

AJPH Podcast—August 2024
Public Health Students About Responding to and Preventing War
Hosted by Alfredo Morabia, MD, PhD

[musical prelude]

AM Hello and welcome to this new podcast of the American Journal of Public Health. Here we are with my colleague and co-host, Professor Vickie Mays from UCLA and associate editor at the Journal and on the campus of Washington University in St. Louis. And we took this opportunity to discuss with two students from the Brown School at Washington University to have a follow-up on a previous podcast that we had done with Barry Levy and Bob Gold about training public health students about issues related to war and what they can do about it. And so we had the perspective of two senior public health persons, you know, with a great experience. We wanted to also have another perspective from more junior persons who give us also the perspective of the current generation.

VM We heard from them, and what we want to do is, you're the next individuals to teach, to, you know, actually you know start to publish in our journals, so we really wanted to hear from you your thoughts about, okay, in terms of the training that you have, in terms of working in, as a public health person responding when there's a war, I heard people say about choosing one side because the other side is being horrible; I've heard people say no you need to be on both sides; and then I've heard people say we shouldn't participate. So, I'd love to hear for you to tell us what you think is, you want, in terms of training going forward, in terms of, you know, we are in the midst of a war, we're going to have others. So, what do you think your role is and you know how should we prepare you in terms of the future?

AM That's great, Vickie; let's start with you, Alice. You're a student in the program of global health at the Brown School, so let us [listen].

A Well, thank you so much, and you're just saying when I was reviewing the past videos I was just impressed by how much news they've worked on the field and so much experience which is something that I'm still to work towards to, and I definitely value the beauty and the privilege to speak up as the next generation of leaders and on what you just said, I guess that the most important part of our training or at least what we hope to see, and unfortunately as you just said wars are still coming which is so unfortunate but the reality, going to say that we need to be trained in a way that does not necessarily mean working in the most effective environment. For instance, when you are talking about designing interventions, you know? How do we design interventions in less than ideal situations and make of them still more effective, you know? Because there are some times—most times—we want to serve as a public health person, you really want to serve, but sometimes you are not equipped with the skills that work in less than effective situations; and we can feel so frustrated and sometimes we're like well I can't do much, I don't have that, but the fact that we don't have that doesn't mean that we should all kind of give up and wait for it to come as sometimes it doesn't, and coming from a low income country I know that it is important to be trained to do more with less.

AM Very, great point

VM Great point, yeah.

AM And, Masoomah, you just graduated, you have an MPh moving to Colorado, just let us know your perspective.

M Yes, I want to echo what Alice said. Um, actually we should embrace the reality of adversity is going on across the globe, not in one country, in the other country—because we are all connected and the adverse outcomes of such a thing like war or exposure to war-zone area is not isolated to one area in the world; it's widespread across the globe, and it impacts all of us no matter where

we live. In terms of what is necessary, really, in educating public health students about the war, I think that it is so essential to train a students, look at the adversity exposure through trans-disciplinary lens. We need to have a lens from different perspectives like sociology, psychology, biology, even. Exposure to war zone area has biological impacts, for example generational inheritance of long-term exposure to chronic stress, you know, and also sociological impact. We need to look at situation through different lenses and embrace that, accept that, and find a solution to design interventions, Alice said. We cannot forget, we cannot keep silent, stay away, and I think that the immense capacity that students have the courage to talk about it and listen through, for example, social media, to what happen around the world and then tailor the very period reaction, impartial reaction, it's very important.

VM What are some of the things that we should be teaching in our programs to prepare you? Is it to teach you, you know we say, well okay we want to make sure you're in global health so that we can send you there or is it really teaching you about, and I like the way Alice put this, about, you know, you're going to have to learn to respond with less than being prepared, because every war we see we don't, we don't know it. You know, it's not the same as another, so what would you like to see in terms of your training?

M Well, I think that, I'm going to say if, because I've already seen part of it here at the Brown School, having not fitting the others as the others, having, being a global citizen and seeing people from around the globe as really, as being the whole, you know, global community, and I think that, first of all, thinking, not thinking of them as someone else's problem is something that helps. So, designing a curriculum that embraces humanity and kind of gives us, every student, an idea of being culturally sensitive of seeing the person as a person and wanting—because I believe that we can have different [I stat] class, we can have different epi classes, and like

courses everywhere, but the way we design them and at least what the students take the most out of, I feel like it is important that it becomes more than just concepts and we see them as a way to serve everyone in different context. As you were saying, wars are different everywhere; it can be a war, populations are different. The way they are affected is different. What they need is different, so we can not afford to just kind of cram some concepts as [really step stones] but being flexible in understanding and kind of finding a way to, not changing but, adapting it to where we are. So, in the way that we are told or trained, it is important that we learn concepts but in a way that we, in the back of our minds, we know that this will need to be adapted in some context. You know, it's not just this, you know—being flexible when you have to.

VM Just in case our listeners don't know, can you explain a little bit more about what othering is, because it's really critical concepts these days.

M Okay, well I hope I get it right! So, othering is, and it's something that I personally had to learn not in the best circumstances as a person from, I'm originally from Rwanda, and being here—first of all, when you're in very... it's home, you know? And sometimes you can just feel that some discussions can be, the radio, it can be on some journals or articles and just see certain groups of people or continent or country or [gen] identities just being treated as, you know it's as an extent, services for us and how to do about them, you know. Not wanting to find, you know, all of us, humans, and it's amazing how, at least in the past, some people really go the extra mile to differentiate groups of people and deciding or thinking that this group needs this but that group not necessarily, you know? So that is one way of seeing the othering as, especially in public health or in any other field.

VM Thank you.

AM So, Masoomeh, I wanted to go back to this idea of what needs to be taught and I think Alice explained, and I understood it essentially, conceptually, what the course should be about, but how should the course be organized according to you? What should be taught and should it be lectures, should people be sent abroad, should be sent to war zones? I mean how do you, would you conceive such a course?

M Actually, I think it should be a combination of all methods. Yeah, I had the privilege of starting in Brown School that is very good at, you know, instructing the courses in a very engaging situation, engaging classes, and all people from any perspectives were so welcome to express thought. But you know, only sitting in the classes is not enough, at least for me and people who think like me. I believe that field experience play a very, very important role in learning things, but you know, I don't want to go very, very far that we should send student to the war zone. I myself had war zone exposure over my childhood and when I was very young, when I was at 20s, and I know that it has psycholo—and scars, and maybe it's not very practical sending someone to the war zone. But, I think that practicing many of those skills here is also very beneficial. For example, I heard that around the campuses in the United States, people tried to talk, to express their concerns, advocate for social justice, and this is kind of practice for public health practitioners, public health students, and I encourage all authorities to embrace the very challenging situation and understand that when people are practicing things, maybe something not very good happen, maybe things very good came out of this; you know recognize the students' rights to practice this here at school and you know open the dialog, constructed dialog, I believe that, thank you for inviting us here, is a kind of opening a dialog and this is helpful. People talk, understand each other, and see that we're not threatening to each other; we just want to find a solution. And you know, public health realm aims to be impartial, so many of us should

practice this. It is not very easy to be impartial because we have some, however we have some shared values, but we have conflict of interest, you know, benefits, and we have such trauma, sometimes trauma's informed our perspectives, and we should practice to be aware of what is my mental, emotional state now.

A I think that in terms of organization of the curriculums, it is important that we have the in-class exposure, and I had an amazing professor this semester, and I was impressed by how we were studying some of the non—I'm going to say, ways of like board views from different cultures around the world and it just got along, I was impressed by how much I was learning from other cultures. And so that being one aspect of the class; we are not necessarily having all the class materials being one-sided or one viewed, and in terms of global exposure, physical exposure, I'm going to say that it's very important to be outside serving in different parts. I had my, in my global health personalization students go in different parts of the world to, they work in different areas providing [financial notarization], in different fields and I'm amazed by how much we learn, you know? Actually, that is a very good way to prevent the other thing, for students to see that, oh, we joke, you know, we all laugh, we all go hungry, you know, and we just start to see them as people, and then when the time comes for serving, you know, in terms of conflict or other times, then a person can voluntarily say oh these were my friends at some point, you know, or people like these are—so the concept of the other are not so much my problem, kind of not just disappears but you get to learn and see that all these are like technically my brothers, you know. So, global exposure is also a good way to normalize and having everyone seeing, you know, the humanity.

AM I like very much, you know, the two perspectives because Masoomah says we can have a global experience just next door, and it's also important to have it maybe also a broad but same skills, actually, can be accrued next door or across the--

A My global exposure was I had definitely been working here in centralized, by far, yeah...

VM When you say you had your experience here, can you talk a little bit about that?

A Yeah. Sometimes, at least additionally when we say global exposure, people here serving in low-income countries, you know, or the global south. Again, the Brown School was amazing about this; they're like sometimes depending on where are from, the global exposure, you know, it is different, and mine was here in St. Louis and I was serving with an organization that works around housing, affordable housing, and affording, not access to healthcare but some of the health benefits, and affordable meals. I could not believe how much I learned from that and how it was so, it was an amazing opportunity to serve, so for instance in my country we do not so much trouble with affordable housing, but here's a real public health issue. And it gave me ground for serve to learn a lot and as I was saying, as I would turn to my supervisor, learning some transferable skills that can still be adjusted in my community work back home. So, yeah, finding a way to learn what can be transferred in either way is, again, it's the global community, you know, it's everywhere.

AM So when you say learning, you mean the experience enriched you and to become a better public health practitioner in situations of war and tension and inequities--

A Exactly, inequities are not the same everywhere but the effect can be, you know, comparable and for instance designing interventions. So I came to people with a different perspective with convincing you know community works, and all of that, that is something that I learned here; I was, I had some work back home but my experience definitely grew stronger here, and most

importantly I feel like now I have skills that can help me do the same, not the same community work, but in different communities around the world which is very important, if you ask me, because it's not, we do not necessarily have to work in our own countries or when I'm training my students in the following, you know, the coming years, I'll be training them to be more than just learn to serve in Rwanda. You know, they'll be able to have transferable skills that can be applicable to different places.

VM It's incredible the ways in which your insights about how to do this, because it really is an issue of there's a war but it's doesn't even need to go there to help that country--

A Exactly--

VM There are people from that country that are here that are being othered or, you know, and your abilities to be where you needed to be but to have a perspective that was outside of where you were, I think that that was just a, you know, incredible. So, you know, one of the things I'm going to hope is that you're going to go on and have students that you will be teaching—

A I hope so--

VM Because these lessons that you've been bringing to the forefront it's like oh my gosh I just had one, so, you know, that just, just really incredible, I think the way that you're thinking about it. And it makes it doable in the curriculum because you aren't coming with things that, you know, we gotta go raise \$7,000 for you to go somewhere and then we've gotta do all these things to get you there, but you're really saying how to learn about the other in many different contexts and that you don't have to be in the conflict to be able to train yourself to be able to respond to a conflict so...

A Yeah, when the time comes...

VM Yeah, so I really appreciate, you know, what you've shared with us.

AM Yeah, thank you, thank you very much.

M I think just to add this to what Alice said, that was, you know, it is the implication of social media that makes the world smaller and smaller, and—

ALL So true...

M Yeah exactly and you know, for, now I know that about 27 conflicts is ongoing around the world that and aren't, you know, violence, and I heard about all of them on social media and you know every single of those peoples in the war zone areas is like a friend, like a person, I know them, and I care about them, and you know, I think that students should be taught to make [qualicients?] and collaborative health initiatives among the students from different parts of the world and initiatives that bring people from a conflicting parties to adverse a common health concern and save that health concerns as a breed of peace. You know, and it actually open the stage for trust, for cooperation, for exchanging the skills and knowledge and building capacity across the world and one of the consequences is that when you can build capacity and structures across the world, you can prevent immigration which is a big consequence of war zone areas and this.

AM Yeah, and what you said, I mean public health practitioners are actually an agent of peace because we tend to, we have to understand both sides we tend to create what you said the dialog, et cetera, and this is, you know, preventing sometimes potential conflict.

M Yeah, actually, I'm more than happy if they can add more political sciences, policy-making, and exposure to these community of people who are involved in decision-making and policy-making, not only direct health policy but also health-related policy, because I think that we have perspective that we can inform them with evidences that we produced first hand by ourselves and we can introduce those evidences and help them to make policies that inform by those evidences.

AM Alice, Masoomeh, we've reached the end of this podcast, and thank you very much. I mean, this was enlightening and so warm, the message that you transmit is, you know, I feel inspired by you, and thank you for that.

ALL Thank you.

A Yes, thank you for opening this dialog, give us that opportunity that we speak from what we heard from our views, other students over the campus...

[musical postlude]