

By Hilary E. Kahn, PhD

The Birthday Suit: A Lesson for Global Learning

A LARGE NATIONAL CONFERENCE that I run every year recently ended. On the last day, I no longer had any significant speaking roles and I decided to forgo the wig I had been wearing for the little aquamarine beanie a colleague knitted for me. This decision was a very visible and pronounced statement of the chemotherapy I was undergoing for breast cancer; I outed myself to the conference participants as they presented me with a surprise birthday cake. I revealed my alter-identity for no real reason other than it was my birthday, and I absolutely hated the wig I had been wearing for the first three days of the conference. It was uncomfortable, itchy, and it made me feel more like I was undergoing chemo than wearing my soft handmade beanie. I wasn't trying to make a point or anything; I just didn't want to wear that wig anymore. I wanted to feel like me.

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Afterward I struggled with that choice a bit; I thought about why I did it or if it was inappropriate or whether somehow I should have just braved that stupid wig for one more day. I started to think about the reactions it stirred, most amazingly warm and tender, but also a few reserved or even fearful. As an anthropologist and an international educator, I have certainly been analyzing the social transformation I have been undergoing over the past few months and the differences in reactions and various changes in social relationships my cancer is provoking. I can tell when I absolutely freak someone out or when my illness somehow distills a significant personal connection that I hadn't quite realized was so profound. I have been keenly aware of how people use my cancer as a chance to expel their own fears or stories or anxieties. I have seen how I am again, like I was when I was pregnant with my two boys, a public good—a mirror of social values, cultural symbols, and humanity. I have become completely vulnerable and exposed to the world, and my life is no longer private. Once I took that wig off and exposed the cancer that had supposedly invaded my body, I became a receptacle of social meanings. I became an entry point for others to see through to a vast number of complicated cultural values and human complexities. I became a lesson, I soon realized, in global learning.

How could I be a lesson in global learning? In one quick shift in perspective, as I spontaneously transformed from professional woman to cancer patient, I demonstrated the social and personal biases, assumptions, and experiences that guide the way we all see the world. It was all those internalized frameworks that were guiding people's reactions to my cancer (and mine too, as I lay awake that night wondering why I came out of my cancer closet that day). Like mental illnesses and a host of other diseases, cancer is not just a medical condition; it is a social one. People thus transform it into a number of situations, whether it becomes a connection to their own histories, an opportunity to express human empathy, or a black hole that represents our mortality and social unease.



It is shifts in perspectives that we are seeking in global learning; we want students to see things from completely different points of view. However, my exposure and the conference participants' subsequent perspective shifts didn't go far enough to be considered global learning. For global learning to occur, we would have had to dissect the reactions and dig even further into them, into the assumptions that made people step back or the framings that encouraged people to tell me I was bold and brave. We would have also had to explore my own reasons for wearing the wig in the first place or why my doctor suggested I buy one after I spoke about my public professional life. They would need to know why I felt I should wear the wig those first few

days, why I feared being misread as *chemo girl* throughout the conference, why at the last minute I almost did not, or why I decided in the end it was simply easier. They would need to know how I cried the month before when a teacher at my son's school did not recognize me at pick-up when I was wearing my wig. They would need to see why I sometimes imagine having cancer as another job and why it is such a challenging one because I cannot completely control it. They would need to learn how my doctor and I worked backward from the dates of this important conference to figure out when we could begin chemotherapy, to assure I would have enough energy to make it through those four days. They would need to see how my sons are my weak spots and how emotionally tiring it is to always be strong and seemingly okay. They would need to know about my Eastern European Jewish ancestry and how my mother had breast cancer 20 years ago. They might want to know that I am a sandwiched generation and how today my mom regrets that she cannot give me the attention she wants to because of the stroke she had two years ago. To be a lesson in global learning, learners would need to talk to me and see the world through my eyes.



Global learning does not only require deep learning that is anchored in a particular place or subject; it also requires broader understanding that expands the angles of interpretation and analysis. Global learners would therefore have to learn about the history of cancer as a social phenomenon and how health, illness, and cancer are practiced and defined differently across cultures. They

might explore how illness is often laden with strands of morality, which is why in many cultures people first wonder what somebody did to get such a disease, thus boosting the social stigma. Global learners might want to explore the growing rates of breast cancer around the world, why less than a majority of women in the United States get regular mammograms, and why this rate plummets in many regions of the world. They should consider chemotherapy, mammograms, and good healthcare as a basic human right that many women are denied. They would also want to investigate the global fashion industry that has emerged around women undergoing chemotherapy, as expressed in popular websites like *curediva.com*.

If I were to transform my breast cancer into an opportunity for global learning, I might also encourage others to take action on this lesson. After deep and broad learning, global learners might want to advocate for women's healthcare in economically disadvantaged regions of the world or intern with organizations that are providing affordable mammograms to women in East Africa. They might want to take actions that are closer to home, perhaps by

getting an overdue mammogram, quitting smoking, or making sure a girlfriend does regular self-exams. The actions are as personal as the questions and biases that global learners first bring to the learning experience. Global learning ultimately starts and ends with the learner themselves; it starts with a reflection inward as one explores the complicated social and personal meanings

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through which they see the world and it ends with a transformation. This transformation can take many forms; it can be a newly ignited spark of advocacy or an enlightened understanding of breast cancer and illness around the world.

As a global educator, I cannot tell for sure what the transformation will entail. However, I can make sure that the learners around me think about me and my breast cancer and my little beanie through as many angles and interpretations as possible. I can encourage them to think specifically and broadly, and I can foster learning environments where students ask as many questions about themselves as they do about the subject matter they are studying. I can become a prism through which learners see themselves and see others in the world. I can become a lesson in global learning. **IE**

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