as the war progressed, the Nazis tried to leave Auschwitz before the opposing forces arrived. He described being marched with other prisoners to empty train cars and then shipped to Dachau. Although no longer at Auschwitz, he suffered with typhus and continued to face extreme crowding, near starvation, and other dire circumstances that led to the death of many.

Vladek described how, after being moved from place to place, he finally was freed. When he was talking about setting out to find Anja, Vladek recalled that he had sent Anja a photo that he had made of himself in a camp uniform. Artie found the photo. This is the first time that we see Vladek as an individual who had lived through all of the pain and suffering of the Holocaust. At the end of his last interview, Vladek described how he was able to find Anja and be reunited with her. Then he said he had had enough interviews and referred to Artie as Richieu.

Reflection

Art Spiegelman used the medium of comics to tell the interconnected stories of his father's Holocaust experiences and his struggling relationship with his father. Comics are an intimate medium that helps us feel as if we are experiencing the story that is being told. With each panel in the comic representing a different point in time, panels of the past juxtaposed with the present highlight the impact of the past on the present and how the two are inextricably tied together.

The contrast between the different points in time is seen throughout the two books as the survivor's tale moves back and forth between the story of the Holocaust and the story of Art's relationship with his father. This illustrates how Vladek's Holocaust experiences affected his behavior in his later years of life and also affected Art and his relationship with Vladek. In this sense, the Holocaust continued even though World War II had ended.

Depicting the characters as animals provides us with some distancing from the horrific tales of the Holocaust so we can feel something that is difficult to experience. It also makes the story more personal. The relatively neutral masks of the mice help us project our emotions onto them and draws us into the story. Also, the mice appear very similar to each other. If we can identify with one of the mice, then we can better identify with all of them. And in identifying with the mice, we are better able to see that what happened to the Jews in the Holocaust can happen to any of us, and in fact, continues to happen in different ways to other groups of individuals today.

With the Jews depicted as mice, we see sub-humans stand upright on their hind legs, protest what is happening to them, and refuse to accept that they are less than human. This highlights Hitler's intent to exterminate the Jewish race as one would exterminate animal pests. That is, exterminating all who were deemed not to be human. This gives us a window into the consequences of irrational hate and dehumanization. There are many other past and contemporary instances of a group of people being dehumanized so work can more easily be done toward eliminating the entire group and their culture.

When we look at the story on an individual level, we see the importance of relationships. Throughout his Holocaust experiences, Vladek developed and used his relationships with others to survive. It is ironic, then, that Vladek struggled later with his relationship with his own son. However, throughout *Maus*, Art slowly gained a better understanding of his father. The storytelling helped Art better understand what his father had gone through and subsequently helped him learn to empathize with his father. This improved their relationship.

This review has only scratched the surface of Art Spiegelman's story. *Maus* is a complex survivor's tale with many layers of meaning that readers need to unpack for themselves by thoughtfully reading and reflecting on the graphic novel. Art laid bare the troubles he had in his relationship with his father and his attempts to understand him. In showing us how he worked to improve his relationship with his father, he invites us to do the same with those we love.



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Book Review

***The Light of Days: The Untold Story of
Women Resistance Fighters in Hitler's Ghettos***

**By Judy Batalion
William Morrow
New York, New York
2020**

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Introduction

Zivia Lubetkin's name is not one many people recognize. Yet her gravestone in Israel is inscribed simply with her first name, because, as her husband and fellow resistance fighter said, "Zivia is an institution."

Zivia's leadership and bravery in Poland throughout the war were so pervasive that her first name (Hebrew for gazelle) had become a code word for the resistance against Nazi oppression led by proud and driven young Jewish men and women. Determined not to yield to the Nazis, these young people chose to risk their lives repeatedly for their people.

Judy Batalion's fascinating book, *The Light of Days: The Untold Story of Women Resistance Fighters in Hitler's Ghettos*, reveals this amazing and little-known history. It details the extraordinarily brave actions of women in their 20s and teens during the war. Often disguising themselves as Polish Gentiles, they gathered intelligence; produced and transported false papers; smuggled food, people, and weapons; infiltrated Gestapo offices; planned offensive strategies; and took up arms against their oppressors.

Discovering a Historical Trove

Batalion worked on *The Light of Days* for 12 years, in part because she knew how painful it would be to immerse herself in the details of the Holocaust full time. Her research began when she stumbled upon some obscure books in the British Library -- eye-opening, first-hand accounts of women resistance fighters. She went on to probe archives and museums in the United States, Canada, and Israel; met with Holocaust scholars; and visited the children and grandchildren of women resisters.

Through her research, Batalion came to understand for the first time that victimization was not the only Holocaust survivor narrative. Testimonies of young women resistance fighters convinced her that Jewish women could rise in anger in the name of justice even against tremendous odds.

Probing Poland's Ghettos

Although women played roles in the Nazi resistance in various countries, this book focuses strictly on women resisters in the Jewish ghettos of Poland. As they gathered intelligence in their secret networks, the movement's leaders eventually recognized during the war that all Jews were bound to die at the hands of the Nazis. They knew that their numbers were small and their resources few against the Nazi war machine. Yet they were determined that if they had to die, they must do so honorably, together, defending their people.

The book explains the beliefs that sustained the women in the resistance, or "ghetto girls" as they were called at the time. It presents the personalities of the women and the details of many of their high-risk missions. The author also considers the long-term emotional impacts on the women who survived the war, bearing trauma and loss as they continued their lives.

The Roots of Resistance

During World War II, the Germans forced Jews in Poland into more than 400 ghettos. Trying to leave the ghetto meant risking one's life. Yet the ghetto girls shrewdly devised ways to pursue underground work inside and outside the ghettos. They sneaked over walls. They traversed roofs. They bribed gatekeepers. They trekked through sewers.

Many worked as couriers in the movement. But couriers did much more than carry messages. They accepted dangerous missions with little guidance. Posing as Poles, they infiltrated the places Nazis worked and socialized. They traveled with money secretly sewn into their clothes. They smuggled guns taped to their bodies or buried in loaves of bread.

The women's commitment to such dangerous work stemmed from their experiences in Polish Jewish youth groups. These groups were a vital source of hope to Jewish youth disillusioned by antisemitism and poverty in Poland during the 1930s. Batalion writes that the groups "took traditional Polish values of nationalism, heroism, and individual sacrifice and gave them a Jewish context." They taught members to regard the collective as more important than the individual. They "touched every part of their members' lives; they were physical, emotional, and spiritual training grounds. Young people defined themselves based on their group."

Youth groups were affiliated with political parties in Poland's Jewish communities, making political activity as much a part of the youth group experience as religious, cultural, and social activities. Therefore, young people's visions of the future were shaped by the pioneering spirit of Labor Zionism (working the land in a new Jewish homeland), religious parties wanting to improve life for Jews in Poland, and Bundists (Communists) aiming for acceptance without assimilation in Poland. The ardent political element of the youth movement helped mold young people into resistance fighters.

According to Batalion, the ghetto girls' training in the Jewish youth movement had given them the "self-awareness, independence, and collective consciousness" to succeed and the ability to transcend temptations despite their youth.

The Women Who Resisted

Dozens of women resistance fighters emerged from this youth movement. The Freedom youth group, for instance, produced straight-talking, chain-smoking Zivia Lubetkin, who initially built a communications network of young resisters across Poland. Later, when deportation and death were certainties, she became a leading military strategist.

Other women resisters from Freedom included teenage weapon smuggler Renia Kukielka, whose writings are a cornerstone of Batalion's book. Frumka Plotnika, known as a mother figure within Freedom, took initiative in providing food, employment, and comfort in the ghetto during chaotic times. Yet, like other resisters, she also channeled her anger and grief into acts of spying and revenge to fight back.

Gusta Davidson, daughter of a religious family, was a leader in the Akiva group combining Zionist principles with a celebration of Jewish traditions. With her husband, Shimson, another movement leader, she posed by day as a young wife living in a country villa, while the couple forged documents and published an underground newspaper by night. Another Akiva member, Hela Schüpper, became one of the first couriers to bring arms and ammunition into the resistance community of Krakow.

Many more young women worked in the resistance. Their names fill every inch of the book's inside front cover and its facing page. Some survived despite hunger and the physical and emotional demands of war. But the many who fell into Nazi hands during their missions were subject to violence and abuse -- torture, rape, deportation, or murder.

Why the Women?

Women were not alone in the resistance and worked alongside men. Nevertheless, women's roles as couriers were essential to the resistance. In many ways they were more able than men to be spies and smugglers, Batalion notes, because success hinged on convincing non-Jews that they were Polish Catholics.

Jewish women could mix among Poles and Nazis with less chance of detection. Jewish men were immediately identifiable because they were circumcised according to Jewish tradition. Most Jewish boys in Poland had been educated in Jewish schools using Hebrew and Yiddish,

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while girls had attended Polish public schools. The girls therefore knew the Polish language and mannerisms better and could mask their Jewish accents more convincingly.

Looking the part of a Polish woman was extremely important to the ghetto girls. The women chosen as couriers were usually those who looked less like Jews and more like Poles with light complexions, blonde hair, rosy cheeks, and blue, green, or gray eyes.

In 1930s Poland, women were more likely to be out shopping or lunching with friends while their husbands worked, a situation that gave Jewish women couriers cover as they walked through cities together, secretly making important connections. In addition, Batalion describes Nazi culture as "classically sexist." German men did not expect women to be undercover agents. They could often be fooled by women couriers who feigned flirtatiousness or naivete to protect themselves.

A Courier's Poise

To be a courier, a woman had to carry herself with unyielding poise, physically and emotionally, among Nazis and Poles. The author describes couriers' work as "a constant performance, a life-or-death acting job that required incessant high-level calculation and reassessment, alongside an animal instinct for danger, a basal sense for knowing who to trust." A courier had to walk with confidence, betraying no doubt or fear, even when asked for her false papers by officials, or questioned about Catholic beliefs by skeptical Aryans.

Couriers needed to mask their true emotions despite the dangers all around them. They were taught to appear carefree in public, talking loudly with their companions and flashing pasted-on smiles. "We couldn't cry for real, ache for real, or connect with our feelings for real," said the courier Chasia Bielicka.

Impacts on Survivors

The author devotes several chapters to the experiences of Polish women resisters who survived the war. They were grateful for their freedom but struggled with it as well. Batalion points out that many in the resistance had been extraordinarily active in their movement as a way to cope with the fear, sorrow, and uncertainty of the war. Post-war, without those systems they had thrived on, some felt adrift in their new lives.

After the war, survivors such as Zivia and Renia, who had emigrated to Israel, actively wrote and spoke about their experiences in the resistance. Their openness, however, was fraught with problems. Survivor stories were sometimes used for political purposes in those early days of Israeli statehood. Storytellers were sometimes accused of fabricating their tales or of conniving to survive while others perished.

Some survivors silenced their own stories. They had their whole lives ahead of them and wanted to move forward. Family members also urged women to keep silent, fearing that painful memories would trigger mental health crises. Zivia, for example, testified at Adolf Eichmann's war crimes trial. Renia was invited to testify as well, but she declined because her family feared doing so could harm her mental health.

Guilt, depression, and the impact of trauma long plagued many of the survivors as well. Despite their heroic work, many grieved over the lives they could not save, the comrades who died carrying out resistance missions, and the actions taken too late. Chajka Klinger, a resistance member from the Young Guard who had been known in her youth as a firebrand, battled depression at many points after the war, ultimately taking her own life. She had written: "The one who survives will be like a leaf cast about by a gale, a leaf that doesn't belong to anyone and has lost its mother tree, which has died..."

Survivor guilt led some to keep their wartime experiences from their children, hoping to give them a normal, happy life. That choice, Batalion found, often resulted in other difficult family dynamics. Children knew not to probe into parents' pasts. Some felt pressure to succeed as their parents and extended families could not. For some survivors, connecting with their grandchildren became easier than it had been with their children. Batalion theorizes that these survivors felt less protective of their grandchildren and that, with time, the survivors carried less fear of again losing their loved ones.

In Reflection Learning from Strengths and Vulnerabilities

The experiences of the women of the Polish ghetto resistance hold lessons for us in understanding and caring for defenders of social justice in the past, present, and future. The author of this book refers to them as defenders of social justice. Some readers, based on their political sympathies, may question the justice in these women's Zionism. But in teaching us about health and the human experience, their story, while encompassing politics, reaches far beyond politics. I agree with the author that these women defended justice because they rose up against a systematic, government-sponsored effort to annihilate their people. Their movement was, at its heart, a quest for basic survival against powerful forces of hate.

Taking the Polish ghetto resistance movement as a model, then, the following conditions appear to have prepared young women to undertake incredible acts of defiance.

Strong shared beliefs. The youth of the Polish resistance shared religious beliefs and the culture and identity of being Jewish. They all knew the meaning of being outsiders in Polish society and hoped to overcome it. The political ideas within the youth movement offered roadmaps to change society. Likewise, the youth movement's openness to avant-garde ideas -- such as the kibbutz system of collective farming -- taught members to value bold thinking.

A sense of community. The concept of the collective was pervasive in the youth groups with their progressive politics. Young people gave themselves over to this ethic which could prevail only if individuals would pool their strengths and resources to take risks for change. The friendships they made in their youth groups produced trust that sustained them through the wartime when families and neighbors were forced apart.

Leadership qualities. The women of the resistance were willing to step forward and take action. They had the intellect to analyze what was happening around them, the courage to confront it, and the shrewdness to find ways to undermine the Nazi regime. They brought

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compassion for their fellow Jews, caring for them in the harsh ghetto environment. They were flexible enough to push themselves into new roles to meet evolving needs. They had the self-possession to project utter confidence even when their hearts were racing in fear. They knew they could not rely on outsiders to aid them -- they were forced to rely on each other and themselves.

Are young people today receiving opportunities like these to build the spirit of resistance?

The postwar experiences of the women who survived also highlight important themes about the price paid by even the bravest leaders in times of violence, degradation, and war. These concepts can and should help shape the care we provide to survivors of historical conflict and trauma.

Not all heroes are remembered or honored. The impressive stories of the young women in the Polish resistance went underground for many reasons. Getting through wartime is different from surviving and building a future in peacetime. New historical, political, and social forces can color the facts and experiences of the past, impacting the perception of those who were at the forefront. These shifting circumstances can affect the perception of not only those who took action but their descendants as well. When heroic stories become downplayed or erased in the retelling of history, future generations are denied heroic models that could shape their expectations of what it takes to stand up for what is right.

Even heroes are human. The young women of the resistance, for all their extraordinary actions, were subject to powerful human emotions. They could not avoid suffering the grief of loss and separation from their families, the fear of being caught by Nazis, the guilt of not being able to save more of their people, or the grip of memories of degradation. How they handled these emotions, especially after the war, had a great impact on the quality of the rest of their lives and their family relationships. As we laud their courage, we must also leave room to understand that such actions can test the limits of our hearts, minds, and spirits.

Around the world and in the United States, we now see evidence of a rising wave of authoritarianism, racism, antisemitism, and xenophobia. *The Light of Days* has much to teach us about what it takes to fight hate and violence head-on and how that fight can change the lives of individuals and communities for generations.



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UNDER CITY LIGHTS



A Poem

The Birth of Cruelty

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The author is solely responsible for the above original poem and introductory reflection. The contents do not necessarily reflect the position of New York Medical College. The author has no financial conflicts of interest.

Why....

Eighty years ago, immense hatred and inhumanity were born from the horrors of the Holocaust and its name was Auschwitz II-Birkenau. This was a place where those perceived to be different would perish at the hand of the Nazis. These included infants whose lives were ruthlessly cut short either upon their arrival or immediately following their birth at Auschwitz II-Birkenau. Innocent beings murdered without remorse due to a presumed threat they could pose to the Nazis despite being too young to choose sides and too young to hate. Their lives were deemed unworthy and irrelevant. They were never registered in camp records, never acknowledged to have existed, and their names were just wiped away. In an ideal world, everyone would know the names of these infants that gave their lives to cruelty and inhumanity; their lives would have mattered; and they would have been remembered. Ironically, it is Auschwitz II- Birkenau that was allowed to live and to grow in infamy. In an ideal world, eighty years ago, Auschwitz II-Birkenau would never have been born; and humanity, along with these infants, would have flourished.

This poem is shaped as alternating birthday statements and begins with statements regarding the horrors of Auschwitz II-Birkenau. The italicized and indented statements are made as if by the murdered infants who were often drowned as their mothers watched. The two closings are designed to raise our reflections and thoughts about what happened to those infants and are bolded in remembrance. My hope is that the voices of those who never had the chance to speak for themselves could have someone speak for them. Therefore, I dedicate this poem to those infants who died at the hands of cruelty.

The Birth of Cruelty

It was its birthday
Conceived in hatred and cruelty

*It is my birthday
I see loving blue eyes*

It was its birthday
A place of torture and inhumanity

*It is my birthday
I feel a loving embrace*

It was its birthday
A place where dreams and lives are destroyed

*It is my birthday
I am torn away*

It was its birthday
A place where justice and kindness do not exist

*It is my birthday
I see blue again; it is the sky*

It was its birthday
A place of communal hatred and soulless killers

*It is my birthday
I am flying, then falling*

It was its birthday
A place where life has no meaning, a killer of innocents

*It is my birthday
The sky moves further away, I feel cool water*

It was its birthday
An automaton propelled forward by hatred and fear

*It is my birthday
I see blue all around me*

It was its birthday
The birthplace of cruelty, inhumanity, injustice

*It is my birthday
I marvel at the world slipping away as I have not yet been taught to hate*

**It was my birthday
I am no more, soon to be forgotten**

**It was its birthday
A day, a time that must never be forgotten**

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Poem & Reflection

Gaslighting: Facing a Holocaust Within

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Introduction

The term “Gaslighting” comes from the 1944 movie *Gaslight*, which depicts a man who manipulates his wife into believing she is losing her mind. He raises and lowers the gas lighting in the house, and tells her she is imagining it, causing her to doubt her own lived experience. “Gaslighting” is now commonly used to describe the use of this kind of manipulation to destabilise a person’s psyche, to de-legitimise their beliefs. It leads the victim to question their own reality, memory, or perception and is recognised as a dangerous form of abuse.

This poem arose from a conversation I had with a fellow Myalgic Encephalomyelitis / Chronic Fatigue Syndrome (ME/CFS) patient. ME/CFS is a serious debilitating neurological illness, for which there is no treatment or cure. In the past, it has been dismissed as a form of Hysteria and patients are told that it is “all in their mind.”

In spite of a wealth of contrary biomedical evidence, there are some physicians who persist in believing ME/CFS is a psychological issue and refer patients to psychiatric services to cure their “wrong illness beliefs.” Many people have been subjected to inappropriate therapy in attempts to convince them they are creating their symptoms as a reaction to supposed trauma. When no causative trauma can be found and symptoms do not improve, the patient is blamed with statements such as “You simply do not want to get well.” My fellow patient endured this medical gaslighting for a year and in the end lied and said they were better, just to stop the abuse.

Many of us with ME/CFS have tried this approach, prepared to believe anything if it will make us better, and trusting that it cannot hurt to talk. It can. Constant self-questioning and blame, in opposition to the evidence of your own experience, is exhausting and results in psychological trauma. Many people with ME/CFS have developed some degree of PTSD from these medical encounters.

Gaslighting – Psychological Abuse

So subtle you can't
put your finger on what's wrong
but something is off.

Stated or implied
and understood to be true
all lies about you.

Soon they don't even
need to say the words, every
look and gesture speaks.

Even you begin
to believe the poison they
spew, hard to resist.

You know that it's wrong
but trapped in their web you doubt
your own sanity.

It goes on so long
you try to hold on to you
there's no guarantee.

Until one day you
hear your own voice, a tiny
glint of sanity.

One day somehow you
begin to wonder if your
feelings are valid.

One day you reach out
you find help somewhere out there
a hand to hold yours.

That's the day you win.
That's the day you save yourself
the day it begins.

It still takes every
ounce of energy you've got
to break away free.

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The cost is sky high
but it's worth every effort
you are worth saving.

If you survive it
the fight for your life, you are
a hero, no question.

When you make it through
you'll find your tribe waiting
Welcome Warrior.

Upon Reflection

This poem is about one specific medical situation where Gaslighting is used. However, Gaslighting is ubiquitous in our lives and more often used with malicious intent.

Gaslighting is one of the arsenals of weapons used in the attempt to control another person or a group. It is usually known as propaganda when applied to groups. The other weapons in this arsenal are: labelling, repetition, isolation, censorship, use of allies, and violence or the threat of violence. Gaslighting/propaganda is particularly poisonous as the victim can end up believing it. The whole arsenal together can be called manipulation (covert) or oppression (overt).

The desire to control others is rooted in one of two things:

- A belief that the other is a threat--in other words--Fear.
- A belief in one's own superiority and entitlement.

Often it is both. The whole pattern begins with the creation of the categories Them and Us and establishing that They are wrong and We are right. Once it is established that They are a threat or Lesser Humans, one can justify any actions taken:

... "It's for their own/the greater good."

... "We have the right to defend ourselves."

... "They forced me to take this action."

These justifications have been used in personal abuse, the subjugation of women, hate crimes, racism, religious persecution, invasion and occupation of another country, slavery, war, and genocide.

Consistent use of Gaslighting/propaganda serves to reinforce and spread the narrative of the perpetrator and strengthen their position.

This Journal edition raises up the 80th anniversary of some of the horrors of the Holocaust. The Holocaust could not have happened without the propaganda and force used to ensure political and social compliance. The Nazis believed that Jewish people were a threat and less than human. They took this belief to the potential end of all such prejudices; namely, if those who are threats cannot be controlled, they must be destroyed. This is the risk and process of all levels of violence and hate crimes, from domestic to national.

The war in Ukraine is a current example of a narrative being used by Russia--and heavily controlled--to justify the invasion, devastation, loss of life, and trauma we see today.

It is easy to point fingers and assign blame for starting wars or causing genocides; but we must understand that the potential for holding prejudiced beliefs and for psychological or physical violence exists in every human being side by side with the potential for compassion, reconciliation, and understanding. We must also understand prejudice is intergenerational; violence breeds violence; and abuse breeds abuse. It seems almost inevitable that there will always be conflict in our world.

So here is the question for us now. Can we change what appears to be a fatal flaw in our nature? Can a human being or any group of humans, having experienced extreme abuse, transcend this experience and learn to live in harmony with others? Who will start the healing? How can we make healing last and allow humanity to thrive?

We need to understand we are an interdependent species. It is all of us or it is all over.

Author Note

The author owns the copyright for the poem. The message of the poem and the contents of the additional reflections provided do not necessarily reflect the position of any organizations or communities the author serves. The author has no financial conflicts of interest. The poem was previously published by the author and is republished here given the special remembrance of this edition of the Journal. Its previous publication can be found on the Pillow Writers website at: <https://pillowwriters.wordpress.com/2022/03/30/gaslighting-psychological-abuse/>

A Creative Reflection

War and a Dozen Roses: A Holocaust of the Mind

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One lone rose wraps itself around a doorway that only my mind's eye can see. The stairs descend, concrete slab by concrete slab. Dank is the air, moldy with the stench of long-forgotten travelers. Deep into the center of the Earth they reach until no more steps there are, until there is no more air to spare. But, here there is no need for oxygen. Those who dwell here are already dead. Hitler's army had seen to that.

I was nowhere near those camps of fear and bunkers of bare bones, yet tears fall as if I can smell their rotting flesh. My nose tingles with the torture of a stubborn sneeze. But, for the grace afforded many here, the stench would be from me.

For this I must be thankful. I must remember, yet forget.

Forget the horrors of human cruelty; yet maintain its imprint on my heart. I must retain hope in the one component of human legacy that conquers circumstance and pride and to which all true humans relate—compassion.

Compassion expresses exuberance for all life. It rocks the babies of every creed and drops a knee to saints of every faith. Compassion is blind, but sees. It hides in the light of acceptance and shines in the face of diversity. It thrives knowing all who breathe can smell the scent of the death that trails us.

In the absence of compassion, fear takes hold. Fear of feeling irrelevant and ordinary. Fear of failure or inadequacy. Fear fosters agendas of exclusivity wherein only those who are like us are invited into the circle. Fear unleashed from pulpits of every creed entices compassionless people to vow their allegiance to their tribe—to accept the tribe's rules rather than risk castration that results from disobedience.

Fear strangles creativity. When fear is held up to the light and seen for the inhibiting destroyer it is, armored hearts melt to silver strands of hope—strands that weave from tongue to tongue throughout the land until self-righteousness fades.

Thoughts of death unleash fear too. Death calls to everyone, even if barely audible, and stirs compliance with social norms. But without death, life would bear no travesty, no earnest plea for grace. Godless mutiny would abound. Humanity's outlandish aberrations would increase ten-fold should people not be fearful of bearing the brunt of Karmic law or of languishing in the pit.

External war reflects the inner war waging inside all people. At its very best, conflict is a catalyst for change. It allows us to scrape our insides and feel our compassion—our connection to skins of all degrees of pigmentation. It creates appreciation for the softness of a rose petal—respect for the thorn.

I wish it were not so—wish we needn't degrade our fellow humans simply because their words aren't ours, because their view is from a different mountain. I wish we needn't slice each other's windpipes to silence our opposition. For with the blade of arrogance we cut our own life force like a gardener who severs a rose's stem still robust with joy.

My heart is torn. Wars are transformative — both the inner and the outer. Both bring flowers, our inner being blossoming upon relinquishing its ego, our outer being adorning with petals the caskets of martyrs who fought for the rights of every human—of every Jew and every Gentile. Both bring peace when resolution leads to freedom. Freedom of choice. Of ideas. Of voice.

The scales are equally laden with war and roses for such is the crux of humanity. Such is the soul—the sacred soul that seeks to find balance between the two. The soul where indifference to human suffering plunges deep from the weight of heavy bloodshed.

My heart is torn. War brings out the best and worst in all of us, yet my soul feels wrung dry. I fight the silent war in my mind daily—each target bursting into tiny buds of hope—each bomb exploding into a dahlia.

I wage war on negativity and prejudice and I am winning. I till the battlefield of lies and turmoil until the soil lies loose and promising and ready for fresh cultivation.

This war is only in my mind, yet I am not alone. Many fight along-side me, keeping rank in their unique way—contributing to the annihilation of indoctrination and religious dogmatism. Pleased I am that others in my regiment see the need to accost this seismic attack on love.

Those who suffered the cruelest of conditions in those prison camps surely lost all pretense and propriety. They would have licked their fingers should they have been able to eat chicken from the bone.

My hand holds open a whispering of peace as I shatter the illusion of darkness for I know that in my heart there grows a rose. I only need eleven more and I'll have a dozen. I only need destroy one lie to see prosperity bloom, her petals unfolding white against the backdrop of hatred and deceit.

My war is within. My judgement, my prison. I kiss the pain, but pity wants the prize I won't offer. I won't allow her to steal my rose, so I shoot into the darkness, hoping by doing so I can

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dissolve targets of despair, hoping the war is soon over. I want a full dozen roses. One for each lie retold, for each truth exposed, for each atrocity—for each bone planted in sacred ground.

I'm steadfast in this war. I want my long-awaited stemming roses—all twelve of them. I want to collect their crimson color in memory of and reparation for the bloody fight against ignorance and arrogance. I'll change the color's meaning to reflect the love cultivated in my heart. I'll fertilize forgiveness and nurture the seed of love I want to sprout.

I imagine tiptoeing through that rose-adorned doorway in my mind and into an underground cell, arms laden with roses purest red, the stems of which extend a foot beyond my bent elbows. I slip through the bars with my fragrant gift and into the damp underground cave made of stone that contains many a sacrificed soul.

A tiny lad with weepy eyes drops the marble in his hand and reaches toward me, plucking a flower from my fingers. Either he's the only one who sees me, or he's the only one with enough energy to move. I caress his cheek, the back of my hand shuddering from the icy flesh of death.

I want to take him in my arms and breathe life into him, but that wouldn't be fair. He's escaped one holocaust, and I don't want to be responsible for his suffering through another. It will be his choice whether to inhabit a new body later and again breathe air into his lungs.

The boy twists the rose's stem and stepping toward the door, turns it in the lock. The bars fling wide. Imprisoned souls fly free toward the ocean of purest sky. That one little boy has loosed a thousand restless souls with his kind intent.

I too, feel free. I no longer fear my Hitler or believe his lies. He tells me I won't last a day without living in disguise, but I see my own temporary bones and want the world to see that, with love, we can all rewrite history.

Ambiguity need not rule. I know what we must do. We must face our Hitlers and embrace our shadow selves—the ones that strive to elevate and puff our chests out wide. We must reach high and wrench our ego tight. We must reclaim our place on the stage of life where people from every tribe stand as equals.

Hitler wasn't the only one with the power to inspire. I, too, can create. I breath. I love. I liberate. I no longer fear the inherent power of my individuality. I am one and he and she. I am all races. All creeds.

To hibernate within my skin is a prison of its own. I want to soar, to feed myself and not need spoon-fed lies—lies that feed the dragon of despair—that make me feel ashamed to own too much or not enough or even worse, to feel too insignificant for what I do to even matter.

Because by waging war inside ourselves and unleashing all our love, we break the spell of mighty ones who divide and rage and kill. We exonerate past wrongs and inhale the perfume of the gods who mold our very thoughts to form and pillage all ill-will.

Both war and roses must exist, but humanity need not cut down their own. The fight is for much more than land—for much more than miles of cornfields or the deepest oil wells.

We fight to get a glimpse of unadulterated love—to be accepted for ourselves. For if we fail to refine our hearts and heal our malevolent history, how, oh, how will we ever be truly free?

Author Note

The insights and views expressed in this vignette are those of the author and do not represent the views of any of the communities the author serves. The author has no financial conflicts of interest.



A Special Editorial Closing

As it closes the reflection and this entire edition, the above photograph is most powerful. It reminds us never to forget our common calling. That calling is to remember, reach out and raise up with healing all those who are in need and suffering from holocausts of any kind in our time, in our own lives and always.

The photograph is from the US Air Force, the artistry of Tech Sgt. Terri Paden. It captures the 2014 program services of MSgt. Jamain Braxton providing for the needs of poor children in the local community of Mount Hagen in Papua, New Guinea. A US military photograph in the public domain, it is found online at: <https://www.af.mil/News/Photos/igphoto/2000936469/>.

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Henry M. Jackson Foundation Special Military Health Film Series Continues...

The new YouTube series on military medicine and healthcare continues to be produced and directed by the Henry M. Jackson Foundation for the Advancement of Military Medicine. Information for the first two short episodes that have been completed thus far is found below. These episodes are immensely powerful. They demonstrate how military medicine/healthcare enriches healthcare for all people across the globe. For more information or for submitting suggestions regarding future topics, please contact the Creative Design Department at HJF c/o (240) 694-2000.

2018 Heroes of Military Medicine Ambassador Award

The Air Force's 99th Medical Group was awarded the Hero of Military Medicine Ambassador Award for its heroic response to the October 2017 Las Vegas mass casualty shooting.

Web Address: <https://www.youtube.com/watch?v=9O7sL5WPPV0>



The Veterans Metrics Initiatives

TVMI—The Veterans Metrics Initiatives is a novel public-private collaboration that unites multi-disciplinary research experts from the Departments of Defense and Veterans Affairs, academic medicine and social science, and industry to develop an evidence-based

Web Address: <https://www.youtube.com/watch?v=U2PP1QqFFSM>





