

THE REST OF YOUR LIFE

Advocate, Caregiver for the Abused

BY RENATE G. JUSTIN, M.D.

Child abuse and neglect is a strong interest of mine. I am guessing that the roots of this life-long concern originated during my childhood spent as a Jew in Nazi Germany. Persecution, a form of abuse, is injurious to any youngster, no matter who dispenses it. My compassion for abused children in pain was aroused when my peers and I lost family members to murder and incarceration in the concentration camps. By reflecting on my experiences, brought about by my empathy for downtrodden children, I hope to raise awareness of the scourge of child abuse.

As a young teenager, I came to the United States and participated as a volunteer in an inner-city children's day care facility. It was the first time I saw an American slum. My work with the lively, bright youngsters taught me that they started out in life at a great disadvantage. They came from and returned to overcrowded homes with insufficient food and no books, no plumbing, just slop buckets in the court yard. Naively, I never expected to find slums and abject poverty in the United States.

As a college student in the mid-1940s, I had the privilege of living in the Bronx in an old YMCA building, the temporary home of European refugee children. President Truman had rescued a relatively small number of children from the displaced persons' camps and brought them to America to be adopted. My job was to help this motley group of 2- to 18-year-old orphans, who spoke Polish, Finnish, Yiddish, and several other languages, to adjust to yet another country on their long journey. In the morning, I taught them English, how and what to eat, and how to take a shower; at night, I helped them endure their nightmares and their sorrow.

Assimilation Isn't Easy

These young people, who had lived on their own like rats, gnawing on bones others had discarded, homeless for months and years, were apprehensive when we went on field trips to the library, public schools, and neighborhood ball games. On one outing, Joseph, one of the boys, did not make it into the subway car before the doors closed. I was frantic and so was he as the train pulled away. The other 15 non-English-speaking kids and I got out at the next station and took the train back. We found Joseph still on the platform, handkerchief in his hand and wiping his last tear while smiling and conversing with a man who not only spoke his language but also was from the same village. Eventually, this subway stranger adopted the homeless 12-year-old.

Ever since I graduated from medical school, I have volunteered in free clinics for children. At the same time, I expended much energy establishing clinics for women who could not afford private con-

traceptive care. Many years ago, I had a patient who was both emotionally and economically unable to take care of all the children she had. Every time her abusive husband was released from jail, she would get pregnant again. It was unavoidable, but sad and difficult for her to give up her children for adoption.

I worked in Central America and met women who had walked for many hours to and from a clinic to obtain contraception. They desperately wanted to adjust the size of their family to the amount of food that was available. These mothers as well as my own patients' pleas convinced me that, in large families with inadequate economic resources, both parents and children suffer and that contraception can ameliorate this suffering.

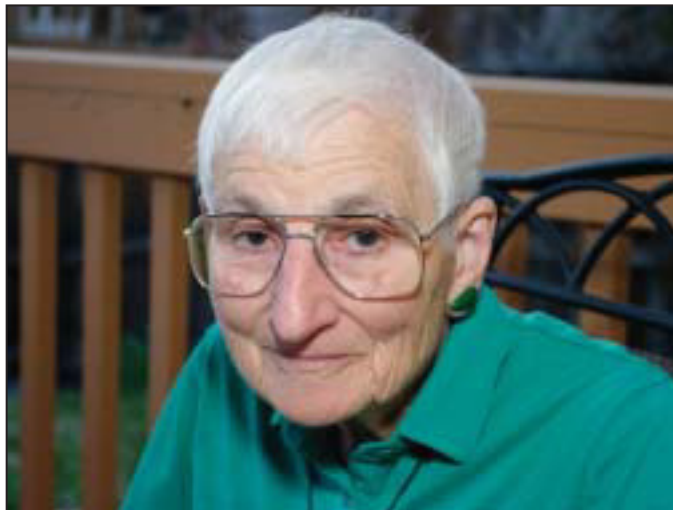
In my family practice office, I saw my share of abused and neglected children. I remember two youngsters the police brought to my office. They were raiding a garbage can while their parents shared the last dram of alcohol, unable to walk out of their house to locate their daughters. When these sisters were left in my waiting room, my impulse was to take them home and nurture them. Since that was not possible, I expanded my horizon to include street children both in the United States and other nations, which led to trips to Haiti, Central and South America, and Washington.

What I learned is that the human spirit can survive rejection, hunger, and thirst. The resilience and peer loyalty of these young outcasts was inspiring. In Bogotá, they cleaned the leftovers from plates of outdoor restaurant customers and shared their spoils with their comrades. I saw them take turns when they carried an injured friend across town to the only medical facility available to them, a small Red Cross clinic run by Dutch volunteers. My efforts resulted in a pocket-size medical booklet for the volunteers who worked with the street children. The advice for street medicine enabled the volunteers, who were not even trained in first aid, to take care of many medical needs of the children that would have otherwise gone without attention.

An Unforgettable Mother's Day

On Mother's Day in Columbia, I visited 500 boys, incarcerated for sleeping on the street, for bathing in public fountains, for being alive. One 12-year-old, whose vision had been destroyed when his father's belt buckle hit his left eye, gave me a Mother's Day card he had made. One other grandmother and I were the only mothers visiting in the jail that day, although each inmate had carefully prepared a card for the absent mother for whom he longed.

I traveled to Nicaragua with Niños de



Dr. Renate G. Justin has devoted her life to caring for neglected and abused children all over the world.

and are afraid to trust any adult they encounter.

The Work Continues

Now that I am an octogenarian, I have the enormous good fortune of taking care of two little girls, 4 and 6 years old, who are enriching every minute of my life every day. Their parents work and I spend many hours with them and am truly grateful that, at a time when my children and grandchildren are grown, I can experience the love of these little ones.

As long as children are used as soldiers and become victims of war, as long as

parents are addicted to drugs and alcohol, as long as many members of society are burdened by poverty and starvation, child abuse and neglect will thrive. We probably will never eliminate childhood trauma, which persists into adulthood. My hope is that an acute awareness of the frequency and severity of the suffering of young people will make us more dedicated to prevent the deep wounds we inflict. That awareness of this evil will encourage us to help the members of the next generation survive their childhoods. ■

DR. JUSTIN is a retired family physician who lives in Lakewood, Colo.

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