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11/24/2014

Us and Them: Exploring Imaginary Borders with Dr. Eric G. Bing

By Ryan R. Latini, a freelance and fiction writer (email: ryan.latini856@gmail.com and on twitter: [@RyanRLatini](https://twitter.com/RyanRLatini)). Dr. Bing was the lecturer at the fifth annual [Lois K. Cohen Endowed Lecture Series in Global Health](#) at USciences on Oct. 30.

Behind Dr. Eric G. Bing, through the glass windows of the McNeil STC, is Woodland Avenue. It is the day before Halloween. "One thing that was always sort of interesting to me is that I used to go to cemeteries a lot," Bing says. The Woodlands Cemetery is about five blocks away from here. "I would read the people's tombstones and imagine who they were—imagine what they had done—and think about these people's stories," Bing continues. "Then I would see these little babies that had died and wonder what their story was—who were they—what had happened so that they died?"

Is Bing trying to shape a seasonal mood around All Hallows' Eve?

No, the man is a far too buoyant spirit.

On the walk from the parking lot with Lois Cohen, PhD., and Dean Andrew Peterson, Bing told us about the time he let his father know that he wanted to be an artist. His father replied with an emphatic, "No." His father was adamant about practicality in his son's career. In recent years, Bing was approached by his own son, who wanted to be an actor.

"He wanted to act, so I sent him to acting school," Bing says. Bing vowed he would not do what his father had done to his artistic desires. "Then, he wanted to write—so I sent him to writing school. Now, he wants to be a novelist," Bing says, grinning at Peterson and Cohen. "My father was right."



Eric Bing, MD

For a man like Bing, who has brought so many laughs in our short, half-hour meeting—why cemeteries? “I’ve always sort of been fascinated with these extremes of life,” he says. “Birth and death. I think it allows us to strip away anything that is not important.”

It would be great to spend Halloween eve touring The Woodlands Cemetery with Bing, filling in the dashes between the dates on the nearly 30,000 tombstones, because Dr. Bing is more than a physician with an MBA and the director of global health at the George W. Bush Institute; he is more than an author and professor at Southern Methodist University; and more than someone who has consulted for health ministries, created nongovernmental organizations and research centers on different continents.

He is a great storyteller.

A tour of The Woodlands will have to wait. Bing’s lecture must go on, so I ask him about his storytelling methods—how he wrote his book, “Pharmacy on a Bicycle.”

“To me, these are stories of people,” he says. “They are experiences that people have shared with me. The way I wrote this book—I had the pictures of the patients on my screensaver. So whenever I said, ‘I can’t do this anymore,’ I would stop typing and the screensaver would come on and it would be a patient. I would say this is not about you, this is her story. She could not do what you can do—do it for her.”

It was fitting to have Bing at Mayes College at a time when Ebola was crossing borders and headlines—Bing has a Ph.D. in epidemiology, and he lives in Dallas, Texas, where Thomas Duncan, the first U.S. casualty of Ebola, made headlines.

“I don’t think people knew what to do,” Bing says, after being asked if his phone was ringing a lot during the media frenzy. “The mother of a person down the street called me up: ‘Should I make my son come home?’ And I said, ‘Look, if he needs to come home from school, you would be the first to know.’ You know why? Because he lives down the street from me, and if it’s dangerous for me to be here, I’m taking him out with me.”

The Ebola scare has solidified in Bing the notion that threats to health—communicable or non-communicable—cannot be broken down into global or national. “I think that one of the things Ebola really showed us is that there’s no us and them. There’s only us,” Bing says. For him, borders, too, are just an illusion: “Diseases will cross them and good ideas will cross them as well. I think that for students here, if you are committed to improving access to care, you don’t need to leave Philadelphia, because we have enough problems here. That’s where it starts. It starts with a commitment, and then you sort of take it where life takes you.”

During his lecture, Bing hits on the point that malleability in ideology is paramount if your true goal is to help others. He describes his journey from where he expected to go, to where he needed to be. It began by leaving the safety of his job at Charles R. Drew University of Medicine and Science for an uncertain future as director of global health at the George W. Bush Institute.

“Can I do this?” Bing says through a high-pitched groan and whine. “I’m comfortable where I am. I’m almost 50 years old.”

Logistics aside, principles and politics came into play.

“I was a dyed-in-the-wool democrat and had campaigned for Obama,” Bing says. So, he thought, and he thought some more. He knew that former President George W. Bush was committed to solving global health problems through the President’s Emergency Plan for AIDS Relief (PEPFAR) and his investment of billions of dollars in the healthcare industries of Africa and parts of Asia.

“I knew his heart was in the right place,” Bing says. “All I needed to do was get in alignment with my own self to say, ‘Yes I can work with people who think differently than me, because what we are committed to is solving problems in innovative ways.’ I’m going to have to cross the aisle, and so I did it, and it has been the most amazing journey of my life. To speak to people who I thought were very different from me—to realize that they are actually the same in so many different ways.”

Perhaps this was another border that was only an illusion.

Posted by Lauren Whetzel Siburkis at 10:21:49 AM in [Health Policy](#), [Mayes Connections](#), [Pharmaceutical Business](#)

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