Traveling with Cultural Humility: An Aspect of Decolonizing Global Health

Teresa Xu, Elizabeth Rose

Medicine, Health, and Society student at Vanderbilt University, in collaboration with Dr. Rose from the Vanderbilt Institute for Global Health

The rise of globalization has seen an increase in collaborations between different countries to address global health issues. However, colonial legacies persist, leading to an unequal global health landscape. Especially with the rise of short-term global health experiences (STGHEs), students at Vanderbilt and in other parts of the Global North should be aware of the power dynamics, cultural biases, and 'white savior behavior' they may bring when they go on service trips abroad or when they engage in healthcare work, the potential harm they may incur to those they wish to help, and the importance of cultural humility as an approach to combat such harm. As part of an effort to promote a more culturally competent and respectful approach to global health issues and travel among Vanderbilt undergraduate students, we developed a workshop to encourage reflection on global service and health engagement, the significance of one's social identity, the implications of power in health and global travel, and the importance of cultural humility. We presented this workshop to a group of students interested in health equity and a group of pre-medical students who traveled to Guatemala during spring break to help them serve others in a culturally respectful way, conducting a pre- and post-test survey to gauge the impact of our workshop. We have also compiled a database of research related to the decolonization of global health that we hope to continue supplementing and refining. Going forward, we hope to continue collaborating with health-based student organizations to expand the reach of our workshop and an understanding of decolonization issues on campus.

Keywords: decolonization, global health, equity, prejudice, power, discrimination, stigma, travel, cultural humility, ethnocentrism, bias