

Promoting a More Inclusive Definition of Global Health in U.S. Medical Schools

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Abstract

Due to increased funding opportunities, faculty recruitment, and growing interest among medical students, global health has evolved into a mainstay in American medical education. However, medical schools continue to engage with global health through fundamentally different definitions of the term itself.^{1,2,3} These interpretations range widely, from emphasis on neglected tropical diseases, to health systems strengthening. This essay offers a more concise and inclusive definition of global health for academic inquiry undertaken by medical schools in this field - to interpret the word *global* as global in scope, rather than global in geography alone. Clarifying the definition of global health in this manner offers three distinct advantages. First, it would better align American medical schools' global health interests to the Sustainable Development Goals passed in 2015 by the United Nations, and other consensus documents shaping the current global health agenda.⁴ Second, this definition would encourage researchers from non-traditional disciplines in academic medicine to collaborate with medical schools on global health projects. Finally, it would facilitate smoother translation of global health practices between developed and developing countries. Reforming the definition of global health in this nature would ultimately preserve the problem-solving ethos of this field, while streamlining its commendable efforts to improve society.

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Early in my first year of medical school, I attended an information session about mentorship opportunities dedicated to global health. Given my past experiences studying global health as a graduate student in the U.K., I expected that we would discuss conducting cost-effectiveness analyses of thyroid uptake scans, or studying power dynamics between pharmaceutical companies and the World Health Organization. Yet after conversations with professors, which rarely ventured away from neglected tropical diseases in impoverished pockets of the world (a "traditional" topic of global health, as one of the faculty had described it), it was clear to me that my definition of global health differed greatly from my colleagues' interpretation. I found myself genuinely confused.

With this perspective, I hope to offer a more inclusive and forward-thinking definition of global health, which prioritizes the increasingly multidisciplinary scope of global health over its geography alone.

Global health only recently gained eminence in U.S. academic medicine, starting in the early 2000s.⁵ Michael Merson, of the Duke Global Health Institute, suggests that themes such as social justice cultivated within universities drew students into global health.⁵ Interest in global health may have also been fueled by synergies between health economics and public health, as countries look to control soaring healthcare costs. Nevertheless, the rise of global health has been transformative. Grant funding from the Bill and Melinda Gates Foundation in particular has supported a growing number of global health

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research centers based in U.S. medical schools, and over two-thirds of medical schools today now have global health interest groups. 6 Nearly forty percent even offer global health curricula for their students. 6

Despite an uptick in interest, a number of definitions for global health continue to coexist. One offered definition describes global health as "collaborative trans-national research and action for promoting health for all," emphasizing the implicated geographic breadth of this field.¹ Another asserts that global health "implies consideration of the health needs of the people of the whole planet above the concerns of particular nations," effectively updating existing paradigms of international health.² A third definition, which perhaps has gained the most traction in recent years, defines it as "an area for study, research, and practice that places a priority on improving health and achieving health equity for all people worldwide".³

Unsurprisingly, the lack of consensus for defining global health has informed different approaches to research undertaken in this discipline within U.S. medical schools. Some pathways emphasize combating infectious diseases, presenting global health issues as a pressing matters of international security. Other pathways have applied global health research towards chronic disease management and health systems strengthening, with the emergence of the *double burden of disease* – referring to both communicable and non-communicable diseases – shouldered by industrializing nations.

The era of global health has spurred unprecedented progress in improving health over the latter half of the twentieth century, utilizing those pathways. Yet the pursuit of achieving this goal steepens in its climb: efforts will have to be sharpened to new challenges, such as aging, diabetes, and pandemics. Moreover, as globalization continues to align our cultures and contract the size of our planet, both developed and developing countries will grapple with an increasingly similar palette of issues related to global health. Because of this, the 'geography' of global health itself will likely become less relevant over time.

For these reasons, it may be in the best interest of U.S. medical schools to reinterpret "global" within "global health"—to emphasize its transcending of multiple disciplines, rather than its transcending of national borders or its localization to specific, impoverished regions. Global health, within this context, could be defined as "the study of threats and opportunities to human health utilizing a multidisciplinary, collaborative, and fundamentally 'global' approach." This new definition of global health would offer advantages for American medicine to contribute better solutions to address existing health inequities.

The advantages for this new definition are three-fold. First, this definition would align the research activity of U.S. medical schools in global health to new objectives set by leading stakeholders. The Sustainable Development Goals put forth by the United Nations, including issues such as climate change and sustainable cities, signal a clear pivot for global health to focus on socio-economic determinants of health in the coming years, alongside its historic commitments to issues like the HIV/AIDS epidemic.⁴ Through the resources of their parent institutions and affiliate hospitals, medical schools possess a unique ability to draw together different forms of thinking to address these multidisciplinary challenges.

Second, this conceptualization of global health would eliminate barriers and encourage individuals from non-traditional academic disciplines to work collaboratively with U.S. medical schools on global health projects. For example, in the Ebola epidemic, addressing cultural etiologies, such as burial practices and public distrust of Western medicine, played a significant role in successfully responding to the disease. ¹⁰ The relationship is apparent in other examples as well. Existing research undertaken in academic medicine on rising obesity rates in the Middle East could be informed by observations in microeconomics, such as the decreasing price of food and the increasing price of exercise in a twenty-first century workforce. ¹¹ Inquiry into the spread of infectious diseases, such variations of influenza, could benefit from understanding global travel patterns and the overall socio-political context in which they occur. This mode of thinking has already saved lives.

Finally, this definition would simplify sharing global health practices between developed and developing countries. The thinking that inspired culturally-competent interventions that increased polio vaccine administration levels in India, for example, could be similarly applied to increase vaccination rates among Somali immigrant populations in Minnesota. ¹² Conversely, successes from antismoking campaigns in the United States, involving legal maneuvers and robust clinical research, could provide lessons for governments in the developing world seeking to decrease smoking rates within their borders. ¹³

In recent years, the agenda of global health has broadened to include new challenges, and U.S. medical schools have an obligation to adapt to the shifting global health landscape. These changes must start with a fundamental reconceptualization of global health itself. Ultimately, it may better translate its commendable research and innovations into tangible improvements for our planet.

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