

TRANSCRIPT: 2018 Kreuter Katz Lecture, School of Public Health

SPEAKER: Dr. Collins Airhihenbuwa

LECTURE TITLE: "We are All Others: Crossroads and the Journey for Health Equity"

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Collins Airhihenbuwa: Hello everyone. It's great to be here. Let me echo the "thank you" expressed to Marshall and Martha. We were reminiscing earlier today: Marshall and I were in Nigeria to address some issues of shared interest that has to do with understanding problems from the perspective of those who carry the burden. Martha, I want you to know that the line you used to recruit Michael is the same line he used to recruit me when he called me. It's good to know where the source of that strategy came. Gary Nelson, I have to thank you for your generosity and spirit in terms of the conversation and welcoming spirit you shared and showed when I first came and the lunch we had about your commitment and support to advance this mission in Atlanta.

I always say in my talks, "I'm not so much interested in answers, I'm interested in questions." A part of what I try to do in my career is question the questions. It's how I got interested in studying culture. Recognizing that professors who represented the space that nurtured me, represented that space in a negative way. There were several issues with which they were not familiar and the way in which we frame different content, was either represented as a problem or a norm. Not having the language to engage this conversation, I thought I should begin on a journey for change. A journey for change is very different from change and journey.

Mark Naples said it best when he said, "Change without journey makes you a chameleon. Journey without change makes you a nomad. A journey for change makes you a pilgrim."

The crossroad that I want to talk about is a space where pilgrims come together to address difficult questions, questions that we often don't want to engage in. But with the understanding that the difficulty of the question should not create a sense of devaluing in ways that we refuse to continue the conversation. As I share my thoughts with you, you will begin to know what I mean. When we talk about spaces, intersections, or crossroads, the notion always invokes some sense of confusion, maybe road signs that gives different directions to places that we may or may not want to visit. Or maybe some type of chaotic engagement where movement requires some type of careful navigation. The crossroad I'm talking about deals with how collective identity comes together to nurture a space for difficult conversation and recognizing that we always start with where the strength lies.

Amadou Hampâté Bâ once said, “The hand that gives is always on top.” It also occurs to me in the spirit and context of engagement, the position of pontification is often at the higher platform. The question is, how do you occupy the same space or platform with those you want to have the difficult conversations with? Bâ gave us this lesson that always stuck with me: “The hand that gives is always top.” Whether it’s a professor- student relationship or whether we are dealing with it on an economic level. When we talk about the hand that gives while the other receives, we think about that which other people engage in, not us. The first point of conversation, the crossroad or pilgrim, is to think about which role you play when you change positions. Are you or have you ever been the hand that gives? Have you ever been the hand that receives?

I want to talk about three critical areas that become a way of framing what a crossroads represents. I’ve given talks about claiming your space and I’ve talked about the importance of understanding that you are an actor within your crossroad space and you have to learn to claim it. Claiming your space is also a way of identifying culture and culture as not monolithic. We all tend to embrace multiple strands of culture, especially in contemporary times and how you claim that and occupy that space. The second area would be owning your crossroad selfhood. Identity is located at a different point within that crossroad. Keep in mind that the crossroad is not a challenging place to engage in difficult conversation. There are ways that we have to understand who occupies that crossroad and how do we engage in that conversation. Beyond the space that you occupy, what is going on in other spaces and how do you learn to embrace those other spaces? You have to understand that to address equity, it’s not enough to look at the negative markers that we tend to define. We have to understand the foundation, structure, and way in which our nature of relationships preconditions the outcome that we end up with.

The notion of “glocal” is a combination of global and local connections. When we say global, we must always remember that local is part of the globe and that is what distinguishes it from international. When we think about international, we often think about crossing boundaries and borders. To create spaces and crossroads that allow us to tackle these difficult questions, we have to think global.

So, everything that happens in Atlanta affects global possibilities. I’ll talk about how some leaders have used that in the past. To get to that, we have to start to unlearn some of the assumptions we make about learning. How do you unlearn that which you know? How do you unlearn the assumption that you’ve become accustomed to? We theorize along disciplinary lines. We identify our self in this vertical language that really doesn’t allow us to go beyond how we understand. We look for evidence, something that is very vertical. From there, what can we do to have an impact on some of the outcomes that have increasingly become a burden? These

include: infectious diseases, noncommunicable diseases, and tropical diseases. How do these happen at a genetic level? What are the levels of vulnerability that allow us to understand what predisposes or creates vulnerability towards the conditions that we study? In between, public health is struggling with the processes.

A lot of things that we are doing, is trying to connect the assumptions about behavior learning to outcome. But the processes do not always allow us to look at the structural issues because we are trying to study behavior. The language in which we define the problem is in the language of diseases. If we are going to function at crossroads, we have to learn language in that specific discipline, how we address issues of identity, and we have to start looking at how equity differs from equality. I've said in previous lectures that we cannot confuse equity with equality. Consider this example: If you're traveling in an airport during a busy time and go to the restroom, you'll see equal bathrooms: men and women. If you were to stick to just gender, you would say it's equal. However, if you measure the time spent used in the restroom between men and women, you'll find it to be inequitable. If you were a business owner and you're trying to quantify how much time people are spending in the bathroom because you're losing money, you would do something to improve the facility that women use to decrease the waiting time. So, equality does not mean equity.

We have been dealing with horizontal relationships, not vertical relationships. In that space, you are no longer a psychologist, sociologist, or public health representative. You are somebody who is trying to erase the boundaries that confine the way you look at issues and begin to understand the humanity of the people of that particular space. When we're studying behavior, we tend to focus on three areas: consumption, energy expenditure, and sleep.

Consumption is addressed with the assumption that what we consume is good for us. There are some things that we consume that is not good for us that we are concerned about. Some individuals find ways to engage in the behavior while simultaneously protecting themselves from other elements. When we say consumption, it's not everything that we consume. When we're dealing with things that we consume, we aren't only dealing with one country. If we were to look at one country, we can look over a span of 20 years for the same product because the purchase size has changed. The size of a hamburger served in 1977 is no longer the size of the burger served today because the burger from the past is now considered too small to sell to consumers. Everything has been supersized. A meal that you consume in Nigeria, has some of the same issues that we are dealing with in terms of quality of the product being served. The same goes for the Asian market.

This is a topic for difficult conversation: How did we get to a point where consuming things that are supposed to be good for us has turned into a health problem that creates diseases? The two culprits that we are dealing with are sugar and salt. How much of these are present in what we eat and how do you address the people and organizations responsible for producing them? Whether we are looking at hamburgers in one country, fried plantains in another, or what people commonly call “Chinese food”, the question is what is the salt and sugar level and how did it get to this point?

How do you claim your crossroad space?

“Man is first a cultural being which is why he resorts to his cultural affiliations when politics appear to have failed him.”

Anytime individuals encounter a problem, they remember what culture or group they belong to. The reality is that we are all cultural beings and we belong to multiple spaces. Movement is culturally framed in terms of whether or not it will be group or individual activity that will result in energy expenditure. Energy expenditure is culturally framed. It's how you engage individuals from a very early age to begin to appreciate that which is customary to their own space.

Sleep is different. What does sleep mean in different contexts? Consumption, energy expenditure, and sleep all relate to each other. The recommendation is that you sleep 7-8 hours a day. Does this count at night or at a particular time of day? We have to understand why sleep is important. The way sleep is framed and interpreted is culturally determined. How do you balance quantity and quality? What is appropriate for the type of activity that you're engaging? In terms of dealing with infectious diseases and genome to globe, we can look at what the United Nations has proposed. They propose that we focus on what it's going to take to bring establish equity around the world. To have an impact, we have to focus on much more than what we've done before. We have to begin to question the questions. Should we follow the leader without every questioning whether or not we are moving in the direction we need to be moving? This leads to looking at a different way to quantify vulnerability and risk.

To own your crossroad of selfhood, I want to talk about what it means to claim your space. I'm going to talk about a topic that I think is most difficult for people to engage in: race and racism. There was a paper published that argues that racism comes before race. Racism is the father and race is the son. If that is the case, who is the mother? It's culture, the nurturing space.

Racism has been at the core of inequity and disparity and has accumulated because people are not talking about it. We have to be able to tackle the issue of racism and how it affects

everyone. Do you know who you are without what you do? I'm trying to understand how can we collectively work towards a transformation that's going to move us around? We all understand that we are pilgrims in this place and there are issues that we need to tackle. We've spent billions of dollars trying to address it and the problem seems to be widening. Why do we continue to have this inequity gap?

Bryan Stevenson says, "We are all broken."

That's a powerful statement. To enter a crossroad as a pilgrim and to engage in conversation, we have to accept that we are all broken. That is not an easy thing to do but it is the thing that we need to take the most seriously. Part of the conversation will be very painful because we are trying to see how we can close the inequity gap. This is a very challenging thing to do: How do you unlearn that which you thought you knew in order to have a conversation for a new way of thinking? You have to create a new set of assumptions if you want to engage in conversations that are different.

Chinua Achebe said, "No man should ever enter his house through another man's gate."

But if you see your gate, would you be able to recognize it? If you're so accustomed to using someone else's gate to enter yours, whether it's in terms of theory or framework, will you be able to see your own? Our gate is not a medical gate, it's a different gate. You may give us money to do something in the community because you understand the medical or clinical gate but for us to understand the totality of experience and to deal with inequity and disparity, we have to enter through a different gate that allows us to understand why we have inequity. So, you basically must turn the world upside down to really understand how to have a crossroads conversation. We must rethink the way we think, to unlearn the assumptions we've become accustomed to so that we may have some serious conversations.

How can you be at home with your spirit and how do you not become a tenant in your own soul? To claim or to own, does not mean to originate. It's something that you are prepared to accept and embrace. A part of owning your spirit and soul is to have the same conversation: We are all broken. It's about respecting the souls that occupy the space. It's about balancing the head and the heart. Your heart is in one space while your head is in another. How do you align it?

Embracing your space beyond your space: It is very challenging to have new ideas when you have not moved from the space of the familiar. Traveling and going into different spaces allows you to remember how you can renew your own space.

Some crossroads of global engagement are: rethinking boundaries of illnesses, move beyond the social and structural determinants of health, and examining the question of social justice and the importance of leadership. Leadership is not about being in administration. It's about every one of you thinking of yourself as a leader and asking yourself what changes and transformations are you going to bring to the crossroads? What is your role, as a pilgrim, in that crossroad? What are you prepared to give up in order to have this difficult conversation? Here are ways to share with competing priorities: 1. understand that everyone has a mandate. 2. Understand that the criteria for valuing will be different. 3. Understand that the diversity of generation is real and crucial at crossroads.

The notion of what really matters is different. It's about going beyond 'what matters' to address 'what matters to you'. You may encounter many defeats, but you cannot let them defeat you. If you are going to dare to dream, you must travel to other places and spaces. You have to read, listen, and act. Listening is probably one of the most important skills you will ever acquire. You don't have to agree with what the person is saying, but you should listen and accept what they have to say. Lastly, you have to act: Engage in the difficult conversations, challenge the introspection about one's intersecting cultural values, and learn how to be comfortable with being uncomfortable.

So, we will first start by flipping things upside down. Secondly, we will have a conversation around the table. Third, we will recognize that we are dealing with multiple generations with multiple identities and lastly, we will remember that we are there to protect that space. That, to me, is the ultimate goal of health equity.

*-Transcription by [Kiana Colquitt](#), Graduate Administrative Assistant for [Jeremy Craig](#), PR & Marketing, Strategic Initiatives and Innovation (Next Generation Program), Office of the Provost*