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Working with a Brigada Médica: A Librarian's Experience on a Medical Mission

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[Column Editor's Note: This quarterly column appears in the January, March, May, and August issues of the *MLA News*. Please email submission or ideas for column topics to Brenda R. Pfannenstiel AHIP, editor, Consumer Health Column.]

For 5 days in early September 2008, I, a science and allied health librarian, joined a medical mission in the northern coastal town of Limón, in Honduras, a developing country in Central America. Our 22-member team consisted of a dentist, 2 physicians, a pharmacist, 3 nurses, 2 physical therapists, a paramedic, a medical student, and 11 general helpers. Our mission trip was organized by Limón Aid, a nonprofit volunteer organization that provides free health care and service projects to Limón and the surrounding areas. Limón is a 3-hour drive from my birthplace of La Ceiba, the third largest city in Honduras. Most of the people in Limón are Garifuna, members of a minority group of descendents of African slaves who have maintained a rich culture for more than 200 years [1].

Although I am no stranger to Honduras, volunteering for the medical brigade was a major experience in my life. I met and worked alongside people who genuinely cared for the people they were helping, and I became personally aware of the challenges and joys of the Garifuna. The small clinic where we worked, Clínica Carolina-Honduras, was founded by the nonprofit Carolina-Honduras Health Foundation in 1997. The clinic is staffed and equipped with only the supplies that were brought by the teams of volunteers. The clinic has a laboratory room, a dental room, a surgery/emergency room, three consultation rooms, and a pharmacy. The comfortable air-conditioned pharmacy was the most coveted area! From the second floor of the clinic, where volunteers lived, we enjoyed views of spectacular sunsets. We also swam in the ocean, visited the children at the local orphanage, and conversed with locals in the area.

Everyone in our group was trained to work at different tasks. With only two physicians, the three nurses were asked to draw on their skills as practitioners. On the first day, we set up the clinic. Because of generous donations we brought with us, we were able to prepare gift bags for the children from the orphanage and for the participants in a health survey. Toothbrushes, toothpaste, shoes, flip-flops, soap, washcloths, school supplies, sunglasses, and school

uniforms were some of the items included in the gift bags. I placed Spanish-language patient handouts on asthma and HIV prevention and education in each consultation room. I selected Spanish-language materials that were generic and did not include material that targeted Hispanics in the United States with toll-free numbers and other US contact information.

When the clinic opened, patients had already been in line for hours and some patients had traveled for many miles. At the end of the day, some patients were still being treated well after clinic hours. The major medical conditions were malaria, intestinal parasites, respiratory problems (asthma, cough), general complaints (fever, weakness), and dental problems. As a general helper and native Spanish speaker, I spent most of my time translating and taking medical histories.

I also helped to translate and conduct a community health needs survey as part of a research project of a fourth-year medical student. The purpose of the ongoing survey was to gather information about the general health status, accessibility of health care services, and general nonmedical needs of the people of Limón and neighboring areas. Approximately 200 people responded to the survey. We also met with local public health professionals to discuss plans to collaborate on teaching diabetes and HIV education and prevention classes. (Honduras has one of the highest rates of HIV in Latin America [1].)

To reach individuals in other remote areas, such as Rio Miel and Icatecas, the team was divided and several members traveled to set up one-day clinics in those destinations. In addition to providing medical and dental care, volunteers also participated in community projects. They built a water purification building and reroofed the small high school. During the last days of the nine-day trip, we went rafting, canoeing, and shopping.

Our team saw more than 500 patients, delivered a healthy baby boy, and pulled and filled many teeth. The September 2008 trip to Honduras was a great learning experience in medical mission work. At the personal level, the experience taught me a deep appreciation of and compassion for the needs and circumstances of others. It was also an opportunity to make wonderful friendships. To learn more about Limón Aid, please visit www.limonaidhonduras.org.

Notes:

1. Cohen J. Honduras: why so high? a knotty story. *Science*. 2006 Jul 28; 313 (5786):481–3.