Defining Choices

Between Indifference and Caring

During 2013, the remarkable centennial year of Harvard School of Public Health, I had the deeply gratifying experience of reflecting on the meaning and purpose of public health—both across the globe and in my own life. I circled this theme in writing, in conversation, in moments of solitude, and on occasions of exuberant celebration.

One realization was that, if there are two irreducible qualifications for a successful career in public health, they are a fundamental dissatisfaction with the way things are and a stubborn determination to narrow the gap between what can be achieved with our current knowledge and what is being achieved with our present practices.

I know this from my own life. My father and his family were refugees who would have died had they stayed where they lived—Germany in the 1930s. They escaped to a much poorer country, yet one rich in culture and tolerance, which welcomed them with open arms. That country—Mexico—saved their lives.

I grew up with a strong sense of indebtedness, of the need to give back. But I did not have a clear idea of where this impulse would lead until I was 16 and spent two months after my junior year in high school living in a poor indigenous community in the state of Chiapas, in southern Mexico. I had traveled there to see a famous anthropologist working in a tiny town. At that point, I was considering a career either as an anthropologist or a doctor. I wanted to see this anthropologist in action.

One day, a destitute woman arrived at the town’s modest health post, carrying her grandson in her arms. It was freezing up in the mountains, and she had walked more than three hours carrying the sick child to the clinic. On her arduous journey, she had injured her head. When she arrived, she was covered in blood.

Both she and her grandchild were in desperate need of care—but there was no one to help. The health post staffer was out, the anthropologist could do nothing, and of course, neither could I.

*Neither could I.* That was my decisive moment. I remember thinking: “I will not merely study these people, I will serve them.” In that instant, medicine and public health became my life’s calling.

Many of our faculty, students, and staff have had such defining moments. So too, many of our donors tell me of the moments that have driven them to embrace our work. All made defining choices—between indifference and caring.

Such moments have the capacity to reverberate across lives and communities and nations, over years and generations—even centuries. The capital campaign on which the School has just embarked (see page 32) reflects what Martin Luther King, Jr. called “the fierce urgency of now”—the fact that delay carries devastating human costs. Inspired by our individual and collective vision of the way things could be—now, in the lifetimes of those who most need help—we will change the world.