Haiti Trip 2014

Each spring, VUSN’s Pediatric Primary Care Nurse Practitioner Director Terry Witherington invites students on a medical mission trip to Haiti. Several of the students who participated in 2014, shared their experiences in hopes of providing insight into this life-changing experience:

Jennifer Holmes Eaton -- When I had the opportunity to go to Haiti, I said yes immediately. Medical mission work has always been a passion of mine, and I was thrilled to have the opportunity to go and work in an area of such high need with a pediatric population. In some ways, I was prepared for the conditions awaiting us, since I had done mission trip in the mountain villages in Jamaica. I wasn’t surprised by eating goat for dinner, chasing lizards out of our bungalow, or dodging falling mangoes while we were studying under a tree. The nursing program has taught us all to be flexible, so setting up a clinic in a backyard or a small community church was actually pretty straightforward. And with wonderful translators, and a couple years of academic French under my belt, we were able to converse relatively easily with our families, despite the language and cultural barriers.

In other ways, I was completely surprised by the lessons that awaited us all in Haiti. When we prepared for the trip, we studied tropical diseases, such as malaria and dengue fever, with the thought that we would see more of those disease processes than anything else. In fact, the opposite was true. We had one child who presented with kwashiorkor, a disease of poverty that is prevalent in Haiti. Otherwise, our children all had diagnoses we had seen in the States, most notably scabies, tinea capitis, and ear infections. But our interactions with the families were much more than simply getting a history and prescribing an antibiotic. For one thing, our pharmaceutical resources were relatively limited, so teaching took on a renewed importance. And often the teaching had to be modified for the culture and the resources of our families. I talked with a mom about treating her four month old’s constipation, and had to think quickly of a substitute for apple or prune juice. I counseled a teenager on proper lifting techniques for carrying water. I talked with families about healthy diets and increasing protein intake with the resources they had available. Throughout our time working with families, what struck me the most was not the differences but the similarities between the families I’ve cared for in the US and the families in Haiti. When I was talking with a grandmother, I joked about the insatiable appetite of teenage boys, and received a big grin in response. And when I offered my stethoscope to the kids who were waiting to be seen, the excitement in their eyes was the same as that of the kids I’ve seen in clinics everywhere.

Terry Witherington always says that if you can treat kids on a mountaintop in Haiti, you can do it anywhere. In my case, I think the experiences I had caring for children in Haiti are what will inform and color my practice for many years as I enter into primary care. Being in Haiti taught me to think on my feet, and to always be mindful of the family’s culture and resources before creating a treatment plan. Working in clinic with translators and other students also taught me the importance of functioning as part of a team. Some of the best advice I was able to give parents came from the other pediatric NP students. Most of all, caring for children in Haiti was a renewing and restorative experience, one that gave me the confidence to care for patients independently, and one that has reaffirmed my desire to make medical mission work a regular aspect of my practice.
Keely Erin Uhlir -- Today, April 26, 2014, we set up our clinic in a village elder’s front yard. It was very hot and humid under the trees and tarps, and we were up to our ankles in thick mud due to rain the night before. The people (our patients and their family members) who came to see us were dressed to the nines and very well behaved – no complaining or fidgeting like we are used to seeing from American children. The kids went wild for stickers and kept asking everyone in the group to take pictures of them. Most memorable for me, however, was a patient with whom I interacted today.

Last night, Jennie (the RN missionary who was in charge of things for our group and clinics) told us a story of a young boy seen at this exact location last year: she was able to diagnose him with meningitis and urged his family to take him to the hospital for treatment. They were unable to do so, so after consulting with the medical director and getting creative, she was able to scour up some “this-will-have-to-do” antibiotics and returned back to the site every day for a week or two in order to give him the medicine he needed to save his life. I had the privilege of performing the equivalent of a well-child check on this boy today and was amazed with his health and well-being. The fact that this boy is still alive today – and SO appreciative – is evidence of what a positive impact we are making while we’re serving here.

I am humbled and feel extremely blessed to have gotten this opportunity. My nail polish may be peeling due to 100% DEET usage and my luggage may be perpetually ant infested, but this is a once in a lifetime experience and I am so thankful to be here with this inspiring group of almost PNPs and our fearless leader/program director.

Taylor Viktoria Knight -- It is our second day in Haiti. We slept in our bunks at our “compound” in Grand Goave. We ate spaghetti for breakfast, which is a Haitian tradition. We caked on 100% DEET and sunscreen and were off for the day. We rode in the back of a truck bed an hour and half up a steep mountain that varied from rocks and dirt. The houses ranged from small stone shacks to tarps held together with sticks and rope. There were many women headed down for the day to the market, which we were told took over half the day to get there by foot. We saw many children at the well where they were getting water, which we also learned was often a near mile for them to walk. We arrived in a small village at the top of the mountain called Mt. Zion. This is the first area that we treated children. Patients were already there when we arrived clothed in their nicest dresses and church clothes.

As a group we treated over 40 children from all age ranges. Most of the children I saw were treated for scabies or ringworm and all were given prophylactic albendazole for pinworms. The last child I had the opportunity to interact with we diagnosed with pneumonia. His lung sounds were supportive of this and there was no hospital close to have a chest x-ray done, so we started treatment. One thing that was concerning for me was that this child may not receive follow up care after we leave because facilities were so far away. We treated and educated as best we could.

During the day there was a point that a group of kids were playing in the dirt and making people out of sticks. They were happy to be playing and seemed content without toys. They live a very simple life, but make do with what they have and seem appreciative for anything they have. The children were very respectful and would wait patiently with their families for hours as they waited to be seen. After spending the day with this village, the
experiences were humbling. The patients and families were so grateful to have us there and I felt so privileged to be able to be part of their care. I appreciated that there was such a sense of family and the welcoming of the community.

**Kyli Riehl** -- Today was our first day in clinic! We drove up a very large mountain in the bed of a truck with a cage around it (Zofran is a gift from God because I felt great the whole time). The mountain was called Mont Sinai in the village of Magadou. This region of Haiti is exceptionally poor and had nearly no medical resources. The families were so grateful that we were able to treat them. It's pretty amazing to see the smiles on the faces of these young children who carry so much weight on their shoulders. There were kids around the age of 8 who traveled to our clinic alone or with siblings to get care. They are so much more self sufficient than the typical American child. One of the best parts about clinic was that we were able to pray over each family before they left. God has really been working in my prayer life and preparing me for this day, which I am so grateful for. On the way back to the Bungalow, we drove through a village that had only one water pump to serve 1,000 people. They are only supposed to serve 200 people. It's unbelievable how much I take water for granted. I have learned so much and have gotten the opportunity to see so many ways the Lord is working in Haiti and it's only our first whole day here. I can't wait to see what's in store for the rest of the week!

**Essien Ekom** -- Sitting in my seat on the flight back to Miami, looking out of my window and watching Haiti grow smaller and smaller, my mind wandered and thought about all the events that had led up to the previous week. The financial support and prayers from my family, friends, coworkers and church family had all come together to make everything fall into place. At every turn I was blown away by how seamlessly things happened, and it put my heart and mind at ease that this was the right time, the right place, and the right group to share this experience with.

More than anything, the unspoken connection I felt with Haiti was overwhelming. The people, language, food, and beautiful landscape reminded me of my own Nigerian heritage. So many of the people who lived in the small mountain villages we travelled to had never met an American who looked like them and shared a similar cultural background. This connection allowed me to open myself more fully to the parents and children I had the privilege of caring for during each of our clinics during the week.

I came away from our weeklong trip not only more confident in my clinical abilities, but renewed and strengthened spiritually and emotionally. I could not have chosen a more remarkable group of women to have shared this experience with; through evenings spent battling to keep the insect populations at bay in our bungalows, to playing hand games with children between clinic visits, and spending every evening reflecting on our purpose and work during the trip, each memory will stay with me for a lifetime.

“While we do our good works let us not forget that the real solution lies in a world in which charity will have become unnecessary.”

— Chinua Achebe, *Antihills of the Savannah*