

RCPSC address

October 24, 2014 Toronto, Ontario

Convocation

Mr. President, distinguished guests, and fellows of the Royal College:

I am deeply honoured and extremely grateful for the distinction received. In the first place, I am honoured to be recognized by this body, the RCPSC, “my college”, standing here among esteemed colleagues, some of whom, like Dr. Mulder, had been my teachers decades ago. I’m also humbled to follow as recipient of the Teasdale-Corti Humanitarian Award in the footsteps of people like Bob Taylor, Jean Chamberlain, Paul Thistle, and Steve and Ken Foster, who were, and still are, role models for me in the faith-based global humanitarian work. And finally, I’m so touched to receive an award commemorating Lucille Teasdale-Corti, the amazing Canadian surgeon whose photo greeted me over 2 decades ago in the hallways of St. Justine’s Hospital in Montréal. For the aspiring surgeon considering global humanitarian service, the story of the self-effacing woman who responded to a faith call and dedicated her entire life to caring for the poor in a mission hospital in northern Uganda was both exciting and inspiring.

What a privilege for me to be standing on the shoulders, as it were, of such predecessors, and to have the opportunity to serve God and children in need in Africa! And what a privilege for us all to be members of this amazing Royal College! Membership has its privileges, American Express reminds us, and, for the new certificants and fellows, now that you have reached the pinnacle of Royal College training, the privileges truly follow. Beyond those 5 iconic letters following our name, we are now recognized specialists, content experts, and trusted leaders in our chosen fields. How easy it may be to forget that membership also comes with its responsibilities! A well-known New Testament parable teaches us that “from everyone who has been given much, much will be demanded; and from the one who has been entrusted with much, much more will be asked.”

The Royal College CanMEDS Physician Competency Framework clarifies for us our responsibilities as medical experts, communicators, collaborators, leaders, health advocates, scholars, and professionals. I would like to highlight tonight two sub-competencies nestled deep in this framework. The first one is a concern for justice, fairness and equity in health care, a commitment to deliver the best care possible to

our patients across the rich-poor divide within Canada, and globally. It was this concern that led Lucille Teasdale to leave her native country and spend her life in Uganda. It was this same concern which motivated the past recipients of the award named after Lucille to spend decades of their lives in remote places like Afghanistan, Bolivia, and Zimbabwe. It was, in part, this same commitment that led me, together with my beloved wife and 2 sons, to whom I am immensely indebted, to leave our comfortable lives in Kingston, Ontario over a decade ago and move to Kenya. And this same commitment I have witnessed in the half-dozen African pediatric surgeons who our organization BethanyKids has trained over the past 7 years, who are now practising as lone subspecialists in places like Madagascar, Ethiopia, and Sierra Leone. But such commitment doesn't come without a price: Lucille Teasdale literally paid through her life, succumbing to AIDS acquired from a patient in the mid-80s, and today's global humanitarians are battling Ebola and other dangers as they provide health care to the poor, the destitute, and the marginalized.

But justice and equity alone fade quickly in motivating our minds unless compassion stirs our hearts. Beyond the learned skill of empathy, true compassion prompts action, the effort of alleviating another's suffering. The famed parable of the Good Samaritan depicts an expatriate volunteer whose heart "went out" to the trauma victim he encountered, resulting in prompt first aid treatment, including, significantly, payment for his inpatient care. Compassion literally means "suffering with", and isn't it telling that it has the same root as "patient", who is, simply, "one who suffers"? Why is it that so many medical schools and hospitals throughout the world share variations of the Latin motto "Medicus Servit, Servat Deus", best paraphrased as "The physician cares, God cures"? Because throughout history we, the medical profession, have come to recognize that, despite our increasing knowledge and expertise, arguably the greatest service we can provide to our patients is our ability to "suffer with them" – which, incidentally, our patients had been requesting from us for centuries... As the great humanitarian physician Albert Schweitzer said, "The purpose of human life is to serve, and to show compassion and the will to help others".

Compassion entails informing our minds about a need, allowing our hearts to be moved by it, and then responding to it through our will. It wasn't just a sense of injustice that moved Lucille Teasdale to Uganda, or myself and past recipients of this award to some remote places on earth. Injustice may have inflamed our minds, but compassion surely moved our hearts. Quoting Robert Pierce, founder of WorldVision, "let [our] hearts be broken by the things that break God's heart".

In 2001 I first visited a small hospital in Kenya dedicated to caring for children with surgically correctable disabilities. Its founder Dick Bransford, a general surgeon, simply couldn't ignore the thousands of disabled children who at the time received no treatment and were considered cursed. As a pediatric surgeon dealing with "nice" curable congenital anomalies, the sight – and particularly the smell – of these severely handicapped children first pushed me away. Yet a voice seemed to say to me, "I have called you to these the least of my brothers and sisters". And as I learned to close myelomeningoceles in little children with deformed backs and to place hundreds of VP shunts in babies with big heads and sunset eyes, my compassion was born. It grew in the heat, dust and misery of the massive refugee camp of Dadaab in northern Kenya, where our little faith-based organization was the only provider of pediatric surgical care to half a million Somalis. And it grew further seeing, at times, one hundred children and even adults with untreated cleft lip and palate waiting patiently and full of hope to be seen by our small surgical team, behind heavily armed guards in Somaliland. And the compassion was nurtured over the years as I accompanied the African pediatric surgeons whom we had trained back to their countries, relinquishing the potential benefits of practice abroad for the opportunity of caring for their own people.

Let me finish with the words of the well-known Catholic theologian Henri Nouwen: "Compassion asks us to go where it hurts, to enter into the places of pain, to share in brokenness, fear, confusion, and anguish. Compassion challenges us to cry out with those in misery, to mourn with those who are lonely, to weep with those in tears. Compassion requires us to be weak with the weak, vulnerable with the vulnerable, and powerless with the powerless. Compassion means full immersion in the condition of being human."

My dear professional colleagues, strive for excellence in patient care, teach without ceasing new generations of doctors, and advance the science of medicine through your research. But add to these qualities a concern for justice and equity, and nurture a deep sense of compassion for all those who are in pain and in need, whether physical, emotional, social, or spiritual. Offer the fruit of the superb training you have received by serving across this country or across the world, wherever your expertise is most needed. And then we can all stand together as proud and grateful fellows of our college.