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**Having recently completed your Ph.D. (Congratulations!), can you tell us a bit about your research areas and/or your dissertation research?**

**[CS]**: I am interested in maternity care, particularly birth trauma and social determinants of health. My dissertation research was a qualitative study interviewing maternity healthcare professionals about their perceptions and experiences of patient birth trauma. I was exploring system-level factors of the maternity care environment that providers believe play a role in patients' experiences of ongoing psychological trauma after birth. It was fascinating to talk with practitioners about their experiences providing maternity care and to explore the factors that they identified as contributing to patients' experiences of trauma, such as patient-to-provider ratios, lack of provider continuity, time allowed for prenatal visits, and some hospital policies. Interestingly, some providers also described system factors in maternity care that affect their own psychological well-being and that contribute to their experiences of burnout, secondary trauma, compassion fatigue, and moral distress.

**Why do you think it is so imperative that health is looked at through a global lens?**

**[CS]**: Now more than ever as we face this pandemic we are seeing the way human health is an interwoven web around the world. We are an interconnected and increasingly mobile world population, and infectious agents can readily cross national boundaries.  Aside from the current situation, however, as public health professionals focusing on global health, we recognize that access to nutritious, affordable food, clean water, safe shelter, and appropriate, high-quality medical care are key elements to health. These elements--and their distribution around the world and within communities--determine not just whether individuals and populations SURVIVE, but also whether they THRIVE. And the availability and distribution of those key elements is very much affected by the global economy and the social and political structures of nations, as well as relationship between nations.

**You teach the core course of the Center's Global Health certificate (Introduction to Public Health), what is your approach to teaching this class?**

**[CS]**: I remind students that the United States is part of the globe. I push students to move beyond a simplistic "us and them" approach of looking at the rest of the world in relation to the United States, and invite them to use what they learn through their analysis of OTHER countries to exam and think critically about the U.S. health system. For example, when we look at maternal health, which is my specialty, we compare what we see around the world with what is happening right here at home as well. When we look at environmental health and lack of access to safe water, we look at our own country as well.  When thinking about health in the U.S., many of us think only about the medical system, because we take much of our public health system for granted in the U.S. So this is an opportunity for students to learn about health systems and determinants of health in the global context and then apply that lens to the U.S. setting as well. We spend a lot of time understanding the social determinants of health and exploring why poverty is such an important health determinant.

**Do you have any global health-related books, podcasts or documentaries you would recommend?**

**[CS]**: We usually watch at least part of the award-winning documentary "A Walk to Beautiful" in class, and Dr. Catherine Hamlin--the subject of the film--just passed away this past week at the age of 86. She and her husband founded the Addis Ababa Fistula Hospital in Ethiopia, and she devoted her life to repairing women's bodies and their lives from the damage they suffered during childbirth. This film gives students a very visceral perspective on the way that health conditions, while physical, are also rooted in social, cultural and economic structures as well.