

Call of Duty

ANDREW LUSTIG, DOCTOR

WHEN ANDREW LUSTIG WALKED OUT of the multimillion dollar media business he built over 20 years, he didn't know what he was going to do. But he knew he wanted to do something that mattered, something that helped people. I think you could say he's succeeded. At 40, he trained to become a physician and launched Global Outreach Doctors, a team of volunteer medical professionals including doctors, nurses, paramedics, naturopaths, homeopaths, acupuncturists and psychologists, all of whom travel the world assisting those in desperate need of medical care. To date, they've had 38 missions to communities ravaged by earthquakes, wars, and refugee crises.

You didn't start out as a doctor...

I studied television photography in college. I shot for the local news station, and when I got out of college my first job was as a production assistant for Woody Allen watching parking lots at nights in New York so the crew would have places to park.

Then I worked for a couple of big commercial filmmakers and production companies and ended up in tele-production, worked my way through lots of different position, and eventually became the president of the National Video Center. We had recording studios, editing facilities, and we started developing content and licensing it. We grew to 12 divisions in Atlanta, Los Angeles, Connecticut, Boston, etc. We had 1,000 employees and contractors. But after



PHOTO SFM, OVERLEAF: UKRAINE (JORDAN CAMPBELL | RAMRO GLOBAL),
IRAQ (GLOBAL OUTREACH DOCTORS), KENYA (GLOBAL
OUTREACH DOCTORS), NEPAL (MIKE MORSE)



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Twenty years of building this, I was completely burnt out. I had doctors telling me you're not going to live a long life, not with what you're doing.

So I decided to quit. I walked out on a Wednesday and about a year later, I became a medic.

How old were you?

Forty.

Most people don't become medics at forty.

Right. It was a midlife crisis. I just thought, Well, what am I doing in the world, and how am I helping people? So I went to a local ambulance group and asked, How do I do what you guys do? And they said, You go to school. And they helped enroll me in school, and I became a medic, an EMT, and started working in ambulances.

Then I moved to New Mexico and began working in ambulances here, and in an emergency room here.

What is naturopathic?

Integrative health, where we look at the entire body as a system. Before I was doing allopathic medicine. Now naturopath gives me the two sides of healing options, it gives me more ways to look at a patient and to help them. So there is a time and place for emergency medicine and for traditional allopathic medicine, and there is both a time in place for integrative health, and oftentimes there's a place for both.

After I became a naturopathic doctor, I started working overseas, both as an EMT and as a naturopathic physician, for charities around the world, until I formed my charity, Global Outreach Doctors.

Why New Mexico?

You know, I was living on the East Coast in a place where everybody had big jobs, and I no longer had a big job. I didn't need the big house, didn't need to go to cocktail parties and talk about corporate finance. I was looking for a change, emotionally and spiritually. My wife and I looked across the country and ended up loving Santa Fe. My children grew up here.

Once I was in Santa Fe, I went to school to become a naturopathic doctor. I did that because working on an ambulance, and you have the patient for about 20 minutes, or however long the ride is. Once in a while you get a frequent flyer, somebody that's always in your ambulance. But mostly, you don't develop any relationships and you generally don't know the outcome of the emergency room visit.

What drove you to start working with the charities?

Well, there are very sick people in the US, but in Western culture there are a lot more resources. And I wanted to help people that have no resources, where there's one doctor for 30,000 people. I wanted to help very disadvantaged people, so I worked as a humanitarian doctor for several years in the Amazon jungle, in Nicaragua, in Kenya. I worked with Sean Penn in Haiti and learned a lot about how to organize these efforts from what he was doing. So I decided to start a charity that would offer both medical doctors and nurses paramedics, physician assistants, nurse practitioners, but also homeopath, naturopath, trauma, acupuncturists, and psychologists. That's what Global Outreach Doctors does.

We started about eight years ago. Today, we're small, we have 400 people around the globe that are primarily medical providers. We provide search and rescue because often you're in remote places and you find a victim and to get that victim to care, namely a hospital, I'd have to push them in a wheelbarrow for two hours.

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What are some places you all have worked?

Our biggest impact has been in Ukraine. We've had medical teams in Ukraine since the beginning of the war on the front lines treating wounded civilians, wounded soldiers, 24-7. We haven't stopped once, and we'll be there until there's some type of resolution.

We also have 11 ambulances there that were driven in from the UK. Many of the ambulances are used for civilian evacuations, for people in places that have been destroyed by Russians who cannot get out because they are in a wheelchair, or they are too sick, so we do civilian evacuations, we do frontline treatment, and we've distributed \$300,000 of financial aid to hospitals.

The other recent war that we worked was Iraq. I was there for a month, treating both sides. We treat both sides in any war because they're all human. We don't discriminate based on political views.

In the Democratic Republic of Congo, we provided care for women affected by sexual gender-based violence. It's very common in the DRC. The majority of the population there have either witnessed or been involved in sexual gender-based violence, most of the women, but also men. It is a tool of war.

The DRC has been at war for many decades, small factions fighting within regions, which makes it very hard for us to determine who's after who. We used UN helicopters to get around because driving, you didn't know who might be targeting you for a ransom.

So we also trained local medical doctors who have less than a week of psychological trauma training. We showed them how to scale, score, and treat gender-based violence trauma.

In Ethiopia, we worked in mountain top villages at 10,000 feet with no electricity, assisting delivery of OBGYN services. The patients there arrived on donkeys. These communities live way up in the mountains, and rarely see doctors.

Is this similar to Doctors Without Borders?

It's great what Doctors Without Borders does; it's great what Sean Penn does; it's great what AmeriCare does.

Global Outreach Doctors is successful because we're nimble and fast to deploy. There isn't a lot of red tape. Some of these larger organizations can't figure out how we get there so fast. We move quickly, we drop in, and provide the services.

But we're all working together in conditions where there's high need and low resource, and we all contribute. In general, we're way smaller than some of those other guys, but we also provide more medical modalities than most other charities. Look, it's not like we're competing. Really, it takes a village.

This is dangerous work. Recently, Pete Reed, one of your Ukraine directors, was killed by a missile strike.

Pete was aiding in the evacuation of Ukrainian civilians when his vehicle was hit with a reported missile in Bakhmut. He was an incredible visionary and leader, a compassionate care provider. But we'll really miss his sense of humor and quick wit.

Here's the thing: Pete's death underscores the devastation war has on innocent civilians, and shows how important humanitarian and medical aid is. So, ultimately, we're committed to carrying out our work around the world – in honor of Pete.