Do Doctors Know Best? And Who Will Take Care of the World?

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The short answer to the first question is:

no one person/ organization/ discipline knows best
‘Walk Softly and Listen Carefully’:

- 'You have to be able to humble yourself before another person, to understand that each person has something valuable to contribute. So you have to be able to quiet down your own agenda and your own thought processes and open up your entire spirit.' (teleconference participant, June 2012)

  From a report on 'Building research relationships with tribal communities' in the US
The short answer to the second question is …
Every human on the planet
“All... are caught in an inescapable network of mutuality, tied in a single garment of destiny... I can never be what I ought to be until you are what you ought to be, and you can never be what you ought to be until I am what I ought to be. This is the inter-related structure of reality.” —Martin Luther King, Jr.
Reframing the question:

What concepts help us as health professionals to be better equipped to do our part in improving conditions of life and living?
Guidance documents


Ecological Thinking & Root Causes

(IUM, National Academies Press, 2002)
Action and research on complex health problems require “an ecological approach to problem solving” which “requires a well-educated interdisciplinary cadre of ... health professionals” who understand “that successful interventions require understanding not only of the effects of biology and behavior, but also the social, environmental, and economic contexts within which populations exist.”
The Marmot report

“The social determinants of health are the circumstances in which people are born, grow up, live, work, and age, as well as the systems put in place to deal with illness. These circumstances are in turn shaped by a wider set of forces: economics, social policies, and politics.” http://www.cdc.gov/socialdeterminants/
If you are a girl born in 2011 in Sierra Leone, you have a life expectancy of 47 years.

If you are a girl born in 2011 in Japan, you have a life expectancy of 86 years.

you live almost TWICE as long in Japan as in Sierra Leone
http://apps.who.int/gho/data/view.main.680?lang=en
If you were pregnant in 2010 in Afghanistan, you have a 1 in 32 chance of dying during pregnancy / delivery.

If you were pregnant in 2010 in Sweden, you had a 1 in 14,100 chance of dying during pregnancy / delivery.

http://www.who.int/gho/maternal_health/countries/en/
HALE-2010 by Income Groups (unweighted average)

Death Rate per 100,000-2010 by Income Groups (unweighted average)
"This ends the debate decisively. Health care is an important determinant of health. Lifestyles are important determinants of health.

But... it is factors in the social environment that determine access to health services and influence lifestyle choices in the first place." Director-General Dr Margaret Chan, at the launch of the final report of the CSDH.
Marmot report recommendations

- “Improve daily living conditions
- Tackle the inequitable distribution of money, power, and resources
- Measure and understand the problem and assess the impact of action (or inaction)”
Levels of learning

- Informative: “acquiring knowledge and skills; its purpose is to produce experts”

- Formative: “socialising students around values; its purpose is to produce professionals.”

- Transformative: “developing leadership attributes; its purpose is to produce enlightened change”
Transformative learning

• “involves three fundamental shifts:
  ◦ from fact memorisation to searching, analysis, and synthesis of information for decision making;
  ◦ from seeking professional credentials to achieving core competencies for effective teamwork in health systems; and
  ◦ from non-critical adoption of educational models to creative adaptation of global resources to address local priorities.”

• Interdependence – transdiciplinarity - is key
Requires

**Reforms**

**Instructional**
- Competency-driven
- Interprofessional and transprofessional education
- IT-empowered
- Local-global
- Educational resources
- New professionalism

**Institutional**
- Joint planning
- Academic systems
- Global networks
- Culture of critical inquiry

**Enabling actions**
- Mobilise leadership
- Enhance investments
- Align accreditation
- Strengthen global learning

**Goal**
Transformative and interdependent professional education for equity in health

*Figure 12: Recommendations for reforms and enabling actions*
Tying the strands together
“Global Governance for Health”

- "We are challenged to develop a public health approach that responds to the globalized world. The present global health crisis is not primarily one of disease, but of governance."
- "Construing socially and politically created inequities as problems of technocratic or medical management depoliticises social and political ills, and can pave the way for magic-bullet solutions that often deal with symptoms rather than causes."
- "The tremendous health inequities that exits are morally unacceptable and "not in any sense a natural phenomenon, but the results of a toxic combination of poor social policies and programmes, unfair economic arrangements, and bad politics."

The Lancet Commission report released in Feb 2014 'The political origins of health inequity: prospects for change'
http://download.thelancet.com/.../la.../PIIS0140673613624071.pdf
What combination of educational experiences is needed?

... To nurture ethical professionals

- with a passion for action (transformational leadership);
- who are ready and willing to cross boundaries that restrict their profession (interdependence / ecological thinking) and to tackle root causes (ecological thinking)
- who can listen and to reach out to communities and partners, (interdependence / walk softly and listen carefully)
- who can steward changes in health in their own community and the region (transformational leaders)
Thank you