

Of Soldiers, Survivors, & Strength Unfailing

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By: Anthony Maranise, ObitSB

Earlier this month, I had the pleasure of attending the Annual *Survivor's Day* event at St. Jude Children's Research Hospital in Memphis, TN. After a keynote presentation and welcome, offered by St. Jude's medical director, Dr. James Downing, the faculty of St. Jude's After Completion of Therapy (ACT) clinic along with the director of cancer survivorship, commenced the annual survivorship pinning ceremony.

The program began with a reading of the most recent "class of survivors" (those from 2000 – present day), and a number of children and teens were called by name. Once they arrived at the stage, various doctors we all knew and grew to love and respect over the years, greeted us with smiling faces and warm embraces as they affixed the survivor milestone lapel pins to each of our collars.

After some time had passed, my decade was finally called. I am a "survivor from the 90's," but this year was truly special for me. It marks 20 years of having been in remission from acute lymphoblastic leukemia (ALL).

For what it's worth, I should explain that the tradition of "survivor pinning" is not like anniversaries in the traditional sense. In marriage or career anniversaries, it's a common practice to ascribe a precious medal, stone, or color to the years accumulated since that particular wedding ceremony, start date, etc. For example, a "silver anniversary" is generally celebrated at 25 years, a "golden" at 50, and a "diamond" at 60.

In the world of cancer survivorship, this tradition doesn't exist—and for good reason. Even though it may seem that a couple remaining married for 25 years or a person persisting in the same career for a similar amount of time are spectacular feats in and of themselves,



statistically, it is much rarer for those previously “touched” by cancer to be “long-term survivors.” That said, 10 years of survival (in full remission) is considered a “silver” anniversary and 20 years, “golden” and so on, culminating in “Jubilee” at 50 years.



Given the special nature of such an occasion (and a true reason to lavishly celebrate), I couldn't help but reflect on my “Golden” anniversary of survivorship. While reminiscing about some of my more uplifting St. Jude experiences and on this whole concept of “survival” as a whole to a young woman very dear to me (currently serving as a U.S. Army ROTC cadet and to whom I happily dedicate this piece)², I began to recall words and phrases common to both of us “survivors.” Phrases like “fighting cancer,” “fighting a battle,” “winning or losing the battle against cancer,” “winning or losing a war,” even “casualties,” revealed some distinct commonalities between all those “touched” by cancer (not just the survivors) and the soldiers who so bravely and selflessly protect, defend, and yes, even lay down their lives for others. What follows, here, are just those sorts of reflections.

There seems to be a prevailing attitude in the United States (particularly among political (<http://www.truth-out.org/opinion/item/26451-another-war-another-evil-haven-t-we-learn-t-that-the-devil-cannot-be-slain>) conservatives) that individuals who haven't experienced the horrors and atrocities of war or a combat situation could ever truly understand what it means to see, to feel, and to experience true evil. However, I would argue that to be a rather narrow-minded and superficial position at best. I have no doubt that human beings experience both moral and natural evils which cause unfathomable sufferings, and which can be just as horrific as the trials of war... and I definitely don't limit those who can, have, or will experience such evils to only those of us “touched” by cancer. However, for the purpose of these reflections, I will focus on those persons.

One of the greatest challenges in military service is the ethos of “service over self” in often the most thankless of situations. I've often witnessed those who whisper unkind things to their surrounding persons or classify, almost automatically, that a military person must be a ‘bigot’ or ‘war-monger’ (<https://www.bostonglobe.com/opinion/2014/12/07/joining-military-doesn-make-you-hero/AtnLFFGkkVvxX2gKXKJE7L/story.html>),’ simply because of

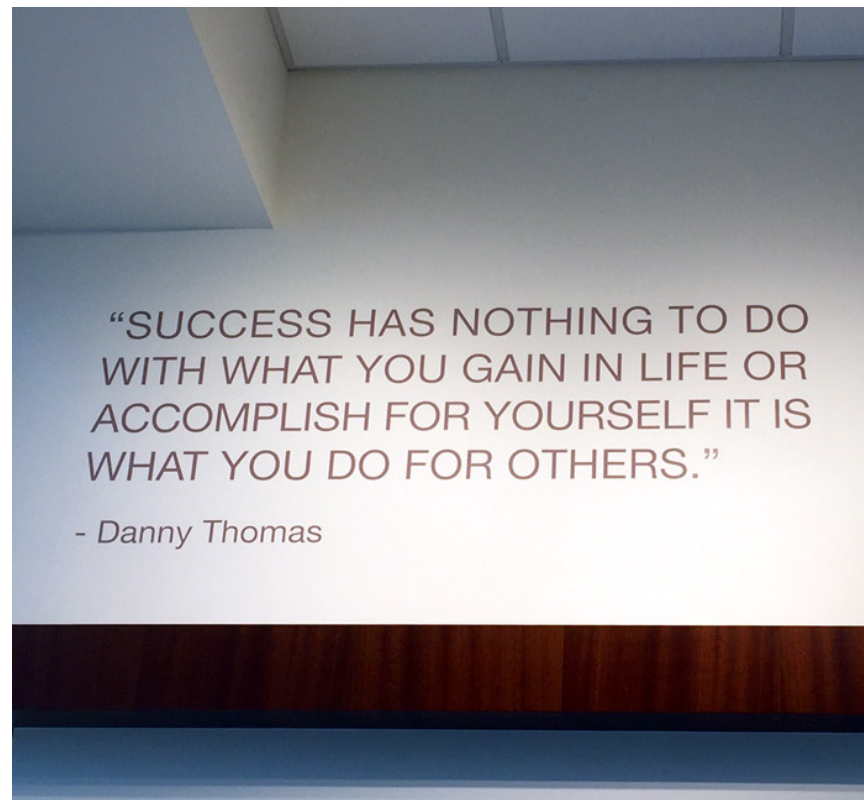


their preconceived (and often inaccurate) ideologies about soldiers or military

(http://www.salon.com/2014/11/09/you_dont_protect_my_freedom_our_childish_insistence_on_calling_soldiers_heroes_d
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 personnel. The reality is that soldiers serve, willingly, to protect the rights enjoyed by those who speak against them. That is authentic selflessness. But, what of those “touched” by cancer?

I once read an op-ed in a Memphis-area publication that rather snidely revealed the contributing writer’s perceived notions of the community’s long-standing interest in both Le Bonheur and St. Jude. This individual wrote: “Being a cancer patient doesn’t make you any more special than any other child.” First of all, believe it or not, I wholeheartedly agreed with the writer’s statement, but then again, I don’t know a lot of persons “touched” by cancer who think of themselves as being as special as this writer insinuated. Many of us wish we would never have had to face what we have. But, we are stronger because of it. In this way, I see soldiers and survivors viewed as a very undervalued and “taken for granted” population. I’ve often heard it said that “A soldier prays for peace, but trains for war;” likewise, the survivor prays in thanksgiving for good health, but remains ever fearful that “the enemy” will return once again, and takes steps to live a healthy lifestyle in preparation for that return.

Secondly, both military service persons and cancer patients must endure a struggle. Though different, neither sort of struggle is one-dimensional. Military personnel as well as cancer patients must “fight” through physical, emotional, intellectual, and spiritual “battles” if they wish to “emerge victorious.” The endurance of these “battles” requires both the cultivation of a substantial interior and exterior strength of body and spirit, and a strength that pre-dates their enlistment or diagnosis.



The other side of the struggles that both cancer survivors and soldiers face is the demands of self-sacrifice. The soldier who so dearly loves his/her significant other must face an “emotional onslaught” by remaining distanced from them for periods of time—either in training or in deployment. Likewise, for the cancer patient community (particularly at a



research-based institution like St. Jude) patients are asked to participate in clinical trials that have the potential to lead to discoveries that could heal future cancer patients.

Imagine a world where each soldier chose to “look-out” for only themselves or each cancer patient chose to “care for” themselves by resisting participation in clinical trials or research studies that could be helpful to medical professionals in their approach to treating cancer in the future. I know from lived experience that patients do have freedoms to choose certain courses of action in their care—whether that be a willingness to participate in the “full spectrum” of treatment possibilities, or to holistically care for themselves by offering details of their cancer experience to researchers. By inviting medical professionals into their cancer journey to advance the possibility of either their own treatment, the patient creates an opportunity for others to get better.

The “casualties” of both war and illness would be so much greater where it not for such selfless sacrifice and willingness to face, endure, and overcome the multi-dimensional struggles associated with each.

The U.S. Coast Guard and the Boy Scouts of America have a similar motto: “always ready/prepared.” In terms of preparedness, I am relatively certain that there is no amount of training that adequately prepares any soldier or military service member for the horrors of warfare and human conflict. However, at least they are provided with training and some semblance of “what to expect” in their service. For those whose lives have been, are currently, or ever will be “touched” by cancer, there is no preparation. There is no training. There is no guarantee.

It is perhaps that final statement, “there is no guarantee,” that most profoundly unites both soldiers and survivors. Both groups of persons enter into their respective “battles” with a deep sense of uncertainty and are buoyed only by hope. Cancer patients hope to either attain healing and a better “quality of life” or to be finally “released” from their sufferings. Similarly, soldiers hope to remain safe in combat situations and return home in one piece to the lives they have left “on hold” while serving abroad. In my estimation and personal experience, there is nothing that requires greater strength than entering into the “absolute unknown,” but doing so with hope which might even, for the sake of another, demand of you all that you have.

I feel it’s important to mention that in the world of cancer survivorship, anyone who has been “touched” by cancer (whether they’re currently fighting, attained remission, or even those left to carry on without their loved one) is considered “a survivor.” We’re united by those experiences, and join a global community for the rest of our lives. Military personnel also form this sort of “fraternal bond” through their combat experiences. I feel fortunate to have been given the opportunity to witness both bonds—one from personally having lived it and the other from the confidence of another who is living it—I would argue that in the bravery with which they fight, every survivor is a soldier. Likewise, through the selfless sacrifices with which they also fight, every soldier is a survivor. For both, we ought to offer our most profound gratitude and admiration.

The author dedicates this piece to Mirjana Michelle Walther of Bellevue, Nebraska, currently attending Creighton University, in pursuit of both her U.S. Army commissioning as well as a degree in Nursing. Without her inspiration and mutual admiration, this piece would have remain undeveloped.

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