

## One bright idea at a time

The editorial offices of *CMAJ* are in one of Ottawa's many inner suburban neighbourhoods, built in that era of urban development when garages started getting as big as the houses they're attached to and where, by and large, people drive rather than walk to the nearest grocery store, post office or watering hole. One eerily warm weekend this November, one of us who lives here in Alta Vista opened her front door to a stranger who handed her a free lightbulb: a 10 000-hour mini spiral compact fluorescent bulb in a recycled-cardboard box that boasted, "If every household in Canada replaced just one regular light bulb with an ENERGY STAR® qualified compact fluorescent like this one, the reduction in pollution would be like taking 66 000 cars off Canadian roads."

Naturally, our editor changed her front porch light immediately — wondering vaguely about the details of this calculation (how many lightbulbs burning for how many hours a day equals how many hours of driving per day, at what speed, under what conditions ....), promising herself a visit to the Project Porchlight Web site later on ([www.onechange.org](http://www.onechange.org)) and also noticing that the energy-saving deliveries of this particular 2-person volunteer team were assisted by car (a wagon would have been more picturesque). She also noticed, having watched too many home design shows, that her new lightbulb doesn't have the classic look flattering to her carriage-lantern fixture.

But that's the thing with change. You've got to get used to things looking, and feeling, a bit odd. You've got to accept that, at the beginning, there's some awkwardness, some guesswork, and some paradoxes to get over. And you've got to hope that small things will add up to big ones.

We've spilled a fair amount of ink in these pages talking about change over the past year, and some might be tempted at this point to lapse into jokes about how many physicians, health systems researchers, policy-makers, politicians and voters it takes to change a ... health care system. But we've also noted an observation made in a recent issue of the *New Statesman* that, "It is a curious feature of modernity that, while the world we live in is changing at a dizzying pace, those responsible for changing it are becoming harder to identify. Politicians often appear to be mere figureheads, buffeted by other forces. Meanwhile, those with genuine power — media and business tycoons — affect our lives in nebulous, hard-to-quantify ways."<sup>1</sup>

And so the *New Statesman*'s round-up of "10 people who will change the world" in their October 17 issue includes only one politician (Barack Obama, "potential saviour of the US Democrats") and one head of state (the modernizing Emir of Qatar). The others are folk we've never or only recently heard of: Anton Zeilinger, inventor of "quantum teleportation" and the Dalai Lama's tutor in quantum physics; Aubrey Meyer, an ex-musician who has devised an alternative to the Kyoto Protocol; Sania Mirza, India's first Muslim woman tennis star; Victoria Hale, whose non-profit pharmaceutical company is ready to put a treatment for visceral leishmaniasis into clinical trial; Mo Ibrahim, who is revolutionizing communications in Africa with mobile phones; 20-year-old social campaigner Kierra Box; Brewster Kahle, who is trying to build a digital repository of all human knowledge; Samira Makhmalbaf, a 25-year-old feminist Iranian filmmaker. What qualifies a person for admission to this top-10 list? In varying degrees: thinking out of the box, courage, recognizing an opportunity, a knack for persuasion. It isn't always "thinking big" that does it, but bringing a good little idea to a larger scale.

Which brings us back to the lightbulbs. If we were to take a look at ourselves and our colleagues, who would we pick out who is most likely to effect positive change? Who's not just replacing the lightbulb, but using a new kind? Who's speaking up, or asking tough questions, or proposing a new approach? What new thing is being tried, in any health care setting, that somehow feels like progress?

We'd like to hear about it. Amid all the talk of the failure of medicare and the perils of privatization (and the other way round) we suspect there is, at the grass roots, a lot of adaptation and innovation going on: changes made to office practice, to clinical approaches, to community interventions. Maybe by this time next year we'll have collected enough lightbulb stories from readers to assemble our own top-10 list of innovative health care professionals in our Holiday Review.  
— *CMAJ*

### REFERENCE

1. Skidelsky W. Revolutionizing the future: from tennis to teleportation. *N Statesman* 2005;Oct 17:19.