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Life-Changing Assistance

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To improve the lives of people in rural Honduras, Meaghan Mormann ’16 served four IWU Global Brigades. She writes how her experiences changed how she sees the world.

Story by MEAGHAN MORMANN ’16

In the tiny community of Las Animas (pop. 120), located five hours outside of the capital city of Tegucigalpa, hundreds of parasol-bearing Hondurans eagerly await the arrival of a busload of Illinois Wesleyan students and several physicians in the almost unbearable morning heat. As quickly as possible, we convert a five-room school into a temporary medical clinic and ready ourselves for the steady stream of underserved patients we will meet over the next nine hours.

Dr. Liza Pilch is one of our physicians, and I am her translator. Our morning routine is interrupted by a shout: “There’s blood! We need a doctor and a translator!” Dr. Pilch stands, takes my arm and pulls me outside. In the courtyard, a young man, perhaps 25 years old, leans against the post of a small pavilion. A t-shirt tied tightly around his calf, he appears surprisingly calm. His friend and his wife tell us he’d hit his foot with the full-force swing of a machete while chopping firewood. His friend half-carried him to the brigade site, nearly two hours from the scene of the accident.

With a first glance I can’t see where the wound begins or ends. What I can make out, however, is his bone — white and glistening, jutting out of the top of his foot — clearly severed and surrounded by dust-covered skin and muscle. He had already lost about three pints of blood. Without the t-shirt tourniquet, his situation would be much worse. A team of physicians, nurses, even dentists start an IV of fluids, antibiotics and pain medications. They sanitize, clean and close the wound, then stabilize his foot and blood pressure in preparation for transport to the nearest hospital, over two hours away.

While days spent with Global Brigades (GB) are rarely this high stress, the stark reality of lack of access to basic services and makes dire situations such as this one a constant possibility.

Of GB’s nine established brigades (business, dental, engineering, environmental, human rights, medical, microfinance, public health and water), IWU students have participated in dental and medical brigades for several years. In December 2015 our first business brigade went to Honduras, and this June our first ever medical–public health hybrid brigade treated hundreds and built basic health facilities for three families.

I have been on brigades with as few as 22 IWU students and as many as 50. GB commonly attracts biology majors, including many on the pre-med track, but I have also served with students majoring in chemistry,
English, business and many other disciplines. Of our brigade members who travelled this year, many were inspired on their first trip, a large number were returning for their second or third years and four of us were completing our fourth brigade.

With the exception of our chapter advisor, Assistant Professor of Nursing Noël Kerr, the group is entirely student run. Students pay to attend each brigade (approximately $1,500), and are also responsible for organizing each trip — work that begins a year in advance with recruiting healthcare professionals (each brigade needs a minimum of two general practice physicians, two dentists and, ideally, an OB/GYN) and raising funds for the purchase of medical and pharmaceutical supplies.

When all the logistics and a million other details have been sorted out and checked off our list, the brigade finally assembles at the airport for the flight to Honduras.

Upon arrival, the first day involves a community visit to an area in rural Honduras where GB is active. For our new students, this is likely the first time they have encountered the stark reality of life in a place where four in 10 people do not have access to clean water, and more than half live on less than one U.S. dollar per day.

Such sterile statistics don’t reveal the warmth of the people, who open their homes to us with the utmost humility and hospitality, offering bowls of fruit, tea, coffee or anything else they have to share. In all of my visits to Honduras, I have been moved by the spirit of faith, love and joy with which the people conduct their daily lives, despite enduring hardships most of us in the United States can barely imagine.

**Cultural context**

The brigade runs like this: after being checked in at the community volunteers’ intake station, patients move to the triage station, manned by students, GB personnel and translators. Triage is often a favorite station of students, whether or not they speak Spanish, because it is a phenomenal learning opportunity. Here, students take vital signs and have the opportunity to practice their language and patient-interview skills.

After the triage station, patients are either helped immediately by medical professionals or passed to the line for general consult, depending on the severity of their condition. We faced a number of ulcerous wounds this year, which are surprisingly common in Honduras, especially on the lower extremities, due to lack of proper footwear and access to medical care. Luckily for us, Dr. Kerr is also a specialist in wound care and has traveled with us on each of my four brigades.

In her work with wound patients, Dr. Kerr teaches them how to dress their various kinds of wounds while ensuring they understand their condition and have the supplies necessary to heal. At the same time, she gets students involved in these patient encounters, giving them an equally enriching opportunity to learn.

When the IWU Global Brigade brings physicians who are English-speaking, a student works closely with them as their translator — a job I held for three of my four brigades. An additional two to three students will shadow each physician. These doctors have consistently been phenomenal teachers, not only through imparting medical
knowledge but in sharing the sensitivity and skills necessary to work with patients of another culture, perhaps of a different first language, and who may have never previously interacted with a medical professional.

As students assess patients’ medical problems they also learn the cultural context in which some of those problems arise. At the triage station, students take vital signs and ask a list of questions, including asking females as young as age 12 whether they are pregnant or breastfeeding. This question often comes as a shock to students accustomed to the U.S. cultural norms surrounding childbirth. Honduras’ predominantly Catholic and patriarchal culture makes many contraceptive methods frowned upon and, therefore, increases the likelihood very young women may already be pregnant or mothers.

Specific aspects of the culture of Honduras — and, indeed, much of Central America — can be explained in the context of masculine and feminine ideals. The male role is machismo; the notion that men are strong and powerful providers and protectors. This means men are generally incredibly devoted to family, loyal to a fault and hard workers. However, this ideal can also perpetuate a power hierarchy that places men in an emotionally, physically and sexually dominant role. In contrast, marianismo defines the role of the female who is pure, maternal, obedient and submissive. This results in women who spend the majority of their lives within the home and raising the family’s children. However, the double standard of being both pure and submissive results in illegal abortions, young girls who are already mothers and the scarce availability of birth control, prenatal care and gynecological exams.

I have experienced these prescribed gender roles firsthand in dealing with patients, such as an older gentleman who refused to let me translate between the male physician and himself. I realized his refusal was deeply rooted in cultural practices that had been a reality for this patient’s entire life. It was much more important for this man to receive medical care in an atmosphere in which he was comfortable than for me to take his cultural views personally and ruin the possibility of him developing a trusting physician–patient relationship. I ultimately found a male GB translator to aid in the completion of this patient consult.

**Justin Bieber in the mix**

At any moment, the work of a Global Brigade can change a life. I witnessed one such event during a shift at the optometry station, where students perform basic eye tests and, when needed, find appropriate glasses among a variety of donated prescription pairs. A boy, accompanied by his mother, told me he couldn’t see the chalkboard at his school. An eye test showed his vision was far worse than 20/200. While we didn’t have a pair of glasses with a prescription as severe as his, we found one that was fairly close. As the boy put them on, his face immediately lit up. With each line on the eye chart he was able to read, my heart filled with greater joy — a feeling shared by his mother, who wept as she expressed her gratitude to us.

Many patients’ problems are not so easily resolved. Changing lives can also mean changing habits through discussion with our patients. After all consults, adults go to an adult charla and children go to a kid’s charla. Translating literally to “chat,” in this situation charla refers to a conversational class all patients are required to attend.

The adult charla is run by the community volunteers to ensure positive communication, trust and complete understanding by all involved. This class is usually centered on some aspect of sexual health such as STDs and STIs or birth control and family planning methods.
The kids’ *charla*, run exclusively by GB students, is always a dental one. Students have discovered that songs grab attention and help the kids recall the lessons. Each year we take a popular tune and rewrite verses in Spanish to teach kids how to brush their teeth. For the past two years, we have used our own rendition of Justin Bieber’s “Baby” with new verses in Spanish. The lyrics include: “Cepillamos en círculo-os/*En el frente y en el fondo/Para sonrisas más bonitas/No olvides la lengua.” (Translation: “We brush our teeth in circles/In the front and in the back/For more beautiful smiles/Don’t forget your tongue.”)

Even when a clinic is over, the GB mission continues. Data informatics acquired by each brigade details each patient’s visit. This data is compiled and analyzed to reveal an area’s common health problems and trends, allowing a determination of which brigades should follow up with assistance. For example, in areas where illness from contaminated water is common, water and engineering brigades are sent to design and install water-carrying systems.

For the first time, IWU students participated in a joint medical–public health brigade this spring. Public health brigades identify families who want to work with GB and local Honduran masons to improve their living conditions. GB pours concrete to replace dirt floors, a source of parasite infections acquired through bare feet.

Eco stoves are built that require less wood and properly ventilate homes. Hygiene stations are added to provide clean-water accessibility and privacy for personal hygiene. Such changes decrease the risk of many medical issues and make aspects of life simpler, such as no longer having to walk miles to collect still-contaminated water.

One of three families for whom our brigade completed projects, a couple in their 90s, repeatedly thanked us for coming and reminded us that everyone on this planet is equal and that we are all brothers and sisters. They insisted on blessing each of us individually before we departed for home.

**An alliance of understanding**

I do indeed feel blessed having had Global Brigades be part of my IWU experience. GB helped fulfill goals I’ve had since the age of 4, carrying around my toy doctor’s kit, adorned with *Scooby Doo* characters. Part of my decision to attend Illinois Wesleyan was based on knowing that I could both study Spanish and biology while following the pre-medical program, and I also wanted to seek out opportunities to grow throughout my collegiate journey.
I remember searching through an online list of student organizations and finding a brief description of GB. I felt instantly drawn to it as a way to engage my passions for healthcare and for the Spanish language and its associated cultures. Among the most appealing aspects of Global Brigades is the opportunity it gives students to broaden their personal beliefs and perspectives by engaging in a culture very different from that to which we are accustomed. This is the liberal arts in action.

In each of my Spanish, general education and science courses, professors encouraged the liberal arts mindset of fostering creativity, effective cross-cultural communication, critical thinking, a spirit of inquiry and a perpetual desire to learn in ways beyond traditional classroom knowledge acquisition. By presenting us with cultures, norms, languages, socioeconomic statuses and so much more that is different from our own way of living, the GB trips to Honduras provide us with the opportunities to challenge ourselves, enrich and further personal growth and reinforce the aspects of the liberal arts education that are so importantly stressed in our coursework.

In Honduras, not only is medical care often a great physical distance from the individuals who require it, but care and prophylactic infrastructure is so expensive and unobtainable to the average citizen that it is not even a consideration when health issues arise. Such dilemmas illuminate the great divide between ideal health care and the reality faced by so many people around the world.

Such disparity demands innovation to eliminate the ever-prominent scarcities that exist in worldwide medical access. It requires a combination of linguistic, cultural and scientific knowledge to lead our society and others to a more inclusive and understanding approach to medicine. Through work with GB, students have become part of an alliance that has a mutual understanding of today’s world and a common desire to maintain and respect its diversity. In my opinion, this is why so many of us keep going back.

Through Global Brigades, Honduras opens its doors to students and enables us to see its beauty and its vulnerabilities in a fashion that encourages us to grow individually and as a group while also striving to eliminate the related and seemingly entrenched biases that inhibit the flourishing of our ever-changing world. That is one of the most precious gifts I have ever received.

About the author: A Hispanic Studies and biology double major following the pre-med program, Meaghan Mormann ’16 was involved with biochemical research with Assistant Professor of Chemistry Melinda Baur and research on avian eggshell fragments with biology faculty Given Harper and William Jaeckle. In addition to serving on four Global Brigades to Honduras, she also assisted as a translator for the McLean County Health Department’s WIC program.

A member of Phi Beta Kappa and Phi Kappa Phi honor societies, Mormann won the 2016 Technos International Prize, recognizing a student who has excelled academically and contributed to broadening international awareness and understanding. This fall, she begins medical school at Michigan State’s College of Human Medicine and will enroll in the school’s Leadership in Medicine for the Underserved certificate program.